Sexual Fantasy

A Hermeneutic Literature Review

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Abstract

Freud (1900/1977, 1905/1977) based his theories of unconscious and psychosexual development on the link between the undischarged libidinal (sexual) tensions and neurosis. He postulated that when a conscious imaginary wish fulfilment (fantasy) was unacceptable to the fantasiser, it became repressed. Thus, it can be argued that the study of sexual fantasies laid the foundation for the birth of psychoanalysis. Freud's suggestion about the universality of libidinal impulses has been supported by contemporary empirical research which reveals that 90-97% of people experience sexual fantasies (Kahr, 2007; Lehmiller, 2018; Leitenberg & Henning, 1995). The purpose of this hermeneutic literature review was to explore how literature from empirical sex research, psychoanalysis and psychotherapy might shed light on understandings of the meanings and use of sexual fantasy in the psychotherapeutic context.

The synthesis of findings revealed that sexual fantasy is often constituted by images and scenarios that differ from heteronormative and mononormative western socio-cultural expectations of sexual practices and forms of desire. Sexual fantasies were found to cause anxiety, guilt, fear, and shame in the fantasiser. These disturbing feelings often prevented the fantasiser from looking at their fantasies with their sexual partner/s, and even themselves, resulting in silence around sexual fantasy. While sexual fantasy was theorised to hold invaluable information about the person's unique psychology, attachment history, early experiences and internalised object relations, there appeared to be less clinical emphasis on the importance of verbalising, processing and understanding the meaning of sexual fantasy in psychotherapeutic context. The key theme identified that sexual fantasy can bring emotional transformation and healing, if explored and integrated into the psyche. These new understandings may help psychotherapists and other mental health professionals to use their client's sexual fantasy as a therapeutic intervention, similar to the interpretation of dreams.

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Attestation of Authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been submitted for the award of any other degree or diploma of a university or other institution of higher learning.

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Chapter 1: Introduction

This dissertation is a hermeneutic literature review exploring the following research questions: "How is sexual fantasy understood in sex research and psychoanalytic psychotherapy?" and "How can this understanding inform psychotherapeutic practice?" The study aims to synthesise findings from sex research and psychoanalytic and psychotherapeutic literatures to add to understandings of the function, meaning and role of sexual fantasy in a therapeutic context.

In this chapter, I begin with providing the context of the study; including, the motivations for my research topic and the preliminary literature review on sexual fantasy. I acknowledge the pre-understandings that I bring to this study. Further, I discuss the definitions of key terms and offer a review of the structure for this dissertation.

The Motivation for the Research

My journey to the topic of sexual fantasy is twofold. It began in a *BDSM*¹ *dungeon*² in Los Angeles during my observation of a *scene*³, which I later learned was *mummification*⁴. I saw a person slowly walking around what looked like a cocoon suspended at eye level from the ceiling. I realised there was a person inside the cocoon only when I heard a muffled moan after the man punched it. When it was explained that the scene had been going on for six hours, and the person inside had consented to the activity, I realised that I was struggling to connect to the erotic element of this particular scene. Moreover, my immediate internal reaction was a critical analysis of what I was

¹ *BDSM* (Bondage/Discipline; Dominance/Submission; Sadism/Masochism) refers to a wide range of consensual sexual practices that involve an eroticised power exchange, use of restraints and the infliction and receipt of pain (Kolmes, Stock, & Moser, 2006; Nichols, 2006).

² Dungeon – a location where BDSM play takes place (Marks, 2019).

³ Scene – a BDSM encounter (Marks, 2019).

⁴ *Mummification* – a type of BDSM activity that involves immobilising the body by wrapping it up, usually with multiple layers of tight plastic sheeting. Mummification is often used to experience a feeling of total bodily helplessness (Griffith, 2017).

witnessing. In the analysis, I could not arrive at any coherent insight about why anyone would wish to be immobilised in such a way and beaten. Finally, I had to admit that there was a lot to human erotic imagination that I had no clue about.

The visit to the dungeon was a part of the intensive Sexual Attitudes Reassessment and Re-evaluation (SAR) course, an American Association of Sexuality Educators, Counselors and Therapists (AASECT) certification requirement for sexologists and sex therapists in the USA and internationally (Britton & Dunlap, 2017). The course was a compulsory component of the overall sexological curriculum⁵ that I was undertaking at the time. The main goals of the SAR intensive course were desensitisation⁶, sex education and processing of the unconscious biases and stereotypes about human sexuality. The experiential learning of the SAR course added to my ongoing interest to learn more about the wide-ranging diversity of human sexuality expression.

My second source of inspiration for this research came from my clinical practice as a psychotherapy trainee at the AUT psychotherapy clinic and Auckland Sexual Health Clinic. I noticed that for some people their sexual fantasies and practices were laden with feelings of psychic pain, fear, guilt and shame. Apart from the social stigma attached to certain sexual fantasies (e.g., homoerotic, BDSM, crossdressing), the people themselves condemned their fantasies. I realised that for this group of clients I was lacking a more informed approach. This is when I turned to literature to find out what had been written about sexual fantasies.

A preliminary review of literature pointed at two areas of scholarship: one that offered empirical studies in sex research; and the other, psychoanalytic and psychotherapeutic writings that explored the notion of sexual fantasy and the role and meaning of sexual fantasy in the therapeutic process.

⁶ *Desensitisation* – a process that reduces, diminishes or eliminates the reaction to external stimuli by repeated exposure to the stimuli (Britton & Dunlap, 2017).

⁵ I studied at SexCoachU, Los Angeles, CA, USA (distance learning) under supervision of Dr. Patti Britton (Sexology Department, Institute for Advanced Study of Human Sexuality, San Francisco, CA, USA).

Sex research literature offered studies on sexual fantasies that investigated a variety of research questions and foci. For example, frequency of sexual fantasies and most common themes (Leitenberg & Henning, 1995), correlation between content of sexual fantasy and gender (Person, Terestman, Myers, Goldberg, & Salvadori, 1989), sexual fantasy and its relationship with sexual orientation (Girolami, 2005; Masters & Johnson, 1979), the link between sexual fantasy and attachment style (Birnbaum, 2007) and women's rape fantasies (Critelli & Bivona, 2008). This body of literature has formed part of the research that will be reviewed in the current study.

The initial review of the classical psychoanalytic literature revealed that sexual fantasy was traditionally understood as a sign of deprivation, trauma and repression of sexual and aggressive drives (Freud, 1908/1977; Spillius, 2001). From this standpoint, sexual fantasy was theorised as a defence mechanism against intimacy or a sign of psychopathology (Coen, 1978). In contrast, Jung (cited in Knox, 2005), theorised that the symbolic nature of sexual fantasy can be understood as an attempt of the psyche to bring together all parts of self, including all internal objects, to make a whole—a process that Jung termed a "transcendent function" (p. 626). This perspective suggests that sexual fantasies, like symbolism, are relational (Knox, 2005); and, as proposed by Friedman and Downey (2000), must be conceptualised in the interpersonal framework. The key difference between the two perspectives points to the different understandings of the psychological role of sexual fantasy. Contemporary psychoanalytic and psychotherapeutic writers seem to agree that sexual fantasies hold information about the client's inner world: internalised objects relations, attachment longings, unmet emotional needs, unconscious conflicts, traumatic experiences and split-off affects (Bader, 2003; Blechner, 2016; Bonovitz, 2010; Friedman & Downey, 2000; Hirsch, 2010; Kernberg, 1995; Person, 1995; Stoller, 1985, 1986). For me, as a researcher, this consensus felt like a promise to shed some light on understanding the unconscious logic of sexual fantasies.

In the literature discussing sexual fantasy in the clinical context, the role of sexual fantasy has been theorised and understood differently in the fields of sexology and psychodynamic psychotherapy. In sex research, sexual fantasy is framed as a useful resource to initiate arousal in a client (Newbury, Hayter, Wylie, & Riddell, 2012);

whereas in psychoanalytically informed psychotherapy, the use of sexual fantasy includes interpretation and processing of transferential phenomena (Bonovitz, 2010; Cohn & Schonbar, 1966; Hirsch, 2010). Exploring the different understandings of the role of sexual fantasy in the clinical context, in both literatures, might be useful for understanding the affect of sexual arousal when working with sexual fantasy in psychotherapy.

The two fields of study—sex research and psychoanalytic and psychotherapeutic research—appear to understand sexual fantasy in different ways. In this review, I will attempt to look at the ways in which ideas and research from sexology might speak to and enhance understandings in the field of psychodynamic psychotherapy. The synthesis might reveal additional insights for psychotherapists on how conceptual ideas about sexual fantasies might be supported or challenged by the research from the field of sexology. Through this study I hope to enhance my own understanding of the meaning, role and function of sexual fantasy in a therapeutic context.

The Researcher

I enter this hermeneutic study about sexual fantasy with a number of biases and 'preunderstandings' shaped by my personal experiences in the wider cultural and historical context (Gadamer, 1982). I identify as a *cisgender*⁷ *queer*⁸ woman. My first socialisation conditioning occurred in a highly sex-negative culture of the Soviet Union where the ultimate upheld relationship model was that of heterosexual matrimony. After the Soviet Union collapse in 1991, my socialisation process was further influenced by the sudden emergence of various religious movements in the newly born post-soviet country Kazakhstan, where I was living. Sexuality matters were not discussed in the family or at

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⁷ Cisgender – a term used to describe people whose gender identity corresponds with their biological sex assigned at birth (New Zealand Psychologists Board, 2019).

⁸ *Queer* – a term used to describe gender identity or gender expression or/and sexual orientation that does not conform to heteronormative expectations. It can also be used to express rejection of traditional gender categories and distinct sexual identities such as gay, lesbian, bisexual or trans (New Zealand Psychologists Board, 2019).

school before or after the collapse; and, from early on, I internalised both fear and shame around the topic of sexuality. In 2010, I immigrated to New Zealand, partly because I was drawn to the nation's aspiration to promote and protect human rights as reflected in *The New Zealand Bill of Rights Act* (New Zealand Legislation, 1990). The change of sociocultural environment contributed to the gradual discovery and integration of the disowned parts pertaining to my sexuality and identity. I have chosen the term 'queer' as it reflects my inner experiences of gender and sexual identity: nonconformative to the traditional expectations of gender and sexuality expression (New Zealand Psychologists Board, 2019).

I support the World Health Organization's (WHO, 2015) working definition of sexual rights that links to human rights: "Sexual rights protect all people's rights to fulfil and express their sexuality and enjoy sexual health, with due regard to the rights of others, within a framework of protection against discrimination." I also support the declaration of the World Association of Sexual Health (2014) that views sexual health as an inextricable part of people's overall health. So, for me, sexuality is both personal and political.

Theoretically, I am grounded in psychodynamic therapy that emphasises the exploration of the unconscious layer of the mind and recurring interpersonal patterns using psychoanalytic methods like free association and dream interpretation (Schedler, 2010). This theoretical orientation informs the way I look at sexual fantasy—listening to the hidden meaning and linking the interpersonal patterns to the object relations and attachment history encoded in sexual fantasy. In addition, my theoretical framework is influenced by psychoanalytic feminist perspectives (Benjamin, 1988; Chodorow, 1978, 1989, 2012; Orbach & Eichenbaum, 1983) with an emphasis on social inequalities, oppression of women and discrimination of marginalised groups. I believe that as therapists we often act as agents of social change by empowering our clients to realise their own social agency through self-recognition of their subjectivity (Chodorow, 2012). This theoretical lens determines how I understand and conceptualise human sexuality and different forms of desire found in sexual fantasies.

Defining Key Terms

In this section, I offer definitions of the key terms used in this study. Further definitions of specialised terms are provided in the footnotes throughout the dissertation.

Sexual Fantasy. Refers to a persistent combination of erotic imagery, thoughts and sounds that appear in one's mind to promote sexual arousal (Kahr, 2007; Leitenberg & Henning, 1995). In psychoanalytic writings, the term 'fantasy' is usually used to refer to a conscious fantasy and the term 'phantasy' is used to describe the unconscious fantasy (Spillius, 2001). Even though conscious sexual fantasy may have origins in the unconscious, and Freud used 'phantasy' to refer to both conscious and unconscious fantasies, the focus of this review is that of conscious sexual fantasy.

Sexology and Sex Research. Refers to the field of multidisciplinary scientific inquiry that addresses human sexuality including sexual interests, sexual behaviours, sexual function, gender identity and sexual health (Britton, 2005; Crowell, Mosley, & Stevens-Watkins, 2017; Farmer & Binik, 2005;). In this study I refer to sexology, sex research and sexology research as interchangeable terms, mainly because this is how it is used in the reviewed literature (e.g., Crowell et al., 2017).

Psychoanalysis and Psychotherapy. When referring to the field of study as the body of literature, I use 'psychoanalysis' and 'psychotherapy' as both representing one field of 'psychoanalysis and psychotherapy' or 'psychoanalytic and psychotherapeutic research' or 'psychoanalytic and psychotherapeutic theories.' I do this because some writers identify as psychoanalysts and some as psychotherapists. Even though there is a distinction between psychoanalysis and psychotherapy, it is not relevant in the context of my research inquiry; and both psychoanalysts and psychotherapists represent one body of research within the framework of this study.

When I refer to the clinical practice of psychotherapy, I use the term 'psychodynamic psychotherapy,' emphasising the theoretical foci underpinning this modality (Shedler, 2010). Additionally, when I use the terms 'psychotherapy' or 'therapy,' I mean psychodynamic psychotherapy. Similarly, when I use the words 'psychotherapist/s' or 'therapist/s,' I imply psychodynamic psychotherapist/s.

The terms 'patient' and 'client' are used interchangeably. The use of one term instead of the other reflects how these terms are discussed in the text under discussion.

Singular 'They'. I use singular 'they' and its forms 'their' and 'them' as a gender-neutral pronoun when referring to a generic person in order to remove any assumption about gender of the author or the research participant (American Psychological Association, 2020). I use gender specific pronouns 'he' or 'she' where gender identity of the writer or the research participant is explicitly identified.

Gender versus Sex. Following the bias-free language guideline of the *Publication Manual of the American Psychological Association* (2020), I will maintain the premise that gender is a social construct that consists of attitudes, behaviours and feelings that a given society associates with the biological sex of an individual. I will use the term 'gender' when referring to social groups—women, men or transgender people. Sex is a linguistically ambiguous concept since it refers to both the biological sex assignment at birth and sexual activity. Moreover, some authors of the reviewed literature use gender and sex interchangeably which adds to the ambiguity. To reduce the confusion, I will use the term 'sex' only when referring to the biological sex and not sexual activity. When describing sexual activity, I will use the term 'sexual activity.'

Chapter Summary

In this chapter, I have introduced the context of my research including the origins of the research interest, my personal motivations and pre-understandings that I bring to this study. I also outlined the key terms that are used frequently throughout this dissertation.

Overview of the Chapters

The structure of this dissertation is as follows. Chapter 2 is a description of my research journey, the design of the study and the link between my research questions and the chosen methodology. Chapter 3 is the review of sexology research literature about sexual fantasy. It begins with the overview of the field of sexology and explores what has been written about sexual fantasy by sex researchers. Chapter 4 is an exploration of how

sexual fantasy is understood in the field of psychoanalytically informed psychotherapy. This includes the origins, role and function of sexual fantasy. Chapter 5 provides a discussion of the findings that emerged in the synthesis of the two bodies of literature, and the implications for the field of psychodynamic psychotherapy. I also discuss limitations, strengths and implications for further research.

Chapter 2: Methodology and Method

I conducted a hermeneutic literature review to explore how sexual fantasy is understood in sex research and psychoanalytic psychotherapy. The study aims to enhance understandings of the function and role of sexual fantasy in therapeutic context.

In this chapter, I discuss the research methodology of hermeneutics within the interpretivist paradigm. I outline the rationale behind my choice of methodology, how it fits the research topic and my philosophical stance as the enquirer. The method section of this chapter details the search process, inclusion and exclusion criteria and the step-by-step approach I have been guided by in my endeavour to answer the research questions: How is sexual fantasy understood in sex research and psychoanalytic psychotherapy? and How can this understanding inform psychotherapeutic practice?

Methodology: Hermeneutics

I have chosen the qualitative interpretivist methodology as a philosophical framework for my inquiry. Within the interpretivist paradigm, the focus is on the understanding of the human condition and the meaning that humans attach to their life experiences (Grant & Giddings, 2002). These theoretical underpinnings echo my understanding of the subjective experience of truth and meaning.

The dissertation is about sexual fantasy phenomena. Considering that sexual fantasy occurs in the symbolic and mostly non-verbal form (imagery, thought, idea, feeling, sensation), it seems that to understand the object of this inquiry, I need to rely on interpretation solely. There are different layers of subjective interpretation: the interpretation of the person who is experiencing the fantasy, the interpretation of an author who writes about fantasy, the interpretation of a clinician who listens to a client's fantasy and my interpretation as a researcher who reads and interprets the published texts.

Hermeneutics recognises and welcomes the inquirer's subjective lens when interpreting data (Barker, Pistrang, & Elliott, 2016; Grant & Giddings, 2002; Smythe & Spence, 2012). Therefore, I have chosen hermeneutics as the methodology and the hermeneutic literature review as the method for this study.

Hermeneutics as interpretation of texts. Hermeneutics is the theory of interpretation. Originally, the methodology was applied to the interpretation of biblical texts and philosophical tractates. Later, hermeneutics was broadened to matters of general interpretation (Caputo, 1987; Grondin, 1994). The etymology of the word 'hermeneutics' is derived from the Greek verb 'hermeneuein' (to interpret) and the name of the Greek god Hermes, known to be a translator between Gods and people, between the underworld, earth and heavens (Caputo, 1987; Grondin, 1994).

One of the philosophers who contributed to the development of the philosophical hermeneutics was Hans-Georg Gadamer. Gadamerian hermeneutics stand on several central tenets: 1) linguisticality of understanding (common language is necessary for being and understanding); 2) pre-understanding (impossibility to be a detached, objective observer); 3) historically – affected consciousness (awareness of a historically-determined situatedness within a particular 'horizon; and 4) fusion of horizons (the object of the study and the interpreter become inextricable from each other and through merging of the individual horizons, create new horizons) (Caputo, 1987; Dowling, 2005; Gadamer, 1982; Malpas, 2018; Schuster, 2013; Smythe, 2012; Smythe & Spence, 2012). I will now discuss some of these points.

Linguisticality of understanding. I became particularly interested in the concept of 'linguisticality of understanding' (Gadamer, 1982) as I am a bi-lingual psychotherapist and researcher, and the process of seeking the 'common language' is often in the forefront of my conscious awareness when working with clients or reading texts for this study.

For Gadamer (1982), conversation exists in language; and both conversation and understanding are linguistically mediated. Since a conversation takes place in a relationship with partners, the exchange is not under control of any conversational partner. Therefore, the understanding is formed during the conversation and, according to Gadamer, is interpretive. Gadamer believed that being in the world happens through being in the language (Malpas, 2018); thus, claiming language as a central and universal horizon of hermeneutic experience.

I am conducting this research in English language, interpreting English texts. My

mother tongue is Russian, the language that shaped my understanding of the world up until my early 20s. Therefore, the 'pre-understandings' in my psyche were initially shaped in Russian language, in a unique historical and cultural context. Thus, it is important to acknowledge my particular pre-judgment/prejudice when I interpret texts written in English language.

The inquiry applying hermeneutic approach becomes the dialogical process whereby the horizon of the text, the author's horizon and the interpreter's horizons merge to generate new horizons or 'vantage points' (Gadamer, 1982). Gadamer (1982) also stated that language always holds prejudice since the implicit historical tradition of the time when the text was written is embedded in the language. In this study, on sexual fantasy, many horizons will merge through complex interplays of multiple interpretations.

Next, it is appropriate to recognise my subjectivity as the researcher since my biases are impossible to remove (Smythe, 2012). The most I can do for the credibility of this hermeneutic study is to be aware of them and accept the challenge to be open to hearing and thinking beyond 'already there' understandings (Schuster, 2013).

Researcher's horizons: Interpreter, translator, psychotherapist, sexologist.

Nietzsche (1886) believed that personal always drives the professional. I grew up in an environment where people did not seem to understand each other very well, as if they were speaking different languages. From early on, witnessing such misunderstandings, I remember wondering to myself, why was it that something 'obvious' to a little me was not obvious to 'grown-up' them? I remember thinking that if only they stopped for long enough to hear me, I would be able to explain (interpret) what another person was saying. Since the age of four, I was having a visual daydream about becoming a bridge, helping people to understand each other. Perhaps my unexplainable fascination with the idea of understanding a foreign language and becoming an 'interpreter' can be partially explained by that daydream. For my first degree I chose to study linguistics, and I did learn a 'foreign' language that allowed me to become a symbolic bridge—working as an interpreter (oral translation) and a translator (written texts) between Russian and English.

One of the family narratives is that my father disappeared after sending apologies

to my eight-months pregnant mother in a letter. That was their last contact. As a child, I developed a strong desire and capacity to intuit what was not explicitly stated, to reinterpret and link narratives, then try to understand the re-interpretation, until the arrival at a somewhat satisfactory understanding. Turning to the books in my grandmother's library, perhaps I searched and found the resonance of my feelings and experiences in the literature. Relating to the characters in the stories, I could begin to interpret my life experiences in my desire to understand the painful and complex interactions of the 'grown-up' world. The existential suffering described by Dostoyevsky, Lermontov, Dickens and Dreiser; the phantasmagorical plots of Pushkin, Gogol and Bulgakov; the love triangles of Dumas and Tolstoy; the disillusioning Chekhov's vignettes and other classical texts have developed my imagination and influenced my fascination with the human condition, and my chosen professions of psychotherapy and sexology.

In a hermeneutic enquiry, research is understood to unfold in two directions, the world and the Self (Weisburg & Buker, 1990). Indeed, my study of the sexual fantasy phenomena serendipitously has become a journey to my better self-understanding. According to Gadamerian hermeneutics, understanding is an unending process with the participants' horizons continuously affecting and expanding each other. Accepting this theoretical framework allows me to get grounded as a researcher, embracing the fact that it is impossible to fully understand the object of my research since it is impossible ever fully to understand the Self.

Hermeneutics: Link to psychotherapy and the research topic. Within the hermeneutic framework, understanding of the reality/meaning and truth is deeply informed by experience and "truth as a whole truth always remains elusive" (Gadamer, 1982 as cited in Smythe, 2012, p. 36). This epistemological position echoes the psychotherapeutic process. Further, hermeneuts believe that in the research inquiry, a complete understanding cannot be achieved (Boell & Cecez-Kecmanovic, 2010). This belief mirrors psychotherapy once again—while striving to understand and uncover the truth about the self, the process of self-discovery can never be complete.

A hermeneutic researcher engages with the movement back and forth, aspiring to link the parts into an expanding whole (Smythe & Spence, 2012). Similarly, "sexual

fantasies bridge the gap between the possible and the permissible, past and present, self and other" (Perel, 2014, p. 134). Furthermore, the study of sexual fantasy relies on interpretation, as discussed above; therefore, hermeneutics as methodology fits this research project well.

Method

Hermeneutic literature review. Initially, I considered a modified systematic literature review (Petticrew & Roberts, 2006) as the method for my research, and a part of my preliminary data handling was conducted applying this method. However, in the process, my question changed. As such, I was led back to the original texts, re-reading them in a circular mode, well captured by the hermeneutic circle concept (Schleiermacher, 1998). Boell and Cecez-Kecmanovic (2010) argued that the hermeneutic circle concept is most suitable for literature reviews in humanities and social sciences because "the most prevailing research questions generally only start to emerge when the literature review is well underway" (p. 141). Thus, hermeneutic literature review as a method is a better fit for the aim of my research and the way I am as a researcher.

A hermeneutic literature review allows an in-depth engagement with the publications to which a researcher is led by the literature. This method made it possible to explore the complexity of the phenomena of sexual fantasy from various angles. Conceptualising a literature review as a hermeneutic process means that there is no correct understanding of the relevant literature; rather, there is a continuous reinterpretation resulting in a deeper and broader understanding of selected publications. It is an open-ended process through which a more comprehensive understanding of the research area and an increased understanding of the research question inform each other (Boell & Cecez-Kecmanovic, 2010).

Boell and Cecez-Kecmanovic (2010) offered a helpful distinction between the literature review as the process and the literature review as a product. The next section "Literature search" describes the process that I followed in the course of my enquiry. The

literature review as a product is organised in the remaining chapters of this dissertation.

Literature search. I began my search using the term 'sexual fantasy' in the following databases: Psychoanalytic Electronic Publishing (PEP), PsychINFO and PsychARTICLES (see Table 1). Psychoanalytic Electronic Publishing database allowed me to find psychoanalytic writings, whereas PsycINFO and PsycARTICLES provided peer-reviewed empirical studies from sex researchers from different fields (i.e., psychology, sociology, sexology, sex and marital therapy and psychotherapy).

Table 1.

Literature Search

Database	Search Term	Field Search	Results
PsycINFO	"sexual fantas*"	Titles	77
PsycARTICLES	"sexual fantas*"	Titles	2
PsycARTICLES	"sexual fantas*"	Abstracts	8
PEP	"sexual fantas*"	Paragraphs	656
PEP	"sexual fantas*"	Titles	5

While sorting the search results, I decided to exclude articles studying unconscious sexual fantasies (phantasies) and sexual fantasies of sex offenders and child molesters because the exploration of those is outside the scope of my inquiry. Also, I have used texts in English language only.

Several search results were duplicated in different databases, which helped me to start sorting the core articles on the topic. Initially, I selected 38 articles that I considered to be relevant to my research area. Next, using the "snowballing and citation analysis" (Boell & Cecez-Kecmanovic, 2010, p. 281), I identified and acquired 11 books, some of which are seminal for my research topic. For example, *By Force of Fantasy* (Person, 1995); *Erotic Imagination* (Stoller, 1985); *Arousal* (Bader, 2003); *Sex and the Psyche* (Kahr, 2007); *Love Relations* (Kernberg, 1995); *Erotic Revelations* (Celenza, 2014) and *Tell Me What You Want* (Lehmiller, 2018).

In the process of literature review, I realised that my clinical experience in psychotherapy and sexology influenced my response to the texts and, consequently, the choice of articles. This 'confirmation bias' (Wason, 1960) is acknowledged as inevitable within a hermeneutic approach (Smythe & Spence, 2012).

The power of choice in a hermeneutic study. When discussing the choice of texts in the hermeneutic study, Heidegger (as cited in Smythe & Spencer, 2012) stated "we truly incline toward something only when it, in turn, inclines toward us... the interest is or is not" (p. 369). This statement made me think of 'sexual chemistry' that cannot be 'willed' between people—it is either there or not. This new understanding helped me to trust my intuition and choose the texts more boldly following the 'chemistry' between me and the text. The 'text as a partner' then, can be viewed as a 'text as a lover,' the fusion with whom might be perplexing, troubling, challenging the patterns of preconceived understanding, but might also bring an expansive change and possibility of birthing something new and original.

Balancing the research context by considering the parts and the whole, I identified three main areas relevant to my research object of sexual fantasy: sexual fantasy in sex research; sexual fantasy in psychoanalytic theories and sexual fantasy in psychotherapeutic practice.

Between the whole and the parts. While writing the methodology section of this chapter, I changed the research question from "How to respond to the client's experience of sexual fantasy in a clinically useful manner in psychodynamic psychotherapy?" to "How is sexual fantasy understood in therapeutic context with reference to psychoanalytic and sex research?" and finally, to "How is sexual fantasy understood in sex research and psychoanalytic psychotherapy?" and "How can this understanding inform psychotherapeutic practice?" These changes were informed and affected by the literature—the dialectical evolution of a hermeneutic study described by Gadamer (1982). The change in the question altered the focus of the study from the therapists' responses to sexual fantasy to a more general understanding of the phenomenon. This change affected the literature search in the subsequent iterations; however, the overall focus of my

research interest stayed the same. Concomitantly, my original question has been answered in the course of the research.

A part of the whole: Sex research. With my horizon altered slightly, I re-entered the hermeneutic circle and re-engaged with the selected texts identified during the initial search to find out what themes might emerge from one of 'individual part of the whole'—the sex research data. For this purpose, I used the latest studies on the topic of sexual fantasies.

This body of literature allowed me to engage with research conducted in the USA and UK, and to identify several themes including the seven most common sexual fantasies as revealed in these studies. I describe these findings in Chapter 3.

A part of the whole: Psychoanalytic perspectives. In the next phase, I read psychoanalytic literatures that explored or discussed sexual fantasy in general, and the themes identified in the previous literature review iteration. The findings of this stage of literature review are presented in Chapter 4.

A part of the whole: Psychotherapeutic practice. As this study is aimed at informing psychotherapeutic practice, I searched and identified literature exploring sexual fantasy in the psychotherapeutic context. The analysis of this circle of the literature review is incorporated in Chapter 5, as a part of the synthesis and discussion of the findings.

Exiting the hermeneutic circle. In the process of searching, sorting, selecting, reading, interpreting and re-interpreting, further themes emerged from the literature that posed more questions than answers. The nature of the hermeneutic study is to know when to exit the hermeneutic circle (Boell & Cecez-Kecmanovic, 2010; Smythe & Spencer, 2012) since, theoretically, there is no end to a literature search. Combs et al. (2010 as cited in Boell & Cecez-Kecmanovic, 2010) suggested looking for the "point of saturation" (p. 272), the indicator of which is diminishing novelty when the cited publications become increasingly known. However, this is not an easy task for a hermeneutically inclined researcher since it requires a pragmatic judgment when to exit the hermeneutic circle.

After being immersed in the topic for months, it was hard for me to know when

enough was enough. Similar to the psychodynamic psychotherapeutic process, which potentially has no end, I needed space for the integration to happen, or what Gadamer (1982) would call 'fusion of horizons'. Waiting for the fusion was like watching a kettle boil and, for several weeks, I experienced defeat and doubts in the validity, originality or use of my research. Staying in the not-knowing, trusting the process, was one of the biggest challenges of this study.

And then I experienced a 'clearing', characteristic to a hermeneutic study—the feeling of reaching a clearing in the woods after a long wandering among trees (Heidegger, 1996). It felt like an opening, a flash of clarity, the dots connecting themselves in the moment of the instant shift. Like a therapeutic insight, this hermeneutic 'clearing' was accompanied by the simultaneous feelings of sadness and relief. Suddenly I 'knew' and understood something, albeit the knowing was more visceral than cognitive. That day, a song *What a Wonderful World* (Thiele & Weiss, 1967) was playing in my mind and, instead of reading and writing, I set time aside to *listen* to this song. Initially, it was the melody that 'spoke' to me. It was only when writing this chapter, I realised that the text of the song was describing the interpretation process of the observer:

I see friends shaking hands saying "How do you do?"

They're really saying "I love you"

I hear babies crying; I watch them grow

They'll learn much more than I'll never know

And I think to myself, "What a wonderful world" (Thiele & Weiss, 1967)

Accepting that the answer to my research question and the findings can only be tentative and suggestive, allowed me to stop the literature search and start the synthesis, the linking between the parts and the whole and between the narratives. This fusion of the horizons is discussed in Chapter 5.

The qualitative research approach has its methodological limitations; particularly, the requirement to simplify complex subjective experiences in an attempt to generalise them (Timulak, 2008). Being aware of these limitations, I tried to "go beyond the surface

meaning of research protocols, in order to identify the implicit or even unconscious meanings embedded in texts" (Barker et al., 2016, p. 87), the undertaking of which constitutes the essence of hermeneutic inquiry.

Chapter Summary

In this chapter, I have outlined my approach to this study on what is written about sexual fantasy in psychoanalysis and sex research. I have described the process from the identification of the research question to finding the appropriate method. I have also detailed the inclusion and exclusion criteria, and reviewed how the findings have been synthesised and presented. The following chapter will discuss what is written about sexual fantasy in sex research.

Chapter 3: Sexual Fantasy in Sexology Research

This chapter opens with a brief historical overview of the field of sexology and the contributions of prominent sex researchers to the study of human sexuality. Next, I present the findings that emerged from the review of sex research literature in the following order: prevalence of sexual fantasies, the most common sexual fantasies, the interlinking between sexual fantasy and attachment style, and the correlation between sexual orientation and the object choice in sexual fantasy. Lastly, I discuss a broad category of fantasies that involves power exchange. Throughout the chapter, I draw on the empirical studies conducted by sex researchers situated across the disciplines of psychology, biology, sociology, sexology, psychoanalysis and psychotherapy.

A Brief History of Sexology

Sexology is a scientific study of human sexuality that has its roots in mid-19th century when German, Austrian and English physicians, such as Heinrich Kaan, Krafft-Ebing, Iwan Bloch, Magnus Hirschfeld, Albert Moll and Havelock Ellis, began publishing books on human sexual behaviour (Blechner, 2016; Kahr, 2007; Lehmiller, 2017). These books reported first sexological research of 'normal' and 'aberrant' behaviours which, at that moment in history, included homosexuality, transsexualism, masturbation, sexual dysfunction and sexual development (e.g., *Psychopathia Sexualis: A Clinical Forensic Study* by Richard von Krafft-Ebing, 1886; *Homosexuality of Men and Women* by Magnus Hirschfeld, 1914/2000). According to Lehmiller (2017), these first scientific publications marked the beginning of reconceptualising sexuality as a medical matter rather than the matter of morality.

In the 1880s and 1890s, neurologist and physician, Sigmund Freud, took an interest in sexology and was known to be in correspondence with the sexologists of his time (Blechner, 2016). Sexological concepts of erogenous zones, autoeroticism,

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⁹ Aberrant – "deviating from the usual or natural type" ("Aberrant", n.d.).

narcissism (Ellis, 1898) and sexuality in children (Moll, 1912) influenced Freud's thinking and the development of the theories on infantile sexuality (Freud, 1905/1977). It can be argued that Freud contributed to the advancement of sexology; and by proposing that sexual fantasies originate in the unconscious mind, he placed sexuality in the domain of mental health. Thus, the historical convergence of sexology and psychoanalysis laid a foundation for modern sexology research.

A Freudian approach to human sexuality in theory and practice was based on individual case studies. This method has its sampling limitation, and in early 20th century a need for a scientific laboratory study of sexuality began to emerge (Lehmiller, 2017). Next, I will mention the pioneers whose research was ground-breaking both for sexology and the general understanding of human sexuality.

During the 1940s and 1950s, biologist Alfred Kinsey and his associates undertook a large-scale survey to examine sexuality of Americans. The results of extensive interviews of 5940 women and 5300 men were published in two seminal books: *Sexual Behaviour in the Human Female* (Kinsey, Pomeroy, & Martin, 1948) and *Sexual Behaviour in the Human Male* (Kinsey, Pomeroy, & Martin, 1953). The impact of Kinsey's findings had a cultural paradigm-shift effect by bringing to light the significant frequency of masturbation (men 92%; women 62%), extramarital encounters (men 50%; women 26%), homosexual activities (men 37%; women 13%) and sadomasochistic desires (men 22%; women 12%) (Farmer & Binik, 2005; Kahr, 2007; Kinsey et al., 1948, 1953; Lehmiller, 2017).

From 1957 to 1965, gynaecologist William Masters and psychologist Virginia Johnson conducted research in which they observed about 10,000 complete human sexual response cycles (a four-stage model: excitement, plateau, orgasm, resolution) in the laboratory of Washington University (Lloyd, 2005). The participants (312 men; 382 women) were asked to masturbate or engage in sexual intercourse while connected to equipment monitoring physiological phenomena (Masters & Johnson cited in Archer & Lloyd, 2002). The findings of Masters and Johnson's research were reported in four books: *Human Sexual Response* (1966), *Human Sexual Inadequacy* (1970), *The Pleasure Bond* (1974) and *Homosexuality in Perspective* (1979). Masters and Johnson are credited

with transforming sex therapy—the field that addresses sexual function and sexual relationships. By enhancing couple therapy with interventions like 'sensate focus' ¹⁰ Masters and Johnson reported helping couples resolve sexual issues, such as erectile dysfunction, premature ejaculation, orgasmic difficulties and performance anxiety (Berry, 2013).

Modern sexologists are the researchers situated within various disciplines (e.g., biology, medicine, anthropology, psychology, psychotherapy and sociology) (Lehmiller, 2017). The field of sexology today covers a vast intellectual domain and includes sexual development, sexual orientation, gender identity, intersexuality and transsexuality; sociological, anthropological and neurobiological aspects of sexual behaviour, sexual function and dysfunction; paraphilias¹¹; relationships and attachment (Friedman & Downey, 2008). The main goal of sexology is to increase understanding of all aspects of human sexuality and its expression, including sexual practices in different cultures and different kinds of therapies that address sexual issues (Lehmiller, 2017).

Sex researchers have used many interesting ways to investigate the topic of people's sexual fantasies. I found that the research into sexual fantasies employs a range of data collection methods including interviews, surveys and computer-generated questionnaires, among others. The literature focused on prevalence, content, links between sexual fantasy and attachment, sexual fantasy and sexual orientation. Interestingly, a significant amount of research focused on sexual fantasies with dominance and submission themes. I will be presenting each of these areas in the sections that follow.

Prevalence of Sexual Fantasies

The reviewed sex research studies indicate that sexual fantasy seems to be a universal

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¹⁰ Sensate focus – sex therapy technique that fosters the ability to stay present in the moment thus focusing on sensory perceptions (Binik & Hall, 2014).

¹¹ Paraphilia – "a pattern of recurring sexually arousing mental imagery or behaviour that involves unusual and especially socially unacceptable sexual practices" ("Paraphilia", n.d.).

human experience. For example, a large-scale survey conducted by Kahr (2007) using semi-structured interviews and online surveys with over 19,000 adult participants in the UK, found that on average 90% reported having sexual fantasies. Findings from Lehmiller (2018), who collected data from 4,175 people in the USA through a survey consisting of 369 questions, revealed that 98% of participants had sexual fantasies. The findings of these two studies are consistent with the results of the studies conducted in the period between 1950s and 1990s. For example, the widely cited review of sexual fantasy research literature conducted by Leitenberg and Henning in 1995, found that 95% of respondents fantasised on a regular basis. These findings revealed strong evidence of sexual fantasies being a common experience among adults, albeit the studies were conducted in only two countries.

Content of Sexual Fantasies

Human imagination is not constrained by morals, values, beliefs and prohibitions; it is arguably a space of true freedom, with the possibility to create virtually anything in the privacy of the mind. Thus, there are potentially as many sexual fantasies as there are people. Nevertheless, empirical literature reveals commonalities in people's fantasies, and there is a high probability that one's unique fantasy has been fantasised by someone else, no matter how idiosyncratic (Kahr, 2007; Person, 1995). Drawing on the three largest and most recent selected studies on sexual fantasies (Kahr, 2007; Lehmiller, 2018; Leitenberg & Henning, 1995), I will now identify the key themes.

The first selected study is the review of empirical research, between the years 1953 and 1994, conducted in 1995 by psychologists Harold Leitenberg and Kris Henning in the USA. The review found that the four most frequently identified sexual fantasies included: 1. Sexual imagery including past, present or imaginary lovers; 2. Sexual power and irresistibility (seduction and multiple partners); 3. Forbidden sexual imagery; and 4. Submission-dominance scenes with sadomasochistic imagery. The authors commented on the difference in methodologies of the reviewed studies. Sometimes, the data were collected through checklists of different fantasies, and in other studies the data were obtained from the written self-reports. Nonetheless, they reported that the common

findings were apparent across their selected studies.

The British Sexual Fantasy Research Project was conducted by Brett Kahr, a psychoanalyst and sexologist in the UK. Between 2003 and 2007, Kahr obtained data from 132 interviews and 18,167 computer surveys detailing the respondents' sexual fantasies, sexual histories and demographic details. Some of the data were collected in personal five-hour interviews, so this research was very close to the participants' experience due to the nature of the method. The methodological difference sets this study apart from previous research where the data may have been gathered in less intensive interviewing contexts. Through his research, Kahr (2007) provided thematic indexes of sexual fantasies, which I reorganised in one thematic index, according to percentage from most popular to least popular (Table 2).

Table 2.

A Thematic Index of British Sexual Fantasies Preferences

Sex with regular partner	58%
Kissing	43%
Sex with someone else's partner	41%
Sex with a work colleague	39%
Romantic scenes	37%
Sex with a stranger	37%
Sex with two or more women	35%
Vibrator	35%
Playing a submissive or passive role during sex	33%
Sex with a friend	32%
Talking dirty	31%
Playing a dominant or aggressive role during sex	29%
Sex with someone of same sex	25%
Being tied up by someone	25%
Underwear	24%
Sex with a friend's partner	23%

Tying someone up	23%
Dildo	22%
An orgy	20%
Being watched during sex	19%
Sex with two or more men	18%
Being blindfolded	17%
Blindfolding someone else	17%
Food items	16%
Sex with a man and a woman at the same time	15%
Using handcuffs or bondage restraints or collars on someone else	15%
Having someone else use handcuffs or bondage restraints or collars on you	14%
Being forced to strip	13%
Spanking someone else	13%
Being spanked	12%
Forcing someone to strip	11%
Being forced to masturbate	10%
Forcing someone to masturbate	9%
Stripping off in public	5%

Note: Derived from Kahr (2007).

I looked at the interrelationships between the fantasies and clustered them into overarching themes in order to derive the most statistically common themes (Table 3 presents these themes in ranking order – from most common to least common). For example, "being spanked", "spank someone" and "being tied up" I interpreted as a broad theme of "dominance, submission, force and restrains". "Sex with someone else's partner", "sex with a work colleague" and "sex with a stranger" I grouped together in the category "sex with someone outside of the relationship".

Table 3.

Most Common Sexual Fantasies in UK

Sex with regular partner

Sex with regular partner

Sex with someone outside of the relationship

Sex with someone else's partner

Sex with a work colleague

Sex with a stranger

Sex with a friend

Sex with a friend's partner

Romantic scenes

Kissing

Romantic scenes

Threesomes and group sex

Sex with two or more women

An orgy

Sex with two or more men

Sex with a man and a woman at the same time

Domination, Submission, Force and Restraints

Playing a submissive or passive role during sex

Playing a dominant or aggressive role during sex

Being tied up by someone

Tying someone up

Being blindfolded

Blindfolding someone else

Using handcuffs or bondage restraints or collars on someone else

Having someone else use handcuffs or bondage restraints or collars on you

Being forced to strip

Spanking someone else

Being spanked

Forcing someone to strip

Being forced to masturbate

Forcing someone to masturbate

Sex with someone of the same sex

Sex with someone of same sex

Voyeurism, exhibitionism and fetishism

Vibrator

Talking dirty

Underwear

Dildo

Being watched during sex

Food items

Stripping off in public

Thus, the seven most common fantasies that I identified from Kahr's research are 1. Sex with a regular partner; 2. Sex with someone outside of the relationship; 3. Romantic scenes; 4. Threesomes and group sex; 5. Domination, submission, force and restrains; 6. Sex with someone of the same sex; and 7. Voyeurism¹², exhibitionism¹³ and fetishism¹⁴.

What is significant about *The British Sexual Fantasy Research Project* is the selected sample. Majority of the previously reviewed studies on sexual fantasies were conducted using college populations (Birnbaum, 2007; Leitenberg & Henning, 1995; Person et al., 1989) which inevitably led to the underrepresentation of the general population due to age, class and education factors. Kahr's research team obtained their sample of 18,167 people through YouGov – a UK polling organisation that generally aims to elicit information from the general public about their political views. The collaboration between Kahr and YouGov resulted in a more proportional representation of the general adult population which adds to the validity and credibility of the results.

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¹² *Voyeurism* – "the practice of obtaining sexual gratification from observing others" ("Voyeurism", n.d.).

¹³ Exhibitionism – "a form of sexual behaviour involving exposure of one's genitals to unsuspecting person" ("Exhibitionsim", n.d.).

¹⁴ Fetishism – an ability to experience sexual arousal from an animated object, activity or a part of the body (Kahr, 2007).

Most recently, in 2018, an empirical study was conducted by Lehmiller, a social psychologist and sexuality educator at Harvard University. Similar to Kahr's research project, this study utilised a general population sample of Americans – a considerable strength of the study. Using the method of an online survey, Lehmiller collected data from 4,175 participants ranging from 18 to 87 years of age, from all 50 states of the USA. The extensive questionnaire (369 questions) included a narrative of a favourite sexual fantasy followed by questions about the fantasy, personality traits, sexual history and demographic characteristics. In his book *Tell Me What You Want*, Lehmiller (2018) reported seven most common sexual fantasies, ranked according to frequency: 1. Threesomes and group sex; 2. Power, control and rough sex; 3. Variety, novelty and adventure; 4. Forbidden sex¹⁵; 5. Polyamory¹⁶ and swinging¹⁷; 6. Romance, passion and intimacy; and 7. Homoeroticism and gender flexibility¹⁸.

Through my readings of these literatures, these studies seem to reveal commonalities around the most common sexual fantasies. I have presented these in Table 4 below.

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¹⁵ Forbidden sex – sexual activities that are considered taboo by culture, society or religion (Lehmiller, 2018).

¹⁶ *Polyamory* – a relational paradigm based on consensual, multiple affective and sexual relationships (Ferrer, 2018).

¹⁷ Swinging – a form of consensual nonmonogamy that involves an exchange or swapping romantic partners (Lehmiller, 2018).

¹⁸ *Homoeroticism and Gender-Bending* – a desire for flexibility with respect to one's gender and/or sexual orientation (Lehmiller, 2018).

Table 4.

Most Common Sexual Fantasies Compared

Leitenberg & Henning (1995)	Kahr (2007)	Lehmiller (2018)
Sexual imagery including past,	Sex with a regular partner	Romance, passion and
present or imaginary lovers	Romantic scenes	intimacy
Submission – dominance,	Aggression, domination,	Power, control and rough sex
scenes with sadomasochistic	submission and forced	
imagery	restrains	
Forbidden sexual imagery	Voyeurism, exhibitionism	Forbidden sex and taboo
	and fetishism	
Sexual power and irresistibility	Threesomes and group sex	Threesomes and group sex
including seduction and		
multiple partners		
	Sex with someone of the	Homoeroticism and gender
	same sex	flexibility
	Sex with someone outside of	Polyamory and swinging
	the relationship	
		Variety, novelty and
		adventure

It appears that many people's fantasies contain romantic, intimate scenes and many fantasies contain transgression, forbidden and 'taboo' scenarios (e.g., voyeurism, exhibitionism, forced sex and fetishism). Fantasies involving same-sex sexual activities were found to be in the top seven sexual fantasies in Lehmiller's (2018) survey, and 25% of Kahr's (2007) sample reported having these fantasies. Interestingly, same-sex fantasies were not found in a significant volume to form a separate category by Leitenberg and Henning (1995). I see two potential explanations to this absence: 1) the respondents did not disclose same-sex fantasies out of fear and shame; and 2) the researchers could have

grouped same-sex fantasies under the theme of 'forbidden sexual imagery'. Considering that the studies reviewed by Leitenberg and Henning were conducted between 1953 and 1995, at a time when homosexuality was either illegal (Drescher, 2012), or/and considered a mental illness (American Psychiatric Association, 1968, 1980), the respondents could have been afraid to disclose same-sex desires. It is also possible that same-sex fantasies could have fallen under the category of 'forbidden'. When Lehmiller interpreted his data, he did exactly that: fantasies containing sexual acts that were illegal in 2018 (e.g., exhibitionism and voyeurism) and that were considered 'paraphilic' (e.g., 'fetishistic disorder' in *The Diagnostic and Statistical Manual of Mental Disorders* (5th ed.; *DSM-5*; APA, 2013) went into the category 'forbidden sex and taboo'.

Another common theme across the selected studies contains scenarios of power dynamics, force, control, restraints, discipline, punishment, degradation, seduction and rough sex. Different researchers have given these fantasies different names; for example, submissive fantasies, sadomasochistic fantasies, rape fantasies, forced sex fantasies and BDSM. When referring to this broad theme of fantasies, I will use the umbrella term BDSM which stands for Bondage, Discipline, Dominance, Submission, Sadism and Masochism (Komes et al., 2006; Levand, Chando, Pillai-Friedman, & Love, 2019). I will discuss BDSM fantasies in more detail in a separate section later in this chapter.

Having discussed the prevalence and content of the most common fantasies identified in empirical research, I now examine literature that has discussed the relationship between attachment style and content of sexual fantasy.

Sexual Fantasy and Attachment Orientation¹⁹

The reviewed literature indicates that there is a relationship between attachment history and people's sexual fantasies. The attachment system is understood to be the first sociobehavioural system (Cassidy, 1999); thus, it has been argued that it lies at the foundation of the sexual system of an individual (Birnbaum, 2007; Shaver, Hazan, & Bradshaw,

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¹⁹ Attachment orientation is used as a synonym to 'attachment style'.

1988). I will now explore the empirical studies that suggest that sexual fantasies may be influenced by the fantasiser's attachment style.

A group of researchers in Israel conducted two studies (Birnbaum, 2007; Mizrahi, Kanat-Maymon & Birnbaum, 2018) that focused on the interplay between attachment orientation and the frequency and content of sexual fantasies. Birnbaum (2007) used two samples (n=176; n=115) and two different methodologies (20-item sexual fantasy checklist and an open-ended writing method) to reduce methodological biases. Mizrahi at al. (2018) used daily diary questionnaires for 42 days on both members of a 100-couple sample. The findings of both studies revealed that those who were identified as anxiously attached revealed a higher frequency of fantasising and the content of their sexual fantasies often included affectionate and intimate themes. These individuals tended to see themselves as affectionate, caring towards others and sometimes helpless and cared for, as in submissive fantasies (Birnbaum, 2007). In contrast, avoidantly attached people fantasised less than non-avoidantly attached participants, and the content of their fantasies had limited intimacy and affection themes. Interestingly, attachment avoidance was also associated with submission themes; however, avoidant individuals saw themselves as humiliated and the other as hostile and distant in their sexual fantasies. In addition, a positive correlation was found between attachment insecurities and higher frequency of extradyadic fantasies²⁰.

The authors of both studies suggested that sexual fantasies may reflect the relational goals associated with attachment orientation of the fantasiser. Anxiously attached people are preoccupied with worries about their current relationship and the perceived distance of the partner; therefore, their sexual fantasies consist of scenarios where they feel desired and irresistible. In contrast, avoidantly attached people use distant strategies in real life and in fantasy. I wonder if the sense of closeness derived from sexual fantasies of anxiously attached people may serve the purpose of soothing the ongoing anxiety stemming from the relational insecurity. The relief, albeit temporary,

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²⁰ Extrapair fantasy refers to a sexual imaginary scenario that involves someone who is not a regular partner in the couple.

may offer a possible insight into the higher frequency of fantasising among anxiously attached individuals. Conversely, for avoidantly attached people, closeness is what provokes anxiety; hence, the submissive sexual fantasies devoid of romance and affection can provide the route for the fantasier to experience relief and pleasure bypassing the intimate aspect of sexual interaction.

Similar to Birnbaum's (2007) findings in Israel, the earlier-mentioned study in the USA (n=4175) by Lehmiller (2018) also revealed that people that the author identified as 'insecure' reported having sexual fantasies with romantic and dominance/submission themes. Lehmiller also viewed submissive fantasies as a route for a fantasiser to escape reality with its relational insecurities. However, in contrast to Mizrahi et al.'s (2018) findings about more insecure people having more extradyadic fantasies, Lehmiller's study found that insecure people had fewer fantasies that would involve nonmonogamy. Lehmiller explained that insecurely attached persons fear abandonment and, therefore, their sexual fantasies would not include the plots with potential triggers for jealousy or rejection unless the scenario placed the fantasiser at the centre of attention, as in romantic or submissive fantasies.

Different methodologies, samples, and cultural messages about sexuality in Israel and the USA should be considered when comparing and contrasting the studies. Nevertheless, taken together, these empirical results offer an important perspective on the interlinking between sexual fantasy and attachment orientation. Next, I will explore what the literature reveals about the object of sexual fantasy and the fantasiser's sexual orientation.

Sexual Orientation and the Object in Sexual Fantasy

Although most research on sexual fantasies focused on a heterosexual population, two reviewed studies included gay men and lesbian samples with the aim to compare the content of sexual fantasies between gay, lesbian and heterosexual samples. The findings revealed that cross-orientation fantasies (same-sex fantasies among heterosexual individuals and heterosexual fantasies among those who identify gay or lesbian) were common. For example, in 1979, Masters and Johnson interviewed 30 gay men, 30

heterosexual men, 30 lesbians and 30 heterosexual women. The top five sexual fantasy themes were identified for each group. Cross-orientation fantasies ranked the third most common category for lesbians (sexual encounters with men); third most common category for gay men (sexual encounters with women); fourth most common category for heterosexual men (sexual encounters with men) and fifth most common category for heterosexual women (sexual encounters with women).

Conversely, these research results were not confirmed by another, slightly larger study (39 gay men, 31 lesbians, 39 heterosexual men, 33 heterosexual women). Price, Allensworth, and Hillman (1985) used the method of self-administered questionnaires. The participants in this study reported having sexual fantasies with a partner/s according to their sexual orientation and no cross-orientation fantasies at all. Price et al. suggested that the demographic factors in the samples could explain the contradictory findings; Masters and Johnson's study recruited people from diverse backgrounds and walks of life, whereas the study sample of Price at al. consisted mostly of white college students. In addition to this explanation, I wonder if the difference in methodologies could account for the striking difference in findings. Could the immediacy of Masters and Johnson's interview method have facilitated an access to the less conscious sexual fantasies then the method of the self-administered written questionnaire?

In other studies that did not include gay and lesbian populations, same-sex fantasies have been consistently reported by heterosexual people (Crepault, Abraham, Porto, & Couture, 1976; Person et al., 1989; Wilson & Lang, 1981), with the higher incidence of same-sex fantasies in heterosexual women than men. Leitenberg and Henning (1995) theorised that this gender difference in the findings could be the result of a historically heavier taboo on male homosexuality in the Anglo-Saxon cultures.

Lehmiller (2018) introduced a concept termed 'sexual flexibility' which he defined as "willingness to deviate not only from our sexual orientation but also from what our culture and society have told us we should want when it comes to sex" (p. 75). Lehmiller used this concept to interpret the findings of his survey, that 59% of women and 26% men who identified as heterosexual had same-sex fantasies. In accord with Leitenberg and Henning's (1995) explanation of this gender difference, Lehmiller also

suggested that women have a higher sexual flexibility because of greater social conditioning and historical criminalisation of male homosexuality.

Kahr's study (2007) revealed that heterosexual people who had never had a same-sex actual experience had frequent homoerotic fantasies, and gay men and lesbians who had never had a heterosexual experience had frequent fantasies about the members of opposite sex. Kahr highlighted the complexity of sexual desire and argued that in the realm of sexual fantasy, all the conventions and assumptions about human sexuality become challenged. Referring to 20 years of his clinical experience as a marital psychotherapist, Kahr argued that sexuality is a not a "monolithic creation" (p. 154) and questioned if it is possible to have a clearly consolidated sexual identity.

The above discussion provides some evidence that sexual orientation does not necessarily determine the object in sexual fantasy, and cross-orientation/sexual flexibility fantasies appear to be common. The next section reviews a wide group of sexual fantasies that fall under the category of BDSM.

Bondage, Discipline, Dominance, Submission, Sadism and Masochism in Sexual Fantasy

This section explores the empirical studies that focused on sexual fantasies containing force, domination, submission and control. As discussed above, this category of fantasies is one of the most statistically common across the reviewed studies (e.g., Kahr, 2007; Lehmiller, 2018; Leitenberg & Henning, 1995). Therefore, understanding these fantasies can enhance our understanding of sexual fantasy in general.

BDSM fantasies include a diverse range of scenarios, from being blindfolded by a regular partner to a pain-inflicting scene in a dungeon. The intrinsic power exchange seems to be one of the main erotic elements of BDSM fantasies. I will illustrate the diverse expression of eroticised power with several fantasies reported by the participants of the reviewed studies. For example, in Kahr's survey (2007), Lila reported that in her frequent fantasy she is forced to masturbate in front of sadistic nuns; Karleen finds it arousing to imagine being kidnapped and raped, and Howell fantasises about being strip-

searched and invaded in "each body cavity" (p. 177) by a custom officer at the airport. In Lehmiller's study (2018), a young woman enjoys the fantasy of being used as a sex object by her partner and 10 of his friends: "...I want to be naked, tied up and humiliated ... I want to be shown no mercy ... I want to feel like I ... have absolutely no control and no say" (p. 27), and a man in his 30s fantasises about a dominatrix²¹ penetrating him anally with an artificial penis. Even though the presented scenarios vary greatly, they all seem to share an organising principle of power. Someone is doing something to someone, and this dynamic is sexually exciting for many fantasisers with BDSM sexual fantasies.

Most respondents of the reviewed studies clearly stated that they did not wish their forced fantasies to happen in real life, even though they brought excitement and pleasure in imagination (Critelli & Bivona, 2008; Kahr, 2007; Lehmiller, 2018; Leitenberg & Henning, 1995; Shulman & Home, 2010; Ziegler & Conley, 2016; Zurbriggen & Yost, 2004). In 2008, psychologists Joseph Critelli and Jenny Bivona reviewed over 30 years of research on women's rape fantasies. They found that between 31% and 57% of women enjoy the fantasies of their own rape. However, most women, over 99% of women according to Laumann, Gagnon, Michael, and Michaels' study (1994, as cited in Leitenberg & Henning, 1995), stated that they would be repulsed by an actual rape. Similarly, Kahr's (2007) participants with rape fantasies did not wish such events in real life. One of the respondents accompanied her sexual fantasy of being tied and raped by a celebrity, with the following clarification in capital letters: "I DO NOT WANT TO BE RAPED IN REAL LIFE THOUGH - IT'S A FANTASY" (Kahr, 2007, p. 233). In Lehmiller's study (2018), two-thirds of women and over half of men reported having forced-sex fantasies, but most of them emphasised the safety, consent and full control of the fantasiser embedded in the fantasy. It seems that the imaginative aspect of fantasy, no matter how unusual and frightening, provides the safety that perhaps is necessary for intense sexual excitement experienced by the fantasisers with BDSM fantasies.

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²¹ *Dominatrix* refers to a "woman who physically or psychologically dominates her partner in a sadomasochistic encounter" ("Dominatrix", n.d.).

An interesting finding from the studies reviewed is that playing a submissive role in fantasy was found to be more common than playing a dominant role (Lehmiller, 2018; Kahr, 2007). Lehmiller (2018) suggested that relinquishing control and the responsibility that comes with it is what lies behind the desire of people to submit in their fantasy, and more people seem to prefer to let go of control than be in control, at least in the fantasy. It can be argued, however, that the submissive in the forced fantasy is actually in control, after all they orchestrate the plot and assign the roles—who dominates them and in what way. I wonder if the need of being wanted, paid attention to, looked at and looked after, could be behind the desire to submit, to be tied up, disciplined, restrained and forced.

In summary, this review offered some evidence that many people in the UK and USA experience fantasies with the elements of power exchange, force, control and pain. BDSM fantasies is a complex psychological phenomena and many questions are yet to be addressed in further research. In Chapter 4, I will review how the intersection of sexuality and power has been theorised in psychoanalytic and psychotherapeutic literature.

Chapter Summary

In this chapter, I have presented a brief historical overview of sexology and the findings of the reviewed empirical research on sexual fantasies. According to the selected studies, 90-97% of people regularly experience sexual fantasies, and sexual fantasies often contain violence, group sex, dominance, submission, voyeurism and exhibitionism, as well as romantic scenes (Kahr, 2007; Lehmiller, 2018; Leitenberg & Henning, 1995). The review of the studies that examined the correlation between sexual fantasy and attachment style found that attachment predisposition influences the frequency and content of sexual fantasies. Further, by looking at the studies that included gay men and lesbian samples, it was found that it is common for people to have cross-orientation and bisexual fantasies. The review of literature on BDSM fantasies revealed that the range of fantasies containing forced sex, constraints and control is wide and even though many people enjoy these sexual fantasies, most of them would not wish the imagined sexual acts to happen in real life. In the next chapter, I will explore how sexual fantasy has been

understood from a psychoanalytic perspective.

Chapter 4: Sexual Fantasy: An Expressway to the Unconscious?

Psychoanalytic and psychotherapeutic scholars write about sexual fantasies in the form of case reports. Looking at such reports, through the lens of research methodology, there are significant sampling limitations given that a case is based on a single individual (n=1). However, such case studies have the benefits of providing deep and rich information and conceptual theorising based on the case. As I immersed myself in reading psychoanalytic and psychotherapeutic literature containing sexual fantasies and theories about sexual fantasies, several themes began to emerge. I present them in this chapter in the following order. First, I discuss what has been theorised about the origins of sexual fantasy with reference to infantile sexuality of preoedipal and oedipal developmental stages. This is followed by an exploration of the function and role of sexual fantasy in a person's life. Next, I examine what people think and feel about their sexual fantasies. Finally, I reflect on the disconnect between what seems like a common experience in people and the hidden nature of sexual fantasy.

The Origins of Sexual Fantasy

Sexual fantasy, as a phenomenon, has been written about by psychoanalytic and psychotherapeutic authors across the past century. Most writers seem to agree that sexual fantasies originate in early childhood and come to the fore of conscious experience in puberty when an individual's sexuality begins to unfold. In this section, I discuss the notions of infantile sexuality, polymorphous perversity and Oedipus complex as underpinning most psychoanalytic thinking about the origins of sexual fantasy.

Theory of psychosexual development. In 1905, Freud published *The Three Essays on the Theory of Sexuality*, where he introduced infantile sexuality and a predictable developmental sequence of psychosexual development from birth to adulthood. According to this theory, humans are born with instinctual sexual energy 'libido,' the child's main wishes are primarily sexual and these wishes form the core of unconscious phantasy life. The expression of the sexual impulses progresses in five

stages: oral, anal, phallic, latent and genital. Freud linked four of the stages to the source of pleasure in different erogenous zones: the mouth during breast-feeding, the anus during toilet-training, the genitals during sex differences discovery and the genitals again in puberty. Latency stage is characterised by the repression of earlier sexual impulses due to the increasing restrictions by the internalised societal conventions and morals. It seems that when adult sexuality begins developing in the period of adolescence, the repressed libidinal impulses get manifested in the masturbatory fantasy, thus moving from the unconscious to the conscious part of the mind. The content of such conscious fantasy is argued to be shaped by the disguised sexual, revengeful and aggressive wishes that the person experienced towards parents or/and siblings in childhood (Bader 2003; Chasseguet-Smirgel, 1986; Kernberg, 1995; Lacan, 1967; Person, 1980; Stoller, 1985).

Polymorphous perversity. Freud (1905/1977) used the term polymorphous—perverse sexuality to define the sexual impulses in the preoedipal stage of development (from birth to age five) that are focused on the oral, anal and genital sources of pleasure. He proposed that incestuous and bisexual impulses are normal in children and, even though they are subject to repression due to the external and internal prohibition during latency, they nevertheless return and often can be traced in a masturbatory fantasy. Psychiatrist and psychoanalyst Otto Kernberg (1995) similarly referred to polymorphous perverse impulses as central to sexual fantasies. He wrote as follows:

It is a longing for closeness, fusion, and intermingling that implies both forcefully crossing a barrier and becoming one with the chosen object. Conscious and unconscious sexual fantasies refer to invasion, penetration, or appropriation and include the relations between body protrusions and openings – penis, nipple, tongue, finger, faeces on the penetrating or invasive site, and vagina, mouth, anus on the receptive or encompassing site. (Kernberg, 1995, p. 23)

This detailed description of different body parts points at the infant's experience of self and the object in parts, the phenomena captured in object relations theory (Klein, 1932). For example, a magically appearing nipple enters the child's mouth and through sucking motion provides life-giving sustenance and hunger satisfaction. The concurrent emotional

and physiological states of safety and pleasure get internalised by the child, together with the psychic associations to these particular body parts—the nipple and the mouth. Of course, for some children, there might be states of disconnection, distress, disturbance if their caregiver is psychologically depressed, significantly misattuned, rough; therefore, the experience of feeding becomes one of disturbance rather than safety and pleasure. That disturbance might also become erotised later in a sexual fantasy. Perhaps, these early experiences can be linked to the plethora of sexual fantasies fetishising nipples and breasts. Looking to the clinical case writings of psychotherapist Michael Bader (2003), he explored the "mommy thing" (p. 58) masturbatory fantasy of one of his patients, Matt. Matt's repeating sexual fantasy features a woman who instructs him to milk her large breasts by sucking and squeezing. Bader's use of the phrase 'mommy thing' masturbatory fantasy seems to suggest the centrality of the early mother-infant caregiver feeding and handling experience to a particular type of fantasy.

Freud (1905/1977) linked the natural 'perverse' capacity of an infant to derive pleasure from their mother stroking, rocking, kissing them to the later development of their capacity to love:

A mother would probably be horrified if she were made aware that all her marks of affection were rousing her child's sexual instinct and preparing for its later intensity. She regards what she does as asexual, 'pure' love, since, after all, she carefully avoids applying more excitations to the child's genitals than are unavoidable in nursery care. As we know, however, the sexual instinct is not aroused only by direct excitation of the genital zone. ...if the mother understood more of the high importance of the part played by instincts in mental life as a whole – in all its ethical and psychical achievements – she would spare herself any self-reproaches even after her enlightenment. She is only fulfilling her task in teaching her child to love. (p. 146)

Interestingly, Kernberg (1995) viewed polymorphous perversity not only as natural but also essential for sexual excitement and the development of a capacity for "mature sexual love" (p. 33).

Within psychoanalytic thought, polymorphous perversity is understood as inherent in human development and, not surprisingly, can manifest in people's sexual fantasies. Now I turn to the Oedipus complex, another key notion of the infantile sexuality theory.

Oedipus complex and sexual fantasy. Psychoanalyst and psychiatrist Person (1995) suggested that every sexual fantasy is one of many concealed scenarios of Oedipus complex resolution. The Oedipus complex is one of the central psychoanalytic ideas—"the nuclear complex of the neuroses" (Freud, 1905/1977, p. 149)—and refers to three main components: 1. Biologically determined erotic feelings towards the oppositesex parent; 2. Competing and murderous feelings against a rival parent; and 3. Fear of castration (Friedman & Downey, 2000). According to Oedipus complex theory, the child enters the Oedipal stage at about 3-5 years of age and in the optimal development 'resolves' the complex by repressing the incestuous wishes towards the desired parent (mother) and the murderous wishes toward the rival parent (father), identifying with him instead (Freud, 1924/1977). There is a view within psychoanalysis and psychotherapy that "Oedipus complex is never actually resolved but rather remains a lifelong challenge" (Teusch, 2011, p. 800). So, sexual fantasy then becomes a psychic way to condense and disguise the intense early experiences of love, hate, competition, envy and failure (Person, 1995) with all its polymorphous–perverse elements of infantile sexuality (Kernberg, 1995).

Since there are infinite possibilities of Oedipal situations (Davies, 2015), it can be said that there are equally infinite possibilities of sexual fantasies plots. Oedipus complex theory is helpful for theorising the choice of the love object/s in sexual fantasy, and the power dynamic that appears to be present in every sexual fantasy that I have read in the selected literature so far. For example, incestuous fantasies and the fantasies of displaced incest (portraying figures in authority - priests, teachers, nurses, doctors) can be understood as psychic encryption of early Oedipal experiences. The child who did not integrate the developmental task of differentiation from parents and coming to terms with the impossibility to become a 'lover' to a mother or a father could have felt rejected and abandoned by one or both parents. So, in the incestuous fantasy, a parental figure fulfils

Oedipal longings of the fantasiser and momentarily transcends the painful Oedipal legacy.

Another example of Oedipal roots in sexual fantasy can be the scenarios with threesomes and group sex (Kernberg, 1995; Person, 1995). In this kind of fantasies, a triangle might be understood as a replication of the Oedipal configuration. But, instead of being excluded from the love relations of an Oedipal couple, the fantasiser is included, welcomed and desired. Perhaps, group sexual fantasies may also be theorised as the replication of Oedipal constellation, including the Oedipal rivals of the childhood—siblings. Sexual fantasy has a magic ability to restore the powerlessness experienced by the fantasiser in childhood, as the gift of imagination allows them to experience power by writing and directing the scenario of their sexual fantasy (Person, 1995).

The reviewed literature revealed that the majority of psychoanalysts and psychotherapists discuss erotic transference (client's erotic/sexual feelings and fantasies towards the therapist) in terms of Oedipus complex theory (Celenza, 2014; Davies, 2015; Hertzmann, 2018; Kernberg, 1995; Morin, 1995; Orbach, 1999; Person, 1995; Stoller, 1985). The therapeutic relationship is unique as it resembles the early relationship of the patient with their mother or father. The therapist often becomes a 'replica' of the first relationship and can stand in for the desired Oedipal parent (Kernberg, 1995). The repressed Oedipal strivings, including sexual and hostile wishes, can become activated in the therapeutic process and projected onto the therapist. Paying attention to the patient's sexual fantasies towards the therapist can help the therapist formulate the patient's symbolic expression of merger longings of preoedipal stage and the defences against the polymorphous perverse elements of Oedipal genitality (Kernberg, 1995). Paying attention to the emergence or absence of therapist's sexual fantasy about the patient can also be a valuable source of information about the patient's inner life (Celenza, 2014; Hirsch, 2010; Kernberg, 1995). Working through the regressive nature of erotic transference and the concurrent activation of the Oedipal longings can help the patient to move closer to the Oedipus complex resolution through mourning (Kernberg, 1995) in order to grow the capacity to create new and satisfactory relational experiences.

To conclude this section, when applied to the topic of this research, the theory of psychosexual development, as introduced in the *Three Essays on the Theory of Sexuality* (Freud, 1905/1977), claims that most sexual fantasies begin formation in childhood, have incestuous roots and contain elements of polymorphous perversity. Several notions proposed in the *Three Essays* have been expanded, revised or refuted. For example, Friedman and Downey (2000) critiqued the universality of incestuous wishes and the chronology of sexual desire development. However, as Chodorow (2015) argued, the theory of psychosexual development has remained "fundamentally unchanged" (p. 38) and the centrality of infantile and oedipal sexuality remains a given in psychoanalysis.

Having explored psychoanalytic theoretical perspectives on the origins of sexual fantasy, I look now at the function, purpose and role of sexual fantasy in human life.

Function and Purpose of Sexual Fantasy

A review of selected psychoanalytic and psychotherapeutic literature reveals that every sexual fantasy appears to carry a psychological function and serve a purpose (Bader, 2003; Freud, 1905/1977; Morin, 1995; Perel, 2014; Person, 1995; Stoller, 1985). In the paragraphs that follow, I discuss several of them.

Compensatory function. In Creative Writers and Day-Dreaming, Freud (1908/1962) wrote: "...a happy person never phantasises²², only an unsatisfied one...and every single phantasy is the fulfilment of a wish, a correction of unsatisfying reality" (p. 148). In this early psychoanalytic view, any fantasy, including sexual fantasy, is triggered by the frustration and functions as a compensation for the unattainable wishes. For example, people who feel unhappy in marriage may enjoy sexual fantasies of extramarital affairs, thus dispelling frustration of what they lack in life.

The solution to the unconscious conflict. Gradually, psychoanalytic thinkers expanded understanding of sexual fantasy function from a substitution for deprivation to

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²² Freud (1900/1977) used the word "phantasie" in the German language for both conscious and unconscious fantasies: "just as there are phantasies…which are conscious, so too, there are unconscious ones in great numbers…" (p. 632).

a more complex psychological solution to the unconscious conflict. This formulation suggests that the real (unconscious) wish of the fantasiser is converted into a conscious sexual fantasy, heavily disguised, to allow the internal conflict prevention and gratification without arousing fear of punishment (e.g., Person, 1995). To illustrate this proposition, Person (1995) offered an example of a woman who fantasises about sex with her brother's best friend. The actual wish of sexual closeness with her brother would create a moral conflict within her; therefore, the wish is disguised in sexual fantasy, and the conflict is 'solved.'

Several writers point at the dichotomy of sexual fantasy, the tension between the unconscious problem and the solution, the hidden wish and the defence (Bader, 2003; Perel, 2014; Person, 1995; Stoller, 1986). Stoller (1986), for example, argued that the function of sexual fantasy is to state the problem and hint on the solution. Perel's (2014) patient Joanna grew up feeling invisible and feeling that she cannot take space, so she has not developed a capacity to receive pleasure. In her sexual fantasy, Joanna is tied up and given pleasure forcefully without any possibility to reciprocate. Perel viewed the function of Joanna's fantasy as bridging the gap between mutually exclusive wishes (wanting to be given and not being able to take), thus solving the unconscious conflict.

Healing and transformation. Another way in which sexual fantasy has been framed in psychoanalytic literature, in terms of its function, is its role in undoing past hurts. In this regard, it appears in the literature to serve the purpose of healing and emotional transformation. In Jungian psychoanalysis, sexual fantasy is understood to serve a "transcendent function" by bringing all the parts of the psyche together (Knox, 2005, p. 621). Psychoanalyst Robert Stoller (1985) argued that experience of being beaten as a child may inform adult sadomasochistic fantasy, thus converting "childhood trauma to adult triumph" (p. 8). A repeating masochistic sexual fantasy acts as a stage to invoke the past trauma, but the safety of imagination and the sense of control is what brings the corrective experience. The fantasiser receives pleasure, thus healing the traumatic experience. Likewise, a narcissistic wound of not being 'chosen' by an Oedipal parent could disguise itself in a sexual fantasy of a perfect romantic union (Person, 1995).

By repeatedly using such sexual fantasy for pleasure, the fantasiser transcends and heals the pain of the past hurts by 're-writing' the narrative.

Guilt and shame assuaging. A slightly different perspective is offered by Bader (2003), who suggested that every sexual fantasy is the psychic attempt to bypass the feelings of guilt and arrive at pleasure. Bader asserted that the conflict between the attachment to the family of origin and the wish to become independent often creates guilt. In addition, most people are socialised to prioritise the needs of others, to give and not take, not to be too excited and have too much fun, all of which adds to the internalisation of guilt about wanting and desiring. Thus, Bader viewed guilt as the main inhibitor of sexual desire and the main function of sexual fantasy as to assuage guilt and stay in touch with one's sexual "ruthlessness" (p. 45). Bader offered a clinical vignette of a client named Jan. She is presented as a feminist writer who has a repeating fantasy of being raped by a strong and insensitive stranger. In fact, she must utilise this fantasy to reach orgasm with her husband. In her personal and professional life, Jan views masculinity as hollow and fragile. On the unconscious level, she believes that if she fully expressed her sexuality, men would feel intimidated and threatened. Even though she chooses gentle and sensitive men to meet her needs in love and understanding, she also criticises them for being weak. As a result, Jan has deeply seated unconscious guilt for hurting men. Bader maintained that her rape fantasy counteracts the guilt and allows Jan to experience pleasure. Another interpretation of Jan's fantasy could be that in the fantasy, Jan has no responsibility for having extramarital sex; it is the stranger who initiates sex, so Jan can enjoy a guilt-free 'mental affair.'

Sexual fantasy as a transitional object. British psychoanalyst and paediatrician Donald Winnicott (1953) proposed that a child may begin using a doll, a blanket or a teddy bear to overcome the separation anxiety. The 'transitional object' serves as a substitute for a caregiver (usually the mother) and can provide soothing and emotional comfort in the mother's absence. Kahr (2007) proposed to understand sexual fantasy as a transitional object that can provide comfort to the fantasiser dealing with a developmental milestone. He offered the example of Preston, whose fantasy details having sex with his boyfriend while his mother is unsuccessfully trying to interrupt the activity by banging on

the door. Kahr argued that Preston's mind utilises the fantasy as a transitional phenomenon to differentiate from his intrusive mother and psychologically master his own adult choices.

From the psychoanalytic and psychotherapeutic writings reviewed, it seems that the main functions of sexual fantasy are to compensate for the unsatisfied wishes, to self-soothe, console and heal wounds and, ultimately, arrive at pleasure by transcending the internal conflicts and feelings of guilt, fear and shame. Paradoxically, it appears that feelings like fear, guilt and anger often accompany the pleasure component of sexual fantasy; and this is the focus of the next section.

Masturbatory Paradox

In this section I turn once more to the earlier discussed research by Kahr (2007). This time, I focus on his psychoanalytic theorising of the results of his research. *The British Sexual Fantasy Research Project* (Kahr, 2007) revealed that a significant number of the survey participants reported experiencing contradictory feelings of being turned on and turned off simultaneously while evoking their repeating sexual fantasy. Kahr termed this ambiguity a 'masturbatory paradox' to describe the tension between the intense arousal and the concurrent feelings of guilt, shame, rage or fear. Kahr explained that sexual fantasies often contain split-off psychological material and the 'forbidden' elements can cause shame, suffering and confusion in the fantasiser. This tension often results in the orgasmic pleasure in the body and simultaneous unrest in mind. Kahr arrived at the conclusion that majority of the participants of his survey had conflicted feelings about their sexual fantasies.

Referring to similar phenomena, psychotherapist Jack Morin (1995) argued that strong 'negative' emotions of anxiety, guilt and anger often accompany intense sexual arousal and have the power to destroy or enhance sexual excitement. Morin termed this paradox the 'unexpected aphrodisiacs.' In his view, sexual fantasy is safe to contain the unexpected aphrodisiacs as opposed to real sexual encounters. In line with the previously discussed transformative function of sexual fantasy, Morin further suggested that the

contradicting and bewildering emotions can be transformed in the safety of imagination. For example, Morin (1995), a male therapist, claimed that many women's fantasies feature an aggressive male who breaks through their resistance and liberates a wild sexual woman from her internal confines. In this example, the woman's guilt is transformed into freedom and the man's aggression is transformed into appreciation and love. This is similar to Bader's guilt assuaging function of sexual fantasy whereby women bypass the internalised guilt over an 'irrational' fantasy about an aggressive male and enhance their sexual excitement.

There is another layer to the paradoxical nature of sexual excitement. The literature reviewed indicates that sexual fantasy and sexual behaviour are two different phenomena. Sometimes they are linked but most of the time people keep their sexual fantasy separate from sexual behaviour and enjoy it nevertheless. For example, Kahr's (2007) patient, whose masturbatory fantasy included sex with women, made an emphatic point that she would never *ever* want to have it actualised. Rape fantasies discussed in the previous chapter also illustrate the paradox since none of the women who reported enjoying rape fantasies wanted to be harmed and abused in actual lived reality. This paradoxical nature of sexual excitement is well captured by psychotherapist Esther Perel (2013): "Most of us will get turned on at night by the very same things that we will demonstrate against during the day - the erotic mind is not very politically correct" (13:45).

One more paradox found in the literature is that the core sexual fantasy does not seem to change over the lifetime (Bader, 2003; Morin, 1995; Person, 1995, Stoller, 1985). Life experiences, sexual experiences can enhance and add the fantasy, but the fundamental core plot tends to stay the same (Person, 1995). Moreover, even when the meaning of sexual fantasy has been explored and integrated, the fantasiser still experiences their core sexual fantasy. For example, a sadomasochistic fantasy can still bring pleasure to the fantasiser during masturbation, even after its analysis in psychotherapy; perhaps now it can be enjoyed without guilt and shame that was attached to it prior to therapy. Thus, it appears that on the one hand, the tension produced by contradictory feelings about one's sexual fantasy seems central to sexual arousal; on the

other hand, resolving, understanding and accepting one's sexual fantasy does not interfere with the sexual excitement of the fantasiser.

Thus far, this chapter has discussed the origins and the conflicting nature of sexual fantasy as understood in the psychoanalytic and psychotherapeutic literature. In the section that follows, the chapter closes by a turn to what appears to be a commonly experienced silence around sexual fantasies.

The Silence Around Sexual Fantasy

The review of selected psychoanalytic and psychotherapeutic literature has consistently pointed at the general silence around sexual fantasy. It seems that the majority of people tend to keep their sexual fantasies private from their lovers, sometimes even themselves and often from their psychotherapists. For example, couple therapists Bader (2003) and Kahr (2007) claimed that sexual fantasy is not easily shared between long-term partners and, surprisingly, many people do not formulate their private masturbatory fantasies even to themselves (Person, 1995).

This silence is puzzling, considering that 90-97 % of people experience sexual fantasy, as discussed in the previous chapter. The literature suggests several reasons to explain the silence. Freud formulated that secrecy was a significant component of sexual life (1908/1977). His patients would rather admit their misdeeds than their most cherished fantasies out of the fear of judgment and rejection; they were convinced that their secret fantasies were unique to them. Person (1995) suggested that many people are not aware of their sexual fantasy which may appear in the consciousness for a few fleeting moments and, if not attended to, slip away, back to the unconscious layer of the mind, mostly due to the taboo nature of the fantasies. So, the internal sensors get activated to prevent one part of the fantasiser from knowing what another part desires by the mechanism of repression. Person goes on, arguing that another reason for not sharing sexual fantasies is the fear that many people have about losing the sense of safety they derive from the magical power of sexual fantasy. Similarly, Kahr (2007) discussed the tendency to keep the power and control of the mind in terms of 'incommunicado'—the

concept suggested by Winnicott, referring to the most private part of human psyche, the part not to be shared with anyone in order to maintain safety and autonomy.

Another possible explanation for the silence might be that once sexual fantasy is shared, the fantasiser is open to perceived and real judgment, and sometimes to the actual risk of losing a loved one, family and social connections. Unfortunately, people with sexual fantasies that deviate from the monogamous heteronormative model of sexuality can easily be condemned as 'perverts' in most cultures today. Since sexual fantasies often do not fit in the narrow mononormative and heteronormative model, it is not surprising, then, that the majority of people choose not to share their sexual fantasies.

I want to offer a parallel that I noticed in my clinical experience. There are two questions that seem to elicit similar responses of almost startling surprise and confusion. The questions are 1. What is your sexual fantasy? and 2. What does your heart desire? Perhaps, one intuitively knows that answering either of these questions would mean getting in touch with their most vulnerable parts and unmet longings encoded in both most cherished heart desire and most private sexual fantasy. Furthermore, to answer these questions entails the danger of collapsing the uncertainty and the 'safety' of not-knowing. Perhaps there is an underlying belief that once a fantasiser admits to themselves what they really want, they *must* act or not—in both scenarios risking facing the consequences. So, for as long as the answers to these two questions stay unknown and hidden, one can maintain the psychic safety in this uncertainty.

Yet, the literature suggests that there appears to be an innate tendency in most people to discover their hidden parts, including the meaning of their sexual fantasies. As Kahr (2007) postulated: "Our sexual fantasies remain, by and large, an unprocessed, unsynthesised area of mind, crying out for explanation" (p. 51). Perhaps, there are not many opportunities and spaces for people to talk about their sexual fantasies.

Surprisingly, sexual fantasy does not seem to receive much attention in psychotherapy and psychoanalysis (Bader, 2003; Kahr, 2007; Kernberg, 2016; Person, 1995). Kahr (2007) conducted a survey among his colleagues and reported that fewer than 5% of therapists in his survey knew their patients' sexual fantasies. Thus, it appears,

that the silence in people is mirrored by the silence in therapists. I will return to the possible reasons behind this silence in Chapter 5.

In summary, it has been shown in the review of psychoanalytic and psychotherapeutic literature that sexual fantasy is deeply private and imbued with complex, paradoxical feelings such as shame, fear, guilt on the one hand; and excitement and pleasure, on the other. This makes it difficult to talk about sexual fantasy and results in the silence around sexual fantasy between intimate partners and in psychotherapy. The absence of the relational processing of sexual fantasy, in turn, makes it harder for the fantasiser themselves not to shy away from examining and integrating its hidden meaning into their self-understanding. I will further reflect on the implications of verbalising sexual fantasy in the therapeutic context in Chapter 5.

Chapter Summary

This chapter has explored how sexual fantasy has been theorised from psychoanalytic and psychotherapeutic perspectives. The review of the selected literature revealed the common agreement among scholars about the origins of sexual fantasies. Most erotic fantasies have their roots in early (preoedipal) sexual excitement and the oedipal complex resolution experiences. Sexual fantasy is understood to serve several purposes—compensate, assuage guilt and shame, transform, repair and heal, among others. Some people experience sexual fantasy as an integral part of their self-image, and some experience guilt, shame, disgust and anxiety about their sexual fantasy. In both scenarios, people rarely make connections between the content of their sexual fantasy and their internal nonsexual conflicts and dilemmas. Finally, the literature revealed that despite its universality, sexual fantasy is a deeply private matter and not easily shared with sexual partners and psychotherapists. The next chapter will provide a synthesis and discussion of the findings from empirical research and psychoanalytic and psychotherapeutic literature, followed by implications for the field of psychotherapy.

Chapter 5: Synthesis, Discussion and Implications

The aim of this dissertation was to conduct a hermeneutic literature review on sexual fantasy. This chapter begins with a discussion of the findings organised around the research questions: "How is sexual fantasy understood in sex research and psychoanalytic psychotherapy?" and "How can this understanding inform psychotherapeutic practice?" The implications of the results for practice, education and professional development are considered. I also reflect on the strengths and limitations of the study, and include suggestions for further research. In conclusion, I offer my final thoughts and reflections on the study of sexual fantasy and the societal messages embedded in how we view sexual fantasy and sexuality in general.

Discussion of Findings

Through the synthesis of empirical research and psychoanalytically informed psychotherapeutic literature, this study has found that sexual fantasy is a common experience for people; one that often contains scenarios that challenge the dominant heteronormative and mononormative construction of sexuality, and include the elements of forbidden and taboo. The research has also shown that sexual fantasies can often cause the fantasiser anxiety, guilt and shame, and most people do not tell anyone about their sexual fantasies—sometimes not even themselves. One of the significant findings indicates that sexual fantasies hold condensed and disguised information about a person's unique psychology, attachment history, object relations and deepest emotional longings and, therefore, can be invaluable for psychotherapeutic exploration. The study also found that reviewed studies' participants were open to sharing and exploring their sexual fantasy with a mental health practitioner, even though the majority of people had not linked their sexual fantasy to their psychological or relational dilemmas. Finally, this study suggests that sexual fantasy can carry a transformative healing function if understood and integrated into the psyche. The synthesis of findings offers a new perspective for looking at sexual fantasy which comprises three overarching themes: nonnormative and taboo sexuality, pathologising of sexual desire and fear around sexuality. I will now discuss each of these themes in turn.

Non-normative and taboo sexuality. It is clear from the literature that people's sexual fantasies often include dynamics and behaviours that fall outside normative sexual practices. Sexual fantasy allows people to explore different sexual acts, gender roles and partnerships that may not be not available to them (or of interest to them) in their actual sexual life.

The reviewed empirical studies revealed that 90-97 % of people experience sexual fantasy. Specifically, many respondents of the reviewed studies reported having fantasies including diversity of sexual object choice (opposite sex, same-sex, transsexual), fantasies where their own gender expression was altered (women, men, transgender) and variety of extradyadic sexual relations (threesomes, foursomes and other group configurations, polyamory and swinging). Interestingly, the identified most common sexual fantasies fall outside the widespread implicit understanding of 'normal' sex being heterosexual intercourse within a monogamous relationship and, therefore, can be deemed as 'taboo' or 'forbidden.' In addition, a large number of reported fantasies include submission, domination, sadism, masochism, voyeurism, exhibitionism and fetishism—activities that are also often referred to as 'taboo' or 'forbidden'. The definition of taboo is constantly shifting depending on the changes in legislation and what the mental health international community consider sexually normal. The discussion of why the forbidden is exciting is outside the scope of this study; nevertheless, the conducted review strongly suggests that 'taboo and forbidden' elements show significant presence in people's fantasies.

These empirical findings are in alignment with a psychoanalytic concept of polymorphous perversity—sexual gratification derived from activities outside of socially accepted norms (Chasseguet-Smirgel, 1986; Freud, 1905/1977; Kernberg, 1995). Freud (1905/1977) asserted that "disposition to perversions is itself of no great rarity" (p. 86), arguing that such disposition exists and appears to be universal (De Block & Adriaens, 2013). According to psychoanalyst Chasseguet-Smirgel (1986 as cited in Friedman & Downey, 2000), sexual fantasy is rooted in the bodily sensations and includes the

symbolic representations of the first relationship that involved the body (usually with the mother). Thus, she argued that incestuous and bisexual impulses are developmentally natural in children and shape the foundation for adult sexuality. Furthermore, Kernberg (1995) asserted that adult sexual desire develops based on the earliest object relations with both parents and unavoidably includes polymorphous perverse elements of sadistic, exhibitionistic and voyeuristic sexual play. Like Freud, Kernberg viewed polymorphous perversity as natural.

In sum, the findings from the empirical and psychoanalytic literature, taken together, indicate that the prevalence of sexual fantasy and the rich gamut of diverse scenarios that people employ for masturbatory pleasure is a normal part of human experience. Freud's discovery of polymorphous perversity and its universality highlights the complex nature of erotic desire and the ongoing challenge of distinguishing the line between what is deemed 'healthy' and 'pathological' when it comes to human sexuality.

Is sexual fantasy healthy or pathological? The reviewed literature suggests that pathologising and de-pathologising of sexual desire has been a constant struggle in psychiatry (De Block & Adraiens, 2013); and, historically, the presence of certain sexual fantasies has been viewed as a sign of a psychiatric condition (Lehmiller, 2018). It is notable that in the DSM-5 (APA, 2013), presence of specific sexual fantasies appears as one of the diagnostic criteria for the eight paraphilic disorders: "voyeuristic disorder 302.82 (F65.3)", "exhibitionistic disorder 302.4 (F 65.3)", "frotteuristic disorder 302.89 (F65.81)", "sexual masochism disorder 302.83 (F65.51)", "sexual sadism disorder 302.84 (F65.52)", "paedophilic disorder 302.2 (F65.4)" and "transvestic disorder 302.3 (F65.1)." This leads to questions about the construction of particular sexualities, sexual behaviours and practices – which are constituted as 'normal' or 'healthy' and which are associated with a mental health disorder.

Interestingly, an absence of any sexual fantasy experience can also be viewed as a sign of psychopathology. For example, "female sexual interest/arousal disorder 302.72 (F52.22)" and "male hypoactive sexual desire disorder 302.71 (F55.0)" both have absence of sexual fantasy experience as one of defining criteria (APA, 2013). Thus, it seems that both the presence of particular kinds of sexual fantasy or the absence of any

sexual fantasy has been constructed in the psychological and medical discourses as associated with something problematic.

The inconsistency of viewing sexual fantasy as pathology on the one hand, and as a sign of psychological health on the other, is illustrated by the interpretation of one of the main empirical findings by Leitenberg and Henning's (1995) study on sexual fantasy. The data revealed a strong correlation between sexual fantasy experience and sexual satisfaction; people with frequent sexual fantasies had more fulfilling sex lives than those who fantasised less. The authors argued that this finding disproved Freudian (1908/1962) theorising about the unhappiness of the people who fantasise. Thus, empirical research challenged a traditional understanding of sexual fantasy in psychoanalysis as a sign of deprivation, immaturity and deficiency. This juxtaposition relates specifically to the ongoing debate in psychiatry about what is considered normal and pathological in a general sense, and what constitutes 'normal sexuality' versus 'abnormal sexuality' (De Block & Adriaens, 2013).

Fear around sexuality. Sexual fantasy often includes sexual desires that are outside of normative sexual expression. This leads to silence around sexual fantasy – it was found that people do not tend to share their private masturbatory fantasies with their sexual partners for fear of judgment, stigmatisation, rejection and perceived or real loss, as discussed in Chapter 4. In this section I look at the fears that seem to prevent sexual fantasy from entering the therapeutic room.

Literature suggests that sexual fantasy is not paid attention to by psychotherapists (Kahr, 2007; Person, 1995) and the inclusion of assessment of sexual fantasies, dreams and practices is commonly avoided in psychoanalysis (Kernberg, 2016). This finding creates a paradoxical tension – therapist's silence around sexuality reflects the patient's silence. A complex set of cultural attitudes, stigmas and beliefs about sexuality in the therapist, as well as in the patient may prevent entry of sexual material into therapy room (Person, 1995). One of the reasons of therapists' caution to talk about sexuality may be fear of stimulating erotic transference emergence – the clinical phenomenon of patient's sexual attraction to the therapist, what Kumin (1985) referred to as 'erotic horror'. Charged sexual feelings that may occur between the patient and the therapist, can be

challenging to navigate, especially if the therapist has not received training on managing these intense feelings therapeutically. Moreover, erotic transference is accompanied by the 'unrequited love' longings, and, therefore, can bring up painful rejection in the patient (Celenza, 2014). Thus, consciously or unconsciously, the therapist may avoid overstimulating or 'seducing' the patient by avoiding the topic of sex entirely. The tension is that therapists whose work is about helping people to talk about what disturbs and troubles them, seem to be constrained as everyone else, when it comes to talking about sexual fantasies and sexuality in general.

Thus far, I have discussed the three themes that the findings of this study have fallen into: Non-normative and taboo sexuality, Is sexual fantasy healthy or pathological? and Fear of sexuality. These themes are interrelated and together point at the complex historical constructions around human sexuality expression in Western cultures. Freud's theory about universal polymorphous perversity supported by modern empirical research, opens up deep questions about what is a 'natural' sexual desire, and what is socially constructed to be 'natural'.

I finish this section of the chapter by highlighting the benefits of examining literature on sexual fantasy from the two perspectives—sexology and psychodynamic psychotherapy. Psychoanalytic and psychotherapeutic research is constrained by time-consuming methods, whereas sex research is challenged to capture the subjective quality of sexual fantasy in laboratory settings (Friedman & Downey, 2000). The combination of the two bodies of literature, however, allowed for the space of intersection where the findings of empirical research either echoed or challenged long-held psychoanalytic and psychotherapeutic notions about sexual fantasies.

I now turn to discussing the implications of this study for clinical practice.

Implications for Practice

In this section, I discuss the implications of this research for psychotherapy, counselling and other mental health professions. First, I consider the use of sexual fantasy as an intervention and how the relational aspect of sexual fantasy may affect transference and

countertransference in the therapeutic relationship. Next, I discuss the use of erotic language in therapy; and, finally, I offer practical recommendations for including sexual fantasy in the therapeutic process.

Sexual fantasy as a clinical intervention. The debate about the clinical value of sexual fantasy exploration is alive among mental health professionals (Kahr, 2007). Some clinicians refute the centrality of sexuality in human life and treat sexual material in the room as a defence and the patient's attempt to shock and disgust the therapist (Shalev & Yerushalmi, 2009). The majority of clinicians in the reviewed literature, however, stress the importance of evaluating a comprehensive picture of the client's sexual life including the nature of sexual fantasies (Bader, 2003, Blechner, 2016; Coen, 1978; Kernberg, 2016; Perel, 2011; Person, 1995). Person (1995) and Kahr (2007) argued that sexual fantasy, even though intangible, obscure and hidden, affects one's life in tangible ways – their relationships, the choice of career and the choices of the objects of love.

The reviewed literature revealed that conscious sexual fantasy holds invaluable information about the person's unconscious sexual and non-sexual conflicts and deepest emotional longings. "Sexual fantasies are the keyhole through which we will be able to see our true selves," asserted Bader (1995, p. 2). Conceptualising sexual fantasy, making links between the content, feelings and experiences can bring powerful insights to the fantasiser and pave the way for healing and emotional transformation (Morin, 1995). Person (1995) viewed the value of exploring sexual fantasy in the relief of responsibility that the fantasiser can experience after connecting the dots and understanding the internal logic of their sexual fantasy.

It is important to note that a central masturbation fantasy does not seem to change over life time (Person, 1995). Some variations derived from life experiences can elaborate the fantasy, but the essential plot tends to stay the same even after psychotherapeutic exploration (Bader, 2003; Kahr, 2007; Morin, 1995). Thus, the goal of psychotherapeutic intervention is not to make the fantasy disappear, rather, to address its unconscious meaning and the conflicting feelings the patient may have about their sexual fantasies (Bader, 2003; Kahr, 2007; Person, 1995). Understanding that even the most bizarre and shocking sexual fantasy is simply a complicated route for some people to

safely arrive at pleasure (Bader, 2003) can liberate a person from life-long sexual and non-sexual inhibitions and foster self-acceptance.

This brings me to the discussion of the embedded relationality of sexual fantasy and how it can be understood through the relational lens of the psychotherapeutic process.

Implications for transference and countertransference. As discussed in the previous chapter, in psychoanalysis and psychotherapy sexual fantasies are understood to be mainly informed by early object relations and Oedipus complex resolution. The relational template between the child and significant others is viewed to shape both their adult relationships and their sexuality and the content of their sexual fantasies. Experiences of power and powerlessness, dependence and independence get eroticised by the psyche and foreground the formation of central masturbatory fantasy. Empirical research seems to support this theorising; the hundreds of sexual fantasies I have read in the process of this literature review consistently point to the in-built relationality of sexual fantasy (most sexual scenarios include power dynamics).

Therapeutic relationship is inherently power imbalanced (Maroda, 2010), and similar intrapsychic dynamics and experiences or power and powerlessness that shaped sexual fantasy can be manifested in the therapeutic relationship. A persistent repeating sexual fantasy often contains repressed and split-off parts of the patient's self and can be enacted in the therapeutic process (Person, 1995). For example, a submissive sexual fantasy of the patient may be a symbolic representation of the person's early experiences when the child's excitement was not mirrored and, subsequently, internalised as rejection and shame. The unconscious logic of the submissive fantasy then can be understood as a psyche's creative way to arrive at pleasure not risking the rejection and shame of being sexually assertive—the fantasiser is so desired that the dominant object cannot resist the desired fantasiser (Bader, 2003). In the transference, the client may perceive the therapist as a dominant figure (authority) and develop idealised and erotic feelings towards the therapist. Could their sexual fantasy have influenced this transferential response? In countertransference, the therapist may become aware of their impulses to reject. The transformative therapeutic experience of this hypothetical situation would depend on the

therapist's interpretation. Avoiding talking about sex may potentially re-enact the traumatic experiences of rejection and threaten the therapeutic process. Staying with the erotic of the client, exploring the meaning of their sexual fantasy may facilitate the reparative experience when the client can have space for an insight about the ways their fear of rejection may have inhibited them in some areas of their life.

The final note on the implications of this research for transference and countertransference is a note of caution. When listening to the client's erotic revelations, there is a tendency among therapists to view sexual desire in the client as infantile (Schaverien, 1996). Whereas sexual fantasy often contains information about attachment traumas and unmet developmental needs, it also contains the deepest erotic longings of an adult (Maroda, 2010). A delicate balance is needed on the part of the therapist to stay attuned to both and not diverge into the exploration of the infantile wishes too fast. Such dismissal may foreclose the potential of adult sexuality to emerge in the therapeutic process fully. The recognition by the therapist of the client's adult desire can, in turn, lead to their self-realisation with all the split-off parts embraced.

Erotic language and psychotherapy. Gadamer (1982) believed that conversation and understanding only exist in the language and through the language. In regards to sexual fantasy in psychotherapy, it seems that for as long as there is no conversation about sexual fantasies, the chance of full understanding of the client's inner world by the therapist can be missed. Even an often-helpful psychotherapeutic tool of a metaphor can do a disservice in some cases and prevent the necessary verbalisation of sexual fantasies. Psychoanalyst, Celenza (2014), emphasised the importance of getting comfortable and non-euphemistic with the language describing erotic scenes; suggesting that the linguistical clarity and the comfort that the therapist can bring into the process may be especially helpful for clients whose distress is connected to sexual inhibitions and compulsions.

In clinical practice, I observed that the 'matter-of-fact' erotic language can convey two messages to the client. The first is that it is okay to bring the fullness of their life, including sexuality into therapy. The second message is the hope for a safe (non-judgmental) exploration of their deepest sexual desires and thoughts.

Another reason to get comfortable with erotic language is for the work with the clients who use sexuality as a defence against emotional closeness. By evoking fear and shame in the therapist, the client may feel that they are in control of the impression they are having on the therapist. Unconsciously, they may be 'making sure' that the therapist rejects them on some level. However, if the therapist is aware of this defensive use of sexuality and she is comfortable with sexual words, instead of being psychically penetrated by the client, she can penetrate the client's defence with awareness and show him that she is not afraid of his sexuality, or his anger, and she will not reject. The emotional closeness and therapeutic change then may become possible. However, if the therapist is shocked or/and disgusted, there is less chance for the conversation, understanding and change.

Recommendations for practice. One of the immediate implications for psychotherapy practice may be the inclusion of sexual fantasy in the assessment process (Kernberg, 2016). Some practitioners might be inclined to allow sexuality to emerge naturally without prompting. However, this research indicates that for most people the topic of sex is laden with taboo, shame and fear of judgment. Thus, without an active and explicit invitation on the therapist's part, sexuality may stay unspoken. For example, a client, whose masturbation fantasy includes an illegal activity like incest or voyeurism, may suffer from the sense of badness and self-judgment about their sexual arousal, and is unlikely to bring this up in therapy. However, the therapist's non-judgmental invitation to discuss their sexual fantasy may open a conversation. The relief to know that their fantasies are statistically common and fantasies do not necessarily lead to actual behaviours, may liberate a client from the weight of shame and guilt.

Another practical implication is informed by my clinical experience. I have noticed that for the majority of people, it is not easy to put their sexual fantasy into words, mainly because they have not done that before. I found that the following question is usually helpful to structure the narrative around their fantasy. The question is "Who is doing what to whom in your sexual fantasy?" The framework of the question includes the relational aspect and power dynamics. Most people can begin verbalising their most

private thoughts using this framework. Considering that some fantasies may not be relational, this is one among other possible questions.

Another important practical implication is concerned with one of the goals of psychotherapy, namely, emotional regulation—the increased capacity to tolerate affect. We, therapists, undergo a thorough training, learning to process, 'sit with' and integrate our own grief, anger, anxiety and shame, so that we can help our clients to do the same. What occurred to me through my clinical experience and the process of this research, is that the capacity to tolerate the affect of sexual arousal is equally important and needs to be integrated in the therapist.

Implications for Education

According to Blechner (2009, 2016) and Kahr (2009), modern psychotherapeutic training programmes do not sufficiently address sexuality. The lack of information and knowledge may cause avoidance of sexuality topic in psychotherapy trainees and graduates. This research suggests that understanding the formation, function and interpreting the meaning of sexual fantasy may enhance the therapeutic process and lead to integration of split-off parts of self. Thus, the introduction of sexual fantasies could benefit psychotherapy curricula. Apart from technical knowledge about sexuality and sexual fantasies, students could be encouraged to explore and process the unconscious meaning of their own sexual fantasies in personal psychotherapy. My hope is that this study has highlighted the need and benefit of raising awareness around sexual fantasy and sexuality in general for students and graduates of psychotherapy.

Limitations of this Study

This dissertation is a hermeneutic literature review. I have selected texts from empirical studies and the qualitative research of psychoanalytically informed psychotherapy. Quantitative studies can be methodologically limited by the recruitment and sampling procedures, data interpretation and generally by the demographic composition. The three main studies on sexual fantasies used in this review provided data from Anglo-Saxon

cultures only (UK and USA) (Kahr, 2007; Lehmiller, 2018; Leitenberg & Henning, 1995). Similarly, most psychoanalytic theory has been based on case studies of individuals usually of a certain cultural background, socio-economic class and education level. Without negating the validity of the reviewed studies and psychoanalytic theories, such scholarship is limited compared to cross-cultural research.

Moreover, the scope of this research is limited in terms of sexual and gender minorities' inclusion. It can be explained in two ways. First, in my curiosity to understand the phenomenon of sexual fantasy and the implication for this understanding for psychotherapy, I wanted to know what people fantasise about and what they feel about their fantasies regardless of their gender identity, sexual orientation or biological sex. Hence, in my literature search, I have not specifically searched for sexual fantasies of sexual and gender minorities. Second, most of the studies in this review were focused on heterosexual, cisgender samples. This might indicate the heteronormative and gender binary bias in the social context and the relative lack of research that has been dedicated to the exploration of the sexual lives of those of diverse sexualities. More inclusive research on sexual fantasy would be a valuable addition to the existing literature.

Any research methodology contains within itself its own limitations because a particular philosophical stance is taken. As described in Chapter 2, the researcher's subjectivity is central in hermeneutics, and therefore unavoidably inextricable from the conclusions. Had this research been undertaken by way of a different methodology, different conclusions may have been revealed.

Strengths of this Study

Even though I am not the first one who wears two hats of a sexologist and a psychotherapist to undertake the study on sexual fantasy, I consider my approach and my hermeneutic horizons original. My background in two disciplines allowed me to unflinchingly look at the sexual fantasies in a desensitised way of a sexologist and try to understand them through the psychodynamic lens that embraces the unconscious and symbolism interpretation. The hermeneutics philosophy has provided me with a suitable

methodology and relative freedom to follow my instinct when selecting and interpreting literature. The concept of a hermeneutic circle helped me to attend to the relationships between the whole (object of my research – sexual fantasy) and the parts (sex research and psychoanalytic and psychotherapeutic texts). At every iteration of the hermeneutic circle, my understanding of the whole changed, as did the understanding of the individual parts. My current understanding of sexual fantasy is a result of the 'conversation' between the fields, between the texts mediated by *my* interpretation. Combined, the factors of methodology, my positioning as a researcher, my training and background allowed me to process literature through a unique subjective lens, and that in itself is an original contribution and one of the strengths of this study.

The topic of sexuality is historically charged with taboos, stereotypes and ambiguity. Therefore, any research that promises more understanding in this area can be considered a valuable contribution. To undertake research on people's private sexual fantasies was not an easy choice for me as I expected to be confronted with my own fears, biases and vulnerabilities in relation to the topic and the perceived judgement of readers. However, I agree with Marie Curie's wisdom: "Nothing in life is to be feared, it is only to be understood. Now is the time to understand more, so that we may fear less" (Benarde, 1973, p. v). I hope that my attempt to understand the phenomenon of sexual fantasy can contribute to the reduction of fear of sexuality, sexual desire—our own and that of our clients.

Further Research Suggestions

While this research elucidates the important role sexual fantasy plays in people's lives and how invaluable the exploration of sexual fantasy can be in psychotherapy, further research would add to a deeper understanding of the phenomenon. For example, a national survey similar to Lehmiller's (2018) study in the USA would gather important data on sexual fantasies in New Zealand. Particularly, it would be interesting to examine the correlation between the feelings of fear, guilt and shame about having sexual fantasies and mental health conditions like depression and compulsive behaviours, for example.

Apart from this, such a survey could also investigate how early relational experiences and societal and familial messages about sexuality informed the content of sexual fantasy. Differential factors like age, socio-economic status, ethnicity, religion, gender, sexual orientation and political affiliations could help in obtaining information to better understand the development of sexual fantasy.

Another research direction could be a number of qualitative inquiries on the practical implications of sexual fantasy in psychotherapy. For example, it would be interesting to explore the experiences of psychotherapists who use sexual fantasy as an intervention. How can verbalising and processing sexual fantasy in psychotherapy assist the therapeutic process? Is there a link between sexual fantasy integration and healing? What is sexual fantasy manifestation in transference and countertransference? How does eroticised power of BDSM fantasies manifest in a therapeutic dyad?

More broadly, research is needed to explore how the content of sexual fantasies is affected by prevailing attitudes toward sexuality in different societies. This research suggests that sexual fantasies often include universal developmental themes that portray early corporal activities, dependence, rivalry, power and gender dynamics; and many sexual fantasies seem to contain some element of taboo and transgression. It would be interesting to see the variation of the sexual fantasies content depending on the cultural environment.

Implications for Personal Development

One of the outcomes of this research is my growth as a psychotherapy practitioner. In the course of this study, as I was opening my mind to the unlimited potential of the human psyche to construct pleasurable scenarios, I got in touch with my biases, judgements and assumptions regarding what people fantasise about sexually. This led to a realisation of my own sexual shame which came as a surprise. Only when I reached an impasse in the research process, I became aware of the unconscious shame that had been driving my decision to remove an entire chapter on sexology and turn away from Freudian theories on the universality of incestuous wishes and polymorphous perversity. I recognised the

shame behind the emerged doubts about the topic of my dissertation and my interest in human sexuality. I was feeling shame when wondering if I was simply gratifying my voyeuristic curiosity when asking clients about their masturbation fantasies. The processing of deep-seated shame helped me to go back to the intention behind this study and my study of human sexuality in general—my work is dedicated to healing sexual shame individually and collectively. As a result of this back and forth reckoning, I could place Eros back at the heart of my view of psychoanalysis and return to my belief that liberating Eros from the shackles of shame is essential for a successful therapeutic process.

Clinical supervision became the crucible of experiential learning during my deep shame processing. Over several weeks, when discussing a clinical case that involved erotic transference, my supervisor kept nudging me to explore my *felt* countertransferential response to the client. The breakthrough came unexpectedly in the phenomenology of the parallel process. Suddenly, I felt dizzy and nauseous, unable to think, only aware of my racing heartbeat and an irrational urge to run out of the room. Next, trying to manage my bewildering affective state with breathing, I slowly became aware of my own sexual fantasy unfolding in my mind. To my terror, the fantasy involved my supervisor's legs and, with a distinctive rush of shame, I realised that my visceral response was sexual arousal. Thanks to my supervisor's comfort with the sexuality topic, I could stay with the erotic energy of the experience, learning not to foreclose it out of fear and shame. Eventually, I conceptualised the experience as powerful processing of my client's erotic transference in the parallel process. This experience helped me to begin paying attention to the defences my mind uses to guard against feeling sexually aroused in countertransference with clients and, most importantly, from feeling unconscious shame associated with my own sexual desire. The experience has significantly added to my continuous learning as a supervisee, a psychotherapist and a researcher.

Conclusion

This study has explored how sexual fantasy is understood in the fields of sex research and psychoanalytically informed psychotherapy. The findings indicate that sexual fantasy is a part of the human condition experienced almost by everyone. Whether for compensation reasons, guilt assuaging, soothing or arousal enhancing, sexual fantasy plays an important role in human life. The exploration of the unconscious logic of the conscious sexual fantasy in therapy can relieve the fantasiser from responsibility, guilt, shame and fear and pave the way for better self-understanding and, ultimately, self-acceptance.

My hope is that this study may contribute to a less pathological and more openminded view of sexual fantasy and sexuality in general. Psychotherapy, as a profession, is not for the faint of heart; it calls for courageous and compassionate 'sitting with' the most painful, often unspeakable experiences of our clients. We commonly agree that in order for healing to occur, the repressed material needs to be processed. Despite the risk of vicarious traumatisation, we choose to actively receive the entirety of our client's inner world without judgment, sometimes processing with the client what is not yet available to them to process by themselves. I believe that processing repressed sexual desire is vital for the psychotherapeutic change because the disavowed eroticism leads to the crisis of aliveness. By attuning to the hidden meaning of sexual fantasies, we may help our clients to begin embracing the energy of their eroticism and master its healing and creative power.

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