

*Recognizing the courage of relationships that exist beyond heteronormativity: What BDSM/Kink & consensual non-monogamy can teach about relationships that work.*

The Couples Conference  
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Joe Winn MSW, LICSW, CST-5  
114 Commonwealth Avenue  
Concord, MA, 01742  
(617) 461-8479  
E-mail: josephwinnlicsw@hotmail.com

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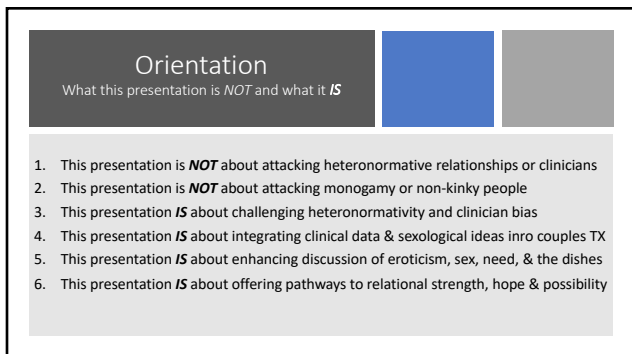
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**Orientation**  
What this presentation is *NOT* and what it *IS*

1. This presentation is **NOT** about attacking heteronormative relationships or clinicians
2. This presentation is **NOT** about attacking monogamy or non-kinky people
3. This presentation **IS** about challenging heteronormativity and clinician bias
4. This presentation **IS** about integrating clinical data & sexual ideas into couples TX
5. This presentation **IS** about enhancing discussion of eroticism, sex, need, & the dishes
6. This presentation **IS** about offering pathways to relational strength, hope & possibility

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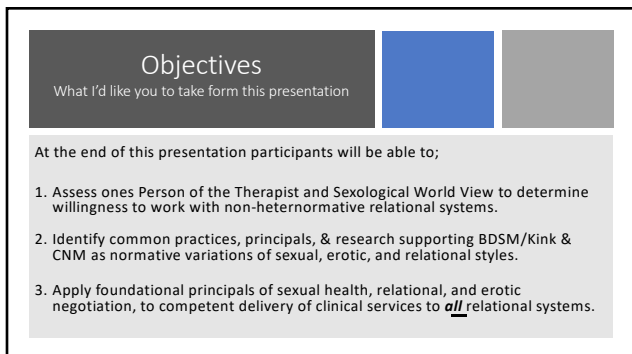
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**Objectives**  
What I'd like you to take from this presentation

At the end of this presentation participants will be able to;

1. Assess one's Person of the Therapist and Sexual World View to determine willingness to work with non-heteronormative relational systems.
2. Identify common practices, principals, & research supporting BDSM/Kink & CNM as normative variations of sexual, erotic, and relational styles.
3. Apply foundational principals of sexual health, relational, and erotic negotiation, to competent delivery of clinical services to **all** relational systems.

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## Centering Practice

Person of the therapist & Sexological world view

Person of The Therapist	Sexological world view
<ul style="list-style-type: none"> <li>• Maximizes the knowledge of self, via Key Signature Issues, that humanize experiences that arise in therapy creating a more process driven therapy &amp; supervision.</li> <li>• <b>Common key signature issues:</b> <ul style="list-style-type: none"> <li>○ fear of vulnerability.</li> <li>○ fear of rejection.</li> <li>○ fear of not being good enough.</li> <li>○ fear of not being in control.</li> <li>○ fear of not being seen.</li> </ul> </li> <li>• Unaddressed, KSI, hinder the opportunity for connection &amp; good clinical practice.</li> </ul>	<ul style="list-style-type: none"> <li>• "... the often unexamined but changeable perspective held by each person about the world around them concerning sexuality."</li> <li>• includes what we 'know' about sexuality, our values, beliefs, opinions, &amp; perspectives on relationship, sexual orientation, gender, gender identity and expression, etc.</li> <li>• The purpose of SWV is to examine our sense of sexual diversity and its impact on our work as professionals.</li> </ul>

Source: Appelo, M. J., & Kroll, K. (2014). "I can't orgasm with this, I can't orgasm with that" (video). <https://www.youtube.com/watch?v=1000000000000000000000>  
Source: Appelo, M., & Kroll, K. (2014). The person of the therapist training. <https://www.youtube.com/watch?v=1000000000000000000000>

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## Sexual, Gender, & Erotic variance in Mental Health

*Applied Heteronormativity & Sex Negativity (Again)*

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**1954 & 1968 DSM I & II Homosexuality & Masturbation = Sociopathic Personality Disorder**

**1974** American Psychiatric Association removes Homosexuality from DSM

**1975** American Psychological Association follows suit: Homosexuality ≠ Pathology

**1980 DSM III Ego Dystonic Homosexuality, GID, Cross-dressing added to paraphilias section**

**1987 DSM III-r Ego Dystonic Homosexuality removed: Sex Addiction added to sexual d/o**

**1994 DSM-IV Sex Addiction removed - No supporting data**

**2013 DSM-5 GID becomes Gender Dysphoria, Kink in 'context', NO to Hypersexuality**

**2013** NIMH withdraws support for DSM-5 to focus on RDoC

**2019 ICD-11 Removed GID from mental health now a new Gender Incongruence section**

**2019 ICD-11 Compulsive Sexual Behavior Disorder added as an impulse control disorder**

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BDSM/Kink ≠ Trauma

Among pathologizing discourses, an emphasis on trauma as the source of kink-oriented desires remains a common touchstone, both in popular BDSM-oriented fiction (e.g., James, 2012) and in some academic writing (e.g., Southern, 2002). Despite the prevalence of trauma, *empirical studies of kinky people have repeatedly found no association between experiences of childhood sexual abuse and kinky interests (Hillier, 2019; Richters et al., 2008), and have found that kinky people who have experienced trauma often find it to be a source of healing* (e.g., Hammers, 2014, 2019; Thomas, 2019).

Source: Hughes, S. D., Hammack, P.L. (2020). Narratives of the origins of kinky sexual desire held by users of a kink-oriented social networking website. *The Journal of Sex Research*, 59 (3), 360-371.

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## Sexual Health & Education is a Human Rights Issue

- ... [S]exual health is a state of physical, emotional, mental and social wellbeing in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.
- Everyone shall have access to scientifically accurate and understandable information related to sexuality, sexual health, and sexual rights through diverse sources. Such information should not be arbitrarily censored, withheld, or intentionally misrepresented.

Source: World Association for Sexual Health (2014). <https://worldsexualhealth.net/wp-content/uploads/2013/08/Declaration-of-Sexual-Rights-2014-plain-text.pdf>

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## Principles of Sexual Health

Braun-Harvey & Vigoroso (2016), Braun-Harvey (2009)

- Consent
- Non-Exploitative
- STI's, HIV & pregnancy prevention
- Honesty
- Shared values
- Mutual pleasure

Source: Harvey, D. B., Vigorito, M. A. (2016). Treating out of control sexual behavior: Rethinking sex addiction. New York, NY: Springer

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## Relational & Sexological Theory & Therapy

**The Developmental Model** (Bader & Pearson, 1988). Incorporates attachment theory, neuroscience, and centers differentiation as a source of optimal relational functioning. The DM speaks to common themes of 1) vulnerability, 2) emotional risk taking, 3) authenticity, 4) strong interpersonal communication, 5) comfort with engaging & managing conflict.

**Optimal Sexuality Model** (Kleinplatz et al., 2020). Based in grounded theory research methodology, found that regardless of age, duration of relationship, sexual orientation, gender & expression identity, erotic & relational variance; sexually & relationally satisfying partnerships consistently demonstrate high levels of 1) vulnerability, 2) risk taking, 3) authenticity, 4) strong interpersonal communication, 5) comfort with engaging & managing conflict.

Sources: Bader, C., Pearson, P. (1988). In quest of the mythical man: A developmental approach to diagnosis and treatment in couples therapy. Forence, NY: Brunner/Mazel.  
Kleinplatz, P. J., Mikant, A. D. (2020). Magnificent sex: Lessons from extraordinary lovers. New York, NY: Knowledge.

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### What is BDSM/Kink?

All BDSM is kink, not all kink is BDSM

"... the knowing use of psychological dominance and submission, and/or physical bondage, and/or pain, and/or related practices in a safe, **legal**, consensual manner in order for the participants to experience erotic arousal and/or personal growth." - Wiseman - SM 101, 1996  
Source: Wiseman, J. (1998). SM 101: A realistic introduction. San Francisco, CA: Greenery Press.

Kink refers to broad variety of consensual, sexual, sensual, and intimate behaviors such as sadomasochism, domination and submission, erotic roleplaying, and erotic forms of discipline. "Fetish" is a narrower term describing people with an erotic or intimate interest in non-genital body parts, fabrics, smells, fluids, and non-human objects.  
Source: Modified from the work of Samuel D. Hughes PhD.

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### Consent & Negotiation in BDSM/Kink

- Consent & negotiation are central tenets of BDSM/Kink & Consensual Non-Monogamy
- Agreements frame how a scene begins, evolves, & ends: Including safe words, aftercare, debrief
- **SSC**: Safe Sane and Consensual
- **RACK**: Risk Aware Consensual Kink
- **4 C's** Caring, Communication, Consent & Caution
- **PRICK**: Personal Responsible Informed Consensual Kink
- **FRIES**: Freely given Reversible Informed Enthusiastic Specific (Planned Parenthood)

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### Strengths of BDSM/kink Orientations

- Dunkley & Brotto (2019) suggest that the specificity involved in negotiating rules, roles, boundaries and limits in BDSM / kink should be a model for how to discuss sexual consent in educational and relational contexts.
- Wismeijer & van Assen (2013) compared the big-5 personality traits, **extraversion, agreeableness, openness, conscientiousness** and **neuroticism**, of 502 self-identified BDSM practitioners (464 male & 438 female) against control group of 434 non-BDSM practitioners (129 male & 305 females). BDSM practitioners were less neurotic, more extroverted and open to new experiences, more conscientious and suffered less rejection sensitivity and reported higher scores on subjective measures of overall well-being. The authors concluded that **"these findings suggest that BDSM practitioners are characterized by greater psychological and interpersonal strength and autonomy, rather than maladaptive characteristics"** (p. 1949).

Sources: Dunkley, C., & Brotto, L.A. (2019). The role of consent in the context of BDSM. Clinical Report: Sexual Abuse. 00(0). 1-22. Wismeijer, A., & van Assen, M. (2013). Do neuroticism and extraversion explain the negative association between self-consent and subjective well-being? *Personality and Individual Differences*, 45(5), 945-949.  
Wismeijer, A., Marcel, A., L. M. & van Assen, M. (2013). Psychological characteristics of BDSM practitioners? *Journal of Sexual Medicine*, 10, 1943-1952

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**What is Consensual Non-Monogamy**  
*Wait! What? Why are you including CNM in this presentation!?*

- Consensual non-monogamy (CNM) is an umbrella term for **relationships in which all partners give explicit consent to engage in romantic, intimate, and/or sexual relationships with multiple people. These are consensual relationships, not to be confused with infidelity.** . . . A relationship agreement might involve partners engaging in sexual, but not romantic relationships. Another type of agreement might include several people (three or more) in a relationship who remain romantically and sexually exclusive. Common forms of CNM (or ethical non-monogamy) include polyamory, open relationships, and swinging relationships.

• Source: <https://www.apadivisions.org/division-44/resources/consensual-non-monogamy.pdf>

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**Agreements in CNM**  
Application to Couples Therapy

- What is **our form** of CNM? Open, monogamish, swinging, poly, etc.?
- What are **our health agreements**? fluid bonding, PrEP STI/HIV testing?
- **How do we support one another**; NRE, jealousy, desire for time?
- Do **we** want connection between partners & do **we** have veto power?
- What are our **relational boundaries**?
- **Is our relationships** hierarchical? e.g., primary, secondary, anarchy . . .
- Where and **how do we manage** being out vs. closeted?
- How do we manage breaks in our agreements?

Sources: Kauppi, M. (2021). Polyamory: A clinical toolkit for therapists (and their clients). New York, NY: Rowman & Littlefield.  
Vaux, F., & Rickert, E. (2014). More than two: A practical guide to ethical polyamory. Thorn tree Press: Portland, OR.  
Turmino, T. (2008). Opening up: A guide to creating and sustaining open relationships. San Francisco, CA: Cleis Press, Inc.

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**Strengths of CNM**

- Séguin et al (2017) exploring relational quality & sexual satisfaction in a Canadian sample of **N=3463** self identified gay, lesbian, bisexual, pansexual, two-spirit, queer, questioning & heterosexual folks who engaged in monogamy, CNM, or poly relationships. The researchers found **no statistical or qualitative differences in relational or sexual satisfaction between groups in their sample.**
- Sheff (2014) interviewing poly families her sample experienced **greater honesty and emotional intimacy**, distribution of household & financial responsibilities, greater time spent with children, children having access to multiple role models and **individual time spent with partners.**

Source: Séguin, L. J., Blais, M., Goyet, M-F., Adams, D. R., Lavoie, F., Rodrigue, C., & Wagoner, C. (2017). Examining relationship quality across three types of relationship agreements. *Sexuality* 28(2-3), 88-100.  
Sheff, E. (2014). *The polyamorists next door: Inside multiple partner relationships and families*. Lanham, MD: Rowman & Littlefield

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### HIV/STI Risk Management For ALL Relational Systems

#### HIV & STI Infection Prevention

**Non-occupational Post Exposure Prophylaxis**

- nPEP: Post Exposure Prophylaxis: ASAP! HAART 1-3 ARVs: 28/30 days
- Highly effective in preventing HIV seroconversion

**Pre-Exposure Prophylaxis: PrEP:**

- Truvada 300mg PO 1x Daily ( W. Adherence > 90% efficacy)
- Descovy 225mg PO 1x Daily ( W. Adherence > 90% efficacy)\* No Go VO
- Apretude 200 mg/mL 1x Monthly IM (1 month oral to track tolerance)

With PrEP regular HIV/STI (request) full panel screening

a) Bacterial, b) Viral, C) Parasitic, D) Fungal

If a partner is HIV + monitor viral loads: < 20-50 vc per ml = undetectable  
2019 CDC Accepts science behind; Undetectable = Untransmittable (U=U)

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### Who is not well represented in the research?

- Costello (2019) Trans, intersex, & the elderly largely ignored.
- Patterson (2018) Tokenism, class exclusion, & fetishization make it difficult for POC to feel welcomed in Alt/Sex spaces.
- Teller (2017) Ableism erases study of disabled people in Alt/sex communities
- Sheff & Hammers (2011) "The privilege of perversities" explore the absence of scholarship among non-white & class variant relational styles within Alt/sex communities.

Sources: Costello, C. G. (2019). Understanding intersex relationships. In Simula, B. L., Sumner, J. E., & Miller, A. (Eds.), *Expanding the universe: Exploring the relationships of Bis+, polyamorous, kinky, ACJ, intersex, and trans people* (pp. 231-247). Lendon, The Netherlands: Koinonika/Bis Brill.

Patterson, K. A. (2018). Love is not colorblind: Race and representation in polyamorous and other alternative communities. Portland, OR: Thorntree Press.

Teller, S. (2017). Advancing the discourse: Disability and BDSM. *Sex and Disability*, 35, 485-493

Sheff, E., & Hammers, C. (2011). The privilege of perversities: Race, class, and education among polyamorists and kinksters. *Psychology and Sexuality*, 7, 159-173.

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### Resources and Education

- The Alternative Sexualities Health Research Alliance: (TASHRA): <https://www.tashra.org>
- Community Academic Consortium for Research on Alternative Sexualities: (CARAS): <https://www.carasresearch.org>
- National Coalition for Sexual Freedom: <https://ncsfreedom.org>
- Terri Conley: Myth Busters: Gender & Sexuality Edition: <https://www.youtube.com/watch?v=185176E083k>

**Resources for BIPOC Kinksters**

- Bound Together: <https://boundtogether.net>
- Kinky Activists Support Fund Organization: Providing aid to BIPOC folk: [https://www.kinkyasf.org/about\\_us](https://www.kinkyasf.org/about_us)

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**Resources and Education**

**Sex Disability**

- Sex(abled) Disability Uncensored: <https://www.youtube.com/watch?v=nA0205hNOr8>
- Sex with Disabilities: <https://www.youtube.com/watch?v=9Pn4Gc-OnCs>
- Andrew Gurza: Picture This: <https://www.youtube.com/watch?v=3fMCsvhynEc&t=155s>

**Resources for Polyamorous and Consensual non-monogamy**

- More than two: <https://www.morethantwo.com>
- Normalizing non-monogamy Podcast: <https://www.normalizingnonmonogamy.com>
- Polyinfo: <http://polyinfo.org>

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Questions? Comments?  
*I don't bite; unless it's consensual*

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