

## Becoming kink-aware – a necessity for sexuality professionals

Sabitha Pillai-Friedman\*, J.L. Pollitt and Annalisa Castaldo

Center for Human Sexuality Studies, Widener University, Chester, PA, USA

(Received 19 August 2014; accepted 7 October 2014)

Bondage and discipline (B/D), dominance and submission (D/s), and sadism and masochism (S/M), also known as BDSM/kink, is becoming an increasingly popular topic in both mainstream media and people's sexual lives. As such, it is vital for sexuality professionals to have an understanding of BDSM and training in working with clients, over and above the current requirements. We present a three part training program which utilizes Sexual Attitude Reassessments (SARS), independent reading, and skills development through supervision, which will ensure that sexuality professionals are more than simply "kink-friendly" but are highly trained and able to help clients navigate concerns with kink and BDSM relationships.

**Keywords:** kink; BDSM; sex therapy; sex education; sexuality counselor; sexuality professional; kink-aware; kink-friendly

### Introduction: mainstreaming kink

The runaway success of the *Fifty Shades of Grey* trilogy demonstrates that the public is hungry for depictions of BDSM (bondage and discipline (B/D), dominance and submission (D/s), and sadism and masochism (S/M)) relationships, at least within the normative framework of a white, heterosexual couple. This trilogy written by E.L. James has become a major bestseller, selling over 100 million copies worldwide (Flood, 2014). The popular success of *Fifty Shades of Grey* was followed by a surge in public interest in BDSM and related activities. Deahl (2012), in a *Publishers Weekly* article that is appropriately titled, "The 'Fifty Shades' Tail: How Long, and far, will it stretch?" claims that the publishing world is capitalizing on the success of this trilogy and is promising readers similar content through marketing language such as "if you like *Fifty Shades*, you'll like this" (para. 5). Deahl further elaborates on the popularity of romance novels and other erotic writing with BDSM content. Popular websites including Amazon are selling BDSM-related paraphernalia such as blindfolds, handcuffs, whips, etc., demonstrating the public's desire to potentially explore kinkier sex (Gray, 2012).

BDSM has entered the mainstream through print, bill board and television ads, television shows, films, popular music, and the Internet. Weiss (2006) illustrates the different ways in which BDSM has entered the mainstream through the use of survey, focus groups, and interviews. She studied non-BDSM practitioners' reactions to two television ads by Ikea and Dannon yoghurt that show a slice of BDSM practice and to the film *Secretary*, which features an intense but ultimately fulfilling relationship depicting power exchange, sexual discipline, and control. Weiss claims that the ads normalized BDSM for the research subjects. However, she insists that the normative "happy ending" of *Secretary*

---

\*Corresponding author. Email: [spillai-friedman@widener.edu](mailto:spillai-friedman@widener.edu)

“redeemed BDSM by refolding it back into normative constructions of sexuality” (p. 115). Weiss’ posits that the mainstream acceptance of BDSM is conditional and rests on an expectation that it eventually will blend into the rigid sexual norms of society.

As BDSM continues to become more and more de-stigmatized, albeit conditionally, the mainstream public has started to openly discuss and to embrace formerly forbidden BDSM fantasies. Sexuality professionals may already be seeing clients who are newly curious about BDSM and others whose closeted, forbidden BDSM fantasies have been liberated. It is no longer a choice for sexuality professionals to deal only with vanilla sexuality, especially as “vanilla sex” has shrunk from describing all normative sexuality to referencing only “sexual activities typically associated with bland heterosexuality” that seem inherently unadventurous and unsatisfying (Francoeur, 1995, p. 693). It is also no longer a choice to describe themselves as “kink-aware” without adequate education and training.

## What is kink and BDSM?

### *Definition of terms*

Bondage and discipline (BD), sadism and masochism (SM) or dominance and submission (D/s) are all aspects of the kink known as BDSM (Richters, deVisser, Rissel, Grulick, & Smith, 2008). More specifically, Wiseman (1996) defines sadomasochism as “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” (p. 10). BD is defined as “rationally referring to the dominant restraining the submissive in some fashion, then ‘training’ them to behave in certain ways” (Wiseman, 1996, p. 10). While Wiseman’s (1996) definitions are useful, they do not make a clear distinction between SM and D/s. Castaldo (2014) provides more nuanced distinctions, differentiating between sadists and masochists – those who gain sexual/erotic pleasure from inflicting pain on a willing and consensual partner or partners, or derive sexual/erotic pleasure from pain delivered by a willing partner or partner – and dominants and submissives – those who gain sexual/erotic pleasure from controlling another person or from giving up control to another person, either within a scene or for all or part of a relationship.

A person practicing BDSM may engage in any or all of these behaviors identifying as dominant or submissive, sadist or masochist (Sandnabba, Santtila, Alison, & Nordling, 2002). It is important to note that many more identities exist on the spectrum of BDSM; the identities listed above are used as primary examples, but are not indicative of all possible identities. Weinberg, William & Moser’s (1984) widely cited article indicates five main components of BDSM, usually, but not always found together: (1) the appearance of dominance and submission; the appearance of rule by one partner over the other; (2) role playing; (3) consensually, that is, voluntary agreement to enter into the interaction; (4) mutual definition, i.e. shared understanding that the activities constitute SM or some similar term; and (5) a sexual context, though the concept that SM is always sexual is not shared by all participants. Though these components provide a description, they certainly do not provide an explanation, nor create an accurate picture of those who participate in any facet of BDSM. Because BDSM is much more prevalent in mass media and society today than in the past, it is important to further explore and understand it (Weiss, 2006).

The terms kink and kinky sex are often used to describe a variety of BDSM practices. Ortmann and Sprott (2013) claimed that the terms sadism, masochism, and fetish did not

arise from within the community but were borrowed from the medical and psychiatric communities. However, the words kink and kinky sex emerged more organically, created by early minorities without relying on medical or scientific jargon. Therefore, in many ways, the term kink is more appropriate if individuals want to honor this culture by using the terms they use to describe themselves, rather than those terms imposed on them from the outside (pp. 18–19).

### ***De-pathologizing BDSM***

BDSM has traditionally been pathologized by the legal system in child custody cases (Klein & Moser, 2006) through psychiatric diagnostic manuals (Reiersøl & Skeid, 2006), by law enforcement and employers (Ridinger, 2006; White, 2006), and by some feminists (Wright, 2006).

To combat the pathologizing psychoanalytic and medical perspectives of BDSM, some research has attempted to reframe BDSM in a social context. For example, a study conducted in 2008 decried the pathologizing of sexual kink, demonstrating that participants of BDSM were no more likely than non-participants to have been subjected to sexual coercion in the past, did not score higher on a scale of psychological distress, and were no more likely to suffer from sexual difficulty such as lack of interest in sex or reaching orgasm (Richters et al., 2008). Sandnabba et al. (2002) concluded that sadomasochists had attained higher levels of education, had higher incomes and were more likely to work in white-collar occupations. A majority of participants practicing SM held prominent positions at work and were involved in community service, supporting the idea that SMers are socially well functioning. Sandnabba et al. (2002) also noted that women, specifically, in the kink community were more likely than women outside the kink community to be better educated and satisfied with their sex lives and sexual orientation.

Wismeijer and van Assen (2013) compared personality traits of those who did and did not practice BDSM and who identified as either vanilla or kinky. When compared, researchers found that practitioners of BDSM were more extraverted, open to new experiences, less neurotic, less sensitive to rejection and more securely attached. Scores of their subjective well-being were also higher than those in the control group (non-kinky individuals). These findings may indicate that due to the level of consent and trust involved in most BDSM practices, those engaged in kinky behaviors may be more self-aware, better at communicating needs, desires, and boundaries and are open to taking more risks. Motivation for sexual risk-taking may stem from what Gaither and Sellbom (2003) classify as sexual-sensation seeking or the desire to be uninhibited and to explore novel sexual behaviors.

Barker, Gupta, and Iantaffi (2013) explored the multiple and overlapping “healing narratives” of BDSM using plots from television, movie, and books. However, they cautioned readers that the concept of healing narratives when applied to BDSM may reiterate the misconception that all BDSM practitioners are psychologically damaged and are engaging in BDSM to address their problems. The myriad reasons why practitioners engage in BDSM may be invalidated by the mainstream public in favor of the one socially acceptable benefit, namely, healing the body and mind. Though research in exploring the benefits of BDSM is challenging and complicated as the above authors have implied, it can add to the mainstream understanding and acceptance of BDSM. This additional research is needed in order to inform sex educators, counselors, and therapists of best practices and skill building when working with kinky clients.

### **Who are sexuality professionals according to AASECT (American Association of Sex Educators, Counselors, and Therapists)?**

It is easier to understand the different roles of the sexuality professionals using the PLISSIT model as a back drop. The PLISSIT model was developed by Annon in 1976. The model provides four levels of treatment for addressing sexual issues. Each letter or pairs of letters in the acronym suggested a method for handling the presenting sexual concern. Permission giving, limited information, specific suggestions, and intensive therapy are the four levels of treatment recommended by Annon (1975, 1976).

Sex educators teach and train about a range of topics on various aspects of sexuality. “Sexuality educators also may design and conduct workshops, courses, and seminars; contribute to the sexuality education literature, develop curriculum; plan and administer programs; deliver lectures and provide one-on-one education sessions” (Certification types: Distinguishing Sexuality Educators, Counselors, and Therapists, 2014). Sex educators can provide the first three stages of the PLISSIT model, namely, permission giving, limited information and specific suggestions.

Sex counselors “represent a variety of professions, ranging from medicine to the clergy. Examples of sexuality counselors are planned parenthood counselors, nurses, and other health professionals, school counselors, and clinical pastoral care and counseling providers” (Certification types: Distinguishing Sexuality Educators, Counselors, and Therapists, 2014). Sexuality counseling is limited to permission giving, limited information and specific suggestions in the PLISSIT model (Annon, 1976). It is generally short term and client centered and the focus is on the immediate concern or problem.

Sex therapists “are licensed mental health professionals, trained to provide in-depth psychotherapy, who have specialized in treating clients with sexual issues and concerns. In the absence of available licensure, they are certified, registered, or clinical members of a national psychotherapy organization” (Certification types: Distinguishing Sexuality Educators, Counselors, and Therapists, 2014). Sex therapists can provide all four levels of the PLISSIT model and “are prepared to provide comprehensive and intensive psychotherapy over an extended period of time in more complex cases” (Certification types: Distinguishing Sexuality Educators, Counselors, and Therapists, 2014).

### ***Psychotherapist ignorance, prejudice, and countertransference***

Kolmes, Stock, and Moser (2006) conducted a survey of 175 BDSM practitioners regarding their experiences in therapy. One-third of the participants in the study reported that they chose not to disclose their affiliation with BDSM lifestyle for fear of being judged negatively by their therapists. The researchers reported that the BDSM practitioners reported 118 incidents of “biased” and “inadequate” care (p. 315). The participants in the study reported that some therapists considered BDSM to be unhealthy and abusive and required clients to give up BDSM activities as a condition to continuing therapy. Some therapists assumed that BDSM interests were indicative of past family/spousal abuse. Some BDSM practitioners found that the therapists misrepresented themselves as kink aware when they were not knowledgeable about BDSM practices and needed to be educated about it.

The participants of the study listed knowledge and acceptance of BDSM lifestyle, experience with BDSM lifestyle, and a good grasp of the complexities of BDSM lifestyle as psychotherapist’s qualities that may be beneficial to BDSM practitioners.

### *Countertransference of sexuality professionals*

Countertransference is a term that is applied to the practice of psychotherapists and psychoanalysts. However, in the context of this article, it can also be applied to the practice of sexuality education and counseling.

Countertransference is a concept that has undergone many changes since Freud first coined the term in 1910 (Freud, 1958). According to Gelso and Hayes (2007), there are four conceptions of countertransference, namely, the classical, the totalistic, the complementary, and the relational. Hayes, Gelso, and Hummel (2011) conducted three meta-analyses on countertransference and its management and the relationship of both to psychotherapy outcomes. The above authors claim that despite the definitional ambiguities surrounding countertransference, most empirical studies on countertransference “have employed a definition that implicates the therapist’s unresolved conflicts as the source, often with patient characteristics as the trigger” (p. 89). For instance, a psychotherapist who has experienced physical abuse as a child and has not processed the experience adequately in psychotherapy and supervision may pathologize kink and label it as self-destructive behavior.

### *Cultural countertransference*

The term “cultural countertransference” was coined by Perez Foster in 1998 to describe the countertransference feelings experienced by psychotherapists, who serve culturally diverse populations. The author describes cultural countertransference as:

a matrix of intersecting cognitive and affect-laden beliefs/experiences that exist within the therapist at varying levels of consciousness. Within this matrix lie: the clinician’s American life value system; theoretical beliefs and practice orientation; subjective biases about the ethnic groups; and subjective biases about their own ethnicity. (Perez-Foster, 1998, p. 253)

This concept of cultural countertransference can be effectively applied to psychotherapists who work with clients who practice BDSM. In the practice of BDSM, emotions and behaviors that are normally considered unhealthy and undesirable, namely, shame, powerlessness, domination, submission, receiving pain, giving pain, giving up control, are normalized and eroticized. Within the matrix of the cultural countertransference, as it applies to kinky clients and their sexuality professionals, sexuality professionals have to confront their own mainstream value system, theoretical beliefs and practice orientation, subjective biases about various aspects of BDSM, and their subjective bias about their own sexuality.

Nichols (2006) asserts that a lack of knowledge and experience in treating BDSM clients may result in several treatment issues. Nichols identifies the therapists’ countertransference as a major stumbling block in treating BDSM clients. She posits that a therapist who is inexperienced in treating BDSM clients may experience a range of feelings when their clients reveal information about their BDSM proclivities. The feelings may include “shock, fear, anxiety, disgust, and revulsion” (p. 286). She further theorizes that when such feelings are intellectualized, the therapist may develop a deep conviction that the client’s behavior is self-destructive. Nichols asserts that “feelings of disgust or aversion may convey information about repressed or disowned parts of the therapist’s own sexuality” (p. 287). She goes on to suggest specific ways for therapist to process their disgust or aversion, which may result in invaluable information about their own sexuality. Hence, Nichols clearly states that the therapists’ own countertransference is important in the treatment of

BDSM clients. Adequate training and supervision that is kink-specific is necessary to process and address the sexuality professionals' mainstream prejudices and biases.

Even though this section addresses countertransference specifically to sex therapists, countertransference can negatively impact the practice of sexuality educators and counselors as well. For instance, a sexuality educator may choose not to address BDSM in a comprehensive sex education curriculum. A nurse practitioner who is also a sexuality counselor may wrongly diagnose a patient who practices BDSM as a victim of domestic violence and initiate the reporting process.

### ***Kink-aware and kink-friendly therapists***

On the National Coalition for Sexual Freedom (NCSF) website, in a document titled "A guide to choosing a kink-aware therapist," authors Kolmes and Weitzman (2010) distinguish between kink-aware and kink-friendly therapists. The authors claim that a kink-aware therapist is able to distinguish between healthy BDSM and non-consensual abuse and recognize BDSM as a normal part of the sexual spectrum. These kink-aware therapists have educated themselves about BDSM through books, articles, discussion groups and other resources. They understand the unique stressors that BDSM practitioners experience in keeping their BDSM practice secret. Kink-aware therapists have a good understanding of the BDSM community and explicitly welcome clients who practice BDSM through their advertising materials. Besides, kink-aware therapists are aware that for many of their clients who practice BDSM, it "is just another facet of the client's life, like their vegetarianism or their hobby of knitting" (Kolmes & Weitzman, 2010, p. 2).

The same authors suggest a kink-friendly therapist as an option for those clients who are unable to find a kink-aware therapist. A kink-friendly therapist might not have the training or education about the needs of people who practice BDSM. However, the therapist may have experience with other sexual minority clients, such as members of the GLBT (gay, lesbian, bisexual, and transgender) community and she would be willing to maintain an open mind, and she can commit to not being judgmental towards the kinky client. She will also welcome your suggestions about books and other resources that she can use to expand her awareness of BDSM. (Kolmes & Weitzman, 2010, pp. 2–3)

The AASECT certification guidelines (Certification overview – certification and certification renewal, 2014) and College of Sexual and Relationships Therapists (COSRT) certification guidelines ([www.cosrt.org.uk](http://www.cosrt.org.uk)) suggest that therapists who are kink-friendly can get certified and practice as a sex therapist. Hence, a certified sex therapist without additional training and supervision may be kink-friendly but not kink-aware. Kink-friendly therapists may be accepting the BDSM lifestyle, however, they may not be able to navigate their clients through the numerous kink-specific issues. The kink-specific issues listed by Kolmes and Weitzman (2010) include the coming-out process, communication about BDSM proclivities with one's non-kink-inclined partner, negotiating boundaries within and outside of the relationship, facilitating the creation of master-slave contract for 24/7 lifestyles, and distinguishing BDSM from abuse (p. 5).

Kolmes et al. (2006) caution that "Until BDSM practices and lifestyles are included routinely as part of the human sexuality component of training for all practitioners, and until the mental health profession begins to recognize BDSM individuals as a subculture requiring special knowledge, skills, and sensitivity, there remains the risk that therapists may be providing services to BDSM individuals without ever having received appropriate study, training, or supervision" (p. 306). They also state that "having an 'interest' in



BDSM or even practicing BDSM does not necessarily qualify one to work in this area” (p. 305).

### **Putting it into practice: facilitating a three-prong training**

The goal of this training is to promote awareness and in-depth understanding of BDSM in order to encourage sexuality professionals to not only become kink-friendly, but more importantly to become kink-aware. This goal will be accomplished by utilizing a three-prong approach, which includes Sexual Attitude Reassessments (SARS), independent reading, and skills development through supervision.

### ***Underlying educational philosophy***

Adult learners, especially highly trained professionals, seek information that is applicable to their own personal and professional lives ([Knowles, 1984](#)). It is important to acknowledge these varied backgrounds, wide-ranging maturity levels, motivations, and attitudes ([Apps, 1981](#); [Cross, 1981](#)). Instruction with in-depth conceptual explanations and discussions and engaging intellectual exploration of ideas are also key to providing optimal learning for adults ([Kasworm, 2003](#)). Because of the nature of both the students and the material, an existentialist learning philosophy is the best model for this program. An existentialist philosophy of learning promotes an individual’s sense of autonomy, places responsibility upon the shoulders of the learner, and emphasizes achievement of one’s own self-definition ([Broudy, 2007](#)). Because it does not approach educating students through the use of indoctrination or popular traditional, societal ideologies, it is extremely well suited for teaching material such as BDSM. This training does not attempt to pass judgment on a person’s views regarding BDSM and kink. It does not intend to push a specific agenda, but instead to provide activities and information that can aid in participant’s becoming not only kink-friendly, but legitimately kink-aware. Through the use of existentialist philosophy, participants can reach their own conclusions and continue to further develop and clarify their values. In terms of actual classroom practice, both group interaction ([Eggen & Kauchak, 2006](#)) and cooperative learning ([Breuss & Greenberg, 2004](#)) are suggested. Both these methods ask students to work collaboratively and take responsibility for creating a safe environment – necessary elements when dealing with provocative topics such as BDSM. Activities such as creating common ground rules at the start of the class, journaling, discussing reactions first in pairs or small groups before a full class discussion, and affective check-ins ([Silberman, 1996](#)) are all suggested. Please refer to Appendix 2 for learning objectives and the procedural steps of this training.

### **Model for training kink-aware sexuality professionals**

It is clear that sexuality professionals need to follow a clear and deliberate path to kink awareness. [Stayton \(1998\)](#) developed a model for training professionals in human sexuality using the Sexual Attitude Reassessment (SAR) model. He emphasizes that a fully integrated sexuality curriculum would include three areas of didactic and experiential training, namely, desensitization and resensitization, knowledge building, and skill development. In addition, [Barker \(2005\)](#) developed a tool for training specifically about SM that may be useful to incorporate during the first prong, SAR experience. Barker’s tool complements and adds to this training by challenging sexuality professionals to examine

their underlying bias and current understanding of SM. The three areas of training occur in cumulative steps. This three-pronged approach offers a thorough and consistent way to educate sexuality professionals about BDSM. It is important to note that the three-pronged approach, although a great guide for clinicians, has not been experimentally tested for increasing competency.

***Prong one: desensitization and resensitization/experiential education***

SAR was originally developed by the Institute for the Advanced Study of Human Sexuality. According to [Stayton \(1998\)](#), the Institute for the Advanced Study of Human Sexuality, formerly known as the National Sex Forum of San Francisco, was “the originator of an implosion model in sexuality desensitization through the use of explicit films. These films are of persons, couples, and groups involved in all types of sexual behavior and activity” (p. 28). Stayton emphasizes the use of “trigger” films that elicit intense reactions in SAR participants in order to explore and process deep seated feelings and attitudes about sexuality. The SAR organizers follow the screening of explicit films with small group discussions and lectures. The small groups are meant to process the intense reactions to the material presented in the SAR. The all-day continuous format of the SAR and explicit material presented in films and discussions serve to create an in-depth awareness about sexual inhibitions, fears, and anxieties. Desensitization is one of the major and important outcomes of a SAR. The other benefits include creating an awareness of different sexual behaviors and practices.

A basic 10-hour long SAR with a variety of topics is a requirement for AASECT certification (Certification overview – certification and certification renewal, [2014](#)). An advanced SAR designed exclusively with BDSM content may be a necessary next step for sexuality professionals who are planning to practice with clients who have interest in BDSM. The SAR could include explicit films with BDSM content, a panel presentation by BDSM practitioners, and a BDSM demonstration and/or a visit to a dungeon, a space that is designed for public or private BDSM play.

A BDSM focused SAR can help therapists confront possible countertransference feelings. When the BDSM focused SAR is created, the facilitators of the SAR need to be highly experienced and comfortable with the BDSM content in the films and discussions. [Nichols \(2006\)](#) explicitly describes a step-by-step process through which therapists can work through countertransference feelings towards the BDSM content. The process begins with the identification and acknowledgment of the negative feeling/s followed by a thoughtful analysis of the reason for such a reaction and finally finding ways to address the negative feelings (pp. 287–288). Participants may benefit from the use of a feeling words worksheet to articulate better their emotions and reactions ([Center for Nonviolent Communication, 2014](#)). Facilitators of the SAR can use Nichols model and create a rubric for processing the feelings of the SAR participants during small group discussions. It would be ideal, but not necessary, if at least one of the facilitators had experience in the BDSM world and strong facilitation skills in order to respond to the myriad of feelings that may arise during such a SAR.

Procedure based on the educational theories discussed in the section titled *underlying educational philosophy* can be found in Appendix 2.

***Prong two: knowledge-building/didactic education***

This section of training aims to provide guidance in selecting the reading list and other resources (found in Appendix 1) in order to gain better understanding not only of the



varieties of kink but also to gain a better understanding of its practitioners. This basic reading list about the practice of BDSM and the diversity within the community is fundamentally important to this training. It is unprofessional to use clients as a resource for learning about BDSM. Each client most likely will have different experiences and approaches to the BDSM world, which will need to be placed in a broader context. To contextualize individual's experience with BDSM, it is helpful and necessary to complete the suggested reading on this list. (This list does not include all the books and articles that have been written about BDSM. It includes a sample of scholarly and mainstream works on BDSM.) It is useful for sexuality educators and therapists to read both scholarly and popular works on BDSM. In this way, both knowledge of current research and an understanding of what an individual may already be bringing to the therapy session or education setting (as seen in mainstream media representations) is provided. The following paragraphs outline specific reading selections and resources for further exploration that may be considered when facilitating this three-prong approach to becoming not only kink-friendly, but kink-aware.

Volume 50 (nos 2–3) of the *Journal of Homosexuality*, which was published simultaneously as *Sadomasochism: Powerful Pleasures* (2006), is edited by two of the leading authorities on kink, Peggy Kleinplatz and Charles Moser. This work offers an excellent collection of BDSM scholarship and should be read by any sexuality professional with an interest in BDSM. A similarly excellent book titled *Safe, sane, and consensual: Contemporary perspectives on sadomasochism* (2013) edited by Darren Langdridge and Meg Barker explores a range of topics of SM from a non-pathological perspective. Nichols' (2006) journal article titled "Psychotherapeutic Issues with 'Kinky' Clients" is an invaluable resource for understanding countertransference, for working with "newbies", spouses and partners, and discriminating between abuse and sexual "play". In addition, there are also two ethnographic studies of BDSM communities, Weiss (2011) *Techniques of Pleasure* and Newmahr (2011) *Playing on the Edge*. Both these works are written from a post-structuralist, theoretical viewpoint and may be useful additions to the reading list.

Internet resources are also widely available and easily accessible. For example, The National Coalition for Sexual Freedom (NCSF) has excellent information, including a Kink Aware Professionals Directory and a survey of BDSM therapy clients. The Community-Academic Consortium for Research on Alternative Sexualities (CARAS) offers a wealth of research and opportunities, including a yearly academic conference (the 2013 conference is the sixth such annual conference CARAS has held). Finally, The Alternative Sexualities Health Research Alliance (TASHRA) is an organization with a mission to improve the physical and mental health of people practicing BDSM. TASHRA is now starting to run independent research projects and collect population data. All three websites can provide sex therapists with up-to-date information.

Sexuality professionals should also be familiar with the contributions of BDSM practitioners for the popular press. Because it is likely that most clients will have read some of these works beforehand and because clients may also want reading suggestions, sexuality professionals are encouraged to investigate pop culture representations of kink. *SM 101: An Introduction* (Wiseman, 1996) and *Screw the Roses, Send Me the Thorns* (Miller & Devon, 1995) are the two popular books that need updating. Neither has been updated to reflect the realities of the Internet. *The New Bottoming Book* (Easton & Hardy, 2001) and *The New Topping Book* (Easton & Hardy, 2003) offer solid, lively introductions to BDSM. A more recent work, *Playing Well with Others* (Harrington & Williams, 2012) is also an excellent introduction, although the focus is almost completely on public play events. *This Curious Human Phenomenon* (Masters, 2008) explores BDSM from a

more psychological perspective and while it presupposes too much knowledge to serve as an introduction, it is an interesting read and serves as a bridge between popular works and scholarly research. Finally, Taormino's (2012) *The Ultimate Guide to Kink* is unique in that it collects essays from established practitioners in all manner of different BDSM sub-fields, so this work is a tapestry of expert voices.

Completing a selection of these readings not only provides therapists with a more complex, comprehensive understanding of BDSM and kink, one which they will share with most of their clients, but also allows them time for personal reflection, critical thinking, and a continual evaluation of their own preconceptions and boundaries. This list is by no means and in no way exhaustive. It mainly functions as an introductory starting point, giving sexuality educators, counselors, and therapists a set of tools to utilize in the education and counseling of clients.

Procedure based on the educational theories discussed in the section titled *underlying educational philosophy* can be found in Appendix 2.

### ***Prong three: skill development through supervision***

Supervision is a professional relationship between an experienced and certified supervisor and a relatively inexperienced supervisee. According to Milne (2009), "[Supervision is] the formal provision, by approved supervisors, of a relationship-based education and training that is work-focused and which manages, supports, develops and evaluates the work of colleagues" (p. 15). Milne claims that it differs from activities such as mentoring and therapy by incorporating added components of evaluation and obligation. Supervisors use corrective feedback on the supervisees' performance, teaching, and collaborative goal-setting. Milne posits that the objectives of supervision "are 'normative' (e.g., case management and quality control issues), 'restorative' (e.g., encouraging emotional experiencing and processing) and 'formative' (e.g., maintaining and facilitating the supervisees' competence, capability and general effectiveness)" (Milne, 2009, p. 15).

Supervision of professional practice is mandated in social work, psychology, marriage and family therapy, and other helping professionals. AASECT has specific certification criteria for sexuality educators, counselors, and therapists. Although the AASECT certification criteria for all three sexuality professionals emphasizes that the applicant be exposed to a "variety of human sexuality issues" there is no special emphasis on kink-awareness. COSRT similarly does not emphasize any focus on BDSM population in its supervision criteria (COSRT Accreditation, 2014).

Sexuality professionals need additional supervision to develop the necessary competence to work with the BDSM population. As discussed in the earlier sections of this article, lack of in-depth knowledge about BDSM practices, countertransference issues, and ethical concerns about professional competence are major concerns that sexuality professionals need to address in working with the BDSM practitioner population.

It would be onerous to create a separate certification process for supervision related to BDSM. It would, however, be professionally responsible to create guidelines for supervision. A basic supervision requirement, in addition to the educational training and SAR experience described above, should include at least 20 hours (10 hours of individual and 10 hours of group or 20 hours of individual) of supervision with a kink-aware professional. The supervision could be bi-weekly or monthly and could be distant or in-person as allowed by AASECT. It would be advisable for those professionals who work frequently with the BDSM population to have ongoing supervision with a kink-aware professional well past the 20 hours. Professionals who consider themselves as kink-aware

professionals should create peer supervision groups to explore blind spots and counter-transference issues on an ongoing basis. These supervision requirements have not been tested and are merely the professional opinion of the first author.

It behooves sexuality professionals to seek their own supervision with kink-aware professionals. The AASECT listserv often has discussions about BDSM and related topics. It is quite easy to identify professionals who have experience working with kinky clients. The AASECT ALT SIG (alternative special interest group) listserv was created for sexuality professionals who are interested in alternative lifestyles. Participation in the ALT SIG may give sexuality professionals an idea about knowledgeable individuals in the field who may serve as their supervisors. The National Coalition for Sexual Freedom website [www.ncsfreedom.org](http://www.ncsfreedom.org) has several pages dedicated to kink-awareness. The website includes a directory of kink-aware professionals. There is also a LinkedIn group for kink-aware/friendly professionals. AASECT allows long-distance supervision through Skype or telephone. This may be a suitable option for sex therapists who would like to seek supervision from supervisors who live and practice in a different part of the country or the world.

### Conclusion

Most sexuality professionals are open minded and eager to help clients navigate their sexual journey, no matter where that path may lead. But when the path involves a still-taboo subculture that delves into intense physical sensations and emotionally powerful role play, open mindedness is not enough. Sexuality professionals need specialized training to acquaint them with the intricacies of the BDSM culture, kink-specific SAR films to help elicit and process negative reactions to kink, and supervision to make sure that therapists are comfortable in dealing with kinky clients. The three part program described here can serve as a model for ensuring that sexuality professionals are fully capable of helping their clients open up to BDSM, navigate difficulties unique to the subculture and differentiate between clients who need help with some aspect of their BDSM choices and those who are kinky but seeking therapy for other reasons.

### Notes on contributors

Sabitha Pillai-Friedman is an assistant professor at the Center for Human Sexuality Studies at Widener University. She is also a licensed clinical social worker (LCSW) and an AASECT certified sex therapist (CST) and an AASECT approved supervisor. In addition to her teaching, she maintains a clinical practice in Philadelphia, PA.

J.L. Pollitt graduated from the PhD program at the Center for Human Sexuality Studies in May 2014. Her dissertation was titled *As she likes it: Erotic agency and the deconstruction of Fifty Shades of Grey*.

Annalisa Castaldo is an associate professor in the English Department at Widener University and has recently completed her Master's degree in sexuality education at the Center for Human Sexuality Studies at Widener University.

### References

- Annon, J.S. (1975). *The behavioral treatment of sexual problems: Intensive therapy* (Vol. 2). Honolulu, HI: Enabling Systems.
- Annon, J.S. (1976). *Behavioral treatment of sexual problems: Brief therapy*. Hagerstown, MD: Harper & Row.

- Apps, J.W. (1981). *The adult learner on campus: A guide for instructors and administrators*. Chicago, IL: Follett.
- Barker, M. (2005). Experience of SM awareness training. *Lesbian and Gay Psychology Review*, 6(3), 268–273.
- Barker, M., Gupta, C., & Iantaffi, A. (2013). The power of play: The potentials and pitfalls in healing narratives of BDSM. In D. Landridge & M. Barker (Eds.), *Safe, sane and consensual: Contemporary perspectives on sadomasochism* (pp. 203–222). London: Palgrave Macmillan.
- Breuss, C.E., & Greenberg, J.S. (2004). *Sexuality education: Theory and practice* (4th ed.). Sudbury, MA: Jones and Bartlett.
- Broudy, H.S. (2007). Sartre's existentialism and education. *Educational Theory*, 21, 155–177.
- Castaldo, A. (2014). Personal communication, January 10, 2014.
- Center for Nonviolent Communication. (2014). *Feelings inventory*. Retrieved August 15, 2014, from [http://www.cnvc.org/sites/default/files/feelings\\_inventory\\_0.pdf](http://www.cnvc.org/sites/default/files/feelings_inventory_0.pdf)
- Certification overview – certification and certification renewal. (2014). Retrieved August 12, 2014, from <http://www.aasect.org/certification>
- Certification types: Distinguishing sexuality educators, counselors, and therapists. (2014). Retrieved May 18, 2014, from <http://www.aasect.org/certification-types-distinguishing-sexuality-educators-counselors-and-therapists>
- COSRT Accreditation. (2014). Supervision. Retrieved August 18, 2014, from <http://www.cosrt.org.uk/members-and-professionals/accreditation-faq/>
- Cross, K.P. (1981). *Adults as learners: Increasing participation and facilitating learning*. San Francisco, CA: Jossey-Bass.
- Deahl, R. (2012). The “fifty shades” tail: How long, and far, will it stretch? *Publishers Weekly*, 259(33), 4–n/a. Retrieved August 15, 2013, from <http://search.proquest.com/docview/1033560213?accountid=14707>
- Easton, D., & Hardy, J. (2001). *The new bottoming book*. Gardena, CA: Greenery Press.
- Easton, D., & Hardy, J. (2003). *The new topping book*. Gardena, CA: Greenery Press.
- EGgen, P.D., & Kauchack, D.P. (2006). *Strategies and methods for teachers: Teaching content and thinking skills*. Boston, MA: Pearson.
- Flood, A. (2014). Fifty shades of Grey trilogy has sold 100m copies worldwide. *The Guardian*. Retrieved from <http://www.theguardian.com/books/2014/feb/27/fifty-shades-of-grey-book-100m-sales>
- Francoeur, R.T. (1995). *The complete dictionary of sexology*. (Revised, expanded edition). New York, NY: Continuum.
- Freud, S. (1958). Future prospects of psychoanalytic psychotherapy. In J. Strachey (Ed.), *The standardized edition of the complete psychological works of Sigmund Freud* (Vol. 11, pp. 139–151). London: Hogarth. (Original work published 1912).
- Gaither, G.A., & Sellbom, M. (2003). The sexual seeking scale: Reliability and validity within a heterosexual college student sample. *Journal of Personality Assessment*, 81(2), 157–167.
- Gelso, C.J., & Hayes, J.A. (2007). *Countertransference and the inner world of the psychotherapist: Perils and possibilities*. Mahwah, NJ: Erlbaum.
- Gray, E. (2012). “50 Shades of Grey” spurs sales of kinky sex accessories. *Huffington Post*. Retrieved from [http://www.huffingtonpost.com/2012/06/07/fifty-shades-of-grey-sales-sex-accessories-toys\\_n\\_1579346.html](http://www.huffingtonpost.com/2012/06/07/fifty-shades-of-grey-sales-sex-accessories-toys_n_1579346.html)
- Harrington, L., & Williams, M. (2012). *Playing well with others*. Gardena, CA: Greenery Press.
- Hayes, J.A., Gelso, C.J., & Hummel, A.M. (2011). Managing countertransference. *Psychotherapy*, 48(1), 88–97.
- Kasworm, C. (2003). Adult meaning making in the undergraduate classroom. *Adult Education Quarterly*, 53(2), 81–98.
- Klein, M., & Moser, C. (2006). SM (Sadomasochistic) interests as an issue in a child custody proceeding. In P.J. Kleinplatz & C. Moser (Eds.), *Sadomasochism: Powerful pleasures* (pp. 233–242). Binghamton, NY: Harrington Park Press.
- Kleinplatz, P., & Moser, C. (Eds.). (2006). *Sadomasochism: Powerful pleasures*. Binghamton, NY: Harrington Park Press.
- Knowles, M. (1984). *The adult learner: A neglected species* (3rd ed.). Houston, TX: Gulf Publishing.
- Kolmes, K., Stock, W., & Moser, C. (2006). Investigating bias in psychotherapy with BDSM clients. *Journal of Homosexuality*, 50(2–3), 301–324.

- Kolmes, K., & Weitzman, G. (2010). *A guide to choosing a kink-aware therapist* [Fact sheet]. Retrieved August 24, 2013, from [https://ncsfreedom.org/images/stories/pdfs/KAP/kap\\_white\\_paper%20final.pdf](https://ncsfreedom.org/images/stories/pdfs/KAP/kap_white_paper%20final.pdf)
- Masters, P. (2008). *This curious human phenomenon: An exploration of some uncommonly explored aspects of BDSM*. Las Vegas, NV: The Nazca Plains Corporation.
- Miller, P., & Devon, M. (1995). *Screw the roses, send me the thorns: The romance and sexual sorcery of sadomasochism*. Fairfield, CT: Mystic Rose Books.
- Milne, D. (2009). *Evidence-based clinical supervision. Principles and practice*. Chichester: BPS Blackwell.
- Newmahr, S. (2011). *Playing on the edge: Sadomasochism, risk and intimacy*. Bloomington: Indiana University Press.
- Nichols, M. (2006). Psychotherapeutic issues with “Kinky” clients: Clinical problems, yours and theirs. *Journal of Homosexuality*, 50(2–3), 281–300.
- Ortmann, D.M., & Sprott, R.A. (2013). *Sexual outsiders: Understanding BDSM sexualities and communities*. Lanham, MD: Rowman & Littlefield.
- Perez-Foster, R. (1998). The clinician’s cultural countertransference: The psychodynamics of culturally competent practice. *Clinical Social Work Journal*, 26(3), 253–270.
- Reiersøl, O., & Skeid, S. (2006). The ICD diagnoses of fetishism and sadomasochism. In P.J. Kleinplatz & C. Moser (Eds.), *Sadomasochism: Powerful pleasures* (pp. 243–262). Binghamton, NY: Harrington Park Press.
- Richters, J., deVisser, R.O., Rissel, C.E., Grulick, A.E., & Smith, A.M.A. (2008). Demographic and psychosocial features of participants in bondage and discipline, “sadomasochism” or dominance and submission (BDSM): Data from a national survey. *Journal of Sexual Medicine*, 5, 1660–1668. doi:10.1111/j.17436109.2008.00795.x.
- Ridinger, R.R. (2006). Negotiating limits: The legal status of SM in the United States. In P.J. Kleinplatz & C. Moser (Eds.), *Sadomasochism: Powerful pleasures* (pp. 189–216). Binghamton, NY: Harrington Park Press.
- Sandnabba, N.K., Santtila, P., Alison, L., & Nordling, N. (2002). Demographics, sexual behavior, family background, and abuse experiences of practitioners of sadomasochistic sex: A review of recent research. *Sexual and Relationship Therapy*, 17, 39–55.
- Silberman, M. (1996). *Active learning: 101 strategies to teach any subject*. Des Moines, IA: Prentice Hall.
- Stayton, W.R. (1998). A curriculum for training professionals in human sexuality using the Sexual Attitude Restructuring (SAR) model. *Journal of Sex Education and Therapy*, 23(1), 26–32.
- Taormino, T. (2012). *The ultimate guide to kink: BDSM, role play and the erotic edge*. Berkeley, CA: Cleis Press.
- Weinberg, T.S., William, C.J., & Moser, C. (1984). The social constituents of sadomasochism. *Social Problems*, 31, 379–389.
- Weiss, M.D. (2006). Mainstreaming kink. *Journal of Homosexuality*, 50(2), 103–132.
- Weiss, M. (2011). *Techniques of pleasure: BDSM and the circuits of pleasure*. Durham, NC: Duke University Press.
- White, C. (2006). The Spanner trails and the changing law on sadomasochism in the UK. In P.J. Kleinplatz & C. Moser (Eds.), *Sadomasochism: Powerful pleasures* (pp. 167–187). Binghamton, NY: Harrington Park Press.
- Wiseman, J. (1996). *SM 101: A realistic introduction*. Gardena, CA: Greenery Press.
- Wismeijer, A.J., & van Assen, A.M. (2013). Psychological characteristics of BDSM practitioners. *The Journal of Sexual Medicine*, 10(8), 1943–1952.
- Wright, S. (2006). Discrimination of SM-identified individuals. In P.J. Kleinplatz & C. Moser (Eds.), *Sadomasochism: Powerful pleasures* (pp. 217–231). Binghamton, NY: Harrington Park Press.



## Appendix 1. Reading material and other resources to understand BDSM

### Articles

Gaither, G.A., & Sellbom, M. (2003). The sexual sensation seeking scale: Reliability and validity within a heterosexual college student sample. *Journal of Personality Assessment*, *81*(2), 157–167. doi:10.1207/s15327752jpa8102\_07

Kolmes, K., & Weitzman, G. (2010). *A guide to choosing a kink-aware therapist* [Fact sheet]. Retrieved August 24, 2013, from [https://ncsfreedom.org/images/stories/pdfs/KAP/kap\\_white\\_paper%20final.pdf](https://ncsfreedom.org/images/stories/pdfs/KAP/kap_white_paper%20final.pdf)

Kolmes, K., Stock, W., & Moser, C. (2006) Investigating bias in psychotherapy with BDSM clients. *Journal of Homosexuality*, *50*(2–3), 301–324. doi:10.1300/J082v50n02\_15

Lawrence, A.A., & Love-Crowell, J. (2007) Psychotherapists' experience with clients who engage in consensual sadomasochism: A qualitative study. *Journal of Sex & Marital Therapy*, *34*(1), 67–85. doi:10.1080/00926230701620936.

Nichols, M. (2006). Psychotherapeutic issues with “Kinky” clients: Clinical problems, yours and theirs. *Journal of Homosexuality*, *50*(2–3), 281–300. doi:10.1300/J082v50n02\_14

Richters, J., deVisser, R.O., Rissel, C.E., Grulick, A.E., & Smith, A.M.A. (2008). Demographic and psychosocial features of participants in bondage and discipline, “sadomasochism” or dominance and submission (BDSM): Data from a national survey. *Journal of Sexual Medicine*, *5*, 1660–1668. doi:10.1111/j.17436109.2008.00795.x.

Sandnabba, N.K., Santtila, P., Alison, L., & Nordling, N. (2002). Demographics, sexual behavior, family background, and abuse experiences of practitioners of sadomasochistic sex: A review of recent research. *Sexual and Relationship Therapy*, *17*, 39–55. doi:10.1080/14681990220108018.

Weinberg, T.S., William, C.J., & Moser, C. (1984). The social constituents of sadomasochism. *Social Problems*, *31*, 379–389.

Weiss, M.D. (2006). Mainstreaming kink. *Journal of Homosexuality*, *50*(2), 103–132. doi:10.1300/J082v50n02\_06.

Wismeijer, A.J., & van Assen, A.M. (2013). Psychological characteristics of BDSM practitioners. *The Journal of Sexual Medicine*, *10*(8), 1943–1952. doi: 10.1111/jsm.12192

### Books

Easton, D., & Hardy, J. (2001). *The new bottoming book*. Gardena, CA: Greenery Press.

Easton, D., & Hardy, J. (2003). *The new topping book*. Gardena, CA: Greenery Press.

Harrington, L., & Williams, M. (2012). *Playing well with others*. Gardena, CA: Greenery Press.

Kleinplatz, P., & Moser, C. (Eds.). (2006). *Sadomasochism: Powerful pleasures*. Birmingham, NY: Harrington Park Press.

Landridge, D., & Barker, M. (Eds.). (2013). *Safe, sane and consensual – contemporary perspectives on sadomasochism*. London: Palgrave Macmillan.

Masters, P. (2008). *This curious human phenomenon: An exploration of some uncommonly explored aspects of BDSM*. Las Vegas, NV: The Nazca Plains Corporation.

Miller, P., & Devon, M. (1995). *Screw the roses, send me the thorns: The romance and sexual sorcery of sadomasochism*. Fairfield, CT: Mystic Rose Books.

Moon, L. (Ed.). (2008). *Feeling queer or queer feelings? Radical approaches to counseling sex, sexualities and genders*. New York, NY: Routledge.

Newmahr, S. (2011). *Playing on the edge: Sadomasochism, risk and intimacy*. Bloomington: Indiana University Press.

Ortmann, D.M., & Sprott, R.A. (2013). *Sexual outsiders – understanding BDSM sexualities and communities*. Lanham, MD: Rowman & Littlefield.

Taormino, T. (2012). *The ultimate guide to kink: BDSM, role play and the erotic edge*. Berkeley, CA: Cleis Press.

Weiss, M. (2011). *Techniques of pleasure: BDSM and the circuits of pleasure*. Durham, NC: Duke University Press.

Wiseman, J. (1996). *SM 101: A realistic introduction*. Gardena, CA: Greenery Press.

### Internet resources

National Coalition for Sexual Freedom. Retrieved from <https://www.ncsfreedom.org/>

Community-Academic Consortium for Research on Alternative Sexualities. Retrieved from <https://carasresearch.org/>

Alternative Sexualities Health Research Alliance. Retrieved from <http://www.tashra.org/>



Pink therapy (UK's largest independent therapy organization working with gender and sexually diverse clients). Retrieved from <http://www.pinktherapy.com/>

Audio lectures and additional training

Dossie Easton: Cultural Competence with BDSM Relationships. Retrieved from <https://archive.org/details/CulturalCompetenceWithBdsmRelationshipsWithDossieEastonMft>

Dominic Davies: Role of BDSM in Sexual Pleasure. Retrieved from <https://www.youtube.com/watch?v=oGZYih7nyJM&feature=youtu.be>

CARAS: Training DVD for counselors and therapists on working with BDSM clients. Retrieved from <https://carasresearch.org/professional/bdsm-and-therapy-project>

## Appendix 2. Learning objectives and procedure

Learning objectives

Participants will be able to:

- examine the complexities of the BDSM lifestyle;
- examine emotions, judgments and biases related to BDSM practitioners;
- gain a larger breadth of knowledge related to kink and BDSM practice;
- distinguish healthy BDSM from non-consensual abuse.

SAR procedure based on the educational theories discussed above in the section titled *underlying educational philosophy*:

- (1) Before conducting the SAR, be sure to establish classroom ground rules. Post ground rules in the classroom as a reminder and reference.
- (2) Pass out the worksheet found in Appendix 1 to each participant.
- (3) Introduce the first video and briefly explain what participants are about to view.
- (4) As a large group, watch the designated video or presentation.
- (5) After the video or presentation ends, break participants up into small groups.
- (6) In small groups, instruct participants to discuss their feelings and thoughts about the video or presentation that was just viewed, emphasizing participants to examine their self-awareness and attitudes and values related to BDSM.
- (7) Once small group discussion has commenced, bring participants back to the large group for additional processing.

Repeat these steps with each video or presentation in succession; 5–10 videos may be used depending upon length and time; presentations of BDSM activities are dependent on available volunteers and will require more time than a video.

For additional impact, participants may be instructed to write a reflection paper or create a journal entry describing their experiences. This step is optional.

Knowledge-building procedure based on the educational theories discussed above in the section titled *underlying educational philosophy*:

Before the beginning of training, the instructor will create a list of questions related to assigned readings to be used later as an assessment tool. Between 5 and 10 questions per reading is recommended.

- (1) Hand out Appendix 2, a reading list of both academic and pop culture articles about BDSM and kink.
- (2) Instruct students to read each required article or book on the list.
- (3) After completing each reading, participants will answer questions related to the reading.

As with the SAR, the instructor may also suggest including a reflection paper or journal entry about the participant's experience.