Introduction to the three weeks' course on sexual health: Sexology history in the XXth century

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Outline

Link between sexuality and criminology
Freud and psychoanalysis
Kinsey
Sexual medicine

1. Link between sexuality and criminology

To reach the concept of "sexual health", we had to go through different stages. The first one was at the beginning of the Century and linked sexuality to criminology. We talked about sexual pervert who had committed an offence (Magnus Hirschfeld and Havelock Ellis are the most representative authors). The study of sexuality was thus focused on delinquents.

2. Freud and psychoanalysis

- In 1905, Freud wrote an article on infantile sexuality. He stated that sexuality did not start during puberty, but, as the 'aggressiveness' was one of the infantile developmental motors.
- He was convinced that there are partial impulses within the child which, if they are fixed, remain as preferences in his adult sexuality. It showed particularly sadism, masochism, voyeurism and exhibitionism.

The child, who during his development, goes through these stages can eroticize and become a paraphilic adult (we use no more the word "pervert" given its moral value).

Psychoanalysis links sexual identity troubles not only to biological and social factors but also to educational factors present within the family. In sexology, some notions come from the psychoanalysis:

- sexuality is a body experience but is mostly related to mental representations
- conflict is not only external between the individual and the society but also between the different instances of individual psychology (Ego, Id and Superego).

3. Kinsey

 In the USA, Albert Kinsey introduced statistics on sexual behaviors.

He interviewed 5000 men and 5000 women and published 2 volumes in 1947 and 1952.

4. Sexual medicine

After the 2nd world war, medicine took again an interest in sexuality.

- the <u>dermatologists</u> who treated venereal diseases had also the role of sexual therapists
- the gynecologists who provided family planning listening to a lot of questions from their patients, realized that good sexual health was at the root of a good contraceptive behavior.

On the other hand, they saw that family planning and especially abortion led to sexual problems among certain persons or in the couple because sexual planning changed the power relationships between men and women.

The gynecologists loosed gradually their interest towards sexology, concentrating their practice on contraception and infertility because they had pharmacologic and surgical solutions to these problems. On the other hand, <u>urology and andrology</u> took up the place of gynecology because they had different techniques and useful medicines for impotent man.

It is necessary to say that impotence is much more serious from a social point of view than female anorgasmy given that the impotent man is prevented in his relational life and his social virility is attained. The biological research on sexuality began during the sixties with <u>William Masters and</u> <u>Virginia Johnson</u> in St Louis.

They studied the sexual reactions of men, women, pregnant women and older people in a laboratory setting. Their results showed one unique model of sexual functioning (the human sexual response cycle model).

They also perfected a behavioral couple therapy to modify these sexual demonstrations when they were not there or not adapted. Nowadays <u>biological</u> researches are done on brain with PET-scan (Serge Stoléru in Paris and Beverly Whipple in the USA).

In certain western countries, researches have been conducted by endocrinologists and neuropsychiatrists. The first centre of sexology was created in Prague 70 years ago (Prof. Jean Rabock) Sexual health has become part of the well-being medicine and WHO played an important role in this change.

When I was consultant for WHO 30 years ago, we developed a quality of life scale with the Mental Health Cluster (Prof. Sartorius). In this new philosophy, sexual health took its role and since 1974 WHO organizes symposiums on sexual health. On a diplomatic and preventive point of view, sexual health is a good front-door to speak to the politicians of your country (more than the sexual pathology) and also to speak to the persons who are in charge of health, since sexual health is a factor of prevention for family planning and unsafe abortion, teenagers' pregnancy, prevention of HIV/AIDS and other sexually transmitted diseases, to treat certain cases of infertility and to prevent sexual violence and perhaps certain cultural habits as genital mutilations.

I hope this course will help you to increase your capacities in the sexual health research field in your countries and in your clinical consultation.

Already in 1974, WHO had defined 3 levels of intervention for clinical consultation:

- Sexual information
- Counseling
- Sexual therapy

The End!