

## CHAPTER 2:

### REVIEW OF RELATED LITERATURE

#### 2.1 Surrogate Treatment as Portrayed by the Lay or Popular Media

*Despite lots of publicity about surrogate therapy  
In the media, there is still much confusion.  
Zilbergeld, 1992*

The media interest in surrogate treatment has traditionally been focused on "what kind of person is a surrogate?" The most common media theme depicts surrogates as a "nymphomaniac." Typical are splashy articles such as "Sex surrogates: The Sensual Therapy," "Prescription Sex: The Women Who Teach Men to Make Love," "Make Your Man A Super Love—with advice from a sex teacher whose bedside manner goes *all* the way," "Sex Surrogates—What they Know Can Help Your Love Life" (Appendix F).

This publicity about surrogate treatment has generally misled readers by representing the surrogate as a cross between a therapist and a prostitute. In order to sell magazines, the pictures on the covers of the magazines and within its pages usually depict a woman in a sensual and/or sexual appearance. The most common justification of this distortion is that sex sells, especially when it is portrayed as titillating and naughty. Some articles underscore the stereotypes of the pictures, while others actually include useful stories of persons with sexual problems who seek the services of a surrogate.

In a *Forum Magazine* (1983) article titled "Sex Surrogates are Lousy Lovers," the author asked, "What, other than a few hours of training, distinguishes such trainees from

prostitutes?" The article concludes that sexual surrogates are "indeed glorified prostitutes."

A write-up in *Woman's World* (1984) titled, "Prescription on Sex--The Women Who Teach *Men* to Make Love," pictures the surrogate as barefooted and sexy, seated by a psychiatrist's couch where a male (client) is lying. However the article itself offers positive informative facts, including quotes from surrogate clients and from professionals such as psychologist and co-author of the Kinsey Report, Wardell Pomeroy, who notes, "There is a big difference between a call girl and a surrogate. Surrogates are teachers who cut through sexual resistance. They work slowly and patiently with sexually dysfunctional individuals. Surrogates play an important role in my practice--there is nothing shameful about it."

Television has on occasion educated audiences on the real issues involved in sex therapy. A case in point was a 1986 episode of *The Phil Donahue Show*. Donahue featured guest Maureen Sullivan, a surrogate coach who appeared with two of her former clients, John and Fred.

When Donahue began to explain to the audience about the background of his guests, the audience's reaction was initially negative. The first question that was asked came from a female who questioned the difference between surrogate treatment and prostitution. As the show progressed, former clients John and Fred told their stories, speaking about the pain of living in social and sexual isolation and how they were subsequently helped by the work of Maureen. The audience became progressively more receptive to surrogate treatment, and by the end of the show the line of questioning became

more positive. Some audience members took the risk of inquiring how one would go about seeking this type of therapy.

Thus, because in the mass media image too often trumps substance, the benefit of surrogate treatment may not always be presented with any consistent intent to educate responsibly, and the surrogate coaches and their services are therefore sometimes misrepresented.

## 2.2 Review of Professional Literature

*"The question has been asked, 'Is the use of sexual Surrogates for the treatment of sexual dysfunction ethical, and if so, under what conditions?' Various professional groups are being asked for clarification on the issue."*

*American Psychologist, 1983*

Material gathered from books, journals, college term papers, dissertations, research papers presented at workshops and sexuality association conferences, Internet web sites and video productions was reviewed in order to present a comprehensive background on surrogate coaching.

Throughout the course of this study, one important area has not been thoroughly represented: The client's experience with surrogate treatment. An important factor in determining the value of surrogate treatment is the client's evaluation of the success or failure of achieving the desired goal. The dominant area of research has been on the surrogate. Previous studies have also focused either on the surrogate or on the results of the treatment, i.e. whether the client corrected the diagnosed problem. Other studies focused on the statistical data regarding the client's resolution of the problem, the differences in the three styles of the therapeutic process, and the experience of being a surrogate client.

A study was conducted by Noonan (1984) on sex surrogates and the clarification of their therapeutic functions in the surrogate treatment process. Noonan examined whether surrogates spent more time during the regular 2-hour treatment session on

socialization skills or on sexuality skills. Fifty-four surrogates responded to a mailing list survey. The surrogates were asked to report and estimate the percentage of time spent in seven activities performed during the sensate focus treatment process. The results of this study (Appendix C) supported Noonon's hypothesis that surrogate coaches spent most of the session time, almost 90%, in non-sexual education and training.

Dannacher's (1985) doctoral dissertation, "Self Concept and Sexual Adjustment of Female partner Surrogates," examined the differences between surrogates, and women who had never been trained as or worked as a surrogate. The results indicated no significant differences between these two groups on self-concept, although surrogates did have a greater level of sexual savvy.

Ball (no date available) surveyed 37 surrogate coaches and presented his findings in a paper, "Summary of Questionnaire Data for Sex Surrogates," in which he reported on the highest grade completed, annual income as a surrogate, and the percentage of the surrogates who received certified training. The surrogates were also polled on their views of the structure of the triad and the relationship with the verbal therapist (Appendix G).

Another focus of research study is the statistical results regarding correction of the diagnosed problem. Dauw (1983) conducted "Surrogate-assisted sexuality treatment" for 501 clients. He obtained results in five categories of observed sexual dysfunctions. As reported by Dauw, 451 of the 501 participants were successful in correcting their diagnosed problems.

Masters and Johnson (1970) conducted within an eleven-year period "surrogate

partner" treatment in which they assisted 41 unmarried males in the treatment of sexual dysfunction. Of these 41 males, 32 were able to reverse their symptoms with a surrogate partner.

The process of surrogate treatment has been studied to find the most effective modality for the greater number of clients. Maureen Sullivan's (no date available) abstract, "Surrogate Therapy: A Comparison of Therapeutic Styles and Outcomes of One Practitioner," describes the differences in therapeutic styles during the treatment process.

Sullivan surveyed 132 male clients aged 16 to 70 with presenting problems common to-surrogate treatment. The results were recorded for 2-week intensive, weekly therapy, and 3-day intensive. There were twenty-two clients in the 2-week intensive group, and 19 (86%) achieved their goal. Out of 101 clients in the weekly therapy group, 43 (43%) achieved their goal. And of the 9 participants in the 3-day intensive, 6 (67%) achieved their goal.

One study of the surrogate treatment process has primarily focused on the experience of the client as communicated by the client. Minson (1980) investigated the value of surrogate treatment for sexual dysfunctions of single males with a variety of sex-related concerns. There were six participants ranging in age from 23 to 53 year of age. Themes that emerged through descriptions of the client's own experience were evaluated, and the conclusions drawn were that: "therapeutic success does generalize to other relationships, and other aspects of the client's lives; and the clients experienced a corrective emotional experience resulting in an increased intra/interpersonal confidence and higher

self-esteem."

Two survey projects were conducted among health professionals. One survey questioned health professionals on their opinion of the use of surrogate coaches.

Malamuth, Wanderer, Sayner, and Durrell, (1976) surveyed 111 health professionals. Of the 111 participants, 72% were practicing psychologists. They were asked whether they would refer clients to "sexual surrogates." The results indicated that the majority of these professionals did not refer to surrogates, but stated that they would do so should the use of surrogates in therapy treatment be "clarified as legal."

In a *Sexuality Today* (1982) article, "ST Survey: Majority Support the Use of Surrogates, but Do Not Use Them," the number of respondents was not available. But the article reports that "the overwhelming majority--70%—stated their belief that surrogates have a legitimate place in sex therapy; however, only 14% said they themselves are currently using surrogates, 28% specifically opposed their use and the rest did not answer the question."

The professional literature search also revealed several pieces on sexuality and the physically challenged. An article in the *Journal of Sexuality and Disability* described a case analysis of a 25-year-old cerebral palsy male. Joseph (1991) discussed four key areas important to the disabled: 1) recognition that individuals with disabilities are sexual beings, 2) learning masturbation as a sexual activity, 3) seeking appropriate romantic involvement, and 4) the process of surrogate treatment.

Also in the *Journal of Sexuality and Disability*, Strauss (1991) comes to similar

conclusions regarding treatment interventions for those with disabilities: sex therapy, sexuality education, masturbation trainings, and the utilization of surrogate coaches.

In the *International Journal of Adolescent Medicine & Health*, Aloni, Danger, Ulman and Lior (1994) discuss the development of a surrogate program in Israel. This program was designed to be incorporated in the sexual rehabilitation of disabled patients. In the program, "...half of the 85-hour training covered basic approaches to sexuality and disability, while the other half (of the program) was solely dedicated to surrogate training."

And in *Sexual Options for Paraplegics and Quadriplegics*, authors Mooney and Chilgren (1975) demonstrate in writing and pictorially the options of various sexual activities for the disabled.

Other sources for sexuality and disability can be found on the Internet. A web site for disabled persons with sexual concerns is [www.sexualhealth.com](http://www.sexualhealth.com). Mitch Tepper, the founder, endorses the use of surrogates, and his site offers referrals for the surrogate treatment program. "On Seeing A Sex Surrogate," an on-line article which is available at [www.pacificnews.org](http://www.pacificnews.org), discusses the story of Mark, a disabled virgin who seeks the services of a surrogate coach.

Professional publications also discuss the techniques and exercises of the surrogate treatment process. Masters and Johnson (1970) and Hartman and Fithian (1972) utilize the sensate focus techniques in a clinical setting. The approach for both Masters and Johnson and Hartman and Fithian are similar. The couple is under strict supervision of the therapist.



The therapist and the couple meet in the morning to receive instructions on the assignment for that day and they again meet in the late afternoon, to report on the experiences from the assignment.

Apfelbaum (1978) presented in a workshop four types of surrogate treatment processes. He discussed the Hartman and Fithian/Master and Johnson model, the independent or spontaneous surrogate approach and the behavioral-analytic (BSTG) model. In his presentation, Apfelbaum speaks about both the Masters and Johnson and Hartman and Fithian approaches as "putting the surrogate in the servant class." He evaluates cases which have been recorded by independent surrogates, and presents his "behavioral-analytic model using a co-therapy structure, the only one of its kind in use with individuals," Apfelbaum concludes that there is no comprehensive methodology or process for treating surrogate client individuals.

Zilbergeld (1999) discusses how surrogates coach the client through the exercises of the treatment process. He also addresses the need to incorporate a partner into these exercises. For those clients without a partner he includes a chapter in his book titled "Surrogate Partner Therapy," which explains surrogates, the treatment process and the profile of candidates for surrogate coaching.

Regarding the women who train to be surrogate coaches, Silvestri (1999) and Florio (1993) wrote college term papers on a surrogate and her presentation at the University of Pennsylvania. Both writers were very positive about the surrogate and her work. Silvestri has this to say: "...the research and information I read stimulated many

thoughts and questions... I believe this method has amazing potential for people with dysfunctions, social insecurities, body image problems, disabilities, etc."

Blanchard (1999), president of the International Professional Surrogates Association (IPSA), pinpoints the qualifications for becoming a surrogate coach. She begins her description by saying that the surrogate must have "... compassion, intelligence, a sex positive attitude, and be non-judgmental about consensual lifestyles and sexual orientations." IPSA also contains a Code of Ethics (1973) which sets standards for professional surrogates. This Code lists seventeen standards to which professional surrogates shall adhere, such as the surrogates' conduct with clients and therapists, her required training and continued education, and her need to maintain fulfilling personal/ sexual relationships.

The two most widely acknowledged organizations of sex therapists and educators are the American Association of Sex Educators, Counselors and Therapists (AASECT) and the American Board of Sexology (ABS). In the 1993 Code of Ethics, there is no mention of guidelines for therapists working with surrogate partners. Howard Ruppel, Executive Director of AASECT discusses the position of AASECT and surrogate treatment:

In 1997, I brought before the Ethics Committee the request to at least study where AASECT stands on the surrogate issue. In 1999, this committee came back with a recommendation that it was unethical to work with with surrogate coaches and it was felt that anyone AASECT certified, who was working with surrogates, was performing unethical behavior. The AASECT Board chose not to act on this recommendation at that time. (Personal Communication, 2000)

The ABS has taken no stand on the use of surrogate partners, however, according to their office spokesperson, it is presently under consideration. (Personal Communication, 2000).

Tollison and Adams (1979), in writing to therapists regarding their decision about the Utilization of surrogates: "In the final analysis, the decision for or against the use of sexual surrogates should be based on the therapist's personal value system and also on the

basis of legality."

The types of clients that seek surrogate treatment are documented from the perspective of social workers (Roberts, 1999), psychologists (Masters and Johnson, 1970, and Strauss, 1991), surrogates (Blanchard, 1999 and Green, 1983) and medical doctors (Mooney, Cole and Chilgren, 1975). All of these professionals agree on the profile of an appropriate surrogate candidate. He is a single male without a primary partner with whom he can practice sexual and social skills, who has a primary sexually diagnosed dysfunction, and for whom the practicing of exercises and skills will facilitate reaching certain sexual and/or social goals.

Green (August, 1983) spoke at The Third National Conference of the International Professional Surrogates Association. In her presentation, she states that the two 'applications' of surrogate treatment are the Classical and the Extraordinary. These two applications are then broken down into ten categories which are further broken down into thirty-two sub-categories (Appendix H).

Hands on sex-help from a historical perspective are presented in books by Eisler (1987), Stubbs (1994), Mann and Lyle (1995) and Wallace (1987). These authors characterize the ancient women of sensual and sexual healing as goddesses and temple priestesses—the archetypes for today's surrogates. Stubbs, in his book *Women of the Light*, uses the term "sacred prostitutes" to introduce the women who tell stories of their professional lives as sexual healers.

There are two video productions on the surrogate treatment process. "Dimensions

of Surrogate Treatment" follows the typical day of a surrogate coach. Surrogate Pat Gray speaks about her role as a surrogate, her clients, and her personal life. The opening of the film shows Pat riding her bicycle to a market where she purchases fruit to prepare a sensual food experience for a client. She discusses with the verbal therapist the session she is planning for her (the therapist's) client. In the session, Pat strategically places the fruit on the client's body and then slowly eats it off of him.

The film also shows Pat working with a female client who is learning how to masturbate. In addition, she explores the body of a male client who lives his life in an iron lung. She searches out patches of his skin for feeling and erotic sensitivity. The video concludes with Pat walking on the beach with her husband, Keith, and unwinding from her day.

The video "Private Practices" is a comprehensive portrayal of the surrogate, the process, the client and the therapist's role in surrogate treatment. Maureen Sullivan is a surrogate who introduces us to two clients. Kip is a 24-year-old virgin male, and John is a middle-aged male who has experienced erection problems since separating from his wife. Both clients have agreed to be filmed during the process of their surrogate treatment. The story begins with the clients' first session at Maureen's home and ends with their closure session and the clients speaking about the experience.

This video also includes the therapeutic processing with the verbal therapist for both clients separately, for Maureen separately, and with Maureen, client and therapist together. Maureen also shares the personal struggles that she experiences in her private as well as

professional life.

At present, little attention is given in the media regarding surrogate treatment. In professional literature, the topics most likely to be found are focused on the ethical, moral and legal issues surrounding surrogate treatment, not the treatment itself. In the second edition of "Principles and Practice of Sex Therapy (1989)," Leiblum and Rosen observe: "Nowadays, medical, legal and ethical concerns have rendered the use of surrogates in sex therapy untenable in most centers."

However an article in The Medical Journal of Australia, Richardson (1991) offers a more positive perspective. Commenting on the morality concerns of surrogate treatment, he observes, "Even though some people question the morality of surrogate therapy, such successes, and the happiness which follows, make it appear to many of us that surrogate therapy has a place in the sex therapist's armamentarium."