Open non-monogamy is an important and sensitive area for psychotherapists and
counsellors, as it can challenge the practitioner’s personal values, and
professional assumptions about dyadic sexual relationships. Additionally, the
increased attention to non-monogamy in popular culture, and the sometimes-
ambiguous distinction between ‘monogamy’ and ‘non-monogamy’ make
understanding the potentials and challenges of non-monogamy a priority for sex
therapy specialists. We recommend existential sex therapy as a useful, non-
pathologizing model for addressing the needs of openly non-monogamous
clients. Both therapists with limited experience working with non-monogamous
clients, and those seeking new theoretical frameworks, may benefit from the use
of existential sex therapy. We identify core existential therapy principles,
including bracketing (i.e. reflectively identifying, and endeavouring to separate
out one’s own prejudgments and values) and horizontalizing (i.e. working to
situate the client’s sexual identity within the wider context/horizon of their life
experience), as methods for affirming the importance of freedom and belonging
in light of the client’s subjective, lived experience.

Keywords: sex therapy; existential psychotherapy; non-monogamy; polyamory

Aside from being heteronormative, love stories are historically dyadic: boy meets girl,
they fall in love, and triumph or tragedy ensues as they live happily ever after, or not.
The contemporary proliferation of LGBTQ-oriented art and activism has helped to
challenge the heteronormative framework of love narratives. Also, within the discipline
of psychotherapy, growing attention to LGBTQ issues has helped show that people
rarely, if ever, fit precisely into sexual binaries, and “straight or gay” is an untenably
reductive way to view sexual identity. Despite the progress made in issues of sexual
diversity overall, and LGBTQ issues specifically, the one-to-one assumption of sexual
partnership seems to still be commonplace in the sex therapy field, necessitating the
question: how can we effectively and appropriately work with openly non-monogamous
It is important to acknowledge that clinicians have varying degrees of experience, and varying levels of comfort, working with non-monogamous clients. This article is intended primarily for clinicians with a lower level of experience in this area, and clinicians looking for new strategies and approaches in dealing with non-monogamous clients. We recommend existential therapy as a framework well-equipped to deal with both the common elements of human experience—the day-to-day challenges in one’s professional or personal life associated with leading a less socially conventional life—and the unique challenges of open non-monogamies—associated with the need to define and establish a framework of personal meaning in relationships that may fall outside many people’s (and many psychotherapists’) conceptual frameworks. Below, we outline the core principles of existential sex therapy, including the focus on the multiple meanings the client may have surrounding sex, emphasis on the client’s unique lived experience, and the importance of considering the client’s sexual identity, behaviours and choices within the context of wider, unique lived experience.

Existential sex therapy is grounded in a non-pathologizing model of sexuality, which views human sexual behaviours as existing within a broad and diverse spectrum. This non-pathologizing approach rejects a binary view of ‘healthy’ and ‘pathological,’ or ‘normal’ and ‘abnormal’. Instead, the existential sex therapist sees sexuality and sexual behaviour as subjectively situated within the context, or horizon, of one’s individual life. An underlying core objective of the existential approach is to confront and problematize the non-reflexive assumptions that may be reflected in socially conventional scripts of sexual health and normality. In this regard, our model of existential sex therapy is influenced by the work of contemporary researchers who seek
to challenge traditional and non-reflexive notions of sexual health and pathology, (e.g. Kleinplatz, 2012; Tiefer, 1995). This non-pathologizing psychotherapeutic model, we contend, provides an extraordinary means for addressing the extraordinary experiences openly non-monogamous clients may bring into the consulting room.

**Sex and Subjectivity: The Heuristic Value of Labels**

Most sexual and relationship therapists are likely to encounter non-mainstream sexualities in their clinical practice. The capacity to deal with evolving normative frameworks, and widely variant client identities, is an essential skill for psychotherapists. Especially when working with diverse clients, even something so familiar as the language that we use has powerful implications. For instance, while terms like “straight” and “gay,” or “monogamous” and “non-monogamous” or even “her” and “him” have a heuristic value, they inevitably restrict the ways in which we communicate about—and the ways we conceive of—ourselves and our clients. We might say that such terms are both enabling and constraining, as they enable us to communicate, but they never fully capture the client’s subjective experience and identity. This linguistic issue is a clear illustration of the challenges we face when working from an existential framework: our concepts, and the labels we apply, are often inadequate in describing the complex world of sexuality. The very language we use in this paper provides a clear example. Throughout this paper we use the pronoun “they” in favour of the gender dichotomous singular pronouns “she” and “he,” in discussing individuals, and in referencing individual clients (in effect, we use “they” as both a singular and plural term). Our hope is that this inclusive language may create a space for clients, and our readership, to self-identify according to their terms of preference, and in accordance with their subjective, lived identities.

Clients may define their identities and sexual practices in reference to particular
categories; lesbian, gay, bisexual, queer and trans being common terminology. The burgeoning popular interest in open non-monogamies (Barker & Langdridge 2010), the increasingly hazy distinctions between monogamy and non-monogamy (Barker, 2011), the problematizing of traditional language and conceptualizations of sexuality, and the increasingly salient presence of such non-heteronormative sexualities in western society make clinical competence in these areas an important priority. As many clinicians attest: a language for discussing the client’s sexuality, shared between client and therapist, is essential. Below, we provide a brief overview of the non-monogamous relationship patterns therapists may encounter amongst their clients, before illustrating the relevant key principles of existential psychotherapy, and showing how they may be of particular use in working with non-monogamous clients.

**Non-monogamies**

Recent research indicates that non-monogamy is a heterogeneous category, which includes a number of variant relationship arrangements. These arrangements differ with respect to: 1) the kinds of relationships engaged in; 2) the degrees of transparency and disclosure involved, and 3) specific terms of mutually-agreed conduct (behavioural ‘contracts’) or the lack of them. In the academic and research sphere, a number of articles and books have begun to explore the issue of non-monogamy (Adam, 2006; Barker & Langdridge, 2010; de Visser and McDonald, 2007; Rubin, 2001; Sheff, 2005; McLean 2004). Additionally, there is an expanding range of books and publications for individuals involved in, or considering, non-monogamous relationships (Benson, 2008; Matik, 2002; Ravenscroft, 2004; Taormino, 2008). Taken together, these bodies of work seek to disambiguate the high levels of flexibility and variability seen in openly non-monogamous ways of relating.

The most common forms of non-monogamy in western culture are: swinging
and open relationships (both of which involve the possibility of sexual encounters
outside a primary relationship), and polyamory (which entails being open to a
multiplicity of simultaneous love-relationships) (Barker & Langdridge, 2010).
Swinging and open relationships involve a primary and enduring partnership, with
acceptance of additional sexual encounters or relationships. In both, the primary couple
may engage in encounters together or separately from their partner, although swinging
implies a shared experience involving both members of the couple, while open
relationships do not necessarily connote a shared experience, and may imply more
separate/individual extra-relationship activities (Easton & Hardy, 2009; Barker &
Langdridge, 2010). It must be noted, however, that the way couples conceive their
sexual relationships, and negotiate conduct agreements, can vary widely between
couples, and within a single couple, over time (McLean, 2004). Equally, polyamorous
relationship arrangements, which can involve multiple concurrent sexual and love
relationships, vary significantly. As such, the existential psychotherapist must be
prepared to deal with non-monogamous clients phenomenologically, on a case-by-case
basis, taking into account the individuality and subjectivity of particular clients.
Within the sphere of open non-monogamies, specialized terms help provide a
conceptual framework for understanding the nature of sexual and romantic
relationships. Newer terms—such as ‘metamour’ (the partner of one’s partner),
‘monogamish’ (a relationship defined by some degree of openness to sexual/emotional
relationship outside the couple), and ‘frubbly’ (the sense of pleasure one derives from
knowledge of a partner’s satisfaction and pleasure with other partners)—have been
added to more familiar terms such as ‘polyamory’, ‘swinging’, ‘dogging’, etc. (Richards
& Barker, 2013; Ritchie & Barker, 2006).
These types of sexual labels have the potential to be both enabling and
constraining: while they offer a conceptual and heuristic value, they are hardly tidy
categories. Though such terms enable us to discuss clients' unique, subjectively
experienced sexual identities (and therefore it behooves the therapist to inform
themselves about open non-monogamies and the common terminology involved prior to
working with such clients, (Richards & Barker, 2013)), clients are unlikely to fit exactly
within a categorical prototype. Just as no client is ‘just gay’, or ‘just straight’, no client
is 'just polyamorous'. As experienced clinicians often observe, clients may self-identify
(comfortably or uncomfortably) in relation to particular sexual categories, but what
these terms mean, and how they relate to the client’s subjective experience of personal
identity, will vary—often significantly—from one individual to the next, and within a
given individual over time. Thus, clinicians require a psychotherapeutic framework that
enables an effective, meaningful understanding of the client’s sexuality, as the client
lives and experiences it: phenomenologically and subjectively. Like the subjectivist
interpretation of the client’s lived experience, a phenomenological understanding of the
client’s experiences, which we discuss at greater length below, allows the therapist to
understand the client’s experience in itself, as it is lived by the client (Spinelli, 1989).
Existential sex therapy, which draws on the philosophical work of thinkers such as
Simone de Beauvoir and Jean-Paul Sartre, and on the psychotherapeutic work of Irvin
Yalom (1989), Emmy van Deurzen (1997), and others, is a highly useful method for
approaching non-monogamous clients (Barker, 2013b).

22 **Existential Sex Therapy and Non-monogamies: An Extraordinary**
23 **Framework for an Extraordinary Client Group**
24 Existentialism is grounded in the principle that “existence precedes essence” (Sartre,
25 1945, p. 20). Philosophically, this means that the individual is thrust into existence, and
must develop a personal identity (i.e. essence) by making real, individual choices. The implication, Sartre states, is that, “subjectivity must be our point of departure” (1945, p. 20). Consequently, choice and meaning-making are central to the philosophical views developed by Sartre and his intellectual companion and lover, Simone de Beauvoir (1953), and to the existential psychotherapy model. “Because human beings have no predetermined essence” Van Deurzen & Kenward emphasize, “we need to constantly choose our lives, and it is our choices that define us, and our choices that constitute our ever-changing identity” (2005, p. 35). In effect, the therapist must recognize that the client is not reducible to some essential, or fundamental nature, but must be understood in light of these subjective choices, and the meanings of the client’s lived experience.

To create this existential framework in a sexual therapy session, the therapist might foster a joint exploration of the client’s sexual choices in relation to existential themes, in particular meaning-making, and the client’s subjective experiences of interconnectedness.

In this regard, bracketing and horizontalization are particularly valuable tools, of especial relevance with openly non-monogamous clients. Bracketing is a therapeutic technique with roots in the phenomenological tradition in philosophy and psychology. Phenomenology, an important foundation of existential psychotherapy, involves understanding experience in and of itself (on its own terms), without deferring to external theoretical frameworks (Aanstoos, 2012). Grounded in this approach, bracketing consists in the suspension, or setting aside, of preconceived notions, prior beliefs, and personal values, and allows the therapist to engage the client openly, a capacity that is particularly important in working with openly non-monogamous clients (Spinelli, 1989). We horizontalize, as Van Deurzen and Adams write, “when we endeavour to place what is becoming known against a horizon, to contextualize the
client’s worldview” (2011: 50). In addressing the sexual dimension of non-monogamous clients’ lives, then, the therapist will work to situate the client’s sexual identity and behaviours within the wider horizon of the client’s life. It must be emphasized that within the existential therapy model, even therapists familiar with non-monogamy—and even those who have lived experience in non-monogamous relationships—need to bracket their own beliefs from those of the client. In particular, the many different relational arrangements and subjective experiences within the wider frame of open non-monogamy make bracketing and horizontalising invaluable to the therapist.

Bracketing and horizontalising are illustrated in the following example: when working with a couple, one of whom was monogamous and one of whom was non-monogamous, in relation to bracketing, the second author (Meg) needed to reflexively consider both clients' preferred ways of doing relationships in relation to their own, and the potential implications of this for (perceived) alignment. Meg found journal-writing about different understandings of relationships to be a useful practice here. It was helpful for recognising that Meg was more philosophically aligned with the non-monogamous partner regarding the capacity to love more than one person at once, but also more aligned with the monogamous partner regarding the responsibilities entailed by having 'a relationship' with somebody. In relation to horizontalizing, the clients themselves were rather fixated on the monogamy/non-monogamy tension as the issue for therapy, so Meg explicitly explained to them (as with any fixation on a sex or relationship problem) that it is important for good therapy for the therapist to get a sense of the whole of their lives and their wider worldviews, to understand how this aspect fits within them. This involved encouraging them to create a diagram of all of the important people in their lives (not just romantic partners), asking them to describe a day in their
life in detail, and exploring what they valued most in life (both in terms of relationships
with others, and in terms of what they wish to achieve, how they would like to look
back on their life, and so on). From such explorations it was possible to explore the
arenas of life in which each client valued independence over sharing/belonging, and
vice versa. Some useful analogies were drawn between the value that the non-
on-monogamous client placed on freedom to pursue their additional relationships and the
value that the monogamous one placed on freedom to pursue their sporting activities. It
was also discovered that they both valued their shared working lives, and their
grounding themselves in this aspect of their lives was a helpful anchor from which to
explore their tensions and conflicts.

The client’s personhood is inherently self-determined, and the client must be
considered in light of their subjectivity. In large measure our aim is to reveal the
meanings our clients associate with sexuality and relationships in general, and with the
particular sexual and relational choices they might make. In effect, the client may not be
reduced to some essential, or fundamental nature, but must be understood in light of the
choices and subjective meanings of their lived experience; the client’s personhood is
inherently self-determined, and the client must be considered in light of their
subjectivity. With non-monogamous clients, we would be apt to inquire about the nature
of the client’s agreements with their partners. Non-monogamous clients vary with
respect to the level of transparency of their sexual partnerships, ranging from a ‘don’t
ask, don’t tell’ agreement to complete transparency (Barker, 2013b). We might inquire
how the client envisions their sexual contacts on a continuum of emotional intimacy
(Barker, 2011). Some clients might experience a higher level of emotional intimacy
with one partner, and other relationships as less intimate. Other clients may experience a
high level of emotional intimacy with a variety of partners. From an existential vantage
point, it is often of particular value to link the client’s sexual choices to the meanings
they associate with sexuality and sexual intimacy.

Like all human relationships, open non-monogamy is a dynamic landscape. We
might encounter, for example, a client who begins in a ‘don’t ask, don’t tell’
relationship and shifts towards a higher level of relational transparency, or vice versa.
The client’s experiences of emotional and physical intimacy are equally dynamic.
Considering the client’s personal and relational evolution, an existential sex therapist
may use meaning as a consistent clinical theme, regularly questioning the meanings
(both known and unknown) that the client may associate with sexual choices and
behaviours, in order to foster an understanding of how the client’s experience of sex and
intimacy might vary between partnerships, and within partnerships across time.

In this process of questioning and open exploration, the therapist works to set
aside presumptions and to accompany the client in an exploration of their world,
maintaining a kind of informed naivety. In dealing with openly non-monogamous
clients, the therapist’s informed naivety is foundational to a set of therapeutic
techniques—bracketing, horizontalizing and verification - which allow the therapist and
client to address the client’s subjective, lived experience.

This position of informed naivety necessitates that the therapist identify, and
bracket off, assumptions and presuppositions about sexual behaviour in general, and
non-monogamy in particular, to the greatest degree possible. This, as many therapists
are apt to note, can be easier said than done. By taking a stance of informed naivety, and
using the existential techniques of bracketing and horizontalizing, the therapist
endeavours to understand the client on their own terms, and works consciously to avoid
imposing presuppositions about ‘normal’ sexual behaviour on the client.
Guidelines for Intervention

There is no proprietary ‘existentialist’ method for maintaining a stance of informed naivety, or implementing the techniques of bracketing and horizontalizing. Critical self-awareness and reflexivity are fundamental to this process. In our own experience, the use of common professional tools, such as journaling, clinical supervision and dialogue with peers, and inner work practice (such as mindfulness, or one’s own psychotherapy) can be invaluable in cultivating informed naivety. By helping therapists maintain a critical orientation towards their clinical practice, such tools can facilitate the reflective practice essential for bracketing and horizontalizing. As with the client, the therapist’s professional experience is subjectively based, and inevitably the tools that work best will be highly specific to the individual therapist. The core existentialist themes, including an exploration of meaning as the therapist experiences it, can be highly useful, and are applicable across modalities. Our own reflective and meditative practice, for instance, is methodologically eclectic, but consistently informed and shaped by an exploration of existential themes. For example, both authors of this paper draw on mindful meditation practices (Barker, 2013c) prior to meeting each client in order to be present to them as they are and to resist fixing them according to prior experiences or assumptions (I-thou rather than I-it relating, Buber, 1937). This practices aids bracketing as it is possible to check in about the ways our own assumptions and experiences about relationships may be colouring our expectations of the client. Clients might also be encouraged to briefly return to their breathing (mindfulness) during sessions in order to be better able to empathise with partner/s positions on issues of tension.

Maintaining a stance of informed naivety is both particularly important and particularly difficult by virtue of the mononormative biases of our culture (Ritchie & Barker, 2006). For instance, a therapist might struggle with biases or prejudices about
the ‘right’ kind of sexual relationships. Sexuality can be a difficult topic for clinicians to broach at the best of times. Introducing non-monogamy can be additionally challenging. Some therapists may be inclined to view non-monogamy itself, or particular forms of non-monogamy—such as the ‘don’t ask, don’t tell’ arrangement—as inherently problematic. Here, the subjective framework of existentialism can be usefully applied: non-monogamy might not work for the therapist, but it doesn’t have to. It has to be healthy in the context of the client’s subjective experience. The experience of non-monogamy likely will not have the same meaning for the client as it might for the therapist.

Like the therapist, the client is encouraged to assume an open, self-questioning approach, which evaluates the subjective meaning of their sexual choices, and intimate relationships. As with the therapist’s reflective practice, the client’s process of evaluative and critical questioning needn’t follow an exact formula, but may be grounded in exploration of existential themes. Existential principles are conducive to integration, and therapists may benefit from introducing existential questioning alongside an array of counselling interventions. In our own practices, we have found deconstruction of social constructs and conventions to be particularly useful for many openly non-monogamous clients. This social constructionist approach can be particularly helpful vis-à-vis cultural mononormativity, as well as the forms of polynormativity (more rigid ways of doing open non-monogamy), which inevitably spring up when a community is positioned outside of the mainstream (Barker, 2013a). For example, many clients who have come across books and websites on open non-monogamy will get the sense that there is one 'right' way of doing this, and it will be important to introduce, and hold onto, the multiplicity of non-monogamies and the sense that one is being chosen at the expense of other possibilities, and that all ways of
relating will inevitably have both potentials and challenges attached to them.

The existential approach focuses on the client’s lived experience, devoting particular attention to the varied meanings the client may hold regarding sexual relationships and sexual behaviour. In light of the powerful stigmas surrounding non-monogamies, it may at times be necessary for the existential therapist to actively affirm the client’s open non-monogamy, or other non-normative aspects of sexuality. This type of affirmative stance may have two aspects—deconstruction of certain social constructs, and validation of subjective sexual choices. In the first instance, it may be necessary for the therapist to refute or deconstruct common cultural stereotypes, and problematize the stigmas that surround sexuality. In our experience, this may involve critiquing some of the more prevalent biases clients may encounter, from common mono-normative and heteronormative biases to anti-sexual biases in certain aspects of our culture. This may be done, for example, by citing statistics on the commonality of such relationships (e.g. half of gay men have openly non-monogamous relationships), or problematising the idea that most people are monogamous (e.g. mentioning that half to two-thirds of people who are monogamous have affairs) (Blumstein & Schwartz, 1983; Vangelisti & Gerstenberger, 2004). You might discuss examples of celebrities of fictional characters who are not monogamous or otherwise non-normative sexually, and generally express familiarity with different modes of non-monogamy from your reading in this area.

Our approach to existential therapy holds that a critical understanding of the external sources of mononormativity can help the client attain a higher level of subjective control of meaning-making in their life. The second aspect is one of more direct affirmation—the therapist may legitimate non-monogamies, stating directly that alternative sexualities are, fundamentally, equally legitimate to more socially normative
sexual arrangements. Here, the therapist may offer an authoritative-but-balanced view, pointing out that both monogamous and non-monogamous people may have healthy *or* unhealthy relationships, and that this is a function of their specific relationship experience, rather than the number of people involved.

It is important that the therapist address the sexual element of the client’s life in a balanced way, by horizontalizing and treating sexuality as an important—but not totalizing or all-encompassing aspect—of the client’s life. Thus, with respect to horizontalizing, the therapist must not fixate on the client’s non-monogamy, or assume that the non-monogamous relationship arrangement is the central concern in the individual or relational sex therapy (Barker, 2013b). To focus overly on this dimension of the client’s sexuality puts us at risk of overemphasizing a single facet of the client’s life and obscuring other important issues. Further, overemphasizing the client’s non-monogamy puts the therapist at risk of fixating on non-monogamy as the ‘problem’, and may distract the therapist from attending to the complexity of sexual and relationship choices and behaviours. It cannot be over-stressed that our model of existential sex therapy is a *non-pathologizing* approach.

Existential sex therapy’s non-pathologizing conceptualization of sexual relationships and behaviour benefits from an emphasis on the themes of freedom and belonging—which the (existential) psychotherapist may wish to explore, and return to, with clients as they progress through therapy. For instance, the therapist may wish to invite an exploration of how the client experiences freedom, and a sense of belonging *within* the context of their intimate relationships and *outside* of their intimate relationships, in the other facets of their life. According to Yalom, exploration of freedom and belonging, as a core existential psychotherapy practice, may help to foster an understanding of the client’s subjective, lived experience, for both the client and the
therapist (Yalom, 1980). In the sex therapy field, we hold, this exploration can help shed light on the unique subjective meanings of sexuality in the client’s life specifically, and the way that sex is situated in a wider context of human experience, and relationships. In effect, these conceptualizations are grounded in a broader understanding of human experience, which envisions the individual’s experience of ‘self’ as inherently linked to their experience of the other. The implication of this inter-subjective experience is that we live in a social world where meaning already exists, and the experience of defining ourselves and our sexual identities is ‘dialectical’, in that it occurs in the interactions between ourselves and others. Our quest for belonging, and our freedom to define our selves and our sexualities is intrinsic to our relationships with others.

Freedom and belonging, within the existential framework, are simultaneously invaluable and challenging. Yalom emphasizes that freedom is no easy thing, writing, “in its existential sense ‘freedom’ refers to the absence of external structure,” with the implication that “the individual is entirely responsible for—that is, is the author of—his or her own world, life design, choices, and actions” (1980, p. 8-9). The consequence is that we therapists as well as clients must determine our own identities, a potentially liberating but also potentially frightening experience. This is particularly true for clients endeavouring to forge or determine extraordinary identities, and so particularly relevant in terms of open non-monogamy. Our clients seek a sense of meaning and belonging in a world that offers social meanings, as determined by others, but no absolute answers. Clients may choose to derive their sense of meaning, and a vital experience of belonging, from embracing openly monogamous lifestyles and identities. They are free to do so, even though the social world may offer meanings that challenge this process. It is important to bear in mind, however, that clients may choose open non-monogamy for
different reasons altogether. While it may be invaluable to explore the themes of
freedom and belonging with the client, it is the prerogative of the existential sex and
relationship therapist to explore what non-monogamy means to the client, and to avoid
imposing assumptions about the client’s motivation on the therapy process.

**Conclusion**

Within existential sex therapy the therapist focuses on the client’s subjective, lived
experience, taking into account all aspects of the client’s life, including those which are
not immediately sexual. The therapist endeavours to bracket off biases and
presumptions, and to control any temptation to overemphasize single aspects, a
technique of particular importance when dealing with openly non-monogamous clients.
The client’s subjective process of meaning-making is a vital topic of consideration in
the therapy. The client is seen as an individual who happens to be in a non-
monogamous relationship—what this means to them simply cannot be known a priori.

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The experiences may well not, of course, feel extraordinary to clients, but rather they are extraordinary in the mononormative context of wider culture, which many therapists will occupy. Generally, openly non-monogamous arrangements will feel rather mundane and everyday to the client, unless she/he/they are new to them (Richards & Barker, 2013).