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Many students contact me every year looking for information on how to become a sex therapist. If you are writing a paper, you are free to use this information as long as you attribute it to me with a date of 2006.

Becoming a Sex Therapist

The Field of Sex Therapy

Sex therapy is a relatively new field. Although early psychologists had interest in people's sexual development, they weren't especially interested in sexual behavior per se. For example, Sigmund Freud looked at "psychosexual development" in terms of drive from one stage of life to another. It wasn't until Masters & Johnson came on the scene in the late 60s and 70s that sex therapy became a treatment for the many kinds of sexual problems that people have. Helen Kaplan is another early sex therapist, as was Dr. Ruth Westheimer (aka "Dr. Ruth").

Sex therapy is still in its infancy. More and more, sex therapy is becoming integrative. That is, it looks at psychological, relationship, developmental, and biological factors to help a person overcome blocks to sexual enjoyment.

Sex therapy takes as a main premise that one's sexuality is generally meant to be a pleasurable part of one's life. Also, it is generally accepted that the best and most meaningful sexual experiences take place within the context of a loving relationship with a trusted partner.

What Is Sex Therapy?

Sex therapy is a type of psychotherapy that is focused on sexual problems such as erectile dysfunction, lack of orgasm, delayed ejaculation, low sex drive, gender confusion, sexual orientation, and so forth. It is "talk therapy." That is, people who come to a sex therapist's office talk about their problem.

Sex therapy is generally solution focused, meaning that the therapist looks at the here and now more than at the past—though the past can be important in assessing the problem.

What Happens in Sex Therapy?

The most important thing that the sex therapist can do is to develop a rapport with the client. That means making people in the office comfortable enough that they feel

free to talk about their problem. The client needs to feel that the therapist cares about them and will not ridicule or shame them.

Next, the therapist asks a lot of questions to assess the problem. The therapist will want to know when the problem began, if it happens all the time, if there are times when it is worse or better, what the client has tried to do about it, and so on. If the person is married or in a committed relationship, the therapist will want to get the partner's perspective.

Sometimes, there is a problem in the couple's relationship. They may have poor communication or have difficulty resolving issues. Sometimes they are fighting a lot, or they have betrayed one another. In that case, the first step is usually to do a bit of couples' therapy before proceeding to addressing the sexual concern.

Once the assessment has been made, the therapist makes suggestions for reading the person can do, plus suggests activities. The sensate focus activities devised by Masters & Johnson are a "classic" homework assignment that involves giving and receiving touch. Other activities may involve making a log about what a person thinks about their sexuality, visiting a physician to rule out medical causes, or trying out other new behaviors.

The client continues in therapy until they feel that they understand their sexuality better and are having positive experiences. In general, sex therapy tends to be more short-term, which is considered to be 3 to 6 months. Sometimes, though, people have more complex problems such as post partum depression, obsessive compulsive disorder, anxiety, Tourette's disorder, and even learning disabilities that can affect not only their sexuality but their quality of life in general. It is also not unusual for someone to reveal past sexual abuse in the therapist's office. Often, it is only because they cannot perform sexually or enjoy being with a partner that they come to the therapist's office.

That is why a sex therapist must be a licensed psychotherapist, so that he or she can assess if there is an underlying cause that needs to also be addressed.

How Do You Become a Sex Therapist?

A fellow sex therapist recently said that being a sex therapist is "the cherry on top" of being a psychotherapist. That being said, the first thing is to earn at least a master's degree that will allow you to become a licensed psychotherapist. This may be a licensed professional counselor, marriage & family therapist, or a licensed clinical social worker, depending on your state. You might also choose to go on to become a licensed psychologist, which requires that you earn a doctorate after your master's degree.

All of these degrees require education as well as training, usually a few thousand hours done voluntarily at various agencies across the country. My recommendation

is that if you really want to be a sex therapist, you should find a program that emphasizes working with couples and do your training with that population. Couples therapy is, many believe, one of the most difficult types of therapy to do because there are 3 entities in the room: the two partners, and their relationship.

Once you are licensed and have experience working with couples, you can begin the journey of becoming a sex therapist. To become a sex therapist certified with the American Association of Sexuality Educators, Counselors & Therapists, you need to take 60 course hours of education, conduct 250 client hours of sex therapy, and have 50 hours of supervision with a certified sex therapist. You can take some of the coursework while you are still in graduate school.

How I Became a Sex Therapist

My path to becoming a sex therapist wasn't a straight line. I was an elementary school teacher for a decade and during that time I helped pioneer a program in which we educated teachers, staff, children, and parents about sexual and other abuse and helped people make reports to authorities when abuse or suspected abuse occurred.

During that time, I began my master's degree in psychology at Pepperdine University. I decided that I wouldn't be happy, however, until I had the depth and breadth that I could get by earning a doctorate, which I did at California School of Professional Psychology (now Alliant University). My concentration was in family therapy, with a special interest in matters related to chronic illness and cancer.

Because of this interest, I worked with many couples in many different settings. I worked at UCI Child Development Center and Children's Hospital of San Diego, Outpatient Psychiatry, helping parents of children with all kinds of special needs manage the stress that it brought upon their relationship. I also trained at the Marine base at El Toro just before it closed, again working with couples under a great deal of stress.

I also worked at Children's Hospital of San Diego in the Hematology / Oncology Department, and my dissertation was entitled, "Ecosystemic Assessment of Families of Children with Cancer Returning to School." Although it now seems a bit commonplace, the idea of assessing the biopsychosocial aspects of a person's illness was, at the time, revolutionary.

After I graduated, I decided to specialize in working with people with chronic illness. This led me, eventually, to my opening an integrated wellness center with an endocrinologist, a doctor specializing in problems with hormones. She told me that a lot of people with sexual problems blamed it on their hormones, though usually the problem was psychological, and so she suggested I learn about sex therapy. Because of my interest in medical problems and couples, I agreed. I attended many

workshops and conferences, started seeing clients with sexual problems, and obtained a consultant to work with me on my cases.

In 2006, I decided that I wanted to work on my own again and opened The Buehler Institute. I occasionally have a trainee working with me, and I plan to offer continuing education opportunities in the future. I am also working on a groundbreaking book; please sign up for my newsletter to learn when it will be published.

What It's Like to Be a Sex Therapist

I very much enjoy my work and feel fortunate that I usually feel “psyched up” to go to my office. Sometimes I do work with very difficult people, but that is part of what I signed up to do. As long as the person is cooperative and willing to work with me, not against me, I can stay compassionate and helpful. The most stressful part of my work is when someone becomes suicidal, but because I had excellent training I know what to do to help someone when they get that low. Sadly, the saying goes that there are two kinds of therapists: the kind that has had a client commit suicide, and the kind that hasn't had that happen—yet.

My day is very busy. I typically see 20-25 clients a week, plus personally take calls from everyone that is interested in making an appointment. I have to write chart notes for everybody and work with them on scheduling. I also sometimes talk with other physicians and psychotherapists about cases. I also do a lot of writing on sex and relationships, plus I review scientific articles for the Journal of Sexual Medicine.

I do truly regret that I cannot speak to each person individually about my work, because I simply receive too many requests. I plan to hold occasional “Meet the Sex Therapist” type meetings that students can attend where they can hear me give a talk much like what you are reading here, and ask questions. If you are interested, please send me an email and I will put you on my list.

Thank you for your interest in my profession. I wish you very good luck on your journey, whatever path you choose.