Emotional dependency is a healthy and adaptive aspect of human development. Differences exist in how this dependency is labeled for men and for women. Women are socialized to attract men as life partners and achieve through their affiliation with others, not to be competent and ambitious on their own. Women have been expected to subordinate themselves to men in physical and intellectual tasks. Women and men participate in relationships which protect the men's egos from women's competence. Women's emotional needs are often not met in their relationships with men; in the past, women's emotional needs have been met through friendships with other women. Men's emotional dependency is discussed under the concept of power. Men feel a need for validation through sexual relations with women, resulting in what they perceive to be women's power over them. Men feel that women gain power over them by women's ability to bring out men's positive and negative emotions. Perceived loss of power over self motivates men to seek to have power over women. An example of how slowly social patterns change is the high rate of sexual intimacy between therapists and clients. In the past, the professional viewed this unethical behavior as the woman client's fault because of her sexual power. Therapists themselves are trapped by their own socialization. Research needs to examine further the role of male dependency. (ABL)
Female and Male Emotional Dependency and Its Relation to Eroticism in the Therapist-Client Relationship

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Abstract

Women and men struggle to achieve a healthy integration of emotional dependent and active autonomous strivings. In this paper the author argues that how dependency is labeled and becomes manifest differs for women and men and that an understanding of this difference requires an understanding of the different conceptions of male and female dependency and how such conceptions are related to gender-role socialization and societal practices and norms. She then relates these concepts to the problem of eroticism in psychotherapeutic settings and makes specific recommendations for the education and training of psychologists.
Gender effects are powerful and pervasive. Knowing whether a person is male or female not only is essential to comfortable interpersonal interactions but also often makes a significant difference in how we relate to that person--both within and outside of the therapeutic setting. Certain normal developmental stages and issues are especially susceptible to gender effects--the attainment of ego identity in adolescence and the capacity for intimacy in young adulthood described by Erikson (1966) are clear examples. This paper concerns one such developmental issue that pervades all developmental stages--emotional dependency. Dependency is experienced by all humans, regardless of gender, and is a healthy, adaptive, and positive aspect of human development.

The struggle to achieve a healthy integration of passive-dependent longings and active autonomous strivings is clearly a life-long developmental task for both women and men. How this dependency is labeled and becomes manifest, however, differs considerably for women and men. To understand these differences requires an understanding of the different conceptions of male and female dependency and how such conceptions are related to sex-role socialization and current societal practices and norms. In this paper, dependency in women, vis-a-vis men's roles and societal views of women, is described first, followed by an analysis of how views of female dependency are inextricably related to the apparent absence of dependency in men. These
concepts are then related the problem of eroticism in the psychotherapeutic situation.

Female Dependency

The female way of being social involves bonds, affiliation, attachment, and commitment. Because girls are expected to eventually assume the woman's expressive role, the emphasis on instrumental behaviors and attitudes in their child-rearing is less than for boys (Hoffman, 1977; Block 1984). Instead, women are socialized to attract men as life partners and to direct their achievement through their affiliations with others. Being competent and personally ambitious is not consistent with traditional views of what makes women desirable.

How do such societal views and socialization practices affect women's abilities to accomplish the normal integration of passive-dependent and active autonomous strivings? Two aspects of female dependency must be recognized. First is their oversocialization to "assume" dependent stances vis-a-vis men and the usefulness of this underfunctioning in relationships with men. Second, as many recent writers (e.g., Block, 1984; Chodorow, 1978; Gilligan, 1982) describe, women are socialized to depend on relationships as a primary way to be in the world and to view relationships, particularly those with men, as the only way to meet their needs of emotional dependency. Such pervasive, deeply ingrained, societal views are related to what Lerner (1983) calls the protective aspects of female dependency. According to Lerner, women traditionally were encouraged to cultivate an "underfunctioning" that primarily served to protect men. That is, women were expected to, and often did, subordinate themselves to men both in physical and intellectual contexts regardless of their actual ability. By so doing, women also protected themselves by assuring themselves a safe place with men. The notion that
women must strengthen men by relinquishing or hiding their own strength is not new. We see poignant examples in fairy tales, movies, and real life. A vivid illustration of female underfunctioning occurs in the short story Barcelona, by Alice Adams (1984).

The story describes Persis Fox, a *fairly successful illustrator, beginning to be sought after by New York publishers but who sees herself as cowardly and fearful. Her husband Thad, in contrast, is a self-assured, self-directed, confident man who teaches at Harvard. The couple is on vacation in Barcelona and on their way to a remote restaurant when a thief suddenly snatches Persis' purse. Thad, who has been quite unattentive to Persis, suddenly springs into action and runs after the thief despite the darkness, danger, and unfamiliar terrain. The purse is recovered on the cobbles and the couple returns to the restaurant.

Thad asks, "Aren't you going to check it? See what's still there?" "Oh good, my passport's still here," she tells Thad.

"That's great." He is genuinely pleased with himself -- and why should he not be, having behaved with such courage? Then he frowns, "He got all your money?"

"Well no actually there wasn't any money. I keep it in my pocket. Always when I go to New York, that's what I do."

Why does Thad look so confused just then? A confusion of emotions is spread across his fair, lined face. He is disappointed, somehow? Upset that he ran after a thief who had stolen a bag containing so little? Upset that Persis, who now goes down to New York on publishing business by herself, has tricks for self-preservation?

"And your passport." Stern, judicious Thad.
"Oh yes, of course," Persis babbles. "That would have been terrible. We could have spent days in offices."

Gratified, sipping at his wine, Thad says, "I wonder why he didn't take it, actually." Persis does not say, Because it's hidden inside my address book—although quite possibly that was the case. Instead, she says what is also surely true: "Because you scared him. The last thing he expected was someone running after him, and that whistle."

Thad smiles and his face settles into a familiar expression: that of a generally secure, intelligent man, a lucky person, for whom things happen more or less as he would expect them to. (p. 43)

Thus Persis protects Thad from the knowledge that his motivations for protecting her against worldly dangers are unfounded and that, in essence, she knows how to take care of herself. She also realizes that Thad reasons for protecting her are more related to his needs than her needs: In the short story Persis, thinks, "He is not doing this for her (the chase); it is something between men." They both collude to maintain a system that shelters the male ego from the threat of female competence and that continues an illusion of female dependency. Thad does not want to see Persis' recently developed independence and competence in dealing with the external world and she makes little effort to show it to him. Such collusion also serves to maintain the status quo and to perpetuate traditional views about gender.

The second aspect of female dependency that must be understood is that women's emotional needs are often not met in their relationships with men, although they are socialized to believe that they will be. In contrast to the female role, the male role has fostered an alienation from emotions and expressivity, characteristics that are not conducive to intimacy, communion,
and attachment. Thus, should women depend on men to meet their needs for affiliation and intimacy, which they often do, their needs are likely to go unmet. This situation is exacerbated by societal norms that lead women to believe the preferred and most desirable way to meet their normal interdependency needs is through relationships with the other sex (for different reasons, the same is true for men, as we will see later).

In earlier times, female friendships often sustained women emotionally. A case in point is Elizabeth Cady Stanton. Susan Griffith (1984) in her biography of Stanton poignantly describes women’s acceptance of men’s inability in nineteenth century America to meet women’s normal dependency needs and how other women typically met these needs. "As Henry [her husband] flourished, Elizabeth floundered" (p. 49). Raised among sisters who had been close companions, and then separated from them as a rural housewife and mother, Stanton felt lonely, depressed, exhausted, and angry. She too eventually flourished—by creating a sisterhood of friends, which included Susan B. Anthony. "I long to see you Susan. If I had you with me about once a week to rouse my self esteem it would be most beneficial." The longing was mutual. When Anthony was depressed ... she appealed to Stanton" (p. 74). Such sentiments were not uncommon among nineteenth century women (Griffith, 1984).

As Bernard (1976) points out, the attachment and bonding with other women that had been a valued and accepted part of the social order in previous centuries became less available for twentieth-century women. The focus on the nuclear family and the shift from a rural to an urban economy, among other factors, tended to isolate women from each other. The impact of this "relational deficit," which inhibits women’s ability to fulfill their normal dependency needs, is further intensified by limitations on female independence strivings in our society and by the fear many women have, perhaps
realistically, of being less desired as women should they be capable of earning their way and thinking their own thoughts. They are typically socialized to believe that, unlike men, having a life-long career and a family is difficult and having career aspirations jeopardizes the likelihood of having a family.

Thus the structure of marriage and society encourages unrealistic dependency needs in women while at the same time discouraging adaptive independency needs. Women, for example, often tolerate emotional and physical abuse or dissatisfying relationships with spouses or therapists because their internalized belief that they are dependent on men inhibits them from taking care of themselves or meeting their needs in other ways.

**Male Dependency**

To discuss dependency in men we need to focus on a different concept—power. Because of society's traditional view that women be weak and men strong, the experiences and emotional needs of women have come to fall under the rubric of dependency and those of men under the rubric of power. A case in point is Pleck's (1981) description of the "psychological sources of men's needs for power over women" (p. 235). There are three—and each relates to dependency but is stated as a power that men attribute to women, which in turn causes men to oppress women.

The first power that men perceive women to have over them is what Pleck calls masculine-validating power; through sexual relations with women a man is looking for validation of himself as a man. For men in our society sexuality and gender are highly intercorrelated. Men are socialized to believe in penis power, and unfortunately the expression of this power requires a female partner or victim. Women who are virgins are often admired; men who are virgins are suspect. Homosexual men, whose sexual preference is other men and not women,
are viewed as wimps, fags, or weaklings, in part, because they do not desire power through sexual intercourse with women.

In his description of the ten myths of masculinity, Zilbergeld (1978) illustrates the close association between sexual power (functioning) and a man's sense of self: A man always wants and is always ready to have sex (myth #4). All physical contact must lead to sex (myth #5). In sex, as elsewhere, it is performance that counts (myth #2). The man must take charge of and orchestrate sex (myth #3).

We see many examples of this need for power over women, a power that, in effect, illuminates men's dependency. To some degree it is present in violence against women--rape and battering, in particular. Men who are abusive of women often experience intense feelings of social and personal (masculine) inadequacy and feel especially dependent on women to make them feel better about themselves. Their extreme sense of dependency is often reflected in strong feelings of jealousy and possessiveness of their sexual partners (Ponzetti, Cate, & Koval, 1973; Telch & Lindquist, 1984). This same pattern is illustrated in noted literary works. In the Tennessee Williams' play _A Streetcar Named Desire_, Blanche, who disapproves of her brother-in-law's crude behavior, is raped by him in order to destroy her power over him. Similarly, in Bizet's opera _Carmen_, Don Jose is devasted by Carmen's rejection of him as a lover and in a jealous rage murders her.

This aspect of male dependency is often shrouded in silence because men rarely discuss their sexuality or sexual functioning with other men. Instead, sexuality is used as a vehicle by which men gain status with other men--a status or position that would be endangered by honest self-disclosure.

A second power that men attribute to women involves what Pleck calls "expressive power" or the power to express emotions. Women often express men's
feelings for them or have the power to bring or draw out their feelings. It is all right for men to be "soft" with women—they are safe havens for male emotion. Women, however, are also blamed for male expressivity, particularly if such expressivity is socially undesirable or violent. Thus men view women as bringing out both their positive and negative emotion and as causing them to do things that are beyond their control.

This situation relates to the third way in which men are dependent on women and are thus motivated to have power over them. Women have a role or part in men's power vis-a-vis other men: They are symbols of success in men's competition with each other and are a refuge for men. They also reduce the stress of competition between men by serving as an underclass (Pleck, 1981). In a patriarchal society women represent the lowest status, a status to which men can fall only under the most exceptional circumstance. Still, today, one of the worse things to call a man is an adjective associated with being female, particularly a female sexual organ.

The hidden nature of male dependency has been recognized by other writers. Baumrind (1980), for example, sees boys as being bribed by promises of power and domination and prematurely relinquishing aspects of their dependency strivings. Because boys are often separated prematurely from their home environment and asked to behave as "little men" before they comfortably can do so, they may depend more than they realize on unconditional acceptance and nurturance from a woman to sustain their pseudo independent stance. Girls, on the other hand, are bribed by promises of love and approval and prematurely relinquish aspects of their independency strivings. Thus, as Pogrebin (1983) points out, in patriarchal families wives conventionally give the care that husbands take: "Contrary to the popular belief that women have the greater dependency needs, men's [noneconomic] dependency needs are far more
insatiable.... Sex specialization in caring atrophies men's capacity to give comfort" (p. 197).

Men's and women's difficulties in developing and integrating both independent and dependent strivings are clearly recognized in the contemporary women's and men's movements. The men's movement has emphasized the importance of men's recognizing their own dependency and positively valuing it as an integral part of male development. Moreover, men are being helped to learn how to express and experience their emotions in intimate relationships and to validate themselves and other men instead of needing women to do this. Similarly, the women's consciousness raising groups of the 1960s and 1970s assisted women in recognizing how they had internalized societal views of female attributes and roles and, as a result, had to some degree come to devalue other women in their quest for the "right" man. These groups, and the women's movement in general, emphasize the importance of women nurturing and sustaining themselves and each other and of developing a sense of self separate from their affiliative relationships with men.

Society changes slowly, however, and the well-established patterns and myths remain in operation to a greater degree than we often care to admit. The increasing incidence of sexual intimacy between male therapists and female patients, despite the clear unethical nature of such a relationship, is one obvious reminder of how slow the change is.

Sexual Contact with Clients--A Problem Area (footnote 1)

Among therapists approximately one in ten men and one in one hundred women have had self-reported erotic contact with clients, nearly all of whom were female (Holroyd & Brodsky, 1977). Reports from the Ethics Committee of the American Psychological Association indicate that violations of principle 6A (i.e., sexual intimacies with clients are unethical) received by the committee
have increased each year since 1979 when sexual intimacies with clients were specifically defined as unethical in the Ethical Standards of Psychologist (American Psychological Association, 1979). Many times the psychologists involved feel very remorseful and regretful (Hare-Mustin & Hall, 1981) and view such behavior as harmful to the client and to the therapeutic relationship (Holroyd & Brodsky, 1977; Boulouteos et al., 1983).

In the past such unethical behavior caused little concern. It was consistent with traditional views of women and the perogatives of men—a manifestation of broader male and female role structure in which men were omniscient and women naive. When such behavior began to be questioned, the situation was often studied from the viewpoint of the client's motivations. What made her do it? Thus, rather than looking at therapists' attitudes and behaviors, the profession adopted the self-serving view that men are vulnerable to women's sexual power over them, and therapists are no exception. Today we realize that we can no longer blame the victim; regardless of the client’s motives, such behavior is unethical and as such requires us to go beyond blaming the client for what happens under the guise of therapy.

Several aspects of male and female dependency may help to explain how sexual contact can become a part of the therapeutic relationship. One involves the strong connection between emotional closeness and female dependency, on the one hand, and sexual expression and male dependency, on the other. Women who come to therapy are often experiencing a "relational deficit" and are seeking intimacy with a man. The man who is trained as the therapist, however, has been socialized to view women as having the power to bring out men's feelings (and not vice versa) as well as to validate their masculinity through sexual relations. Men also have little experience relating to women in a truly egalitarian fashion. Thus when the client feels distressed and emotionally

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intense, the male therapist may feel afraid of her intensity and yet feel compelled to "help" her because of her assumed dependency on him as a man. The feeling of needing to help her, and yet experiencing the client as both overwhelming and weak, can leave the therapist feeling paralyzed and impotent. One deeply ingrained way of reestablishing potency with women is through sexual expression. Hence the therapist responds to the client's needs for intimacy with his needs for male validation and dominance and, in essence, is patronizing the client.

A second possibility is that male therapists lack sufficient awareness and understanding of their own dependency needs, particularly their need to be validated by women, and the close association between their sexual functioning and their sense of self. According to the data available, 5% of men who self-reported sexual intimacies with one client, repeated this sexual contact with other clients (Holroyd & Brodsky, 1977). Thus, the therapist's needs were such that despite ethical violations and harm to the client, they had to be met. Similarly, Bouhoutsos et al. (1983) report that in their sample of patients' previous therapists, sexual intimacies (usually intercourse) began within the first few sessions for 30% of the patients, after 3 months for 25%, after 6 months for 22%, and after a year for 19%. (Both therapy and the sexual relationship ended simultaneously for 55% of the cases; termination of the therapy was usually initiated by the patients.)

In his book Male Sexuality, Zildergeld lists as the ninth myth, that sex should be natural and spontaneous. Perhaps the first myth of eroticism in the psychotherapeutic setting is, like, sexual intercourse, that the male therapist should naturally know what to do. Clearly many therapists do not know what to do and their educational programs do little if anything to assist them in learning what to do.
Effectively dealing with eroticism in psychotherapeutic treatment requires education in and an understanding of the sex-role socialization of women and men, particularly male and female dependency. As was mentioned earlier, contemporary women are overly socialized to depend on men to meet their emotional needs and often enter therapy for help in this area. Contemporary men, in contrast, develop a strong interconnection between sexuality and gender: men often define their sense of self in terms of their sexual functioning and their ability to make it with women. Their sexuality becomes related to their self-esteem, concepts of intimacy, and manliness. In addition, their needs for power and dominance make it difficult for men to recognize and own their own emotional dependency, particularly vis-a-vis women.

Without adequate education and training male and female therapists remain trapped to some degree in their own socialization. Thus they may lack the vision or objectivity needed, for example, to assist women in moving beyond their own societally imposed limits. They too are likely to focus on the women's dependency rather than assisting her to integrate her dependency and independency. In addition, the female client's ability to underfunction with men serves to enhance the male therapist's ego and to collude with him in continuing her dependency in the therapeutic relationship.

Also apparent is the collusion between current educational practices and the social system. What we do as educators and practitioners reflects the social practices of the culture and society in which we live. In therapy, as in the real world, we nourish ourselves on female dependency and go to great lengths to protect men from their strong dependency needs. Moreover, our training programs engage in this same collusion. Rarely is male sexuality discussed or studied. Rarely are male students given the opportunity to understand their own sexuality and how it relates to their sense of self and

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developing ego. Little if any attention is given to the social construction of male and female dependency and how these relate to therapist-client dynamics and the process and goals of therapy.

Where to from Here

This paper has described aspects of male and female socialization that need to be understood to provide effective therapeutic treatment to clients. A vast literature and lore have developed about female dependency, whereas little if any understanding or recognition of male dependency has occurred. Ironically, this situation, which in many ways parallels societal values and norms, inhibits the very integration that healthy adults are attempting to achieve. It is also argued that an understanding of male and female dependency within the context of current societal views and practices is essential to decreasing the incidence of sexual abuse of clients. As a profession we are deeply concerned about negative effects in psychotherapeutic treatment that are related to gender, such as the continuing problem of sexual relations between therapists and clients. Yet as educators we appear reluctant to look at the broader and deeper psychosociological issues, and the social structure in which they are imbedded, that give rise to unacceptable and harmful behavior on the part of therapists. Specific courses and material should be made available in graduate programs and continuing education offerings so that practitioners have sufficient self-awareness and knowledge to live by the code of ethics of their profession. Although we cannot change society, we can make great strides in changing aspects of our behavior and making the therapeutic environment more conducive to positive emotional functioning.
Footnote

1. Not all erotic contact occurs between male therapists and female clients. Of the licensed psychologists surveyed by Holroyd and Brodsky (1977) 5.6% of the males and 0.6% of the females reported having had sexual intercourse with clients. Bouhoutsos et al. (1983) survey of licensed California psychologists who were asked to report on their clients sexual intimacies with previous therapists indicated that the preponderance of such incidents occurred with male therapists and female clients (93% of those reported as compared to 1.7% for female therapists and female clients, .03% for male therapists and male clients, and .02% for female therapists and male clients). The numbers are small for these other gender pairings, but the problem is serious and requires our attention. Many of the comments and recommendations made in the chapter are directly applicable to these situations, particularly those in the earlier section on power and the following section on supervision.
References


