
Masturbation

DEFINITION/HISTORY

Considerable attention has been devoted in the past to the problem of childhood masturbation (self-stimulation of the genitals) because it was viewed as a deviant behavior that led to serious physical and emotional disabilities. A popular book entitled What a Young Boy Ought to Know, written by a minister and published in 1909, notes serious consequences from masturbation: "[Due to the shocks to the nervous system] the entire nervous system will eventually become shattered and ruined beyond all hope of complete recovery The bright boy that stood at the head of the class is gradually losing his power to comprehend ... His memory fails him... The health gradually declines. The eyes lose their luster. The skin becomes sallow. The muscles become flabby... He complains of pain in the back; of headache and dizziness. The hands become cold and clammy ... digestion becomes poor ... The heart palpitates ... He sits in a stooping position ... and the entire body ... becomes wasted, and many signs give promise of early decline and death" (pp. 113—114). Many physicians of that era agreed that there were health risks from masturbation and a number of techniques involving mechanical devices and surgery were used to prevent boys and girls from the practice. These are some of the darkest pages of religious and medical history.

As noted by Leung and Robson (1993), childhood masturbation is now recognized as a virtually universal phenomenon in that all males and females explore their genitals as a normal part of sexual development. In addition, the majority stimulate themselves to orgasm at least once (and often very frequently) by the time they are teenagers. Masturbation does not pose a physical or mental health risk. Due to better diet and medical care, children mature physically earlier than in previous times. As a result, there may be a major time gap between reproductive maturity and opportunity to establish a relationship with a person of the opposite sex that includes sexual intimacy. Masturbation is a normal and harmless way to adjust to this circumstance.

INTERVENTION

For most parents, it is best to counsel them on the normality of masturbation and the positive aspects of the behavior while assuring them that it is not physically or mentally dangerous. For example, data suggest that men and women who have had normal masturbation experiences are better adjusted sexually in their marriages later in life. Rules and boundaries may be taught by explaining that masturbation is something one does in private. Sex education appropriate to the age of the child is an essential part of the process. There are numerous books that may be obtained from the library or local bookstore on sexual development and sex education for children and parents to read together. Parents can then answer questions and present their personal views to the child. In some families, parents may regard masturbation as inconsistent with their values. There is some movement to change these attitudes as exemplified by a very courageous pastoral counselor, Charles Shedd, who has a chapter in one of his books entitled, "Masturbation—Gift of God." Parents who maintain their opposition to masturbation should be counseled to use mild discouragement and distraction to reduce the behavior and not to overreact punitively.
Masturbation can be a problem if practiced excessively or in public. While normal children and adolescents may masturbate as often as several times a day, some children have been known to become obsessed with masturbation and to stimulate themselves to the point that the genitals are raw and bleeding. They also sometimes use dangerous instruments or methods of masturbation. Likewise, some children masturbate in public places and do not stop when encouraged by adults to do so. In all of these instances, one should immediately investigate the possibility that the child has been or is being sexually abused. If this turns out to be the case, the child should be protected and the appropriate agencies should be notified. It is important to note that although children who have been sexually abused often engage in excessive masturbation, many children who masturbate excessively have not been sexually abused. For these children, distraction from masturbation with an array of highly enjoyable competing activities along with cognitive therapy on rules for appropriate behavior and rewards for appropriate changes in behavior can usually decrease the excessive or inappropriate masturbation. Inappropriate masturbatory behavior sometimes is secondary to insecurity, anxiety, depression, or similar emotions in the child. In these instances, professional help may be needed to resolve the underlying problems.

See also
Differential Social Reinforcement/ Positive Attention; Sexual Abuse; Sexual Development; Sexuality Education

Further Reading


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