

Introduction: The State of Our Knowledge on SM

Charles Moser, PhD, MD

Institute for Advanced Study of Human Sexuality

Peggy J. Kleinplatz, PhD

University of Ottawa

It is with great pleasure that we introduce an entire issue of the *Journal of Homosexuality* devoted to sadomasochism, also known as SM, S/M, BDSM, D/S and Leather; each has a slightly different meaning. For simplicity, we will refer to the concept generically as SM.

It is vitally important that we include the study of SM in order to have a broader understanding of all sexuality. Havelock Ellis' (1903/1936) statement (made before the terms or concepts of sadism and masochism were in common use) remains true:

The relation of love to pain is one of the most difficult problems, and yet one of the most fundamental, in the whole range of sexual psychology. . . . [I]f we succeed in answering it . . . we shall have

Charles Moser is Professor and Chair of the Department of Sexual Medicine, Institute for Advanced Study of Human Sexuality, San Francisco, CA. Peggy J. Kleinplatz tate for Advanced Study of Medicine and School of Psychology, University of Ottawa, Ottawa, ON, Canada.

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made clear the normal basis on which rest the extreme aberrations of love. (p. 66)

It is not clear why SM has not engendered more attention from researchers. All the large survey studies of sexual behavior have ignored SM behavior almost completely (e.g., Hunt, 1974; Kinsey, Pomeroy, Martin, 1948; Kinsey, Pomeroy, Martin, Christensen, 1953; Laumann, Gagnon, Michael, Michaels, 1994). Thus, our estimates of the incidence and prevalence of SM behavior are rudimentary. Perusing the average adult bookstore or sexually explicit Internet sites, one finds a large variety of SM materials. It is reasonable to assume that this abundance of media would not be produced unless there were a market for it. SM educational, support, and social organizations can be found in every state in the US and in many foreign countries (see Wright, this volume; SM International, this volume). SM is widespread enough so that mainstream movies, television shows, commercials, and magazines refer to it commonly without having to explain it to their audiences (see Weiss, this volume). Yet it is still virtually unstudied scientifically.

The first task of this introduction is to define SM. As indicated below, we asked all the contributors to this volume to define their terms in their articles. This task is actually quite difficult. First, who is to define it? Is it to be the helping professionals (e.g., physicians, psychotherapists, social workers) who work with these people clinically, though not necessarily for the consequences of SM interests? Should it be the lawyers and legislators who define the crimes and determine when the behavior goes "too far"? Should terms be defined by researchers who study SM and, more specifically, by theorists or by those who collect data? Is it to be defined by SM practitioners themselves, and if so, by which subgroup? Not only the obvious SM subgroups are relevant here (e.g., men versus women, heterosexuals versus homosexuals, and Caucasians versus racial minorities), but also other kinds of group/subgroup variations. Should we differentiate between those who seek only occasional SM encounters incorporated into more conventional sexual patterns or those for whom virtually every sexual act has an SM tinge to it? Other taxonomic issues include recognizing the balance between the physical (e.g., pleasure/pain) dimension and the psychological manifestations (e.g., dominance and submission) of SM. Some people have very specific, and even exclusive, erotic interests (e.g., spanking, bondage), while others are more experimental and incorporate a wide variety of SM and other activities. Some are interested in SM as just part of their sexual relationship and others feel it has nonsexual purposes (e.g., spirituality, fulfilling other emotional needs) or is a mix of the two.

So what is SM? It is sometimes easier to say what it is not. It does not entail violence and it is not nonconsensual. That does not mean that an SM practitioner cannot commit a violent or nonconsensual act but that

such acts are not part of SM.

To complicate matters, SM is not necessarily what it appears to be on the surface. Many years ago, one of us (CM) was invited to an SM party; it was my first such experience and the first time the participants allowed a researcher to observe them "in action." At the beginning of the party, a man began what seemed like an especially savage beating of a woman. I watched uncomfortably, not knowing why the other, seemingly nice guests were not coming to her aid. Obviously, this severe beating could not be pleasurable and this must be violating all the limits and party rules I had studied beforehand. While deliberating about what to tell the police when asked why I sat by and did nothing as this man savagely beat this woman to death, I decided I had to act. Just as I stood up to intercede, the woman had a magnificent orgasm and I sank back into my chair to ponder my miscalculation. At the end of the evening, the woman asked her partner, "Can we stop on the way home for a drink, before we do this again?" It was amazing that she could still walk, but unbelievable that she was eager for a repeat performance. Obviously, there was much to be learned and a neophyte researcher's fascination with the subject was born.

So what is SM and who are the practitioners? This is actually the subject of great debate among SM practitioners. It is not uncommon to hear one person denigrate the SM style of another. "Wannabes," "novices," "game players," "thrill seekers," "wankers," and "the clueless" are among many labels used to distinguish "real" practitioners from the supposed posers. (Some people feel that SM stands for "stand and model.") There is conflict between those who engage in SM only "online" and those who do it only in "real-life." Some people denigrate those who do not take part in SM "community" life (i.e., a network or networks of support groups, social events, educational classes, and businesses that cater to an SM clientele). There are those who choose to remain anonymous; they feel they "invented" this with their partners and there is no reason to venture out. There are those who proclaim their SM interests loudly and those who deny their desires. Furthermore, some do not regard SM as a set of interests or desires but as an identity, just as some, but not all, individuals who engage in homosexual acts adopt a gay identity. It is obviously easier to study members of community groups, but we do not know if they are different from those more private individuals.

So is SM a set of sexual behaviors comparable to anal or oral sex? Is it a type of sexual orientation? Is it genetically set? Is it culturally determined? At this time, unfortunately, the answer is "yes" and, "we really do not know yet" to all these questions. More research is in process; this volume is just a beginning.

How has SM been defined in the literature? Some 20 years ago, one of the editors co-authored an article which has been cited widely (see Weinberg, William & Moser, 1984). It indicated that there are five components of SM. Not all five must be present in order to constitute SM, but they usually are found together. The five components are:

- 1. The appearance of dominance and submission; the appearance of rule by one partner over the other.
- 2. Role playing.
- Consensuality, that is, voluntary agreement to enter into the interaction.
- 4. Mutual definition, i.e., a shared understanding that the activities constitute SM or some similar term.
- 5. A sexual context, though the concept that SM is always sexual is not shared by all participants.

So does this set of components define SM? These components provide description more than explanation and certainly do not constitute a definition. Of course, it is no easier to define heterosexual, homosexual, gay, or queer.

We have researched SM (both together and separately) previously, often to the bemused glances, yawns or, rarely, the outright consternation of other sexologists. We began to notice that audience members who attended our presentations rarely asked any questions or made comments; that is, not until they caught us alone later. We realized gradually that people were following our work. Slowly, our papers began to be cited in textbooks. Foreign colleagues began telling us that our papers were describing SM in their countries. It eventually became obvious that it was not us, but the subject matter that kept people at a distance.

We have estimated privately that approximately 10% of the general population is involved in SM, but there are no studies on which to base that figure. Based on our experiences in conference hallways (where the real exchange of knowledge and learning in academia often transpires),

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an even greater proportion of sexologists, sex educators, sex researchers, and sex therapists are so involved. Although sexologists are usually quite nonchalant about their personal sexual behavior, those who have confided in us have done so in hushed tones and have requested our undying pledges of discretion. We have even run across partners who each request our secrecy, but cannot bring themselves to tell one another. Simple self-disclosures are not typically sufficient to solve the couple's problem; such are the intricacies of SM. In some instances, both partners are dominant, or submissive, or maybe one yearns for the physical aspects of SM while the other for the psychological aspects, or maybe their familiarity destroys the fantasy, etc.

Since I attended that first SM play party in 1974, the number of SM support groups in the U.S. has increased from one to over one hundred. A Google search of BDSM reveals over 27 million Web pages (performed 11/21/04). Although many participants worry about the effect if their SM interests became known, others now live their lives without at-

tempting to hide their sexual proclivities.

On the other hand, as is evident in this volume, SM participants lose custody of children, security clearances, inheritances, jobs, are disowned, assaulted, and generally are victims of discrimination and persecution/prosecutions. Much of the discrimination is surprisingly overt. A leader of a gay rights organization admitted that her resistance to working with SM groups was because SM "made [her] sick."

In 1969, the Stonewall riots occurred in New York City and the Gay liberation movement was born. Over the years, the name of the parade honoring this event and promoting acceptance of alternative sexual interests has changed, becoming more inclusive. In San Francisco, this event was initially known as Gay Freedom Day Parade (FDP), then as the Lesbian and Gay FDP, then as the Lesbian, Gay and Bisexual FDP, then the Lesbian, Gay, Bisexual, and Transgendered FDP, and currently the Lesbian, Gay, Bisexual, Transgendered, and Intersexed FDP. The SM community (both Gay and Straight) has always marched in the parade, often over the objections of the parade organizers, but has never been recognized formally. In the early years, the crowd often booed the SM contingent.

Leather is a term often used in the Gay and Lesbian community as a synonym for SM. In San Francisco, there is a public flagpole that flies the Gay Pride Rainbow flag. The city agreed to fly the Leather Pride flag during the week before the Folsom Street Fair, an event that draws 400,000 people per year to celebrate their interest in and support of Leather and SM interests. Nevertheless, it is still over the objections of

many Gay activists that the Leather Pride flag flies for even that one week.

Although notable progress in visibility has occurred, in some areas, tolerance is lagging. Recently, a sex research organization chose "unusual sexual interests" as a conference theme. A simple listing of the possible topics in the Call for Papers resulted in a number of statements concerning the inadvisability of proceeding with a conference on such a sensitive topic. There were also a few personal exclamations of being "appalled" and "aghast."

These stories demonstrate that even among other sexual minorities, sex researchers, and sexual rights activists, SM still elicits a panoply of negative feelings. Sexual Sadism and Sexual Masochism are still listed as diagnoses in the *DSM*, despite the absence of studies proving that SM practitioners even fit the criteria for definition of a mental disorder (see

Moser & Kleinplatz, 2005).

Nonetheless, SM remains a fascinating topic for further study. It involves sexual behavior that is readily observable, which is useful for descriptive researchers. It has taught us an immense amount about all sexuality and communication. We hope this volume gives the reader a flavor of what there is to learn from the SM practitioners.

A PREVIEW OF SM: POWERFUL PLEASURES

It seems only fitting that this collection should begin with a review of the SM literature by Thomas S. Weinberg, PhD. Weinberg has written the seminal reviews in this field since 1978. It is our privilege to be able to include his update of social science research in this volume. Weinberg chronicles recent theoretical and methodological advances in the study of SM. Research in this field has moved from early clinical, predominantly psychoanalytic perspectives to an emphasis on psychosocial aspects of SM. Correspondingly, there has been an increase in survey research, content analyses, ethnographic research and critiques of traditional assumptions and beliefs regarding SM. Weinberg summarizes the state of our knowledge in the field. He focuses on the symbolic, ritualistic and theatrical aspects of SM roles, socialization into an SM identity and the organization of SM subcultures. Weinberg concludes that with the shift from the study of clinical populations to SM as a complex social phenomenon, current research depicts SM practitioners as "emotionally and psychologically well-balanced, generally

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comfortable with their sexual orientation, and socially well adjusted." Weinberg's review illuminates the need for further research in this area. We hope this volume will contribute meaningfully to the burgeoning study of SM.

It became apparent as soon as we began to receive manuscripts that there was great variation in how authors conceived of SM. According to Niklas Nordling, PhD, N. Kenneth Sandnabba, PhD, Pekka Santtila, PhD, and Laurence Alison, PhD, similar differences exist among SM practitioners themselves. Nordling et al. stated, "Clearly, [SM] cannot be thought of as unitary phenomenon: People who identified themselves as sadomasochists probably mean different things by these identifications." Nordling et al. used a questionnaire to study SM in gay (N = 91) versus straight (N = 95) SM subcultures in Finland. They found that the themes predominating, particularly among men, vary depending on sexual orientation. Whereas gay men tend to emphasize "hypermasculinity," straight men veer towards pain and "humiliation." Of course, one might question whether even these terms capture precisely what they mean to the individuals involved.

In addition, Nordling et al. provided another valuable contribution. They questioned the commonly held assumption that SM desires are caused by disturbed early relationships. Nordling et al. tested the assumption that the "etiology" of SM is linked to early family dynamics; they have claimed that SM functions as a form of affect regulation among those who come from dysfunctional families. Nordling et al. found no significant differences between gay and versus straight SM subjects in attachment styles, or between their SM participants as compared to published data on general adult samples.

Rebecca Plante, PhD, examines how we conceptualize SM and how participants construct their identities by examining what may be the quintessential SM activity: spanking. The paradox discovered by Plante is that many of those in the spanking scene do not consider their behavior to be sadomasochistic nor do they identify as SM practitioners. Plante employs fieldwork including interview and observational data from heterosexual spanking parties. She discovered that many of those who engage in spanking neutralize the stigma associated with their activities by distinguishing between their behavior and SM. In fact, participants in Plante's study seemed to distance themselves from and expressed disdain for SM players. Others attempted to vitiate/nullify the stigma by normalizing their desires, explaining that such proclivities are "natural" and commonplace, even if not everyone acknowledges them. Plante works within a sexual script perspective and outlines the narra-

tives used by participants to explain, sustain and justify their activities. It is striking and almost comical how rigidly the rules and roles of the spanking scene are delineated to keep within group norms—just as is the case with conventional sex scripts within the "vanilla" world. As Plante concludes, "Social norms are pervasive, even in a sexually radical subculture."

Much of the research on SM focuses on sexual acts or whatever scenes can be observed by researchers. Peter L. Dancer, PhD, Peggy J. Kleinplatz, PhD, and Charles Moser, PhD, MD, have added to the literature in the area by examining full-time owner-slave relationships. This study was conducted via an Internet questionnaire and involved 146 self-identified slaves in 24/7 SM relationships. Dancer et al. investigated what characterizes such relationships and keeps them viable over time. Dancer et al. found that these relationships are sustained by rules and rituals intended to signify, reinforce and heighten the awareness of the status and position of the slave, even when seemingly out of "role," for example, at work. These rules and rituals governed every moment of the slave's life, from waking to sleeping.

For those who think of SM as purely or even primarily "sexual" in nature, this study calls that assumption into question. Here, SM is more about a way of being and a lifestyle than about discrete acts. Indeed, many of the participants reported that SM slavery constituted and defined their identities and even their "orientation(s)." Interestingly, the option of exiting slavery is built into the relationship (e.g., via solo bank accounts); the paradox is that the possibility of leaving ensures that slaves remain in their relationships of their own free will. That choice, however, whether to stay or to leave, may be the only one they retain upon committing to slavery.

What are we to make of the increasing visibility of SM imagery in American pop culture? According to Margot Weiss, PhD, we should be cautious about equating the rising visibility with corresponding levels of acceptance or understanding. Weiss argues that on the contrary, the nature of current depictions, which simultaneously sensationalize and sanitize SM, reinforce our perceptions of SM practitioners as "other." She used focus group and interview data as well as a review of media representations. Weiss suggests that "mainstreaming kink" signifies a paradox: We are drawn to the exotic, enough to make us peer in on all the deviants from a nice, remote distance; alternately, we co-opt what agery into pablum. SM has been "commodified" to boost sales of yogurt or furniture. Weiss suggests that viewers disappointed by increasingly

bland SM imagery point to a hunger for something darker, more authentic and transgressive. In a time of sociopolitical repressiveness, Weiss is encouraged by this response and hopes that untamed erotic energy will continue to attract those seeking the real thing.

Patricia A. Cross, PhD, and Kim Matheson, PhD, have conducted a series of three important studies on SM. They set out to investigate the mental health, values and motives of self-identified SM participants. Traditionally, psychoanalytic and other mental health practitioners have commonly believed that SM participants are pathological in a myriad of ways, from being antisocial to running away from reality and from themselves. In addition, others have assumed that dominant men are closet misogynists, inclined to use the guise of SM in order to get away with assaulting women. Cross and Matheson tested these assumptions by giving a battery of psychometric tests to 93 SM participants and 61 members of a control group. Their comparisons showed no significant differences in terms of psychopathology or escapist tendencies. Furthermore, dominant men were more likely to hold pro-feminist attitudes than "normal" control group participants. Cross and Matheson suggest not only that the prevailing beliefs are erroneous but also that "sadomasochism may simply be a form of sex play, providing those individuals with sufficiently adventurous attitudes towards sex with the experience of intense and intimate encounters."

What, then, is SM about and what is at the core of the experience? Cross and Matheson planned to answer this question by studying online SM interaction. However, in order to ensure the validity and generalizability of their findings, Cross and Matheson had to first design a study to verify that online SM players resembled "real life" SM players. Ingeniously, Cross and Matheson compared online SM players with other online fantasy role-play participants (e.g., Dungeons and Dragons players) and with a sample of "real life" SM players. Cross and Matheson found that online and "real life" SM players were comparable but that both were significantly different from control participants. In an age of extensive Internet-based research, this finding alone constitutes a valuable contribution.

Cross and Matheson then went a step further and performed content analyses on eight online SM dialogues involving 16 self-identified SM participants. Their results demonstrated that power exchange is central to and the motivating factor in SM play.

This set of findings, namely that SM participants are "normal" in terms of mental health and values and that it is the desire for power

exchange-rather than pain or psychopathology-which fuels SM activity, forces us to reconsider all the conventional "wisdom" on SM.

Chris White, PhD, relates the story of the Spanner case, as well as discussing its origins and implications. The Spanner case remains the most notorious of the criminal trials to date revolving around SM. In 1989, a group of 16 gay men were arrested in the United Kingdom as a result of their SM activities. Curiously, all the men present were charged with assault even though several were presumably the "victims" while others were the "perpetrators." Those who were "assaulted" in the scene were charged with "aiding and abetting" assault or grievous bodily harm upon themselves. The British law under which the participants were charged was interpreted to mean that no one can consent to being assaulted. Exceptions are justified in terms of the public good. Notably, these exceptions include boxing, parental chastisement of children and military combat. Mutual sexual/erotic gratification was not significant enough to join this group of excluded behaviors, notwithstanding the consent of the participants. White explores the rationales of those who would consider boxing to be in the public interest but would not accord the same status to consensual SM play. The conviction of the Spanner defendants led to appeals all the way up to the European Court of Human Rights in 1997, which upheld the right of the state to apply such laws.

White points out that the deliberations involved in the Spanner case highlight the erroneous beliefs and biases within the justice system. The police and judges failed to distinguish between "real" violence and SM play, regardless of the participants' testimony. According to White, the operative word here is, in fact, "play." She cites an unnamed SM practitioner who testified in the course of the Spanner trials and stated, "Sadomasochism is only violence by metaphor: a closer metaphor would be to view sadomasochism as theater." Furthermore, White contrasts the refusal to consider the defendants' perspective in the Spanner case with the judge's lenience in a similar case, in which the defendant was acquitted. The latter case, however, involved a married couple. Apparently, married (heterosexual) couples are accorded legal protections not afforded to gay men. White's account of the Spanner case, the verdict, sentencing and their meanings suggest the need for a fuller public discourse on sexual consent.

Robert Ridinger, MA, MLS, traces the history of legal conceptions and the status of SM. Ridinger explains that Victorian conceptions of SM as degeneracy and 20th century psychiatric classification of SM as psychopathology set the stage for legal regulation of SM conduct, be-

ginning in the 1960s. Early and continuing beliefs that SM was immoral and that anyone who would engage in such practices must be insane led to a curious legal situation; the implication was that SM was a form of assault to which its participants, by definition, could not give informed consent (as in the Spanner case). The criminalization of SM opened the door to overt and legal discrimination against SM practitioners in court. SM practitioners are threatened with loss of child custody and, in fact, consistently lose custody in court. Similarly justified fears surround the threat of employment termination. Over the last decade, with growing polarization in the United States over sexual mores, prosecutions of SM practitioners have increased. Ridinger reviews the complexities of consent, protection, the right to privacy and to sexual freedom within American law. He concludes by describing emerging responses by SM organizations to attempts at persecution.

Susan Wright, MA, is ideally situated to discuss these efforts by SM activists. As spokesperson for the National Coalition for Sexual Freedom (NCSF), she has been in the forefront of the battle for civil rights for members of sexual minorities. Wright details the history of discrimination against SM practitioners since the 1970s. Over the last 30 years or so, SM has become more visible and thus its practitioners have faced more overt condemnation. She explains that SM has been attacked from both the right and the left. Specifically, SM has been targeted as immoral by the American religious right and as degrading and exploitative by sex-negative feminists. Ironically, for a time, even lesbian SM was condemned as patriarchal violence. Wright describes how the work of pro-SM feminists, including herself, led to a turnaround in the policy of the National Organization for Women (NOW), which has retreated from its previous position opposing SM. Nonetheless, SM remains an "orphan" among sexual minorities, conspicuously excluded from the GLBTIQ umbrella. As such, in 1997, the NCSF was formed as an SM advocacy group. Unfortunately, continuing threats to the civil rights of SM practitioners keep the NCSF busy. Wright chronicles discrimination against individuals, parents, private parties and organized SM community events. She argues effectively that it is only through widespread education that SM can be demystified, thereby preventing further persecution of SM participants.

If Ridinger and Wright speak of pervasive threats and oppression of SM practitioners, Marty Klein, PhD, and Charles Moser, PhD, MD, help to bring the reality of such persecution home. Klein and Moser provide a case illustration of a woman who lost physical custody of her son because of her own SM proclivities. What gives this story its power is

that it is real; this is not a fictionalized or even a composite account, although identifying details have been changed to protect confidentiality. It is presented with the participants' courageous and informed consent because they wanted others to know just how devastating the accusation of SM activity can be in court.

Despite the lack of evidence that the child had any knowledge of or was exposed to his mother's sexual activities in any way, let alone affected by them, the mother was seen as dangerous to him.

The presence of the diagnostic category of Sexual Masochism in the *DSM* leaves psychologically healthy, good parents (and their partners) liable to being misdiagnosed and pathologized. Notwithstanding some egregious errors by the psychologist who testified against the mother and despite the expert testimony by the first author, who attempted to set the record straight, the outcome was predictable. The mere allegation of SM in child custody disputes is volatile and prejudicial enough to destroy families.

North American clinicians can be somewhat insulated from international perspectives on mental health and psychopathology. Odd Reiersøl, PhD, and Svein Skeid provide much-needed balance by focusing on the F65 section of the *International Classification of Diseases*, 10th edition (*ICD*-10). The *ICD* is published by the World Health Organization and is the international counterpart to the American Psychiatric Association's *DSM*. The *ICD* classifies Sadomasochism as pathological alongside Fetishism and Fetishistic Transvestism in section F65.

Reiersøl and Skeid discuss the manifold reasons for removing F65 from the next edition of the ICD. Their objections to the pathologizing of these "Paraphilias" include conceptual weaknesses (e.g., assumptions about norms, clarity, cohesion, organization) and empirical flaws (e.g., methodological and statistical shortcomings plus the lack of convincing research). Reiersøl and Skeid point out that current nosologies of sexual disorders are based in the notion that heterosexual intercourse is the ideal; they argue that this outdated viewpoint is a holdover from a Victorian value system and early, psychoanalytic domination of the mental health professions. They acknowledge that the sexuality of some individuals leads to distress or to committing antisocial acts. Reiersøl and Skeid contend that impulsive and compulsive acts should rightly be classified in the Personality Disorders or Habit and Impulse Disorders sections of the ICD. As for crimes, these should be handled by the criminal justice system and not confused with psychopathology. Furthermore, the classification of Paraphilias as psychopathology has clinical and ethical implications. Reiersøl and Skeid describe the deleterious

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psychological and social effects of being diagnosed with a mental illness and suggest that the current classification system does more harm than good.

Reiersøl and Skeid review the history of opposition to the F65 section in Europe. In 1997, the Revise F65 Forum was founded in Norway, composed of GLBT SM groups and mental health professionals. Skeid was instrumental in the formation of this organization. The authors discuss a variety of influences which helped to mobilize opposition to F65 including the successful campaign to eliminate the diagnosis of sadomasochism in Denmark, the Spanner case in the United Kingdom, and the human rights concerns of the gay pride movement in Europe. Their account provides an important counterpart to similar attempts at reexamining the Paraphilia classification in general and the Sexual Sadism and Sexual Masochism diagnoses in particular in North America. Reiersøl and Skeid conclude that there is much to be gained by working together. The results of their activism to date are inspiring.

The recognition that most of the readily available, English information on SM tends to be American led us to put out a request on numerous listservs and Websites for information on SM internationally. The request called for information on SM oriented groups in the particular country, SM subculture(s), the social and legal status of SM, levels of acceptance, tolerance or stigma, etc. We are grateful to have received information on BDSM in Brazil from Bia Sel, Helio Pachoal, Maria Cristina Martins, Konstantin Gavros, Misty Avalon and Paulo Roberto Ceccarelli; on SM in Germany from Mark-A, Kathrin Passig, and Johannes Jander; on SM in Austria from Robert; on SM in Switzerland from Matthias Leisi and on SM in Norway from Kelly. In addition, we received regional information on SM in Canada from Naughty Nancy and on SM in the United States from Mistress Blair. Their responses give us an inkling of the diversity in social expressions of SM in North and South America and in Europe. Clearly, far more information will be required to obtain a comprehensive picture of SM around the world. We appreciate the authors' contributions in beginning this endeavor.

The field of psychotherapy has been paying more attention in recent years to ethnic and cultural diversity. Increasing literature has been focusing on the need for therapist sensitivity to minority patients' backgrounds. In addition, there has been a growing interest in the concerns of gay and lesbian clients in therapy. However, little has been written about psychotherapy issues involving other sexual minority patients. Margaret Nichols, PhD, helps to fill this gap. She describes the myths and realities of BDSM and then discusses the common issues confront-

ing therapists who work with this population. Nichols is a sex therapist who has specialized in working with queer clients for over 20 years; as such, she is well situated to note the parallels between the clinical concerns in therapy with gay/lesbian clients and those interested in BDSM. Specifically, she highlights the need for therapists to be aware of negative attitudes towards BDSM. Such prejudices can trigger therapists' own countertransference reactions as well as creating internalized shame in clients. Conversely, therapists who are comfortable with BDSM can look beyond it, to see when sex should *not* be the focus of therapy. In addition, Nichols provides a variety of case examples of individual and couples therapy involving BDSM. These illustrations demonstrate the importance of a strong knowledge base in working with sexual minority clients.

Empirical evidence for the need for culturally competent clinicians, attuned to the needs of clients who practice SM, is provided by Keely Kolmes, PsyD, Wendy Stock, PhD, and Charles Moser, PhD, MD. Kolmes et al. argue that as a matter of ethics, clinicians should not be providing services outside their areas of education, training, supervised experience, etc. They contend that BDSM practitioners constitute a discernible subculture and that specialized training is required for ethical treatment of this population. This assertion was supported by the survey of 175 BDSM practitioners regarding their experiences in therapy. Fully one-third of participants reported choosing not to disclose their BDSM proclivities in therapy, many for fear of being judged negatively by their therapists. Participants reported 118 incidents of biased care, including having to educate therapists about SM, being pathologized a priori on the basis of their desires, and being subject to therapists who failed to distinguish between BDSM and abuse. Indeed, their data establish the need for ethical guidelines for provision of clinical services with BDSM-identified individuals.

Peggy J. Kleinplatz, PhD, concludes this volume by turning common assumptions surrounding SM on their ear. Many of the contributors to this collection point out that beliefs about SM are typically unfounded and attempt to separate myth from reality. Fittingly, Kleinplatz starts with a question: What if instead of pathologizing SM practitioners, we attempt instead to learn from them? What lessons can we learn about the farther reaches of human erotic potential by learning from those who engage in extraordinary sex? Kleinplatz is a sex therapist and focuses on optimal sexual development rather than the more typical concern with dysfunctions and pathology. She presents two cases of couples she had seen in therapy who illustrate the heights that people can reach when

they relinquish conventional sexual rules and roles. Both couples, one initially heterosexual and "vanilla" while the other identified from the outset as "leather dykes," chose instead to be fully alive and engaged with each other in SM play. Kleinplatz lists ten lessons taught by these two courageous couples. Ordinary couples and ordinary sex therapists have much to gain by going beyond "us and them" perspectives and by regarding those we have marginalized as on the cutting edge of sexual potential.

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