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DISCUSSION QUESTIONS

1. Why is so much of what we know about sexuality limited to the physical body?
2. Why does Ussher argue that both science and the law protect and serve men? How does the law construct what it means to be a “man” or a “woman” in society? How does sociobiology continue this tradition today?
3. Why has the law viewed homosexuality between men differently than lesbianism?
4. How have science and medicine served as a form of social control over women historically and still today?

RATIONAL TRUTH
The intent of sexual science is to obtain careful observations or measurements of sexual phenomena which, in turn, are extended in a theoretical structure. Predictions...are deduced from these theories, which once again are measured against observations of sexual behavior. Progress in sexual science is facilitated by the inflating database and the continually reformulated theories.

ABRAMSON, 1990

LAW AND TRUTH
Legal reasoning...is intellectual and rational...the judge can come to know enough about the whole complex of the law and fact to discover enough of the truth to settle wisely disputes before the court...It requires an open and cultivated mind.

DERMAN ET AL., 1990

IDEOLOGY AND POWER
At any given time, the more powerful side will create an ideology suitable to help maintain its position and to make this position acceptable to the weaker one. In this ideology the differences of the weaker one will be interpreted as inferiority, and it will be proven that these differences are unchangeable, basic or God's will. It is the function of such an ideology to deny or conceal the existence of struggle.

HONEY, 1967

SECRET
What is peculiar to modern societies...is not that they consigned sex to a shadow existence, but that they dedicated themselves to speaking of it ad infinitum, while exposing it as the secret.

FOUCAULT, 1979

SATURATION
Nothing is less certain today than sex...and nothing today is less certain than desire, behind the proliferation of its images. In matters of sex the proliferation is approaching total obscurantism. Here lies the secret of the ever increasing production of sex and its signs, and the hyperrealism of sexual pleasure...No more want, no more prohibitions, and no more limits...It is the ghost of desire that haunts the defunct reality of sex. Sex is everywhere, except in sexuality.

BAUDRILLARD, 1990

REGULATING THE MATERIAL BODY
Representations of "sex," and of "woman" and "man" do not sit in a theoretical vacuum, of interest only to academics concerned with the symbolic sphere. They have "real" effects. Phallocentric visions of "woman" and the conflation of "woman" with "sex" directly influence many arenas of material practice, in which the physical body of woman is regulated and controlled. I am not talking here about the actions of individual misogynistic men but about institutionalized practices and procedures sanctioned or condoned by the machinery of the state. Until very recently, it was these material practices that preoccupied the critical attention and political campaigns of feminists attempting to liberate women from the shackles of patriarchal subjugation and control. It is a relatively recent luxury to be able to condemn and resist representations of "woman" in the symbolic sphere—for centuries women did not have rights over their own bodies or their own lives. In many contexts they still don't. In examining the relationship between representations of "woman" and "sex" and the regulation of the body or the person in the physical world, I could have looked at a number of other areas:

- REPRODUCTION: Access to contraception, abortion and treatments for sexually transmitted diseases; myths about menstruation, pregnancy and the menopause; the control and treatment of women during pregnancy and childbirth; elective abortion and infanticide of female children; infant mortality rates; edicts and controls of fertility.

- WORK AND EDUCATION: Women's rights to education or paid work; the position of women as unpaid houseworkers; women's earnings; women's promotional opportunities; the presence of women in positions of authority and power; sexual harassment in the workplace; women's tax and pension rights; maternity leave and the rights of mothers to work; child-care provision.

- MENTAL HEALTH: Rates and causes of mental illness in women; the conflation of femininity with madness; 'treatments' meted out towards women positioned as "mad."

- POWER: Women's ability to own land or money; the right to vote; custody rights over children; the right and ability to live outside the control of man; women and religious power.

- MARRIAGE: Mental health and marriage; physical health and longevity of life span and marriage; domestic violence; "child brides."

- SEXUALITY: Forced child and adult prostitution; prostitution law; forced marriage and polygamy; sexual slavery; dowry murders.

Each of these areas could fill a book in itself—indeed, over the last century, many books have been written, many campaigns to change discriminatory practices run and, in Europe and North America at least, many changes in the material conditions of women's lives brought about as a result (although we still have a long way to go). The same could be said of representations of "woman" and "sex" in sexual science and sex law. If we examine the way in which "sex" is legally and scientifically defined, representations of and official reactions to sexual violence, and theories and treatments for sexual deviancy and sexual problems, we can see how phallocentric images of "woman" and "sex" are enshrined and legitimated in the machinery of the state. This has serious and often damaging consequences for the lives of many women (as well as for men who step outside the phallocentric boundaries of sex).

"Sex" is not an immutable, biological, given fact, driving us unthinkingly or instinctively towards pleasure (or pain). What we define as "sex" is not a simple instinctual or hormonal process—"vaginal intercourse" may be commonly acknowledged to be "sex," but are masturbatory, nocturnal emissions or the rubbing together of naked bodies? We are not born with a natural template that determines how we desire, how we express our sexuality and what is unequivocally a sexual crime or problem. These processes are determined by social rules and tastes; they differ across cultures and across time.6 In Anglo-American western cultures science and the law are two of the major social institutions that influence these processes, shaping what we see as "sex," how we learn to desire, how we experience our sexual selves and how we learn to repress or conceal the sexuality that is currently forbidden. As a consequence this shapes how
we experience ourselves as "woman" or "man." The penalty for ignoring the edicts of science or the law is that we become sexual outliers or outsiders, our sexuality seen as a sign of illness, crime or, to some, sin. This is not merely a process of categorization, a matter of ascop- tion of labels we can discard or ignore. Scientific and legal edicts have concrete effects in enforced referral for invasive treatment, incarceration or, in extreme circumstances, sentence of death; they constitute a sexual ideology with material and often drastic effects.

For the last two hundred years "sex" has been exposed to the rigours of the secular gaze, the sexual body scrutinized, categorized and contained within the boundaries of exact measurement and control established by scientists and legal experts. Common law and science act to categorize and justify what is "other" in the sphere of the sexual; what is outlawed because deviant, or open to clinical intervention because dysfunctional. Law and science combine to define "normal" sexuality by regulating what is "abnormal"—under-age sex, incest, anal and oral sex, adultery, homosexuality, rape and sexual abuse and obscenity and pornography. There are clinical classifications and treatments for dysfunction and perversion. Some laws are rigidly enforced; others ignored. Some "dysfunctions" are tolerated; others carefully treated. Yet in the annals of science and the law the lines of demarcation between normal and abnormal sex are reassuringly clear—no messy uncertainty here.

What science "knows" about "sex" and "woman" is focused almost entirely on the physical body; sexuality is reduced to its bodily components, to instincts and drives, to generic, normative and reproductive organs. This is partly a result of the dominant ethos of modern-day scientific endeavour, which follows the philosophy of positivism. This stipulates that the gaze of the scientist is primarily concerned with what is measurable or observable, with what can be experimentally manipulated or tested to see if it is "real." The scientist is concerned with facts, not values; with "truth," not speculation, or belief. Concepts such as desire, lust, love, pleasure or misogynistic fear are too nebulous and vague, not easily trapped within an empirical prism; they are material for the philosophers, the poets and the playwrights.

Male sexuality has been reduced to testosterone and androgens, to the functioning of the penis, to erection and ejaculation; female sexuality (if considered at all) is reduced to oestrogen and progesterone or to the biological components of reproduction—menstruation, pregnancy and the menopause, considered almost solely at a biological level—or to heterosexual response, mainly receptivity to the penis in heterosexual intercourse. These easily observed and measured bodily "realities" are dissected and displayed in order finally to uncover the mysteries of sex. Biological theories are offered as explanations for sexual violence, sexual problems and sexual deviation, as well as for the vagaries of "normal" sex. Subjectivity, and social or cultural context, is in the main marginalized or denied.

However, the rhetoric of objectivity that dominates in both science and law is itself merely a smokescreen for the acting out of ideologically motivated power and control. Science and law are both gendered and phallocentric.11 The smokescreen of objectivity acts to conceal the way in which the rule of science and law is intrinsically influenced by the fears and fantasies of "man." In this hallowed sphere, the mysteries of woman and the fear she provokes in man can be carefully classified and controlled. An illusion of power serves to ward off the fears of phallic powerlessness, the fear that we really do not "know" what woman is, or what sex, or sexual desire, is about. Both science and sex law act to reify the mythical power of the phallicus by emphasizing the active, powerful sexuality of man in contrast to the passive, receptive (or absent) sexuality of woman. The model reflected in both science and law is heterosexual man.12 He is the benchmark against which all else is measured. It is his interests which the powerful social institutions act to protect and serve. Equally, the boundaries of "normal" sexuality established in scientific and legal theory are those of heterosexual sexuality; all that deviates or detracts from this is at risk of categorization and control. So lesbians and gay men as well as women who deviate from the script of femininity become the targets for legislation which is at best biased and discriminatory, at worst misogynistic and homophobic in its dictates and decree.

Yet whilst science and law may be prime sites for the regulation of "sex," they are also prime sites for resistance. Both science and law have been laid open to feminist scrutiny and critique. Some have argued that both professions are simply sexist, acting to support the interests of man whilst denigrating or neglecting the interests of woman;13 wholesale rejection of legal and scientific theorizing on the subject of "woman" and "sex" has been advocated as a result. Others have taken a more moderate stance, recognizing that both science and law contain many contradictions, many discourses supporting male privilege and interest, but others playing a part in the protection and empowerment of women.14 Here the baby is not thrown out with the bathwater, and both law and science are seen to offer something positive for women. Campaigns to change the more archaic aspects of the law or scientific theory and practice have been executed as a result.15 In the following two chapters I will examine how the law defines "sex," sexual deviancy and sexual problems and then examine in detail the phenomenon of sexual violence—in particular the way it is represented and explained in science and law. Each of these issues is not merely a matter of abstract theory; for in the execution of punishment or "cure," in the legal apotheosis of "blame" for a sexual crime, both science and the law have very concrete material effects on the lives and bodies of women and men.

Most people would agree that we need some legislation on sex, that the boundaries of the law and her sister profession sexual medicine provide safety and security against general debauchery and licentiousness, that we need to control the sexual outlaws, the sexual criminal, the rapist and the abuser. Yet it is not that simple. How do we define a sexual crime? How do we define sexual deviance or a sexual problem? It all depends on our definition of normal sex. We cannot merely accept science or the law as neutral or see the boundaries of sex as the police as a reflection of given, somehow natural rules. We must accept the instantiation of the woman and "man."16 The cool and calculated analysis of sex is part of a wider process of secularized control of the body and, through control of the body, control of the person. (Madness and criminality, two other forms of disruptive deviancy, have also been subjected to the "objective" analysis of these legal and scientific experts.) The mechanisms of this control are a means of convincing us that all the confusing irregularities of human experience can be explained and contained, that anything out of the ordinary, anything not "normal," can be punished or treated—thereby maintaining our safety and security and giving us reassurance that those deemed "other" can be clearly categorized and thus controlled. However, rather than providing us with objective knowledge and guidance, examining how science and law regulate the boundaries of sex and sexual deviancy largely demonstrates the power of phallocentric privilege itself; examining anomalies and anachronisms in the practice of law in this area demonstrates how rigidly the dominant institutions define and seek to maintain their privilege and control.

DEFINING THE BOUNDARIES OF "SEX"

THEOLOGICAL AND CANON LAW: GOD'S WORD MADE FLESH

Any Woman who acts in such a way that she cannot give birth to as many children as she is capable of makes herself guilty of that many murders, just as with the woman who tries to injure herself after conception.

St. Augustine, ad 354–430

A man with a hundred tongues who lived for a century would still not be able to complete the task of describing the vices and defects of a woman.

Mahlshetti, Hindu text

Take her skin from her face and thou shalt see all loathsome under it ... within she is full of phlegm, stinking, putrid, excremental stuff.

St. John Chrysostom, AD 347–407

In pain shall you bring forth children, woman, and you shall turn to your husband and he shall rule over you. And do you not know that you are Eve? God's sentence hangs all over your sex and his punishment weighs down upon you. You are the devil's gateway; you are the she who first violated the forbidden tree and broke the law of God.

Tertullian
Edicts defining and controlling sexuality have been at the centre of theological law for centuries and have provided the foundations for much of the common law which defines and controls "sex" today, even though theological and common law differed in their aims. Historically, a main concern of theological law has been the danger of woman's sexuality, as the extracts above illustrate—the images of "woman" as temptress, her body an instrument of evil and corruption for which she must be eternally reviled and punished, of woman, incapable of intellectual thought, childbirth and child-rearing her natural, God-given destiny.

Christian doctrine on sexuality have their origins in the Augustinian creed, which was established in the fourth century a.d. St. Augustine was originally a scholar, and adhered to the strict Manichean faith, which advocated complete celibacy and dictated that sexual intercourse which led to pregnancy was to be condemned because it caused a soul to be trapped in another's body, perpetuating a cycle of good versus evil. In his eleven years as a member of the Manichean faith Augustine battled unsuccessfully against his own sexual drives. Rather than resolve what he saw as the conundrum of whether he should confine himself to a mistress, to prostitutes or to a wife, he underwent a religious conversion to Christianity and found that he suddenly no longer desired sexual release.

Augustine's celebration of his newfound celibacy and freedom from lustful desires for women came to be enshrined in the doctrine and decrees of the early Christian church. His hostility towards the act of sexual intercourse led him to declare that nothing was more likely to bring the mind down from the heights than a woman's caresses, and that joining of bodies without which one cannot have a wife. Men were told to worship the spiritual nature of woman but to despise her bodily reality:

A good Christian is bound toward one and the same woman, to love the creature of God whom he desires to be transformed and renewed, but to hate in her the corruptible and mortal conjugal connection, sexual intercourse and all that pertains to her as a wife.

Augustine preached that woman could pass into the kingdom of heaven only if her body was cleansed and her spiritual self literally separated from those organs connected to sexual intercourse and child-rearing. In this way she would be "suited to glory rather than to shame." This offers a chilling parallel to the sexual murderers of today, many of whom cut out or disfigure women's genitals whilst claiming divine inspiration for their crimes. The only way for woman to be truly spiritual and rational, Augustine declared, was for her to remain a virgin, denying her sexuality and physicality altogether. This heralded centuries of celebration of female virginity, epitomized by the Catholic church's belief in the "virgin birth," through which Mary is reputed to have given birth to Jesus without having been soiled by carnal desire or sex.

While celibacy became the ideal to which the angels (or their earthly counterparts, the clergy) should aspire, Augustine acknowledged the biblical edict to procreate and so declared that sex could take place, but only within marriage and with impregnation of the woman (not pleasure) as its sole aim (an interesting reversal of his earlier position). All sexual activity outside marriage was considered sinful—but was sexual intercourse not carried out in the appropriate "missionary" position, with the woman on her back facing the man?

Augustine's decrees were not novel, but merely the continuation of a long-held belief, enshrined in theological law, that active sexuality on the part of a woman was sinful and perverse and, if not avoided, would lead to the downfall of man. As Paul decreed in Romans 1:25-27, women who "changed the order of nature" by taking up a sexually active position were evil "daughters of men" accused of seducing the "sons of gods." (In sharp contrast, men who took the passive position in homosexual activity were the ones who were deemed degraded and condemned.) So male and female sexual behaviour was closely defined—passive receptivity prescribed for women and proscribed for men. This is the script of heterosexuality we see in women's magazines, romantic fiction, films and pornography, positioned as moral edict in the Christian bible.

Later Christian scholars and theologians extended and clarified the boundaries of what was considered sinful sexuality. St. Thomas Aquinas outlined four "sins against nature" that were to be prohibited and condemned: masturbation, intercourse in an unnatural position, homosexual activity and bestiality. These activities were seen as more serious than adultery, rape or seduction because they were sins against the laws of nature, as set down by God. The punishment for contraven- tion of such laws was ultimately eternal damnation—exclusion from the promise of eternal life in the kingdom of heaven. The fornicator, the adulterer or the homosexual may have enjoyed their sinful pursuits on earth, but always with the knowledge that they would be excluded from everlasting salvation whilst the pure of heart and mind would bask in God's grace as their just reward.

This isn't merely historical anachronism—arguably, fifteen centuries later, the traces of these archaic edicts remain. The Christian belief in the sanctity of marital sex and the sinfulness of all else, still holds in many quarters today—certainly in official religious doctrine. Yet as common law and science took over the regulation of "sex" in the eighteenth and nineteenth centuries, punishment on earth took the place of threatened punishment to come. Sex outside the boundaries of "normality" has been brought into the statute-book, turning sexual sinners into common criminals. The scientific expert has moved away from the religious emphasis on sexual iniquity and vice to define clinical categories of sexual problems and "perversions." Categories of sin, debauchery and moral turpitude have been replaced by taxonomies of disease, madness and degeneracy.

**Scientific Taxonomy and Classification: Categorizing Deviance and Perversion**

It was only in the second half of the late nineteenth century that the scientific community saw the publication of a number of key sexual tomes which both spelt out the importance of sexuality for society as a whole and gave an air of respectability to its scientific study through the discipline of "sexology." Krafft-Ebing was working in Germany, Magnus Hirsch and Havelock Ellis in England; all were committed to objective, disinterested analysis of both sex and the anatomical body. Sigmund Freud was also an influential pioneer, but his work has arguably had less impact on the building blocks for modern-day descriptions of "paraphilias" and are worth a brief examination. They also illustrate the tight boundaries placed by science and sexology around "normal" sexual expression (phallocentric heterosexuality) and the strict rules which define what is an "acceptable" erotic object.

Ellis claimed there were three levels of erotic "symbolism"—eroticism towards parts of the body, towards inanimate objects and towards acts and attitudes. He defined arousal by hands, feet, breasts, buttocks, hair, secretions and odours as "normal"; arousal by "harnessed, squinting, pinning of smallpox, pockdophile [sic], presbyphilia, or love of the aged, and necrophilia" and "erotic zoophilia" (excitement caused by animals) as "abnormal." All arousal by inanimate objects—"gloves shoes, stockings and garters, sprogs, handkerchiefs, underclothes"—or by "acts and attitudes" such as "whipping, cruelty, exhibitionism, mutilation, murder, being whipped,... acts of urination and defecation and the coitus of animals" was also categorized as abnormal. Sado-masochistic sex—sex involving the infliction of punishment, pain or injury on a consenting partner—was first discussed as a medical
category by Krafft-Ebing in 1886. He conceived of it as resulting from a "congenital hereditary tainted constitution," involving a "pathological intensification of the masculine sexual character [in sadism and a] degeneration of the psychical peculiarities of women [in masochism]." It remains as a category of sexual dysfunction (or perversion) today; it may also be categorized as a "crime."

The modern-day classification systems have not diverged much from this model. The Diagnostic and Statistical Manual of the American Psychiatric Association (DSM), one of the most widely used systems of classification, lists exhibitionism, fetishism, transvestism, and voyeurism as paraphilies. Homosexuality was only removed from the DSM in 1973; before this date it was classified as psychiatric deviance. The International Classification of Diseases (ICD), an international taxonomic system, includes all of the above, as well as bestiality, transsexualism, disorders of psychosexual identity and homosexuality—although a disclaimer is included with the latter that we should "code homosexuality here whether or not it is considered as a mental disorder." Clearly many people still do; ICD-9 leaves our options open. While the law condemns those who break laws of consent as sexual offenders, in the taxonomies of sex research child sexual abuse is classified as "paedophilia." The DSM defines this as "intense, sexual urges and sexually arousing fantasies, of at least six months' duration, involving sexual activity with a prepubescent child." To receive a diagnosis, the person has to have acted on these urges—or to be "markedly disturbed by them." Transformed into a clinical disorder, the behaviour of sexual abusers of children is thus contained within a diagnostic category as a list of presenting "symptoms."

Interestingly, adult sexual assault or rape is not categorized as a "sexual disorder"—perhaps it would condemn too many men. Those who are categorized as "sexual sadists" because they have sexual urges and fantasies involving the physical and psychological suffering of the victim, may commit rape, we are informed by the DSM. In these cases "the suffering inflicted on the victim is far in excess of that necessary to gain compliance, and the visible pain of the victim is sexually arousing." We are reliably told that only 10 per cent of rapists exhibit sexual sadism. Presumably, by implication, the other 90 per cent are "normal men" who inflict an inappropriate degree of "suffering" to gain the woman's compliance. It is also interesting that "perversion"—with a few notable exceptions—is seen to be a male prerogative:

The extreme forms of symbolism (perversion) are chiefly found in men. They are so rare in women that Krafft-Ebing stated, even in the late editions of his Psychopathia Sexualis that he knew of no cases of erotic fetishism in women.

Havelock Ellis, 1946

Except for Sexual Masochism, in which the sex ratio is estimated to be 20 males for each female, the other paraphilias are practically never diagnosed in females, but some cases have been reported.

DSM 111-B, 1987

As both the early experts and the more recent diagnostic bible inform us, women are rarely "perversion." It is only in the case of masochism—ironically, as it is, perhaps, the archetypal feminine position—that female "perversion" is at all acknowledged. Is this merely a reflection of women's lack of imagination? Or is it because a phallocentric view of "woman" underpins these diagnostic categories—a view of "woman" as sexually passive and inactive? Yet as the earlier examination of women's eroticia illustrates, women are certainly capable of exploring and experimenting with sexuality in the realm of the "perversion"—even if sexologists choose to turn a blind eye.

None of these diagnostic categories of sexual disorder are based on incontrovertible "fact"—there is no reason why arousal associated with hair is "normal" but attraction to an elderly person is not. It all depends on the social values adopted by those who construct the classification systems. Yet this scientific classification of sexuality as deviation or dysfunction is often seen as reflecting the "truth" and thus gives a false air of respectability to the theories and the therapies of the sex experts. It sees in stone (or academic tome) and gives a false legitimacy to what are subjective, value-laden judgements of what is normal and what is not. It conceals the ambiguities and uncertainties of "sex" under a cloak of scientific rhetoric. It also pathologizes and individualizes sexual behaviour that deviates from the norm, legitimating the right of the experts to intervene.

Yet this is no more irrational than the sex laws which define a particular sexual act as criminal in one place and time and legal in another (see below). What is perversion in one context may be normal sexual behaviour in another.

Havelock Ellis's classification of "perversions" was probably of little importance to the majority of people in the nineteenth century; equally, if representations of sexuality in today's pornography are anything to go by, clearly many readers could be clinically defined as deviants—sex with animals, fetish objects, SM and "worn sports" are not uncommon fare in the pornographer's visual diet. These sexual practices may technically be classified as "paraphilias," but who cares? Only if you come forward to an expert for help will the diagnostic categories be invoked. What's more, the very notion of these acts being transgressive may add to their allure (the recent trend for SM clothing worn as a fashion accessory has been greeted with dismay by serious aficionados of SM sex). Social, cultural, legal and psychiatric judgements are open to resistance. That is, at least as far as the state allows.

COMMON SEX LAW: ANOMALIES AND ANACHRONISMS IN DEFINITIONS OF "ILLEGAL" SEX

Marriage and Adultery

Sex laws in the late twentieth century are a hodgepodge of anomalies and anachronisms, yet they still position phallocentric heterosexuality as the norm and enshrine belief in female sexual passivity with strictures to contain the lascivious woman. It conceals the ambiguities and uncertainties of "sex" because they have sexual urges and fantasies involving the physical and psychological suffering of the victim, may commit rape, we are informed by the DSM. In these cases "the suffering inflicted on the victim is far in excess of that necessary to gain compliance, and the visible pain of the victim is sexually arousing." We are reliably told that only 10 per cent of rapists exhibit sexual sadism. Presumably, by
it is woman’s responsibility to refuse or resist. As one British MP, engaging in a debate on sex law earlier this century, pronounced:

Sex attraction is one of the elemental things in life, and it will be agreed that when you get down to the instincts which move men and women in sex matters, the outstanding instinct of the male is pursuit... The instinct of the female is resistance, reserve, followed, if she is won, by surrender, but broadly speaking she has the reserve, and the resistance... and the most potent individual force that makes for sexual morality in a community is woman’s modesty (or lack thereof).35

The implication here is that the woman who doesn’t object is responsible for the sexual act that then takes place, as man can’t help his “instincts’; women are blamed for adulterous sex (as well as for sexual violence...). This is also why even in contexts where adultery is not officially outlawed, men who punish their adulterous wives (often with murder) are treated symptomatically by the law...

THE QUESTION OF CONSENT

The arena in which the law is most vigilant is sex without consent. The law defines “sex” as an activity that is only allowed to take place between adults, between those who are deemed mature enough to give or withhold consent.36 Yet the age of consent for sex varies greatly across cultures and across time, leading to different definitions of what constitutes child sexual abuse and variations in the age at which young girls are deemed “ready” to receive the sexual attentions of older men.37 For example, in sixteenth-century England children were betrothed and married well before the age of puberty, invariably because of the financial or political gain such matches would accrue for their parents. In the Elizabethan era the age of consent for girls was ten.38 In many cases, the boy was not physically able to consummate the union. The marriage of Catherine of Aragon and her first husband Prince Arthur is one notable case, the lack of consummation being the reason that Henry VIII could marry his brother’s wife.39 Up until the late nineteenth century girls could legally engage in sexual intercourse at the age of twelve. This was raised to the age of sixteen in 1885 only because of the increasingly common practice of parents selling their daughters to brothel keepers.40 A report published in 1882, which prompted the 1885 Act, stated that the desire for young girls was so great that prostitutes in the West End of London had to dress as little girls in order to get any custom.41 W. T. Stead, then editor of The Pall Mall Gazette, caused an outcry when he published the fact that he had with great ease purchased a thirteen-year-old girl from her mother for prostitution. The resulting public debates acted to spur on the legislative campaigns of early feminists such as Josephine Butler and J. Ellice Hopkins,42 creating a climate that facilitated changes in the law of consent. Yet until the 1929 Marriage Act it was still legal in England for girls of twelve to marry and have full sexual intercourse with their husbands but illegal for them to have sex with anyone else. Today, any girl who “has sex” (defined as sexual intercourse) under the age of sixteen is committing a legal offence. If there is a five-year age difference between the girl and her partner, it is “child sexual abuse.” Yet this young age of consent is not merely a historical anachronism. For example, in Bangladesh (which is one of the few countries where at 29.9% women’s life expectancy is lower than that of men), at 56.8% one fifth of women today have given birth by the age of fifteen. Within the United States of America the age of consent varies across states: In Oregon it is twelve, in Missouri, Georgia and Washington fourteen, and in California, Idaho and Wisconsin eighteen.43 In many cultures there are no laws about the age of consent whatsoever and sexual activities between adults and children occur unchecked and unquestioned. For example, anthropologists have recorded that in the Sambian tribe of the New Guinea Highlands part of the initiation of boys into adulthood involves fellatio (oral sex) between young boys and men, with the young boys ingesting the oral sex and the adult male semen as a rite of passage into manhood.44 All boys take part in this ritualized activity so they can become strong and courageous warriors. It is not categorized as “sex.”45

So what is considered to be sexual violence of a child in one context is deemed acceptable (or compulsory) sexual behaviour in another. There is no immutable point at which children become sexually responsible and capable of giving consent, no point at which a sexual act “naturally” becomes legal or acceptable between adult and child, between two adults or between two children. The only physical restraints are the development of the sexual body, which will preclude sexual intercourse or pregnancy on the part of the girl, and the ability to maintain an erection and ejaculate semen on the part of the boy. However, these physical restraints only apply when we conceive of “sex” as being heterosexual sexual intercourse leading to pregnancy—other forms of sexual activity are not inevitably restricted by biology or physical maturity in the same way. It is social laws that define these boundaries and tell us when we are legally allowed to become “sexual,” and these boundaries are variable, as we have seen...

DEFINING RAPE: REIFYING THE PENIS AS PHALLUS

“Rape” is legally defined as sex that occurs in the absence of consent. If we examine the definition of rape we have a further demonstration of the ideological assumptions underpinning sex laws and their narrow definition of what we consider to be “sex.” For example, in England and the majority of states in North America rape is narrowly defined within the law as penetration of the vagina by the penis46—an oral or anal penetration or assault by objects would be defined as “incest assault,” a lesser crime in the eyes of the law. (New South Wales, Australia, is one of the few places that has a broader cover definition of “rape,” which includes penetration by objects, as well as the penis, and penetration of the mouth, rather than just the vagina or anus.) In England, where a life sentence can be given for “rape,” ten years is the maximum for “incest assault.” Yet in the same way that women (or men) may engage in many activities other than vaginal penetration with the penis and define them as “sex” (oral sex; mutual masturbation; sex toys; anal sex...), penetration by objects other than the penis or violation of parts of the body other than the vagina may be experienced as a traumatic “rape.” A woman who is violated with a broom, a baseball bat and a statue—as was the case with a gang rape of a woman which occurred in Glen Ridge, New Jersey in 199147—is the victim of an extreme form of sexual violation. To her it is “rape.” To categorize this as less serious than rape with a penis is a complete denial of the seriousness of the crime as well as a glorification of the power of the penis as weapon. This is “rape” defined from the point of view of phallocentrism.

Within the law certain groups of individuals appear to be deemed incapable of being raped. Women working as prostitutes or women who are deemed “pro-miscuous” may find it almost impossible to bring a successful charge of rape against a man, regardless of the circumstances—as do married women against their husbands. Consensual is deemed to be always present in these circumstances... Equally, within a model of heterosexuality which positions man as seducer and woman as resistant, “rape” of a woman by a man has to be extreme or violent to be proven. Or... it is merely seen as “sex.” In the same way, gay men are assumed to consent to sex with other men, so “rape” is deemed less serious—or impossible—when they are the victims. It is only the young boy sexually abused by an older man, or the raped heterosexual man, who are likely to be believed if they claim to have withheld consent. Whilst defence counsel has been known to plead precipitation in cases of the rape of a homossexual man, this would be unthinkable in the case of rape of a heterosexual man for whom “sex” with a man is unthinkable. In this vein, many people believe that rape is worse for heterosexual men than it is for women, as it is a sexual act which violates the “normal” boundaries of sexual behaviour. The fact that the defence of attempted rape has been successfully used by heterosexual men in a number of recent murder trials demonstrates the serious way in which the law views rape of a heterosexual man.48 For these men (and the law), it seems, is better to kill than to be subjected to rape. However, consent is often assumed to be present if the victim of sexual abuse or violence experiences any form of sexual arousal or response during the event—a not uncommon finding in both male and female victims of certain forms of sexual assault. This is even more visible and noticeable to the abuser when the victim is male. It is not rare for the man to have an erection or to ejaculate when being subjected to rape.49 This can cause increased trauma for the man, can be used to infer homossexuality and, by implication, complicity in the “sexual” act. This “myth of complicity”50 is also common in cases of sexual abuse of boys, where abusers have been known to comment on the size of the victim’s erection during the attack, positioning the boy as a willing party in what is reconstructed as a purely “sexual” encounter. Equally, if a boy experiences an erection he may be less likely to categorize the
experience as “abuse,” even if force is used, and so be reluctant to disclose.

However, within the law, the very existence of male “rape” is rarely acknowledged. In England the first prosecution for male rape was brought in 1995, following the introduction of the crime on to the statute-books in 1994 (this first convicted offender was given life imprisonment). A similar position exists in the United States, where few states (exceptions being Michigan and Massachusetts) recognize male “rape.”

In both countries sexual assault by one man on another is categorized as “indecent assault” and, as a consequence, lesser penalties than those meted out for rape are attached to this crime. As forced buggery between men isn’t categorized as “rape,” the cross-examination of the sexual history of the complainant, which has been almost universally banned in male–female rape trials, is allowed.

However, it is not the case that male rape doesn’t exist within the law. One of the contexts in which it has been officially recognized is in American prisons. A number of surveys have estimated that at least 14 percent of prisoners in the USA will experience rape which, given the figure of 1,200,000 men in prison at any one time, means 150,000 male rapes per year. Yet convictions are rarely, if ever, brought. Many young prisoners are subjected to repeated gang rapes, and it has been demonstrated that if men are not sexually dominant in these contexts, engaging in rape, they are at high risk of being positioned as sexually submissive—and violated. This situation may be changing as a result of the 1994 U.S. Supreme Court ruling that prison officials could be held responsible for not protecting a prisoner from sexual violence, which resulted from a number of prominent rape cases being brought to appeal, including the gang rape of a male–female transsexual who was placed in a male prison. This ruling ended what one male rape victim described as “the Gulag of rape,” where prison warders implicitly condoned open and often organized sexual violence.55

Under current laws on male rape a transsexual or hermaphrodite cannot, legally, be “raped”—even if the sexual assault in question involves the penetration of a vagina by a penis, as the law does not recognize a change in sex—born a man, one dies a man. So it is not simply an operational definition which classifies rape, not simply a matter of penis and vagina. It has to be a “real” man, raping a “real” woman, in a “real” vagina—a reconstructed one clearly does not count. . . .

POLICING DEVIANT SEX: THE CASE OF HOMOSEXUALITY

MALE HOMOSEXUALITY: THE SIN OF SODOMY

Laws and scientific theories that regulate and explain homosexuality also reveal the phallocentric bias within science and the law—the fact that both professions reflect the interests and the fears of the “normal” heterosexual man—and provide further examples of the variable nature of the legal and scientific pronounce-ments on the rights and wrongs of “sex.” Arguably, it was in the categorization of homosexuality as “illness” and sexual crime that the early sexologists had the greatest impact on the lives of individual women and men. It is one of the few forms of “deviancy” where the sex police come knocking at the door. The homoerotic fantasies we have seen framed in the masculine gaze in art, film and pornography are transformed into material controls of sex as they enter the legal statute-books.

Active homosexual sex between men has been almost universally condemned within theological doctrine throughout the ages—with sodomy being seen as a “crime against nature” more heinous than murder.56 In England the act of sodomy was criminalized and made punishable by death under an Act of 1533, promulgated by King Henry VIII. The death penalty remained on the statute-books until 1861, when the Offences against the Person Act of 1861 was extended in 1885 as part of an act aimed at controlling prostitution, so that any acts of “gross indecency” carried out between two males, either in public or in private, were made illegal. Labelled a “blackmail-er’s charter,” it resulted in the ruin and imprisonment of many thousands of men, one of the most infamous being the playwright and poet Oscar Wilde. It remained on the statute-books in England until 1967, when consenting sex between two men over the age of twenty-one, in private, was decriminalized. Whilst in the majority of European countries today the age of consent is the same for heterosexual and homosexual sex—following a recommendation of the Council of Europe in 1981—in Britain, until 1994, the age of consent was twenty-one for homosexual men, and sixteen for heterosexuals; the former only latterly being reduced to eighteen in a private member’s bill.

Male homosexuality continues to be illegal to this day in many cultures—in the mid-eighties it was still illegal in Cyprus, Eire, Mexico, New Zealand, the Soviet Union and all Moslem countries.57 In 1993 it was illegal in twenty-four North American states,58 with the most severe state penalties being twenty years in jail. Against an appeal brought by gay legal activists in 1986, the Supreme Court upheld the right of the state of Georgia to criminalize adult, consensual, private sex between two men. The appeal concerned the Bowers v. Hardwick case, in which a young man had been arrested in his own bedroom for engaging in “illegal” sex with another man. Relying on theological dictates concerning homosexuality, the court concluded that homosexuality was a threat to the American family and to the American way of life.59

The law on homosexuality highlights many of the contradictions and anomalies that underpin the legislation which frames our sexual lives and exemplifies the invasive nature of the strictures that can potentially condemn our sexual practices. For example, whilst within English law consensual sex between two men over the age of eighteen, if carried out in private, is not illegal, if one of the parties is under eighteen (even by a month), or if another person is present (male or female), even if they are not engaging in any sexual activity, it is illegal. If sexual intercourse takes place between two men with another person present, they could still be sent to prison for life. In contrast, today, individuals engaged in heterosexual or lesbian sex (or even a combination of the two) can enjoy as many partners simultaneously as they wish, and the law of England will say nothing. This particular law against homosexual men is certainly enact ed: Each year scores of men are arrested for “cortaging”—having sex in public toilets—because this is defined within the law as an “unnatural offence of gross indecency.” Until recently, many police forces placed specially trained officers in public toilets in an attempt to trap such offenders. The voyeurism involved in peeping through pinholes in order to catch men having consensual sex with each other beggars the imagination.

Equally, many men have been convicted for engaging in consensual sex with those under the age of heterosexual consent—but also the age of heterosexual consent. For example, in 1988 when the age of male homosexual consent in England was twenty-one, twenty-three men were convicted for consensual sex with men over sixteen.60 The justification for such prosecution and for the differential age of consent for heterosexual and homosexual men is that young boys are deemed open to easy corruption by the seductive powers of older homosexual men. Following discussion of a lowering of the age of consent in the British parliament in 1990, the then Conservative party chairman Kenneth Baker was reported to be appalled, commenting that “Parents will be shocked to know that this protection for their children could be removed.”61 Boys are clearly deemed in greater need of “protection.”
than girls, who are legally free to choose whenever they choose to have sex with after the age of sixteen even though, as the Howard League reports, there is no evidence that boys can be "converted" to homosexuality. This is an interesting reversal of the belief in "man" as rational and controlled and "woman" as vulnerable and easily seduced. (Another legacy of this fear for the corruption of children by supposedly rapacious homosexuals is to be found in Clause 28, introduced by the British parliament in 1988, which made illegal any public pro-mition of homosexuality as normal or equal to heterosexuality, particularly in schools or places of further education.) This was again illustrated by the comments of a conservative MP, Robert Spink, during 1994 parliamentary debates that preceded the lowering of the homosexual age of consent:

The public interest is best served by uncompronisning prosecution policy...any reduction in the age of prosecution would put teenage boys at danger from the promiscuity theory. It would be a contempt of parliament for any waiver to be given. The bugbears of teenage boys is the only issue on the table.66

Today, whilst many aspects of sexual behaviour between men remain illegal, few convictions are actually brought for consensual sex in private. This non-application of sex law is not unusual. In 1948 Kinsey remarked that 95 per cent of American men were regularly engaging in sexual acts that were technically criminal,—yet very few were actually convicted (or even saw themselves as criminals). For example, whilst oral sex between consenting heterosexuals is technically illegal in many U.S. states today, and anal intercourse between consenting heterosexual adults was illegal in Britain until 1994, under the Sexual Offences Act of 1956 (s.12 (1)), convictions for these crimes have rarely been brought. (A sentence of eighteen months was given for the crime of heteronormal sodomy in 1971.) These are behaviours which the majority of the population would no longer see as particularly deviant if consensual and practised in privacy. What this selective application of sex laws demonstrates is that public consensus on sexual morality (or immorality) and the law is entwined in a complicated symbiotic relationship. In many instances public morality changes prior to changes in the law leading to anachronistic edicts lying unused on the statute-books. In other cases the law (along with medicine and psychology) is strongly influential in shaping social mores on sex. This is most clearly illustrated in legal rulings (or refusals to rule) on the subject of lesbianism.

The Horror of Lesbianism

These moral weaknesses (lesbianism) date back to the very origin of history, and when they grow and become prevalent in any nation or in any country, it is the beginning of the nation's downfall. The falling away of feminine morality was to a large extent the cause of the destruction of the early Greek civilization, and still more the cause of the downfall of the Roman Empire.67

Whilst male homosexuality has been almost universally castigated and condemned, lesbianism has been remarkably neglected in the statutes of the law. In English law, there is no age of consent for lesbian sex. Laws on homosexuality are uniquely applied to men. Lesbians have never been, legally or otherwise, criminalised. Theological doctrine is similarly silent on the subject (one exception being Paul's epistle to the Romans, concerning the dangers of women turning from the "natural into the unnatural" (1:26)). Yet whilst women were clearly romantically and sexually engaging with each other long before the Victorian sexologists categorised them as "lesbian" (or as female sexual tovers), it would be wrong to assume that women have had the freedom to engage in same-sex sexual activity whilst men have been tortured and hanged for the same. For the fears of Paul outlined in the New Testament, have been enshrined in secular law in a number of different contexts.67

For example, in an 1860 the Code of Orléans was introduced in France, prohibiting sex between women, stating that whilst for the first two offences a woman would "lose her member," for the third she would be burned to death. In Italy in 1574 women who were found engaging in sex with other women, if they were over the age of twelve, received the following punishment: "she shall be fastened naked to a stake in the street of Locutus and shall remain there all day and night under a reliable guard and the following day be burned outside the city."68 Burning at the stake was also the punishment for women caught having sex with another woman in medieval Spain, enshrined in the law code of 1256. Particular forms of lesbian sexual activity were deemed more worthy of specific punishment. One Spanish jurist argued that "burning should be mandatory only in cases where a woman has relations with another woman by means of a material instrument,"69 This edict was repeated in Italy, where it was decreed that if a woman merely made overtures to another woman she should be denounced, if the "behaves corruptly with another woman only by rubbing," she should be "punished," yet if she "introduces some wooden or glass instrument into the belly of another: she should be condemned to death."70 A distinction between "vanilla sex" and the leucistic crime of phallic masquerade being introduced in the Middle Ages?

Yet perhaps evidencing a foretaste of twentieth-century prudishness (or panic), official secrecy and silence invariably surrounded these particular sexual crimes. A fifteenth-century cleric who declared "lesbianism" (as we now know it) is a sin against God and a crime against nature proclaimed that "women have each other by detestable and horrible means which should not be named or written (Brown's italics)."71 In the sixteenth century, in Switzerland, the authorities were advised that in the case of those women convicted of same-sex sex the death sentence should be passed, yet the crime itself should not be described, for "a crime so horrible and against nature is so despicable and because of the horror of it, it cannot be named."72 So when one woman was drowned for the crime of sex with another woman in Geneva in 1568, the jurist Colladon recommended that "it is not necessary to describe minutely the circumstances of such a case, but only to say that it's for the detestable crime of unnatural fornication."73

Sex between women was often implicitly positioned as orgiastic within the law—part of a general absence of libidinous control. For example, the charge of femina com femina (two women) was often repeated during the witch trials of the Middle Ages, during which thousands of women were condemned for their supposedly voracious sexuality.74 One of the most famous cases of a woman burned for heresy and witchcraft, that of Joan of Arc, centred around her wearing of male attire and her supposed sexual relationships with other women—all seen as evidence of her criminality.75 In the fifteenth century it was believed by many that witchcraft (seen here as synonymous with lesbianism), was often the result of the woman's inability to attract and keep a man. As one authority declared, "A woman usually becomes a witch after the initial failure of her life as a woman; after frustrated or illegitimate love affairs have left her with a sense of impotence or disgrace."76 The antecedent of the belief today that all a lesbian needs is a good fuck; she is only a lesbian because she can't get a man. Yet as well as being conceived of as a sad, second-rate activity, lesbianism was also positioned as a licentious sexual act in the annals of witchcraft. One account produced in France in 1460 declared:

Sometimes indeed indeciblurable outrages are perpetrated in exchanging women, by order of the presiding devil, by passing on a woman to another woman and a man to another man, an abuse against the nature of women by both parties and similarly against the nature of men.77

No wonder the authorities wanted to remain silent on the subject. In England this legal silence has largely continued to this day (in contrast lesbianism is named—at illegal—in nearly 50 per cent of U.S. states).78 It is widely thought that the current absence of any law regulating consensual sex between adult women in England is due to the fact that Queen Victoria refused to allow any mention of lesbianism in the sexual offences acts of the late nineteenth century, on which our laws on sexual consent are based. This was supposed because she could not conceive of such perverse acts actually being carried out by women—which is why to this day there is no legal age of consent for lesbian sex in England.79 A 1904 medical treatise entitled Woman appears to reinforce this view, claiming that female homosexuality had never been made a criminal offence because of "the ignorance of the lawmaking power of the existence of this anomaly."80 This, in fact, was not so. But it appears that even when lawmakers knew, they preferred absence of legislation to open acknowledgment of the threat of the lesbian. It wasn't Queen Victoria but the ruling parliamentarians who maintained the silence on lesbianism.

Regulating Lesbianism in English Law

 Whilst there may have been no legal age of consent for sex between women, the concept of sex (or at least
The decision of what to do with these female "perverts" also presented difficulties. Lieutenant Moor-Brabazon suggested three ways of dealing with them: stamping them out with the death penalty, locking them up as lunatics, or, best of all, ignoring them—not because they were innocuous, but because they would eventually extinguishe themselves, sentiments reminiscent of the eugenics movement that advocated sterilization for "deviant" men and women. So it was declared:

"We should leave them entirely alone, not notice them, not advertise them. This is the method that has been adopted in England for many hundred years, and I believe it is the best method now... they have the merit of exterminating themselves, and consequently they do not spread or do very much harm to society at large... To adopt a clause of this kind would introduce into the minds of perfectly innocent people the most revolting thoughts."

So, despite its apparent danger, lesbianism remained outside the law. Lord Desart, a former director of public prosecutions who had been involved in the indictment of Oscar Wilde, opposed the bill with the comment:

"You are going to tell the world that there is such an offence, to bring it to the notice of women who have never heard of it, never thought of it, never dreamed of it. I think it is a very great mischief."

The Lord Chancellor, Lord Birkenhead, reiterated these sentiments:

"I would be bold enough to say that of every thousand women, taken as a whole, 999 have never heard of it, never thought of it, never dreamed of it. I think it is a very great mischief."

In the manner of the legal experts down the centuries they were beset by the fear that if any publicity were given to the concept of sex between women, those women who had never previously imagined the existence of such activities might be tempted to try them. The grave risk was that they would then forsake their men, as it was feared, in the words of one parliamentarian, that "any woman who indulges this vice will have nothing whatever to do with the other sex." What fragile male egos must have promoted such fears. Can the power of the phallus be so easily superseded?

That women having sex with each other could be such a threat is undoubtedly testimony to the vulnerability felt by the law-making men in the face of the autonomous sexual woman, her sexual passivity no longer confirming man's "natural" phallic mastery and power, her turning from the phallic—both as symbol and as embodied sign (in her apparent rejection of the penis)—acting as the greatest conceivable threat to "man." This was perhaps what promoted the apparent blindness (or lack of imagination?) in generations of law-makers—"the inability (or reluctance) to imagine woman as sexually active and therefore potentially threatening, as well as the horror evoked by confirmation that she was capable of being so. For as recently as 1978 the British government was quoted as saying: "The question of homosexual acts by females has never—so far as the government of the United Kingdom are aware—been generally considered to raise social problems of the kind raised by masculine homosexuality." 

Legally denying active female sexuality—or the very existence of woman's rejection of man—can be seen as a defence against the anxieties and fears associated with "woman."... The above comment reflects the prejudiced fears directed towards male homosexuality—the threat supposedly posed to young men by the predatory advances of the rapacious homosexual man (perhaps concealing a dread many men have of their own homoerotic desires)—and the narrow definition of "sex" used within the law (penetration of vagina by penis); and is analogous to the laws that narrowly define "rape" as vaginal penetration by a penis, seeing penetration by objects not as "rape" and therefore as a lesser crime.

Sexual activity between women was implicitly recognized in English law in a number of divorce cases in the late forties, where a woman's "unnatural sexual relations" with another woman were deemed grounds for her husband to divorce her. The 1956 Criminal Offences Act, ss. 14 & 15 also acknowledged that a woman was capable of carrying out an indecent assault in another woman. But few cases have been brought before the courts. In 1991 Jennifer Saunders was jailed or six years for "sexually assaulting" her two girl-friends and for impersonating a man, the case being brought after the mother of one of the girls discovered that her daughter had a female lover. Saunders argued in her own defence that both women had known she was a woman and had wanted her to dress as a man in order to conceal the fact of their lesbian relationship. Whether the court was punishing "assault" (which had been consensual sex at the time it happened), "lesbian sex" or the audacity of a woman taking on a masculine masquerade is open to speculation.

In other cases when the law on female indecency is invoked there is an implicit assumption that women's sexuality is somehow less than that of men. This was made clear in a 1957 Royal Commission on Homosexual Offences and Prostitution (s. 105), which reported that it had "found no case in which a female has been convicted of an act with another female which exhibits the libidinous features that characterize sexual acts between males." This reflects the belief that lesbian sexuality is somehow more benign and innocuous than heterosexual or gay male sexuality (what do they do in bed?), an assumption that sits strangely with the converse belief that "the lesbian" is the epitome of rapacious, rampant female desire. The fact that the British serial killer Rosemary West engaged in "lesbian sex" appeared to be regarded as unsurprising by both court and media during her 1995 trial for the murder of twelve women. Her defence lawyer revealed his own prejudices in his comments in opening her defence: "She may be a lesbian, but she's not a murderer. I wonder which he thought she was worse? During the same period, the media was full of salacious reports of the wife of the then Greek prime minister, Dimitra Papandreu, as a result of photographs supposedly showing her engaging in "lesbian sex" (photographs allegedly of her on a beach embracing another woman). This was seen as evidence of her errant sexuality and threatened her whole reputation (as well as that of her husband)—a "lesbian" is clearly the antithesis of a "good woman."

Yet if the law does not like to think of or mention lesbian sex, it has no compunction in regulating lesbian motherhood. Historically, women in lesbian relationships have been deprived of custody of, or even access to—their children on the grounds of being unfit to be mothers. For example, in the 1981 case of Daley v. Daley the woman's ex-husband argued: "Your honour, this is the bible belt. This [lesbian raising her children] might be okay in New York or California, but this is the bible belt." The woman lost custody of her...
Evolutionary development was believed to have led to the gender roles men and women occupied; as Ellis concludes, "Woman breeds and tends; man provides; it remains so even when the spheres tend to overlap." So "woman" was conceived of as a modest, reticent creature, whose role was reproduction and the resistance of the male sex.

Prior to the nineteenth century female sexuality had not been so clearly distinguished from men—well into the late eighteenth century both sexes had been seen as potentially passionate, lewd and lascivious—but that the Victorian sexologists elevated the myth of "woman" as Madonna or whore into scientific dogma. Working-class women, prostitutes or women from "immigrant" populations (especially African-American women) were positioned as "naturally" promiscuous and sexually unrestrained because of their lower position on the evolutionary ladder, whilst that archetype of femininity, the middle-class Victorian maiden, was assumed to be less sexual than man. As William Acton declared in 1870: Many of the best mothers, wives and managers of households know little of or are careless about sexual indulgences...a modest woman seldom desires any sexual gratification for herself. She submits to her husband's embraces but principally to gratify him; and were it not for the desire of maternity, would far rather be relieved from his attentions.

There can be no doubt that sexual feeling in the female is in the majority of cases in abeyance, and that it requires positive and considerable excitement to be aroused at all, and even if aroused (which in many cases it never can be) it is moderate compared with that of the male.

In a respectable society, the philoconic view positioned man as actively sexual and woman as sexually responsive to man. Ironically, this laid the blame for women's frequent nonresponsiveness on the sexes (as hands...of men), urging us a foretaste of the pressure to perform many other sexual acts which often prevents custody being granted to a lesbian mother. Encouragingly, in the light of this research, as well as the result of political lobbying, it is becoming increasingly possible for lesbian mothers to be treated fairly in custody hearings after a divorce—so the law does appear to be open to movement. Yet the reactions in parliament of two conservative MPs to a recent British case where joint custody of a child was awarded to two lesbian women are telling: "I am immensely unhappy when adult sexual behaviour inflicts a distorted lifestyle on children. I believe atonecessarily that every child deserves a mother and father." Emma Nicholson

"We don't put children in the hands of the insane. Why should we put them in the hands of the perverted?" Sir Nicholas Fairbairn

Whilst some sections of the law may be open to change, in many (powerful) quarters, things remain the same.

**SCIENCE DEFINES "NORMAL" SEX**

**NORMAL SEX: A HETEROSEXUAL INTERCOURSE**

If homosexuality is positioned as the epitome of deviant or perverse sex, its antithesis is heterosexual. Heterosexual intercourse within marriage is the only sexual act to be universally legal (and universally recognized as "sex"), and the legally (and religiously) sanctioned relationship of "marriage," seen to provide the bedrock of social order, is a relationship that can take place only between a man and a woman.

The law frames heterosexual intercourse as normal and legal; science positions it as "natural." In common with their theological forebears, the early sexologists positioned sex primarily as an instinct for reproduction, with heterossexual intercourse, the man in control, and the woman acquiescent, being seen as a biologically driven act. For example, take the comments of Havelock Ellis—who was widely acknowledged to be one of the more liberal and reforming sex researchers, on the subject of courtship:

*A BIOLOGICAL PHENOMENON: Courtship, properly understood, is a biological process which can be found throughout the bisexual animal world. It represents the psychic aspect of the slow attainment of tumescence, the method of securing contraception.*

**ON THE MODESTY OF WOMAN:** The modesty of women, which, in its most primitive form amongst animals, is based on sexual periodicity, is, with that periodicity, an essential condition of courtship...modesty may be said to be the gesture of sexual refusal by the female animal, who is not yet at the period of estrus.

**ON THE SEXUAL PRIMING OF MAN:** Without the existence and delays of modesty, tumescence could not be adequately aroused in either sex, nor would the female have time and opportunity to test the qualities of the candidates for her favours, and to select the fittest male.

Here we have the masquerade of femininity—woman's charade of feigned resistance to the sexual attentions of man—elevated to a biologically necessary process which acts to further the reproductive potential of the species. The script of courtship laid out in romantic fiction and teenage magazines is reified as a "natural" biological process. Phallocentrism was the dominant in the early theories, the penis being seen as the most important component of sex. As Ellis argued: "tumescence and detumescence are alike fundamental, primitive and essential; in resting the sexual impulse on these necessarily connected processes we are basing ourselves on the solid bedrock of nature."
on the assumption that both "normal" and "abnormal" sexuality are primarily instinctual or hormonal phenomena:

Our sexual behaviour is controlled by phylogenetically ancient parts of our brain and therefore is best understood at the level of instinct, within the concepts of ethology and sociobiology. In fact, the "reproductive imperative" is the ultimate principle underlying all human behaviour, since animals survive in proportion to their breeding success.

Wilson, 1988

The cycle of sexual response, with orgasm as the ultimate point in progression, generally is believed to develop from a drive of biologic-behavioural origin deeply integrated into the condition of human existence.

Masters & Johnson, 1966

Given the explosive rate at which the fields of molecular genetics and neurobiology are expanding, it is inevitable that the perception of our own natures, in the field of sex as in all attributes of our physical and mental lives, will increasingly be dominated by concepts derived from the biological sciences.

LeVay, 1993

The exact role of female sexual motivation in modulating female sexual behaviour is unclear. The resolution lies in understanding the role gonadal hormones play in regulating the female's ability to mate and her interest in mating.

Wallen, 1995

These biological theories fall into three major camps: evolution-based theorists, who focus on the "selfish gene" and the instinct to reproduce; endocrinologists, who measure "sex hormones"; and clinically oriented researchers, such as Masters and Johnson, who focus on the actual workings of the physical body—on the mechanisms of sexual response. And whilst many scientists who advocate biological theories of sexual behaviour do present us with a sophisticated analysis which acknowledges the importance of social or cultural factors (even if these are often seen as secondary influences), in many instances these are narrow biological theories which implicitly posit the script of phallocentric heterosexuality as "natural" because it is biologically driven and seen as "sex" as simply a physiological response.

Take, for example, the comments of the psychologist Glenn Wilson, who has justified male promiscuity and men's attraction to large-breasted, small-waisted women on the basis of "parental investment theory," which means that the goal of the male is to "impress" many females simultaneously, hence his interest in multiple mates of breeding age.101 We are informed that men are programmed to seek "physically attractive women," those with "proportionately large breasts and hips... and [a] narrow waist," which gives a clear indication to men that the woman is "fertile ground in which to plant their seed."101

On the same lines, we are told by the anthropologist Donald Symons that "nubility cues" are what are attractive to men: youth, light skin colour and high "waist to hip ratio" (the hourglass figure—Marilyn Monroe would be the ideal). He argues that evolutionary theory provides the most plausible explanation for the type of woman represented in pornography—young, with large breasts and bright eyes—as men are biologically programmed to find this image erotic.

When women wear cosmetics, fashionable clothing or engage in diets, exercise or cosmetic surgery, they are actually attempting to "manipulate age and parity cues in order to enhance their sexual attractiveness."102 This argument may be used to justify as "instinctual" the constraining rituals of the feminine masquerade, the "beauty" rituals women's magazines sell as "pleasure." Yet how evolutionary theory explains the changing fashions in what is deemed sexually attractive, or differences across cultures, is not clear. The flappers of the twenties, the skinny models of the sixties and many of the "supermodels" of the nineties, had as waists to hip ratios. Are these icons of female beauty not attractive to men? And why are disinterested ear lobes, facial scarring, elongated necks or distorted lotus feet attractive in other cultural contexts? Would evolutionary theorists suggest that African or Chinese populations have evolved differently? Surely the reproductive imperative is the same everywhere?

Women, on the other hand, are primarily interested in protecting their offspring, "and hence the coyness of the female and their need to build relationships"103—of so we are told. Women are primarily "seeking evidence that a man is superior breeding material which means physical strength and skills relevant to defence and provision and willingness to share the burden of child-rearing."101 Given the evidence that women still take on the burden of child-rearing even in "egalitarian" couples,102 they are obviously going wrong somewhere. Ironically, it is those men who are least like the stereotypical caveman painted in the sociobiologists' theories who are most likely to take an equal role in the home—the almost mythical new man, whose main goal in life is not muscle growth and macho power.

Traditionally, evolutionary theory positioned women as being relatively passive in this process, their primary function being to attract men and to "accommodate male sexual initiation." In recent years, it has been widely acknowledged that "females" do actively initiate sexual activity, leading one proponent of evolutionary theories of sex, Kim Wallen, to comment, "the notion of the sexually passive female is, one hopes, dead, as convincing evidence of female sexual initiation has now been reported in a range of mammalian species."103 Indeed, as it has been suggested that females are more active that males in "mate choice," feminist evolutionary theorists, such as Dorothy Eimon, have claimed that this is a model of sexuality which can be seen to be empowering for women.104 Yet if we look at how these theories have passed into lay discourse, we find that it is the very (and phallocentric) view that is dominant. Biological theories of sexuality have, undoubtedly, had a striking influence on lay beliefs about what it is to be "women" and "man." They certainly formed the dominant views of male-female sexuality entertained by many of the men I interviewed. The belief that men are biologically driven to do sex (whereas women are not) was seen as "true," as one man commented:

"I think men have a great sex drive... this is probably going to sound awful, but I don't think women actually need sex as much as men do. Because obviously men have got that biological thing, a greater sex drive... you can see it in the animal kingdom... I don't think women need to feel that satisfied or they don't have that kind of tension, perhaps."

A corollary to this view is that whilst women might enjoy sex and that women and men both have a right to express sexuality, their drive can never match that of men:

"I don't think it's wrong for a woman to be sexually active or take a dominant position when making love or whatever. But I don't think the need is as great. Women can enjoy sex, and when they enjoy it it's beautiful. They need to do it, but it's not so great as men's kind of anxiety."

Others have long believed that women had no sexual desire:

"One of the things I grew up with was finding it hard to believe that a woman in any circumstances could have any sexual desire, that was possibly the way my circle of friends worked, it was the men, the boys, constantly along the playing, the sexual role, whereas the girls were the ones who played the role of the object of their desire."

Men also argued that women were more selective than men, a fact related both to their passivity in sex and to their greater "emotional needs":

"Women are a bit more selective... there is an emotional need for women to become emotionally attached to somebody before they have sex... but it's not totally necessary for men."

"Men tend to be more overt in physical things—men are probably thinking of sex more than women... whereas women are in the receiving position and they tend to be a bit more removed and be a bit more considered and tend to assess the personality of the person."

Whilst many of the men I interviewed did acknowledge women's desire and arousal, echoing Ellis and Acker, it was always assumed to be less than men's. It was a woman's desire was greater than theirs, she was often positioned as having a problem:

"My long-term girlfriend wanted sex more than me. She needed sex, to fill some need in her. I'd put it down to insecurity. It may very well not be. Anyway, very often it became a confrontational area. So I'd have sex whenever just for an easy life."
These men positioned the differences they perceived in male–female sexual behaviour as simply a biological issue; these were all "natural" differences that we couldn't do anything about. This sociobiological view may give pseudo-scientific credence to men taking a controlling role in sex, and, at the same time, it refines the beauty myth and positions male promiscuity as "natural." So Glen Wilson, again, waxes lyrical on the biological basis for the "tendency for males to be sexually recharged by novel females," which he tells us has been observed in most mammals:

"(This) is another manifestation of their reproductive optimum: "promiscuity strategy." This presents a problem, for men especially, over the course of a long marriage and is responsible for a great deal of adultery. Progressive "contests due to familiarity" (at least as far as sexual excitement is concerned) is an almost inevitable outcome of sexually exclusive marriage. It is not unusual for sex therapists to see men who are unable to achieve erection with their wives but perfectly capable of stud-like prowess with their new secretary. Once again, what is observed is not a disease but a normal biological phenomenon, and realistic solutions must be sought (my italics).

This distinction between "disease" and "normal biological phenomenon" is interesting, given the tendency of many sex researchers to position sexual dysfunction and "disease" as biological. Wilson is presumably referring to the statistical frequency of such behaviour, suggesting that men would all like to have sex with their secretaries, given half a chance, and therefore that it is a "normal biological phenomenon." The advice that "realistic solutions must be sought" for men's inability to maintain an erect penis in the presence of his wife, yet to be able to do it every time with his "new secretary" is tantalizing. Should secretaries have written into their job descriptions—resuscitation of the flagging apparatus of the boss?

Those who examine the mechanics of sex itself frequently advocate similarly reductionist views. For example, Simon Le Vay has described sexual intercourse as such a simple behaviour that "one hardly needs a brain to do it." His description of the "basic components" of "coitus," as he coyly calls it, say it all. It could be a recipe book for sex as conceived by the (phallocentric) scientist. Here it is, step by step:

1. Erection of the penis;
2. Insertion of the penis into the vagina and the labia minora;
3. Lubrication of the vagina by glandular secretions and transudation, and erection of the clitoris;
4. Insertion of the penis into the vagina;
5. Elevation of the uterus, with a consequent forward and upward rotation of the mouth of the cervix;
6. Ejaculation of semen into the vagina; and
7. Orgasm, the intensely pleasurable sense of climax and release, often accompanied by increased heart rate, flushing of the skin, muscle spasms, and involuntary vocalizations.

A typical heterosexual encounter? How easy it sounds (or how boring, depending on one's own sexual proclivities). Le Vay may be seen to be egalitarian—at least he recognizes female response. But within this definition he reinforces the notion of "coitus" as penis-focused, with erection of the penis always coming first; as well as implicitly negating any other form of sexual stimulation, or desire, which may be a necessary component of "sex" (ironic, given that he is gay himself—yet as we have already seen, he advocates a biological root to homosexuality as well).

Desire is acknowledged in one of the formative scientific models of sex: Masters and Johnson's Human Sex Response Cycle Model. It has been highly influential in shaping our understanding of both "normal" sexuality and sexual problems and forms the basis for the categorization of "sexual disorders" in the DSM. The four stages of the cycle are described within the psychiatric manual as (1) "appetitive" or fantasizing about sexual activities and a desire for sex; (2) excitement (a subjective sense of sexual pleasure accompanied by physical changes); (3) orgasm (peak and release of physical tension); and (4) resolution (general relaxation, well-being). Seeing sex as a closed energy system, a cycle that repeats itself, again and again, Masters and Johnson provided a model of "normal sex" by which generations of couples would come to judge themselves (through the "sex guides" and sex manuals influenced by Masters and Johnson's approach). Given the appropriate stimulation, the body was expected to respond, the man with erection and ejaculation, the woman with vaginal engorgement and orgasm. We might see this as an advance on the theories of many of their predecessors' positioning of "women" as inevitably sexually passive. We may even go so far as to claim it is emancipatory for women, according their sexuality the same status as that of men. But this would be premature.

Masters and Johnson reached the majority of these conclusions about female sexuality from controlled experimentation that took place in a laboratory. Due to the difficulties in persuading women to take part in research in the fifties, Masters and Johnson used female prostitutes in many of their pioneering studies. The techniques learned from these women were central components of their "clinical research programs" carried out on "normal" couples. In order to test their hypotheses about the human sexual response cycle, "vaginal pulse amplitude," women's orgasmic responses and the female arousal cycle were observed in a neutral, detached manner in the laboratory. This is a model of research which continues to "dominate in sexology to this day."

Take these recent experimental studies on female sexuality: in one, the response of women reading neutral or sexually arousing passages whilst wearing masks impregnated with androstenol or a placebo were measured; in another, the responses of pre- and postmenopausal women viewing a neutral or erotic film whilst sexual arousal and vaginal pulse amplitude and lubrication were being recorded were examined, with oxytocin, estrogen and humanizing hormone also being collected. In others, vaginal phalpethymography was performed; and vaginal erotic sensitivity was measured in "coitally experienced" women, by means of systematic digital stimulation of both vaginal walls.

In these experiments female sexuality is reduced to the status of abstract experimental variable—the woman herself invisible behind the attention given to carefully selected aspects of her body, which are dissected and discussed. The vibration of her vaginal walls is of interest; her subjective experience of being "woman" or the social construction of sexuality is ignored. Whether these intrusive experiments are meaningful or justifiable may be questionable, but the fact that this genre of research forms the bulk of scientific research on female sexuality is evidence of the denial of subjectivity at the expense of exact experimentation in mainstream sexology. Take this introductory paragraph in an academic paper on female sexual response, entitled "Infrared Vaginal Photoplethysmography: Construction, Calibration, and Sources of Artifact":

During the past five years, several basic and clinical researchers have conducted physiological assessments of female sexual arousal using novel instrumentation approaches (reviewed by Rohe, 1979). One of the most promising approaches is based on the principle of reflected light from the vaginal capillaries. Several studies have shown vaginal photoplethysmography measures to be sensitive and valid analogues of sexual arousal... However, there is still controversy concerning sensitivity of the AC versus DC coupled signal... and it is still not yet known precisely which vaginal haemodynamic processes are represented by these signals.

That these researchers are interested in the sexuality of women is impossible to gauge from this text. Indeed, it is the vagina that they are interested in, or "sexual arousal," rather than the woman herself.

To understand why this is not an unusual depiction of the sexuality of "woman," we have to look to sex research as a discipline. Sex researchers are preoccupied with the legitimacy of their field—preoccupied with notions of second-class citizenship and with the stigma of working in a "linggry" research area. One prominent sex researcher has commented that "sexological research is stigmatized as slightly unsavoury and verging on pornographic..." Another has claimed that the risks include "rejection by peers... vilification... threats... and FBI listings." As feminist sex researcher Leonore Tiefer has commented, it's not surprising that sexologists have doggedly stuck to the most traditional "hard" methodologies of positivist science, whilst rejecting all that is political or ideological for fear that it add even more of a taint to their serious endeavours. So sex researchers attempt to achieve legitimacy through adopting the methods of "rigour" and "objectivity" and focusing on what can be observed—the physical body. They distinguish themselves from what have been described as "sexohistrians," those who are "not impartial but value-laden, ideological and judgemental," these interested merely in the "philosophy of sex." So sex-research conferences are
Female sexuality was positioned as vaginal response, in contrast to male sexuality, which was framed in terms of performance. Sexual “problems” were thus manifested differently in women and men—a legacy which continues to this day.

The DSM categorizations of female sexual dysfunction illustrate this most clearly. The two most common disorders are anorgasmia and disorders of arousal—both positioned as disorders of heterosexual response. The estimates of prevalence of anorgasmia in the general population range from 29 per cent to 4 per cent, as most women don’t report such problems (or even categorize them as such) it is impossible to know the exact numbers. The way in which these disorders are classified by the DSM is outlined below:

**Diagnostic Criteria 302.72: Female Sexual Arousal Disorder**

A. Either (1) or (2)

1. Persistent or recurrent partial or complete failure to maintain the lubrication-swelling response of sexual excitement until completion of sexual activity.
2. Persistent or recurrent lack of a subjective sense of sexual excitement and pleasure in a female during sexual activity.

B. Occurrence not exclusively during the course of another Axis I disorder (other than a Sexual Dysfunction), such as Major Depression.

**Diagnostic Criteria 302.73: Inhibited Female Orgasm**

Persistent or recurrent delay in, or absence of, orgasm in a female following a normal sexual excitement phase during the sexual activity that the clinician judges to be adequate in focus, intensity and duration. Some females are able to experience orgasm during non-coital clitoral stimulation, but are unable to experience it during coitus in the absence of manual clitoral stimulation. In most of these females this represents a normal variation of the female sexual response and does not justify the diagnosis of Inhibited Female Orgasm. However, in some of these females, this does represent a psychological inhibition that justifies the diagnosis. This difficult judgement is assisted by a thorough sexual evaluation, which may even require a trial of treatment.

So whilst the nineteenth-century woman who showed too much sexual drive was at risk of being defined as deviant or dysfunctional (as a “nymphomaniac”), in the late twentieth century it is women who are unable to experience desire or orgasm who are at risk of being categorized as “ill.” But today this categorization is as dubious as the view that the nineteenth-century woman was “naturally” sexual. Both are value-laden judgements, reflecting our changing social definitions of what “normal” sex is (and normal sexual roles for “woman” and “man”).

Take the case of inhibited female orgasm, diagnosed if a woman cannot achieve orgasm through intercourse, but not if she cannot achieve orgasm through masturbation. This clearly defines orgasm during vaginal penetration as the normal experience for women. A woman’s ability (or willingness) to give herself autonomous pleasure is not deemed an issue for clinicians, unless she is being taught to masturbate as part of a programme of therapy. If the clinician judges the sexual activity to be “adequate in focus, intensity and duration,” then the woman should reach orgasm—although how the clinician will glean this information without observing the sexual act is not obvious. If the sexual activity is “adequate,” and the woman doesn’t reach orgasm we are ominously informed that she will be subjected to “a thorough sexual evaluation, which may even require a trial of treatment.” This implies that her body will be examined—not her feelings about sex, about men, or about the pressure to respond to vaginal penetration. Perhaps it is the fear of being classified as sexually dysfunctional which results in the high numbers of women who report faking orgasm during heterossexual intercourse (as well as their desire to protect the egos of men). The DSM recognition that many women cannot experience orgasm during intercourse “without clitoral stimulation” is interesting. A number of surveys have reported that a high percentage of women rarely or never achieve “unassisted” orgasm during intercourse—up to 80 per cent in one study. It is a relief to know that the DSM doesn’t deem this deviation or pathological but merely part of the “normal variation of the female sexual response.” And if the findings of the earliest sexual surveyor, Alfred Kinsey, are in any way correct, women’s need for extra stimulation isn’t surprising: he reported that 75 per cent of men ejaculate (and therefore terminate intercourse) after only two minutes of penetration. Most women require more than two minutes of vaginal penetration to achieve a vaginal orgasm (if penetration is the only form of stimulation they are getting). Yet two minutes are seen to be enough to please by many experts. The sex researcher, Martin Cole, comments:

*Naturally, more responsibility falls upon the male than upon the female in relationship formation... moreover, to add to his problems, the male needs to get an erection at least a minute or two before ejaculation in order to, as he sees it, ‘have sex’ and ‘please his partner’, (my italics).*

This shouldn’t surprise us. Within the phallocentric view of sex perpetuated by sexologists it is naturally man’s climax, his arousal and orgasm which act as punctuating marks of the sexual encounter. The woman merely follows him (by necessity very quickly). Echoing liberal feminist theories of sexuality, Masters and Johnson claimed that, “In a comparison of male and female sexual function, it should be emphasized that in sexual response it is the similarities of, not differences between, the sexes that therapists find remarkable.”

Hailed by some as the instigators of the sexual revolution, Masters and Johnson were seen as emancipatory because of their recognition of the importance of clitoral stimulation and the existence of the clitoral orgasm (prior to this it was only the vaginal orgasm that was acknowledged as “normal”). Yet they still considered female sexuality within the confines of heterosexual marriage, where the woman was expected to experience sexual pleasure and orgasm during heterossexual intercourse and to be aroused by the man (or by anticipation of penetration of penis).

In essence, the vaginal barrel responds to effective stimulation by involuntary preparation for penile penetration. Just as penile erection is a direct physiologic expression of a psychologic demand to mount, so expansion and lubrication of the vaginal barrel provides direct physiologic indication of the obvious psychologic mounting invitation.

Masters & Johnson, 1966

In an era when women are expected to enjoy sex and to be “pleasured” by men the biological difference in men and women’s sexual responses is inherently problematic. It can result in frustration and sexual dissatisfaction for both parties if one cannot control his ejaculation (particularly if “foreplay” is not brought into the sexual repertoire). Even if a man can control his own sexual responses, this is invariably at the cost of splitting off his own pleasure and desire for the sexual act he is engaging in. According to Anthony Crabbé:

A man learns, or is taught, that, in order to avoid being a selfish lover, he must often distance himself from the sex act. His biological capacity to be satisfied more quickly is a liability for which he must compensate by concentrating on his performance. Sex manuals make this clear.

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*invariably closed affairs, which only "legitimate scientists" or those specially invited can attend. They are, however, the signs of the beginning of change. Subjective experiences of sexuality, and the views of individual women and men are becoming more legitimate topics for sex research. Yet the legacy of the very reductionist viewpoint lives on, with the focus of sex therapy being primarily on bodily response.*
A similar argument could be made about "inhibited sexual desire," a disorder which can be experienced by men, but is much more commonly reported in women. 16 It is manifested by "persistence or recurrently deficient or absent sexual fantasies and desire for sexual functioning." This could imply that a woman who does not desire her partner (or any man) is somehow ill (a critique which would equally apply to men who don't desire women). This unambiguously refers to a pathology within the woman rather than looking to her partner or the relationship for reasons for her disinterest, or looking more critically at this narrow definition of "sex," which many women find limiting, boring and inappropriate for their own sexual needs. As these women I interviewed told me:

"I'm certainly not interested in an overdose of pumping penetration, you know it just seems to me that it is possibly one of the ways in which the whole world has been pumped off its axis, if you know what I mean. It's just not necessary at all, this, like, emphasis on performance, it's just such a waste of time."

"Men who are skilled lovers can have any women they want because they're so rare. The thing that depresses me about sex is how grateful we are as women for even being interested."

"It's really not that hard. Men who are skilled lovers can have any women they want because they're so rare."

"As "sex" is synonymous with heterosexual intercourse, it is perhaps not surprising that those disorders which impede this activity—vaginismus and dyspareunia—have received the greatest amount of attention from sexologists and clinicians. Vaginismus is the term used to describe "recurrent or persistent involuntary spasm of the musculature of the outer third of the vagina that interferes with coitus." This prevents "sex" (defined as intercourse) from happening or, if the man perseveres, can result in extreme pain for the woman. Dyspareunia is the diagnosis given to pain experienced by the woman (or man) during intercourse, and may include vaginal pain or other general symptoms such as nausea. Whilst positioned as physical problems, both have a clear psychological component and have often been described as "sexual phobia." The symptoms include anxiety, profuse sweating, nausea, vomiting, diarrhea or palpitations."

"As "sex" is synonymous with heterosexual intercourse, it is perhaps not surprising that those disorders which impede this activity—vaginismus and dyspareunia—are defined with varying degrees of intensity. They range from a dyspareunia of mild discomfort, through serious and indeed intolerable pain, to vaginismus, where the reflex constriction of the peri-vaginal muscles effectively prevents penetration by the penis. In more serious cases, any attempt to touch or approach the vagina leads to powerful reflex adduction of the thighs, thus precluding even the possibility of attempted penetration."

That penetration could be attempted in such circumstances seems startling. Yet it is obviously not uncommon given the comments above—and appears implicitly to be condoned by the researcher. The language here is telling. That this is a description of a woman (who cannot or does not want to) have sexual intercourse could easily be overlooked in the discussion of peri-vaginal muscles and reflexes of the thighs. It is the parts of her body which are of interest, not her subjective experience.

Many of the aetiological theories put forward to explain women's sexual problems reinforce the very definition of sex as a bodily phenomenon. Illnesses such as epilepsy, cancer, heart disease, diabetes, cystitis, pelvic pain, spinal-cord lesions or arthritis are seen to be major causes of sexual problems, or they are seen to be associated with the woman's reproductive life cycle (which by implication is pathologized or positioned as a narrow hormonal event), with menstruation, pregnancy and childbirth, or with the menopause. Social or psychological theories have been suggested—cognitions, sexual abuse, personality, anxiety or depression being seen as possible causes of women's sexual problems— and there is a move towards multifactorial models in sex research and therapy, in which social, psychological and biological factors are seen to interact to produce the problems under investigation. John Bancroft's "psychosomatic model of sex" is one of the most well known. This move is to be commended. But the majority of researchers and clinicians ignore the social construction of sexuality and the way in which both "sex" and "sexual problem" are defined; it is extremely rare (and the implications this has for "sex") to be raised or any questioning of the "normality" of heterosexual intercourse.

Phallic Performance as "Normal Sex"

So despite the claims of sexologists to be neutral and objective observers of human sexuality, we can see in their categorization of sexual dysfunction a strong adherence to a narrow, ideologically motivated model of "normal" sex. In descriptions of female sexual problems it is assumed that the woman's partner is a man and the focus of attention is heterosexual intercourse. Monogamous marriage is advocated as necessary for sexual health; in her critique of popular sex manuals Meryl Altman has described Masters and Johnson's The Pleasure Bond as "a marriage manual in the most unisonic sense," for whilst it explores alternatives to heterosexual marriage it concludes with proof that they are "unworkable and damaging." In the sexologists' version of the fairy tale, "the dream-team" couple Masters and Johnson take up the difficulties of the sexually
dysfunctioning man and woman in order to reunie and “cure” them. As they walk into the proverbial sunset, they are “fully functioning” sexually. And this isn’t just the woman—within a phallic-centric model of heterosexuality, the pressure is on the man. As one sex researcher commented:

Few sexual problems are as devastating to a man as his inability to achieve or maintain an erection long enough for sexual intercourse. For many men the idea of not being able to ‘get it up’ is a face worse than death.³⁰

Where “sex” is reduced to the biological workings of the body and focused on the actions of (or response to) the penis, it isn’t surprising to find that male sexual problems are signified by a dysfunctional penis. For with the exception of “disorders of desire,” where the problem is manifested by absence of interest or aversion to sex, the workings (or not) of the penis are the issue at stake. So the DSM classifies male sexual problems as categories of male erectile disorder, inhibited male orgasm and premature ejaculation. As the ability to “do” sex is so central to what it means to be “man” it’s not surprising that men feel anxious or afraid when they can’t “get it up” (and to), they have “failed” as real men. The DSM classification system appears to reinforce this, very notion. For example, one of the criteria for male erectile disorder (diagnostic category 302.72) is the “failure in a male to attain or maintain an erection until completion of the sexual activity” (my italics).³¹ Premature ejaculation (category 302.73 in the DSM) is also an emotive subject. Its clinical description is “persistent or recurrent ejaculation with minimal sexual stimulation before, upon, or shortly after penetration and before the person wishes it” (my italics).³² As we have already seen, the pressure to perform sexually and to live up to the myth of the phallic hero is a major cause of anxiety for men. In defining the boundaries of “normal” performance the DSM doesn’t necessarily allay fears. For how do we define “shortly” after penetration, in the description above? If a man wishes to keep an erect penis for two hours and can only manage it for one is his ejaculation “premature”? What if his partner wants him to go on for longer—can she count as “the person”?

Yet it is the inhibited male orgasm (category 302.74) that most clearly reveals the heterosexual bias and the pressure for men to “do” sex in the classification of dysfunctional sex. It is described as:

Persistent or recurrent delay in, or absence of, orgasm in a male following a normal sexual excitement phase that the clinician, taking into account the person’s age, judges to be adequate in focus, intensity and duration. This failure to reach orgasm is usually restricted to an inability to reach orgasm in the vagina, with orgasm possible with other types of stimulation, such as masturbation.³³

The classification acknowledges the (little discussed) fact that with increasing age male potency diminishes markedly. So orgasmic problems in an older man are a normal part of aging rather than being “dysfunctional.” It is younger men who must be able to maintain an erection, enjoy it at the same time and then reach a climax of pleasure. If they can only do this with another man or with their hand they are at risk of being classified as ill, because the vagina is deemed to be the appropriate place for male orgasm to occur (regardless of what hardcore porn suggests).

Given this focus on the penis as central to “sex,” it’s not surprising to find that physical interventions, such as penile implants, are one of the most common treatments for erectile problems in both Britain and the United States.³⁴ These devices consist of a plastic or silicone rod surgically implanted in the penis, with an inflatable bulb so that the now permanently erect organ can be “stored” against the body device³⁵ (up or down, whichever your preference), or an “inflatable prosthesis,” a device which can produce an erect penis on demand by use of a squeeze-bulb device, which fills inflatable silicone cylinders in the erectile tissue of the penis, with saline.³⁶ The ultimate phallic fantasy—the ever-ready penis. It’s reminiscent of the strap-on dillo we see in lesbian porn, yet here minor surgery is part of the price to be paid. Thousands of men undergo such surgery each year.³⁷

Male impotence or erectile problems are a serious matter, particularly in a culture where the penis, and successful achievement of sexual intercourse, is how “sex” is defined. But it is a sorry indictment of medicine that the means of addressing such a difficulty is increasingly seen to lie with prosthetic aids. Can sex really be reduced to the successful achievement of a comatent penis? It does not take much cynicism to ask whose view of sex this is—particularly when very few of the outcome studies examining the effectiveness of these penile implants even think to ask the man’s female partner if she is satisfied with the device.³⁸ The woman is implicitly positioned as passive object, penetration of her waiting body the assumed aim of the sexual game. The irony is that if this really were the aim, the man could do worse than use other parts of his body—his fingers perhaps—and provide satisfaction for the woman who enjoys penetration, as many lesbians (as well as teenagers engaging only in “foreplay”) have long known.

It doesn’t take too much of a leap of the imagination to ascertain why sex therapists don’t advocate such courses of action for men—it could make the penis redundant. Echoing the comments of the legislators who would eschew any mention of lesbianism for fear that women would catch on to the notion and take up the infamous practice, sex experts have advised men not to penetrate the woman’s vagina with anything but the fingers. Certainly not with the fingers.

As one sex manual explains:

Many men who realize the need of preliminary play tend to overdo it. This is not advisable from the medical viewpoint, particularly when the fingers are inserted deep into the vagina, for it may cause infection. The use of fingers should be limited to the entrance of the vagina. Fingering the cervix or the vaginal wall should be avoided for another reason: the woman may develop deeper satisfaction from these caresses than from vaginal intercourse itself [my emphasis].³⁹

Does this mean that there is nothing essential about the male that provides sexual satisfaction for the female? Could fingers be more stimulating? Masters and Johnson reassure us that the majority of women don’t think so, and that this deeper pleasure can only be obtained by the woman pretending that the penetrating fingers are a penis.

There is usually little value returned from deep vaginal insertion of the fingers, particularly early in the stimulative process. While some women have reported a mental translation of the ensuing intra vaginal sensation to that of penis penetration, few had any preference for the opportunity.⁴⁰

A high percentage of the women I interviewed reported intense enjoyment during digital penetration of the vagina. The main complaint, from heterosexual women at least, is that few men could do it well. That they saw it as “foreplay,” with penis thrusting being the main focus of sex. Lesbians tell a different tale, as we have already seen, their sexual repertoire is not limited by emphasis on one part of the body which always has to “work” for “sex” to occur. Sex therapists and sex researchers could learn much about the sexuality of women if they widened the scientific gaze to examine lesbian sex. It is rare for them even to acknowledge that it exists (outside of theories of pathology). This means that many aspects of women’s sexuality are marginalized or ignored in mainstream sex research—such as female ejaculation, or the changes in sexual response and desire across the menstrual cycle—which are as important for heterosexual women as they are for lesbians. It appears to be the case that if an aspect of female sexuality is not immediately noticeable or constituted as an issue within a phallocentric model of sex, it is simply left out of the frame.⁴¹

FEMALE SEXUALITY AND MADNESS: THE DANGERS OF THE REPRODUCTIVE BODY

Science and medicine have not stopped at sexual problems as a means of containing both “woman” and sex. One of the most insidious means of denigrating both female sexuality and what it is to be “woman” has been the centuries-old association between sexuality and madness, now seen as a hormonal connection within the mainstream endocrinological analysis of sex. Traditionally this connection between biological liability and ill health was represented by theories associated with hysteria and anorgasmia. Today, the reproductive syndromes of premenstrual syndrome (PMS), postmenopausal depression (PND) and the menopausal syndrome have taken on the same connotations: the association of women’s madness with the wandering womb.⁴²

The association of female reproduction with insanity assumed scientific legitimacy in the nineteenth
century and formed the basis for the present position of the reproductive body as a source of illness and vulnerability. As two medical experts claimed:

The monthly activity of the ovaries...has a notable effect upon the mind and body, wherefore it may become an important cause of mental and physical derangement...It is a matter of common experience in asylums, that exacerbations of insanity often take place at menstrual periods.

Maudsley, 1879

Every body of the least experience must be sensible of the influence of menstruation on the operations of the mind. In truth, it is the moral and physical barometer of the female constitution.

George Man Burnes, 1828

The very fact of reproduction was seen to be an insufferable burden, from puberty to menopause. Thus, as one learned doctor declared "mental derangement frequently occurs in young females from amenorrhoea" and treatment in the form of "an occasional warm bath, or leeches to the pubis" was advocated in order to "accomplish all we desire."16

It was the medical categorization of hysteria that justified the ancient superstition about the "wandering womb" as illness. From the time of the Ancient Greeks it had been believed that the womb travelled throughout the body, leaving illness and madness in its wake. In the nineteenth century hysteria, designated recently as "the joker in the neurological pack,"17 became the source of attribution for a myriad ailments and symptoms supposedly associated with "woman." As Sydenham commented in 1848:

The frequency of hysteria is no less remarkable than the multiformity of shapes which it puts on. Few of the maladies of miserable mortality are not imitated by it. Wherever part of the body it attacks, it will create the proper symptom of that part. Hence, without skill and sagacity, the physician will be deceived; so as to refer the symptoms to some essential disease of the part in question, and not to the effects of hysteria.18

Women's sexuality was firmly connected with both the curse and cure of hysteria and a woman's reclusion (or inability) to bear children was perceived by many authorities, continuing a view first put forward by Plato, to be at the root of this pathology:

The womb is an animal which longs to generate children. When it remains barren too long after puberty, it is distressed and sorely disturbed, and straying about in the body and cutting off the passages of the breath, it impedes respiration and brings the sufferer into extreme anguish and provokes all manner of diseases beside.19

It was believed that "this disturbance continues until the womb is appeased by passion & love,"20 and so the "cure" was clear—heterosexual sex, motherhood and marriage, the message of romantic fiction traced back to Plato. Yet it was not only madness but also moral turpitude that was seen to be associated with female reproduction. As Maddock wrote in 1854, "the reproductive organs...are closely interwoven with erratic and disordered intellectual, as well as moral, manifestations."21 The sexologists took this long historical connection between boudness and the womb and reworked it into a clinical categorization of sexual deviance or perversion. Today, female reproduction and madness are linked irrevocably through the reproductive syndromes—PMS (named late luteal phase disorder in the DSM), PND and the "menopausal syndrome"—the heirs to hysteria and the fear of the wandering womb. The sophistication of the categorization may appear to have increased yet, arguably, the process is the same. Women are at risk of being unstable and in need of treatment because of their reproductive bodies. The whole reproductive life cycle has been pathologized—from puberty to menopause—within the modern reproductive categories. Any symptom, any complaint, any ailment, any abnormality can be neatly fitted into the nosological categories which both describe and dismiss women's behaviour. As Elaine Showalter has argued in The Female Malady, hysteria worked wonders as a means of denying women's frustration and anger in the nineteenth century, as a means of categorizing together a cornucopia of complaints. This process is alive and well today.

Take PMS. According to recent studies, up to 40 per cent of women are said to suffer from PMS to such an extent that it seriously affects their lives. The medical profession has taken note. A range of different biochemical aetiological factors has been proposed, from oestrogen and progesterone to dopamine, pyridoxine or nonglandular imbalances.22 A similarly wide range of biochemical treatments has been proposed, with women taking oestrogen, progesterone, lithium, fluoxetine or dydrogesterone, as well as the vitamin B6 (currently most popular) to cure the many symptoms with which they flock to their doctors. However, as there have been suggestions of a placebo effect of 20–80 per cent, and many of the treatments produce marked side effects (which can be worse than the original symptoms), this is actually a very disquieting practice. As the "faulty hormone" at the root of PMS has not been identified, and the majority of researchers and clinicians are now acknowledging that there isn't one single "cause" of PMS, treating women as we "know" the biological cause of their problems merely perpetuates the clinical physical and mental classification of women's bodies. At a recent conference I attended on the subject of PMS, at which a whole range of theories and therapies had been suggested, a member of the audience asked the expert speaker, "Is there any guaranteed cure for PMS?" "Hypersexuality," came the answer—given with no sense of irony at all. This is using a hammer to crack a nut, analogous to conducting a lobotomy to cure depression. Most clinicians, thankfully, are more humane: offering counselling or a range of drug treatments to the women who come forward for help. But few of them question the legitimacy of "PMS" as a syndrome; few question the notion that it is reproduction which causes disturbance or distress. As I have argued elsewhere,23 there is considerable evidence to suggest that symptoms women experience in the premenstrual phase of the cycle—or after the birth of a child or during the menopause—are as much to do with social and psychological factors as they are to do with the body. The symptoms are also irrevocably linked to what it is to be "woman," with reproduction necessary for understanding women's distress and anger. As an article in The New York Times commented: "It is clear that PMS is a disease that exists to the extent that it seriously affects a woman's life."24

Equally, since the male obstetricians wereest control of childbirth from female midwives as early as the sixteenth century,25 childbirth has been construed as a technological accomplishment on the part of the expert—the woman herself is positioned almost as a passive participant. The (until recently) ubiquitous stirrups in which she was strapped helpless and splayed symbolizing her position as vessel to be relieved of its burden. The hospital setting maintained women's alienation, their sense of being sick, or stupid,26 and of pregnancy and childbirth as an illness. As Adrienne Rich commented:

We were, above all, in the hands of male medical technology...The experience of lying half-awake in a barred crib, in a labour room with other women meaning in a drugged condition, where no one comes except to do a pelvic examination or give an injection, is a classic experience of alienated childbirth. The loneliness, the sense of abandonment, of being imprisoned, powerless, and depersonalized is the chief collective memory of women who have given birth in American hospitals.27

Is this a coincidence? Or is the positioning of female reproduction as illness or liability not another reflection of the envy of women's power to reproduce?

SCIENCE EXPLAINS SEXUAL VIOLENCE

THE BIOLOGICAL BASIS OF RAPE AND SEXUAL ABUSE

Some sex offenders, in spite of their behaviour, may not be evil or bad people...the key to better understanding of sex-offending behaviour may be tied more to biology than to theories of evil or moral corruption.28

Given the fact that "sex" is positioned as a bodily phenomenon in much of sexology and scientific research, we shouldn't be surprised to find that sexual violence is studied similarly. The law acts to categorize and condemn sexual offences—science explains the offender's behaviour. The law inflicts punishment; science, through the professions of psychology and medicine offers treatment. Here he is not evil, but ill; he is not a monster, but mad or misunderstood. Or perhaps he is merely a man whose body is to blame, a man who is acting in the manner in which he is genetically primed, his hormones or bodily parts driving him out.
of control. For one of the most influential bodies of scientific research would appear to suggest that the man can’t help it—his biology is to blame.

One “fact” that has to be addressed and explained by science is that it is overwhelmingly men who execute sexually violent crimes. Women, regardless of circumstances, rarely behave in a sexually violent way. So scientists have looked for the reasons for this. Evolutionary theory has provided one of the most simple explanations: Men are simply “born that way.” Like sex itself, sexual violence has been seen as an evolutionary adaptation, which protects the male’s biological interests—his need to plant his fertile seed and serve the interests of his “selfish gene.”

For example, one evolutionary theorist, John Archer, claimed that “those who initiate violence do so typically where there is some means to the end of fitness to be gained.” Competition for women—or in this case access to her womb—is deemed “natural.” Archer continues, “Unmarried males of many species...challenge conspecific males who are guarding the fertile female (the limited resource for male fitness), and in such cases (for example, many hoofed animals) success in violent contests is highly predictable of mating success.”

Here we have an evolutionary explanation for men fighting each other for women, and unchallenged parallels being drawn between animal and human behaviour. All are explained simply as the natural urges of “unnamed males” who are desperately searching for a mate.

This notion has passed into lay consciousness as an explanation for sexual violence, where we see the stereotype of the lonely man who is driven to “seduce” forcibly (rape) a woman because of his deep bodily drive—a myth perpetuated by both the courts and the media. Yet as the majority of rapists and sexual attackers are in relationships with women, this explanation just doesn’t wash. It also fails to explain why a man would attack the woman he already “owns”—his girlfriend or wife. But evolutionary theory can explain that as well, for men enact violence in this way in order to “deter a wife from pursuing courses of action that are not in a man’s interest”—his biological interests, that is. Archer continues with what might appear to be an exonerating of wife-battering:

The use of violence against wives is ubiquitous. But the contexts in which husbands commonly assault wives are remarkably few: in response to a wife’s sexual inadvertence (or cues thereof), or a wife’s unilateral decision to terminate the relationship (or cues thereof), as well as to “discipline” a “too independent” wife, and in response to other factors (perhaps his own inadvertence or paranoia) that activate male sexual jealousy mechanism (my italics). Here, sexual jealousy (and by implication sexual violence) is framed as some intrinsic bodily “mechanism,” which has an adaptive purpose (for man).

We propose that the particular cues and circumstances which inspire men to use violence against their partners reflect a domain-specific masculine psychology which evolved in a social milieu in which attacks and threats of violence functioned to deter wives from pursuing alternative reproductive opportunities, which would have represented substantial threats to the husbands’ fitness by misdirecting parental investment and loss of mating opportunities to reproductive competitors.

A woman doesn’t need to exert violence to “keep” her man. She has got his seed or can seek another more “dominant” male if he strays in order to fertilize her waiting womb. The greatest threat to her from a fitness perspective, we are told, is rape (not the threat of death). Raped, she will lose the opportunity to choose who is likely to sire her offspring, thereby depriving her of the opportunity both to have her children sired by a man with desirable phenotypic qualities and to have her children benefit from the time, effort and resources of a father.

Does this suggest that we should merely advise women to take the contraceptive pill? Then rape will not deprive them of this “choice” of mate. This is fairly reminiscent of the comments of many assailants who believe that the woman cried rape only because they left her after the “sex”... of the myth that a woman will put up with anything as long as she gets her man (or in this case, his sperm). Rape, within evolutionary theory, has been positioned as “a very effective means of controlling the reluctant victim,” it is also given legitimacy by being positioned as an act which improves his “fitness potential.” Man is primed to have sex with and attempt to “fertilize” as many women as he can in order to maximize his chances of reproducing his genes. As Archer comments:

The fitness costs of any act of sexual intercourse have always been less for men than for women, which suggests that the evolved sexual psychology of men is likely to be less discriminating regarding choice of partner for a single sexual opportunity than that of women.

This reifies the notion of the promiscuous male, who will have sex at any available opportunity. Rape is simply an extension of this, a practice which has evolved.

Another design feature of male sexual psychology which is relevant to the occurrence of rape is the apparent disregard of women’s unwillingness as indicated by the use of coercion to achieve copulation. The ability of the male to remain sexually competent in such circumstances presumably reflects the past fitness benefits of pursuing and achieving copulation in the case of female resistance (my italics).

The fact he is “sexually competent” even though she is screaming in terror, or crying with pain, is deemed proof that rape is biologically primed, that it is a design feature of masculinity. How rape involves bottles, broom handles or fists is explained within this model. I do not know. Or rape of men or young children, who have no “reproductive potential” at all.

This version of evolutionary theory appears implicitly to condone sexual violence, elevating the assailant to the status of anti-hero: he is primitive man, or super-macho man, a warrior hero, merely following in the footsteps of his primitive ancestors. As Archer concludes, “The compete use of violent skills contributes quite directly to male fitness: both successful, warriors... and successful game hunters... have converted their success into sexual, marital and reproductive success.”

The myth of romantic fiction—every woman loves a dominant aggressive man—is also elevated to scientific “truth.” As two earlier sex researchers commented, “Normal aggressiveness in the male appeals to the female,” and “the normal woman likes to feel herself conquered. A masterly touch in her lover is invariably pleasing.”

Serial sex killers have used the hunter metaphor to serve their own ends. The American “co-ed killer” Edmund Kemper declared: “I was the hunter and they were the victims;” Ted Bundy, speaking of himself in the third person, says, “what really fascinated him was the hunt, the adventure of searching out his victims;” David Berkowitz wrote to the press with the boasts, “I love to hunt, prowling the streets looking for fair game—easy meat... I live for the hunt—my life. Blood for Papa.” Evolutionary theorists would presumably argue that these men are merely acting out all that is repressed in our politically correct age, the urges the “new man” has to deny...

UNDERSTANDING SEXUAL VIOLENCE: LOOKING AT WHAT IT IS TO BE “MAN”

Not all sexual scientists advocate a narrow reductionist view of rape. As a result of two decades of feminist critiques, there is increasing recognition that in understanding sexual violence, we have to look at what it is to be “man” and how this man is positioned in relation to “woman” within the script of heterosocial sex. This means that we have to look beyond the individual to the constructions of masculinity and femininity and to the relation of “man” to “woman” in a phallocentric sphere. We also have to look to the fears and fantasies associated with men as sexual other to men—fears associated with homosexuality in particular, as women are not the only targets of the anger, fear and sexualized violence of man.

Sexually violent men are not all perverses; they are not all mad. They share much with non-violent men—a fear of the feminine side of themselves; a fear of homosexual desire—a fear of the fears and fantasies associated with masculinity and femininity and to the relation of “man” to “woman” in a phallocentric sphere. We also have to look to the fears and fantasies associated with men as sexual other to men—fears associated with homosexuality in particular, as women are not the only targets of the anger, fear and sexualized violence of man.
can absolve himself of responsibility for giving pleasure to a woman, in which he can guarantee that he is in control. She cannot reject him here; she will not laugh at him—she is too afraid of death. Or she is a child, she is completely vulnerable and in his control; she has no previous experience of sex with which she can compare his performance. As one interviewee commented:

"For my own experience I wouldn’t feel satisfied if a woman wasn’t satisfied. I mean it’s almost like giving a performance and sort of saying if you don’t get applauded that’s the hell point of doing it. You don’t feel very good about it yourself.”

The man who rapes doesn’t have to wait for the applause (for fear that a woman will discuss his performance with her friends, another common fear). Equally she cannot say “no” and so he avoids the risk of rejection. As one man I interviewed said, “Women have the real power because they have what no man likes and that’s the ‘no’ response.” Given the current constructions of masculinity and femininity and the way they intersect with constructions of “sex,” perhaps we should be asking why more men don’t carry out sexual crimes.

Not all men rape. The majority, thankfully, deal with their fears and desires through other means. Yet in extreme cases, sexual murderers desecrate and destroy the objects of their desire and desire. Millions of women are raped and sexually assaulted every year. Indeed, it is many men. Despite what sexual science might suggest, these are not the acts of madmen or monsters. We should be looking at what it is to be “men,” not positioning those few who are caught as deviant perpetrators. We should be looking at the fantasies and fears about “woman” that underlie men’s misogyny and dread. We should be looking at the continuum of violence a woman’s lives and the connections between sexual harassment, rape and child sexual abuse. We should be looking to the fear and dread of homosexuality and the way in which that fear is sometimes projected towards and onto other men. We should be looking at how systems which implicitly condone such abuse, seeing it as trivial or as a product of the malicious imagination of those who are abused. We should be looking to the way in which sexual violence is used to keep women down—as it is women who are the main targets of such violence.

If "males" are positioned as having to be in control of sex and to have to "please" a woman, it isn’t surprising that he feels anxiety and dread. This adds to the dread and fear of woman which, arguably, goes back to early experiences with women, to the early fantasies and fears of the mother. Sexual violence is an arena in which man's notion of the penis as a weapon, seeing heterosexuality as analogous to rape and therefore as the worst violation of women. It is not the penis which is at fault, it is the fallopian man who wields it as weapon. It is man who positions the penis as phallic and it is man, in the extreme of any notion of the penis as weapon, the subordination to which they are able to be vulnerable and in his control; he has no previous experience of sex with which he can compare his performance.

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and in most therapeutic practice, as well as on popular culture, through his identification of the important role sexuality plays in the whole of our psychic lives. However, from the earliest inception of psychoanalytic theories and therapy, the world of real Science (with a capital S) has dismissed Freud almost totally as a prejudiced charlatan, as a man who bashed all his theories on his analysis of middle-class Viennese women, studied in a way that was simply "unscientific"—his theories cannot be objectively proven—or disproven—so have little weight in the scientific world. It is a line still fed to generations of psychology undergraduates today, who are taught to forget all their lay notions of sex for young women but the dangers of sex for young women but the dangers of sex for everyone.

See Jeffreys, 1985, for a discussion of this.


55. Ibid., p. 43.

56. Ibid., p. 99.


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167. Ibid.
169. Ibid., p. 583.
172. The glaring absence of research on subjects such as female ejaculation was made clear with the advent of AIDS, when it was noted that there was little research information on the process of female ejaculation, let alone on the risk of transmission of AIDS through this fluid.
183. Ibid.
190. Ibid., p. 265.
191. Research on sexual attackers has shown that one third are married and having a sexual relationship with their wives at the time of the attack, and the majority are in consenting relationships. Gordon, M. T. & Riger, S., *The Female Fear*, Urbana: University of Illinois Press, 1991.
193. Ibid., p. 269.
194. Ibid., p. 270.
195. Ibid., p. 270.
196. Ibid., p. 270.
197. Ibid., p. 274.