Sexual Interdependence Theory (SIT)/Sexual Progression Approach (SPA)

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SIT/SPA CAPS 2015
Overview

I. Sexual Interdependence Theory (SIT)
II. Sexual Progression Approach (SPA)
III. SIT/SPA and Christian Perspectives
IV. Conclusions
Importance of theory

- Theory provides a road map that can shape research and guide treatment.
- Psychosexual development and sexual function, dysfunction and disorder have received limited theoretical attention.
Sexual Interdependence Theory (SIT) is based on the principle that psychosexual development is an integral part of human development.

Each developmental phase and process involves elements of normal psychosexual development.
Sexual Progression Approach (SPA) is based on three principles

- Best treatment identifies the developmental stage of the patient/client
- Treatment targets the stage-appropriate developmental tasks
- Interventions are suited to developmental level and related goals
SEXUAL INTERDEPENDENCE THEORY

Figure 1

Sexual Progression Model
Sexual Interdependence Theory proposes four stages:

A. Sexual Mistrust
B. Sexual (Con)fusion
C. Sexual Identity
D. Sexual Integrity
Table 1

SIT Compared to other Developmental Theories

<table>
<thead>
<tr>
<th>SIT</th>
<th>Erikson</th>
<th>Kohlberg</th>
<th>Maslow</th>
<th>Piaget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Mistrust</td>
<td>Mistrust</td>
<td>Preconventional</td>
<td>Physiological &amp; Safety</td>
<td>Sensorimotor &amp; Preoperational</td>
</tr>
<tr>
<td>Sexual (Con)Fusion</td>
<td>Trust with Role</td>
<td>Conventional</td>
<td>Love/Belonging</td>
<td>Concrete</td>
</tr>
<tr>
<td></td>
<td>(Con)Fusion</td>
<td></td>
<td></td>
<td>Operational</td>
</tr>
<tr>
<td>Sexual Identity</td>
<td>Identity</td>
<td>Early</td>
<td>Early Esteem</td>
<td>Formal Operations</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Postconventional</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sexual Integrity</td>
<td>Ego Integrity</td>
<td>Postconventional</td>
<td>Esteem &amp; Self-Actualization</td>
<td>Formal Operations</td>
</tr>
</tbody>
</table>
## SIT/SPA CAPS 2015
### Sexual Integration Theory

<table>
<thead>
<tr>
<th>SIT</th>
<th>Erickson</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Mistrust</td>
<td>Mistrust</td>
</tr>
<tr>
<td>Sexual (Con)Fusion</td>
<td>Trust with Role (Con)fusion</td>
</tr>
<tr>
<td>Sexual Identity</td>
<td>Identity</td>
</tr>
<tr>
<td>Sexual Integrity</td>
<td>Ego Integrity</td>
</tr>
</tbody>
</table>

4/11/2015
For SIT, each stage has:
A. Characteristic features
B. Specific limitations on sexual satisfaction
   SPA proposes specific treatments related to these
C. Primary intervention objectives
D. Various intervention approaches

Here we will discuss SIT and SPA together
A. Sexual Trust/Mistrust: characteristic features

- Interpersonal and sexual trust pave the way for the next stage

- Distrust of sexual partners results in
  - Sexual avoidance
  - Objectification
  - Assumed malice in sexual partners
  - Sexual domination
## Table 1

Overview of SIT/SPA Model

<table>
<thead>
<tr>
<th>Stage</th>
<th>Characteristic Features</th>
<th>Limitations</th>
<th>Primary Objective</th>
<th>Interventions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Mistrust</td>
<td><strong>Interpersonal distrust</strong> leads to objectification and/or sexual avoidance</td>
<td>- Distrust of sexual partners; assumed malice in sexual partners; sexual anorexia or sexual domination</td>
<td>- Initiate therapeutic alliance sufficient for modeling effective relationships and reprocessing trauma</td>
<td>- EMDR, exposure with response prevention, CBT/CR and Schema Therapy</td>
</tr>
<tr>
<td>Sexual (Con)Fusion</td>
<td><strong>Fusion</strong>: Identity is defined by rigid adherence to familial or cultural standards</td>
<td>- Rigid sexual enactments or abstinence; discrepant beliefs and experiences; sexual anorexia</td>
<td>- Address ineffectiveness of sexual rigidity and loss of opportunities rooted in emotional and behavioral avoidance while formulating internalized, workable sexual values</td>
<td>- Foster development of internalized values; ACT</td>
</tr>
<tr>
<td>Sexual Identity</td>
<td>Established sexual values/beliefs that are both internalized and workable</td>
<td>- Tension between values and behavior/relationships; “wimpy” masturbation where will-power collapses</td>
<td>- Apply “radical acceptance” of sexual urges while incorporating values-based living</td>
<td>- Developing distress tolerance and resistance to temptation via ACT, EMDR, and mindfulness. Practice comprehensive alignment of behavior with values</td>
</tr>
<tr>
<td>Sexual Integrity</td>
<td>Seeking partner in context of mutual respect, nurture, mutual feedback and change; cultivates lasting attachment</td>
<td>(Rare)</td>
<td>- Maintain coherence of behaviors and values while modifying values to fit new circumstances. Retaining posture of complete acceptance of sexual urges</td>
<td>- None proposed outside of maintaining existing coping strategies</td>
</tr>
</tbody>
</table>
A. Sexual Mistrust: Characteristic features

- Interpersonal distrust
- Pathologies
  - Sexual avoidance
  - Sexual objectification
A. Sexual Mistrust: Limitations

- Distrust of sexual partner
- Assumed malice in sexual partner
- Sexual anorexia
- Sexual domination
A. Sexual Mistrust: primary treatment objectives

- Build trust:
  - Initiate therapeutic alliance
  - Model effective relationships
- Reprocessing trauma
A. Sexual Mistrust: Interventions

- Relationship building
- Schema Therapy
- EMDR
- Exposure with response prevention
- Trauma-focused CBT/CR
B. Sexual (Con)fusion: Characteristic Features

- **Fusion**: Identity is defined by rigid adherence to familial or cultural standards
- **Confusion**: Sexual uncertainty
  - Often brought on by tension between values and experiences
  - May involve rejection of familial or cultural standards
B. Sexual (Con)fusion:

Healthy development
- Progress toward maturity
- Gradual emergence of own beliefs/values

Limitations
- Discrepant beliefs and experiences
- Rigid sexual enactments
- Abstinence
- Sexual anorexia

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Sexual Interdependence Theory
B. Sexual (Con)fusion: Primary Therapy Objective

- Address ineffectiveness of sexual rigidity
- Address loss of opportunities rooted in emotional and behavioral avoidance
- **Formulate internalized, workable sexual beliefs/values**
- **Foster behavioral patterns consistent with beliefs/values**
B. Sexual (Con)fusion: Interventions

- Induce “Creative Hopelessness”
- Foster development of internalized values
- ACT
- EMDR
- Behavioral activation
C. Sexual Identity: Characteristic Features

- Established sexual values/beliefs that are both
  - Internalized
  - Workable—reality-based
C. Sexual Identity:

Benefits
- Growing sense of sexual beliefs/values
- Exploration of sexual behaviors consistent with beliefs/values

Limitations
- Tension between values and behavior/relationships;
- “Wimpy” masturbation where will-power collapses
- Other sexual behaviors inconsistent with beliefs/values
C. Sexual Identity: Primary treatment Objectives

- Foster “radical acceptance of sexual urges”
- Developing distress tolerance
- Developing resistance to temptation
- Promote values-based sexual living
C. Sexual Identity: Interventions

- Practice comprehensive alignment of behavior and values
- ACT
- EMDR
- Mindfulness
D. Sexual Integrity: Characteristic Features

- Seeking partner in context of
  - Mutual respect
  - Nurture
  - Mutual feedback and change
  - Cultivating lasting attachment
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Sexual Interdependence Theory

D. Sexual Integrity:

Benefits
- Enhanced relational richness
- Flexible engagement in sexual interactions consistent with beliefs/values

Limitations
- Psychosocial limitations are rare but occur
- Physically-based complications also may occur
D. Sexual Integrity: Primary Treatment Objective

- Maintain coherence of behaviors and values
- Retaining posture of complete acceptance of sexual urges
- Modifying behavior or values to fit new circumstances such as limitations or changes in physical capacity
D. Sexual Integrity: Interventions, though rare, may include

- ACT/acceptance of physical limitations and changes
- Maintain existing coping strategies
- Develop new coping and sexual strategies that fit changing personal and life circumstances
A. What are Christian sexual values?
   ◆ Factors that influence one’s values.
B. Internal & communal congruence as health.
   ◆ Internal & communal congruence
C. Subjective, communal, and common influences.
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Sexual Progression Approach

A. Christian sexual values.

- There is no one set of Christian values regarding “right” sexuality.
- This appears to exist on both an interdenominational and an intradenominational level.
- Individual values regarding “right” sexuality differ from their denomination.
A. Christian sexual values.

• Christian values, like many systems of individual belief are co-constructed.
  • Interaction of subjective and communal factors.
  • Communally Embedded
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Sexual Progression Approach

Subjective Factors

• Personal Sexual Experience (PSE)
• Personal Sexual Behavior (PSB)
• Personal Sexual Values (PSV)
• Personal Religious Beliefs (PRB)
• Biological Factors (BIO)
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Sexual Progression Approach

• Subjective Factors
  • Unique Experiences (PSE, PSB, PSV)
  • Unique Biological Make-up/Experiences (BIO)
  • Unique tradition and theological perspective (PRB)
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Sexual Progression Approach

• Communal Factors
  • Sexual Proscriptions
  • Sexual Prescriptions
  • Spiritual Significance of Sex

• Diversity amongst Christians in these areas.
B. Internal & communal congruence as health.

- If no consensual values exist regarding “right” sexuality, what is considered spiritually healthy?
- Congruence?
Sexual Progression Approach

• Congruence
  • Congruence exists on at least two levels:
    1. Internal Congruence
      • Subjective Sexuality
    2. Communal Congruence
      • Meeting of Subjective Sexuality and Communal Values.
  • Congruence ==> Sexual Functioning.
Figure 1: The figure depicted above displays the reciprocal relationship that exists between a person’s subjective sexuality, the community (including but not limited to faith community) in which they, and their sexual functioning.
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Sexual Progression Approach

C. Subjective, communal, and common influences.

- Diversity and commonality.
  - Subjective Uniqueness
  - Uniquely Embedded in Community.
- What ties us together as Christians?
Sexual Progression Approach

• Commonalities
  • Sex is significant in the bible
    • Poetically (Song of Solomon)
    • Rhetorically (Corinthians)
  • Sex as a deep relational connection
    • Perhaps the most intimate way of expressing our fundamental relatedness.
  • People share a common identity as divine creations
    • Sex offers an avenue to embody a Christ-like love to another person.
Sexual Progression Approach

Rom 2:1-3

Therapeutically, focus on the process
1. Meet the patient/client on her side of the bridge
2. Address pain
3. Confront hypocrisy with grace—foster integrity
4. Trust the process and trust God in the process
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SIT/SPA and Christian Perspectives

I. Sexual Interdependence Theory
II. Sexual Progression Approach
III. SIT/SPA and Christian Perspectives
IV. Conclusions
IV. Conclusions

A. SIT offers a developmental model
   
   1. Integrates psychosexual development with other aspects of human development
   2. Parallels mainstream developmental theory
IV. Conclusions

B. SPA offers a nuanced model for treatment that takes into account the developmental stages of the patient/client and seeks to promote healthy development

1. Using targeted interventions,
2. We proposed mostly those from 3rd wave CBT
3. Alternative interventions could be employed
IV. Conclusions

C. A Christian perspective offers a model for values that can shape interventions while

1. Respecting patient/client values
2. Fostering exploration of their practical benefits and limitations.

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