


Essays on Eros



— by Dr. Martha Lee, D.H.S. —

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About this E-Book

Dear Reader,

This e-book is a compilation of past work I wrote during 2010.

It is my hope that through this e-book allows me to reach out more people beyond Singapore.

The best thing about my job is seeing the glimmer of hope on the faces of clients, reignite the sparkle in their eyes, and, of course, helping them overcome their sexual difficulties and consequently achieve a more fulfilling life. I hope that you have several delightful 'a-ha' moments going through this e-book.



Warmest regards,

Martha

Clinical Sexologist

About Eros Coaching

Eros Coaching is a sexuality and intimacy coaching company which believes in the innate solutions we each already hold in achieving and enjoying a fulfilling, healthy and pleasurable life. Eros Coaching listens, informs, facilitates and empowers you to spread your wings.

Services

- Sexuality coaching/ counseling
- Life coaching
- Sexual education workshops
- Telephone access
- Answer sexuality questions via email

About Dr. Martha Lee:

Founder of Eros Coaching, Dr. Martha Lee is a Clinical Sexologist who does sexuality and intimacy coaching. She is compassionate, practical, honest, interactive and solution-focused. Dr. Lee incorporates a blend of conventional and alternative approaches and draws upon a variety of styles and techniques to support each client as they work to resolve both current problems and long-standing patterns.

Dr. Lee utilizes her years of experience in professional communications and volunteer counseling to optimize her coaching work. A well-traveled Singaporean Chinese, Martha welcomes individuals as well as couples of all sexual orientations.

Often cited in the local media, Dr. Lee is the appointed sex expert for [Men's Health Singapore](#), and [Durex Singapore Facebook page](#). She also blogs for [Good Vibrations Magazine](#). She was listed as one of 'Top 50 Inspiring Women under 40' by [Her World](#) in July 2010 and 'Top 100 Inspiring Women in Singapore' by [CozyCot Singapore](#) in March 2011. She is married with no kids or pets (yet).

For more, visit www.eroscoaching.com or email info@eroscoaching.com.

Part 1 The Business of Sex

1. Why I Became a Sexologist
2. Letting a Stranger Into Your Bedroom – How
 a Sexologist can help spice up your sex life
3. What a Sexologist is not
4. Client Confidentiality

Why I Became a Sexologist

If there is one question I am asked almost every time I meet somebody new, it is this: “Why did you become a sexologist?”

Even complete strangers on Facebook find it is their business to pose one-liner questions along the lines of: “Is your job for real?”

Occasionally my polite replies would be followed by cheekier replies of: “Can I know you?” [This is Singlish for “May I know you?” or “Could I get to know you?”]

Or I will receive lengthier ones trying to draw me into philosophical, theoretical or academic discussions related to sex and sexuality.

Indeed, I have an interesting profession.

This is my official answer, all of which is true:

“Personally, I was curious to learn more about sex because I did not receive any sexuality education growing up in Singapore. I missed out on biology completely because I was in the Arts stream. The compulsory annual school assemblies I attended through my secondary school career were on why women bled monthly and how we young ladies have to pay particular attention to personal hygiene.

I saw that there was a sore lack of trained sexuality educators in Singapore. Surely, there was more to understanding sex and sexuality than learning to protect against sexually transmitted infections (STIs), making babies and getting your period? This was why I decided to pursue a Doctorate in Human Sexuality and am now a trained Clinical Sexologist.

“Is your job for real?”

The best thing about my job is seeing the glimmer of hope on the faces of clients, reigniting the sparkle of light in their eyes and of course, helping them overcome their sexual difficulties and, consequently, achieve a more fulfilling life.”

A slightly longer, more honest answer is: I had to.

I was tired of the lack of any real and meaningful conversations about sex and sexuality. If sex was this wonderful, beautiful and intimate act between two people in love, why is it always talked about so negatively? Nobody was acknowledging the importance of sex and sexuality to one’s sense of well-being, not to mention the role it plays in a relationship.

I was tired of the lack of any real and meaningful conversations about sex and sexuality.

Prior to this, I had already worked in corporate communications for eight years – doing public relations, marketing and advertising. I left a comfortable career to start a non-profit helping young people in the area of career guidance. I did so because I was no longer satisfied with the status quo. I could no longer deny that I care about people more than money, and helping people was more important to me than climbing the corporate ladder. I broke out of my comfort zone and there was no turning back. And yes, it was scary.

After two years doing a combination of volunteer recruitment and management, fundraising and everything in between, I realised my heart was with working with people directly. To ‘help’ from a distance was safe for me and I knew it. I had to put myself on the line.

I had been doing volunteer counselling work for three years by then, and realised that

I also knew in my heart of hearts that I could make a difference.

there was a jarring gap in the dialogues revolving around sexuality in Singapore. I knew that, as a professional sexologist, I would have the unique expertise that would allow me to contribute to the well-being of men and women – including helping them develop an understanding of their sexuality and better express themselves through sex and intimacy.

I also knew in my heart of hearts that I could make a difference, but I had to get the training. And I did.

For most of my life (even whilst in the corporate world), I have been told: (audible gasp first) “You are a woman. You shouldn’t be talking like that.”

I know! Whatever does that mean? And who defines what a woman should say or do?

As a woman, am I supposed to be one (or several?) step behind men (or all men?). And the ones who say so are invariably men – including my bosses. And why shouldn’t I speak up? Don’t I have a say if something affects me directly? I wasn’t trying to be a man. I was being me.

Now, I am grateful for what seems like the instant rapport and comfort women have when they communicate with me – women who would otherwise not seek my support if I weren’t a woman.

Sex is not everything. But sex is important.

I became a Clinical Sexologist because I had to.

Letting a Stranger Into Your Bedroom

- How a Sexologist can help spice up your sex life -

Would you let a stranger into your bedroom? What if this could help to substantially spice up your sexual life, as well as your marriage? Surely, sexual well-being contributes towards the quality of your life?

All too often, couples only seek support after struggling with their sexual difficulties and concerns for a long time. They do not know whom to turn to. They try, but they cannot discuss it – it's just too hard, they think. They hope, against the odds, that the problem would simply go away. But it doesn't. The problem festers and begins to take on a life of its own. Soon it eats at the edges of the relationship, sometimes even threatening to consume it.

Enter the clinical sexologist. A board-certified sexologist, possessing an academic degree such as a doctorate from the U.S.A., such as myself, would have completed between 3,000 and 5,000 hours of training in human sexuality. This is someone who has the greatest knowledge on the topic of human sexuality. A sexologist regularly addresses the sexual questions and concerns that people have in a clinical or counselling setting. Any person who asks for the advice of this specialist actually asks for the advice of a friend, who is there to support and to guide, not to judge.

These are some ways in which a clinical sexologist can help:

To Listen

During your first session, you begin by talking about the primary concerns and issues in your current sexual life. Most people admit that they feel a sense of relief in being able to talk openly and honestly about a situation that has been distressing them. Also, the person you are talking to is trained to truly be present and listen to your concerns. After all, listening is the first step to being able to help you.

To Clarify

You must be clear about your reasons for seeing a sexologist, and the sexologist also needs to be on the same wavelength. Hence, you might be asked questions soliciting more specific information and details. This act of articulating verbally actually helps individuals to not only feel better, think deeper, and get in touch with their thoughts, feelings and attitudes, but also clarify internally, such a way as: 'Is this really what happened?'.

Some questions that might be used to provoke deeper reflection include:

What have you already tried towards resolving this issue?

Is there anything else that you think you could have tried?

What was stopping you from doing it?

To Reassure

Sometimes clients come in with minor sexual issues or concerns. They do not need much more than verbal permission or reassurance that what they are doing is correct, that they are normal and most importantly, that they are on the right track. This time of reassurance is important, since many people come in having never had the opportunity to discuss their deepest sexual concerns with anyone. No question is silly. A sexologist facilitates your personal development from a sexual perspective, concerning situations, experiences and sensations.

To Inform

In this Internet Age, there is much we can find out in terms of sexual information by simply applying ourselves a little, conducting a 'Google' search and typing in some keywords. However, not everything we learn from the internet is true or accurate. We can ask people we know and trust, yet they might be just as clueless.

Even if we obtain information from a credible source, is it presented in a manner that is understandable and digestible? A sexologist can provide accurate sexual

information. Also, when questions come up during a session, a sexologist is right there to gently correct any misconceptions, as well as impart the applicable information in a way you can understand.

To Educate

When you need more than just sexual information, a sexologist is also on hand to provide precise direction, specific suggestions or advice that might resolve your situation. This could be in the form of explaining what would work better sexually, be it how to choose a sex toy, a more comfortable sexual position, or a better sexual technique. The advice would be based on academic study and professional training as well as field experience. A relationship can sometimes improve even with a slight shift of attitude of one partner.

To Brainstorm

Not every client comes in knowing what the problem is and what they could be doing to overcome their issue. Through the course of the session, upon listening and clarifying, the sexologist will be able to form a better understanding of the situation. Rather than struggle independently, or attempting to come up with immediate answers and short-term, one-size-fits-all solutions, you will find value in exploring your options with a sexologist you trust and can be honest with; and in so doing, broaden your possibilities.

To Encourage

A sexologist is on your side – akin to a friend, fan, or even cheerleader. You are considered in your different roles as an individual, a partner, and as part of a couple. Your sexologist would work with your image as a woman or man, as well as your sexual self-perception and how it affects your behaviour. You might need to work on rediscovering sexual emotions and inter-sexual states, developing awareness of the cultural symbols of sexuality, or on approaching the feeling of shame and guilt associated with sexuality, as well as disorders of sexual orientation and dynamics. Whatever the case may be, your aide is right next to you.

You might still find it hard to imagine that a person could discover the way in which couples behave in intimate moments and the mistakes couples make, just by having a simple discussion. Yet a shift in perspective or attitude is sometimes all that is needed. It is important that you choose a sexologist who is well-recognised, well-trained, experienced, and who is somebody you can trust innately.

Quick Glance:

- To Listen
- To Clarify
- To Reassure
- To Inform
- To Educate
- To Brainstorm
- To Encourage

What a Sexologist is not

I am a sexologist. Since I am the only one with this unique combination of qualification and training in Singapore, there exists a lot of confusion within our little city/state about what exactly a sexologist *does*. Not only that, I have my share of detractors who think I am a 'joke', only about hype, or out to create trouble or controversy for the purpose of my own aggrandizement, etc.

I have never professed to be something I am not. Since I am 100% serious about the work I do and intend to be around for some time, here are a few common misconceptions I would like to address here:

1. **I do not have a PhD.** A lot of people think any degree that starts with the word 'Doctorate' is a PhD. My school, the [Institute for Advanced Study of Human Sexuality](#), offers five different graduate degrees, including a PhD programme. I chose not to complete a PhD because I did not and probably never will pursue an academic or research-based career. What I have is a Doctorate in Human Sexuality.
2. **I am not a sex therapist.** While I have a certificate in sex therapy from Florida Sex Therapy Institute, I am not qualified to call myself a sex therapist. A sex therapist, at least in the United States, is somebody who has a psychology degree with a specialisation in sex therapy. In short, a sex therapist is a psychologist first, who subsequently obtains additional training in sex therapy. The training of a sex therapist and one who has studied human sexuality is different. The former looks at sexual difficulties from only the psychological (mind-based) perspective, while a sexologist addresses issues from a more holistic view (i.e. the roles and impact of the body-mind-heart-spirit).

The field of sexology is not one singular discipline, but actually draws upon many disciplines, such as sociology, psychology, anthropology, medicine, and the arts of understanding the various manifestations of human sexuality.

3. **I am not a psychologist.** (See above.) Few psychologists or psychotherapists ever get specialized training in human sexuality. The governing body for psychologists in Singapore is the [Singapore Psychological Association](#).
4. **I am not a counsellor.** You may be able to cook, but it doesn't necessarily make you a chef. Even though I have a certificate in counselling, I do not call myself a counsellor. However, I do use counselling techniques in my practice. The governing body for counsellors in Singapore is the [Singapore Association for Counselling](#).
5. **I am not a social worker.** According the website of the governing body of social workers, [Singapore Association of Social Workers](#), social workers are primarily dedicated to: assisting people to manage their problems more effectively; improving social conditions; advocating for change when change is necessary to better human lives. I only focus on sexuality and intimacy issues and the concerns of individuals and couples about these matters.
6. **I am not a medical doctor.** I do not issue prescriptions, give medication or prescribe any kind of drugs. I also do not carry out any physical examinations. I do possess some knowledge about the kinds of medical drugs that can help sexual difficulties, as well as know a whole lot about the types of condoms, lubrication, as well as sex toys that people can use. It might be worthwhile noting that not all medical doctors are trained about the myriad of different sexuality issues that people have, and therefore are not familiar with them and with talking with their patients about same.
7. **I am not a Tantrica.** Most Tantra teachers and workshops teach a small segment of the Tantric philosophy that focuses on sexuality, massage, and breathing. While I incorporate some Tantric ideas and methods into my work, I neither believe that any kind of sexual expression is the best or only method, nor insist that you adopt a new language or complicated types of breathing. I am not against tantra. I am just not qualified to teach tantra.

8. **I do not call myself a sexual educator.** I carry out sexual education all the time – by way of the articles I write for the media, the posts on my blog, Facebook, Twitter, not to mention through my workshops and client sessions. Since a lot of my time is spent being involved in some aspects of sexual education, why didn't I just call myself a sexual educator? My client sessions are not always and only about sexual education, some of it involves helping them to work through a very specific sexual problem. A more accurate term for the myriad of things I do is actually sexologist. I did not pluck the term sexologist out of thin air. It is a legitimate professional title that is more commonly used in the United States.
9. **I am not your mother.** Go ahead, laugh. Sometimes I feel the need to point out the obvious. I am not going to nag or pester you to do your home assignments so that you can overcome your sexual difficulties and go on to have a more fulfilling life. That's your responsibility. My role is to facilitate and support your growth in the best possible ways, not take over for you.
10. **What I am.** I am a specialist in the area of sexual questions or concerns. I am a board-certified sexologist by the American College of Sexologists. I am also a life coach. I employ a combination of counselling, coaching and sex therapy methods and techniques, sometimes including them all, depending on the concern(s) the client(s) come in with.

I certainly do not proclaim to be all things to everyone. By now, you can appreciate the difference in the type of discipline as well as

I certainly do not proclaim to be all things to everyone.

in the practitioner who is most qualified to help you through your own particular issue. The training of one who calls him- or herself a sex therapist, sex doctor or sexologist can vary greatly. One type of degree or work experience doesn't guarantee that a practitioner will work for you. What is important is for you to understand what their qualifications are, and that he or she offers this information directly and completely.

Client Confidentiality

As the Lion City's only clinical sexologist with a doctorate in human sexuality, I have often been asked by journalists, friends, and complete strangers to share my thoughts about what I felt was my most bizarre/interesting/fulfilling case.

I could become the next media darling or belle of the party but I have always refused to give them what they wanted. Instead, I may reply: "I treat all my client information as strictly confidential, so I couldn't discuss any of that. But, I can share the most common kinds of issues related to sex...."

Some publications, however, won't take no for an answer: "I completely understand your need for client confidentiality. However, what I'm asking"

It doesn't matter what follows the rest of the request because obviously they are still trying to get what they want and do not respect what client confidentiality means.

[Client confidentiality](#) is the principle that an institution or individual should not reveal information about their clients to a third party without the prior consent of the client or a clear legal reason. This concept is commonly provided for, or codified, in law by most countries. In my own case, client confidentiality is honouring and respecting that everything, and I mean everything, that is shared in session as sacred (i.e. not to be repeated), outside of the confines of my office. This includes not letting anybody see my case notes, or indeed even taking my notes out of my office.

It also means that it is **not** all right to make reference to my client by changing their actual names or making it anonymous.

It also means that it is **not** all right to make reference to my client by changing their actual names or making it anonymous. Mentioning their case might still lead them to be potentially identified and/or embarrassed by people who know them.

At this point, a layperson might suggest: Why don't you ask them for their permission to cite their case without their names?

Now we are going into the ethics of casework. My clients have approached me at a time of distress. The terms of employment state clearly from the start that this is fee for service: They pay; I help them. I cannot turn around and say, "I helped you so I like you to do this, that, and the other for me." In all likelihood, a client, out of utter gratitude and obligation, would say yes. Having said yes, are they truly able to comprehend the consequences including potential fallout such as negative public reactions in the media causing them to experience emotional distress, and hindering their ability to move on?

It is quite another matter for my client who, having overcome their sexual concern(s) to return and offer to help me in my publicity efforts. Yet, just how many clients would be truly comfortable to share their stories or even think of doing so? They are probably, and rightly should be, focused on their healing, growth and onward journey.

I am not obliged to do what everyone else is doing.

Hence, I am not going to change my mind when the media cites me the example of Dr So-and-so who has a weekly column in XYZ publication sharing patient stories, with the intention of helping readers have a better understanding. I am not obliged to do what everyone else is doing. As a practitioner, my primary responsibility is my client's well-being and welfare, as well as sense of safety. It is not my job to entertain strangers, humour my friends or help struggling journalists with pressing deadlines to please their demanding editors.

The testimonials you see on my website are from clients whose work has been completed and were generous enough to write me a short note. All had expressly asked to remain anonymous.

Part 2 Serious side of Sex

1. Revised: Sexual Terms
2. Sexual Anxiety
3. Male Sexual Dysfunctions
4. Six Myths about 'The Magic Wand'

Revised: Sexual Terms

I was browsing through the October issue of an expat magazine recently when I chanced upon an article entitled “Well-being and Sex”. Intrigued, I read the piece, only to come upon the sexual terms: ‘sexual transmitted diseases’, ‘impotence’ and ‘frigidity’. The author is obviously not a sexologist because these terms are passé.

In the same week, a client asked why I used the term ‘STI’ to refer to ‘sexually transmitted infections’ instead of STD. I have also dealt with journalists who have on occasion admitted that they were unfamiliar with the terms I used. Hence, I thought this is a good occasion to address how sexual terms have evolved with time.

Use “STI” not “STD”

Before the term [“sexual transmitted disease”](#) (STD) was used, all diseases related to the genitals were called “venereal disease” (VD). “Social disease” was another euphemism. In recent years, the term “sexually transmitted infections” (STIs) has been preferred, as it has a broader range of meaning; a person may be infected, and may potentially infect others, without showing any signs or symptoms of disease.

Also, not all STIs are transmitted through sexual intercourse. Some STIs can also be transmitted via the use of drug needles after its use by an infected person, as well as through childbirth or breastfeeding. Sexually transmitted infections have been well known for hundreds of years. “Infection” is a more encompassing word, in that it can also refer to a germ: be it a virus, bacterium, or parasite, that can cause disease or sickness in a person’s body – whether with or without symptoms. On the other hand, a disease means that the infection is actually causing the infected person to feel sick, or to notice something is wrong. For this reason, the term STI is a much broader term than STD.

Say “Erectile concerns”, not “Impotence”

The word [“impotence”](#) is a venerable term that dates back to the fifteenth century. Its literal meaning is “powerlessness” and so it possesses obvious pejorative connotations. The advent of sildenafil (Viagra), which is the first oral medication

approved by the USFDA for the treatment of impotence, popularized the more recent term “erectile dysfunction” (ED).

ED is actually a common men’s health problem characterized by the consistent inability to sustain an erection sufficient for sexual intercourse, or the inability to achieve ejaculation, or both. This problem can be occasional as well as periodical. The word “dysfunction” means function incorrectly or abnormally.

A sexologist, such as myself, would use the words “erectile concerns” or “erectile difficulties”, as they are much gentler on the ear. Clients who come before me are distressed as it is about their condition, and there is no need to stick the knife in by telling them they are “abnormal”. Most men will have erectile concerns or difficulties at some point in their life.

Who are you calling ‘frigid’?

In the early versions of the DSM (The Diagnostic and Statistical Manual of Mental Disorders published by the American Psychiatric Association), there were only two sexual dysfunctions listed: frigidity (for women) and impotence (for men). Since then, we know that there are more to the sexual difficulties a woman can experience than the failure to have vaginal orgasms.

As such, [“female sexual dysfunction”](#) is now the blanket term that replaces the word ‘frigidity’ when referring to the inability of a woman to function adequately in terms of sexual desire, sexual arousal, and/ or orgasm. The term ‘frigidity’ continues to be used but like ‘impotence’, it is seen as an insult or derogatory term for women. As explained above, I might use the words ‘sexual issue’, ‘sexual concern’ or ‘sexual condition’ when speaking with a client because we all have them from time to time.

You might say sexual terms are just words. What difference does it make? Indeed it does not make that much of a difference to the sexologist who is expected to know them all and reflect only positivity and support in session. Yet it does to the person who has that sexual condition. Also knowing and keeping up to date with the sexual terms also means you have the vocabulary to communicate clearly what you intend when you wish to.

Sexual Anxiety

Anxiety is a normal part of life. We all have experienced anxiety at some point of our lives. In fact, anxiety is one mechanism that evolved to keep us alert and help us cope in stressful events or situations. More specifically, performance anxiety refers to self-consciousness about the quality of one's performance that actually, in turn, decreases the quality of one's performance.

Sexual anxiety may present itself as a form of performance anxiety. Typically, there is so much preoccupation with the anxiety itself that the person becomes less fully involved in the sexual interaction, bringing about the very failure that is feared.

Male sexual performance anxiety is usually described as when a man has trouble getting an erection. This issue is hardly ever discussed openly by men, for fear of losing their projected 'macho' image.

Sexual anxiety may present itself as a form of performance anxiety.

Fears of sexual performance are not limited to men. For women, it might include worries about physical responsiveness—such as the speed with which vaginal lubrication or orgasm is attained, or the length of time that lubrication or orgasm is maintained. On a broader level, anxiety can also be reflected in how much passion, tenderness, intimacy and sensitivity a person feels toward his or her partner.

Sexual anxiety may also be part of a social anxiety complex where people may feel that they are inferior to others in some important

Sexual anxiety may also be part of a social anxiety complex.

way, or where they are overly concerned about other people's reactions. Whether sexual anxiety is part of performance or social anxiety, it can result in lowered self-esteem, avoidance of sexual encounters, relationship breakdowns and further sexual difficulties.

In this cycle, anticipation of the next sexual encounter arouses the same anxiety coupled with the memory of the previous failure and often perpetuates the problems. It might lead to an avoidance of sexual activity altogether, or at least a minimisation of the amount of sexual interaction that occurs. In turn, the partner might misinterpret the behaviour as a form of rejection. The underlying reason for avoidance is usually to save face so the person feels more in control and less guilty about being inadequate.

These are a few suggestions where anxieties revolving around sexual performance are concerned:

1. The first remedy has to be communicating with your partner about what is happening. Attaining the understanding and support of your partner should reduce some of your symptoms. If you find other sexual activities that you can do in bed, this should take some of the stress off sex.
2. Focus on enjoying the whole process of sexual intercourse and don't torment yourself by thinking solely of the end result or goal – the Big 'O'. The emphasis is on the sensations – staying in your body, remaining in the moment.
3. Let go of the erroneous belief that men are always ready, willing, and able to perform sexually. Besides sexual anxiety, there might be other factors at play such as tiredness, illness, resentment, not being attracted to your partner, or just not being in the mood.
4. Sexual coaching can take you from where you are at, to where you want to be. Home assignments are given where your goals are broken into smaller, achievable exercises which will help you learn how to overcome your sexual anxiety.
5. Hypnosis can reduce sexual performance anxiety to promote a more relaxed and confident sense of self, optimize self-esteem, happiness and boost self confidence.

6. Prescription drugs can be used to treat erectile difficulties. The medication works by enhancing nerve signals that causes nerve signals to be sent from brain to the male genital organ, which results in it becoming erect. Viagra, Cialis, Levitra or the newly launched Zydena (in Malaysia) are some of the drugs to choose from.

Lastly, sex is supposed to be un-self conscious and pleasurable. Until you let go of what you 'ought' to be doing, or of what is 'right' or 'best' for you or your partner, you are not going to be able to enjoy the experience. We need to learn to let go of control, receive, release and feel.

Male Sexual Dysfunctions

During my training to be a sexologist, I was often confused by the differences between PE, DE, and ED. They are, namely, premature ejaculation, delayed ejaculation and erectile dysfunction or disorder, respectively. Later, I realised it was just as confusing for the men who have sexual concerns. Hopefully, this piece will give you an idea of the types of male sexual dysfunctions.

There are four main types of male sexual dysfunctions:

1. Ejaculation Disorders

The most common type of ejaculation difficulty known is *premature ejaculation* (PE). It happens when a man's ejaculation occurs rapidly, much faster than what is desired by the man or his partner. PE is also known as rapid ejaculation, rapid climax, premature climax, or *early ejaculation* (EE).

Premature ejaculation (PE)
Delayed ejaculation (DE)
Erectile dysfunction (ED)

Delayed ejaculation (DE), also known as inhibited or retarded ejaculation, is when ejaculation is slow to occur. Then there is *retrograde ejaculation* which occurs when the semen from the prostate flows backwards into the bladder. This is common in males with diabetes who suffer from diabetic neuropathy (nerve damage).

Ejaculatory insufficiency refers to insufficient semen volume, which may at times be a result of retrograde ejaculation.

2. Erectile Dysfunction

Erectile dysfunction is a common men's health problem characterized by the consistent inability to sustain an erection sufficient for sexual intercourse or the inability to achieve ejaculation, or both. This problem can be occasional as well as periodical. Any diseases that affect blood flow such as hypertension, high blood pressure can cause ED.

Who hasn't heard of the blue pill, Viagra, which can aid ED? If anything, we have drug companies to thank for popularizing the term ED. And since the incidence of ED rises with age and human are living longer, we can expect more men to have this condition. Besides oral medication, treatment options include mechanical devices and behavioural training as well as couples coaching.

3. Inhibited Desire Disorder

This happens when a man has a decrease in desire for sex, is uninterested in sex or is unresponsive to sexual stimuli. Possible causes include one's physical, psychological, mental, or emotional state. Then there might be issues with his body image, intimacy or sexual performance. Or he could just be sexually ignorant about what being 'horny' means, such as when a person is sexually 'shut down' or unawakened. One should also rule out any kind of exhaustion, stress and/ or anxiety.

Possible causes include one's physical, psychological, mental, or emotional state.

4. Orgasmic Disorders

In an orgasmic disorder, the man may not be able to achieve an orgasm and reach climax during sex. These men are usually experiencing a psychological or mental health complication which may be situational or generalized to all sexual experiences. However, it could also be due to decreased penile sensation and/ or other factors.

Whether the cause is physical or psychological, it is important to meet with a qualified physician to determine possible underlying medical issues. If the physical cause is ruled out, this is when you might seek support from a mental health specialist who specializes in sexual dysfunction.

Six Myths about 'The Magic Wand'

There is a dire lack of sexual education in Singapore; not to mention timely, accurate and positive sexual information. There are a lot of misconceptions about the male sexual anatomy that could possibly be preventing both men and women from feeling the pleasure they deserve. It's time to set the record straight.

Here are six of the most common myths, debunked:

Myth #6: The penis is dirty.

There is a common misconception amongst women of the penis being unclean, smelly or downright dirty. It goes without saying that a penis, circumcised or not, will be dirty if it is

Yet, in reality, the penis is an external organ, and hence more likely to be 'clean'.

not washed. Yet, in reality, the penis is an external organ, unlike the female vagina which is an internal structure, and hence more likely to be 'clean', all things considered.

The penis should be washed in the bath or shower just like any other part of the body such as your armpits or your rectum. Just roll back the foreskin (if uncircumcised), wash the glans or head of the penis with soap and rinse it off with warm water.

Myth #5: Penis size is proportional to other body parts.

There is a myth based on the premise that you can tell how big someone's penis is by measuring their feet, hands, or nose. There is no scientific proof of a correlation between body part size and penis size.

It is true that there are certain genes that control the development of the limbs which also control the development of the penis in the embryonic stage. Yet, when it comes to fully-developed males, there is no absolute relation between the size of the penis and the size of the limbs or other body parts.

Myth #4: A 'real man' can last all night long.

This myth would have you believe that if a man is not capable of maintaining a cucumber-hard erection and performing all night, he is an incompetent lover.

Truth: Men typically reach orgasm five to ten minutes after the start of penile-vaginal intercourse, taking into account their desires and those of their partners.

A good erection is dependent on how good the blood supply is to your penis. Hence, men who have any kind of vascular problems have high chances of their erection being affected. Smoking affects the blood vessels making them less pliable and less compliant. Avoid smoking, fatty foods and cholesterol-rich foods. Exercising and eating healthy are good things. Whatever affects the vascular system affects your erection.

A good erection is dependent on how good the blood supply is to your penis.

Myth #3: Your penis is your most powerful sex organ.

This is patently false. Your mind is your most powerful sex organ, and your skin is your largest one! The brain programs our sexual function, our reproductive behaviour and our sex drive. Hence, it has the potential to be our most powerful tool for accessing mind-blowing sex. This applies for both men and women.

We can use our minds to fantasize about anything – even the impossible or seemingly unattainable. Fantasies are healthy and normal as long as you can separate them from reality and accept (and sometimes appreciate) that you may not be able to fulfil them. For many, fantasies should remain that way they are – fantasies – as reality creates potential for letdown.

Myth #2: You need a penis for sex to occur.

There are tremendous anxieties revolving around the hardness of penis as well as how long it stays that way. The assumption is that the man's penis is central to a woman's sexual satisfaction. Ironically, the penis is just a small part of what might be needed to have a wonderful sexual experience. Therefore, sex should be viewed as more than just penetration.

Orgasms are a very individualistic thing — there is no one correct pattern of sexual response. Whatever works, feels good, and makes you feel more alive and connected with your partner is what counts. Men will do well in focusing on making her feel important, loved and cared for, and establishing an intimate, emotional, physical, and mental connection, rather than on the tool.

Orgasms are a very individualistic thing — there is no one correct pattern of sexual response.

Myth #1: Bigger is better.

This has to be the most widely-held myth, especially since guys tease or insult each other about being small in size. The penis is a symbol of male identity, sexuality, and masculinity, which is why size is often fussed over among men. The notion that a larger penis equates to someone who is more masculine has, in turn, led men to think or feel that bigger is better.

The penises of Singaporean men average 3.5 to 5.9 inches in length. Most men fall somewhere in-between. Size has little to no relation to sexual performance. If he asks you if what you think of his penis, know that he is actually asking for reassurance. Encourage him to appreciate his body for what it is – healthy, functioning and perfectly normal.

There you have it: six of the most common myths debunked. Take a moment, think of the penis as not an incomprehensible alien but as a magical wand promising endless hours of pleasure and ecstasy.

Part 3 Female Sexuality

1. Female Sexual Dysfunctions
2. Vulvas and Vaginas are Pink
3. The G-Spot
4. Vaginismus – When a Woman's Body
 Says: 'No Entry'
5. Smile – You're a Woman
6. Primal Sex for Cameron Diaz

Female Sexual Dysfunctions

Many women have problems with sex at some stage in their life and it becomes more common as women get older. Having covered male sexual dysfunctions in a previous piece, let's move on to the types of female sexual problems.

Female sexual dysfunction refers to one or more of the following issues: loss of sexual desire, loss of arousal, problems with orgasm and pain during sex.

1. Hypoactive Sexual Desire Disorder

The opposite end of the spectrum from hyperactive sexual desire disorder, women with this condition avoid sexual feelings, sexual thoughts and fantasies. They do not initiate sexual activity and are not responsive to their partner's initiation of sexual activities. Causes include fatigue, hormonal changes, relationship conflict, body image issues, a history of sexual abuse, or being with an unskilled lover or partner.

2. Sexual Aversion Disorder

Women with this condition persistently or recurrently have a phobic aversion to, and an avoidance of, sexual contact with a partner. The disturbance causes marked personal difficulty such as panic attacks (feelings of terror, faintness, nausea, palpitations). The woman might also avoid sexual situations or potential sex partners by covert strategies.

3. Sexual Arousal Disorder

There are four types of female arousal disorders, which can occur alone or in combination with other disorders:

- **Subjective sexual arousal disorders** mean that no matter how much the woman is stimulated, whether genitally or non-genitally, and despite the

occurrence of physical genital response (this means her vagina may exhibit increased lubrication), she doesn't feel aroused.

- **Genital sexual arousal disorder** means that a woman has little or no vaginal lubrication or swelling of the vulva. She might respond to nongenital stimulation, for instance an erotic video, but not to genital stimulation. This typically affects postmenopausal women.
- **Combined genital and subjective arousal disorder** refers to lacking or feeling little sexual and genital arousal.
- With **persistent genital arousal disorders**, women have excessive unwanted unprovoked genital arousal. Arousal is unrelieved by orgasms. The feelings persist for hours or days.

4. Orgasmic disorder

Orgasm is the moment of most intense pleasure in sexual intercourse. Women with this condition are unable to reach a climax

Orgasm is the moment of most intense pleasure in sexual intercourse.

or orgasm. This occurs even despite high levels of subjective arousal. This is not to be confused with women who are able to attain orgasm through clitoral stimulation.

Factors associated include: distraction; performance anxiety; negative sexual beliefs or misconception; ignorance about genital sensitivity or poor technique; anxiety about letting go of control; lack of trust; history of sexual abuse or trauma; current relationship dissatisfaction; or partner-related difficulties.

5. Vaginal Pain Disorders

There are three types of vaginal pain disorders: Dyspareunia, Vaginismus and Vulvodynia. Dyspareunia is pain during attempted or completed vaginal penetration. This can be lifelong (primary) or acquired (secondary).

Vaginismus is another pain disorder characterized by reflexive tightening around the vagina when vaginal entry is attempted or completed that can block entry of the penis. This is despite the woman's expressed desire for penetration and when no structural or other physical abnormalities are present. Vaginismus is actually very treatable by focusing on sex education, counselling and progressive desensitization. A third pain disorder is known as vulvodynia, which is chronic vulvar itching, burning, and pain that leads to physical, sexual and psychological distress.

When a woman experiences sexual difficulties, it is useful to seek support from a trusted medical professional such as a gynaecologist or an urologist. Sex therapists and psychotherapists may also be helpful. It is always useful to bring your partner into the discussion. Treatment varies depending on the disorder and cause. If the types of disorder overlap, more than one treatment might be required.

Seek support from a trusted medical professional.

Vulvas and Vaginas are Pink

I didn't know I had a vulva until I went to sex school.

Don't get me wrong. I do have a vulva (pronounced 'vuhl-vah') and a vagina (pronounced 'vha-gine-a'). I just didn't know what they were called. I couldn't even pronounce the word penis (say 'pee-nis') and called it the 'pen-is'.

For the longest time, I was calling the whole area 'no nok' because that was what my mother said it was. For the purpose of this article, I asked my parents how to spell it and realised that what I always assumed was a Teochew word is in fact Malay!

Vulva ('vuhl-vah')
Vagina ('vha-gine-a')
Penis (say 'pee-nis')

My sexuality school was the [Institute for Advanced Study of Human Sexuality](#) in San Francisco, California, U.S.A. Sexual anatomy was one of the first things we covered. Even then I was confused about the difference between the vulva and the vagina and was too embarrassed to admit it. Needless to say, I had a lot of catching up to do.

Now, sexual anatomy is something I talk to my clients about on a daily basis. Without knowing what is 'down there' and resorting to using pet names or blushing every time we refer to our private parts, just how comfortable can one be with one's sexuality, much less sexual expression? For some people, knowing and referring to our private parts by their proper names is their first step to truly owning their sexuality.

So I tell them, with a straight face, what is what and where, utilising diagrams. Some of the braver ones admit they are still confused, and seeing that they are such keen learners, I get cyber skin replicates of the male penis and female vulva out. Their eyes invariably widen. Sometimes, a glaze comes over their eyes as I launch into my speech again. I wonder whether they are absorbing the information or are overwhelmed by the surreality of the moment.

Yet I plod on. At times, I might quiz them to make sure they remember the terms correctly. Other times, I send them home with web links to navigate as home assignments.

When I first started my practice and ran previews explaining my work, I was told by well-meaning friends to skip the part about the anatomy altogether. Make it more fun, more humorous, more interactive, they suggested.

Skip anatomy? Why should I? I see myself as a sexuality educator, among the many other

Skip anatomy?

Why should I?

roles I play. Unbeknownst to my clients, talking about anatomy is actually the first step to the desensitization process – an important one in becoming more comfortable with our sexual self and talking about it. When you talk about sex and the anatomy involved in sex using factual, scientific and accurate language, you demystify it. By calling a spade a spade, sex is no longer the elephant in the room and no longer a taboo subject. Also, this might be my only chance to provide the correct anatomical names, including the pronunciation.

Having done the anatomical talk many times now, I am better at it – more fun, more humorous, more interactive, but I am still and will still be talking about our pink bits. Say ‘vulva’. Try ‘vagina’. How about ‘penis’? Great job, class!

The G-Spot

There is a place within a woman which is so famous that it is referred to by a singular alphabetic term. I am asked frequently, usually by men, just where this is. Many women are confused about whether they have one. The fixation has a lot to do with the belief that its stimulation results in an instant mind-blowing orgasm. No, not the T-zone. That's right. We're talking about the G-spot.

The G-spot is named after the German gynaecologist who first described it in 1944 – Ernest Gräfenberg. But the concept of a hypersensitive area inside the vagina did not become such an indelible cultural artefact, so much so that it has been awarded a place in the dictionary, until the publication of *The G-spot and Other Discoveries about Human Sexuality* in 1981.

In the book, the discovery is described -- “the Gräfenberg-spot lies directly behind the public bone within the front wall of the vagina. It is usually located about halfway between the back of the public bone and the front of the cervix, along the course of the urethra (the tube through which you urinate) and near the neck of the bladder, where it connects with the urethra. The size and exact location vary. Unlike the clitoris, which protrudes from the surrounding tissue, it lies deep within the vaginal wall and a firm pressure is often needed to contact the G-spot in its unstimulated state”.

The fixation has a lot to do with the belief that its stimulation results in an instant mind-blowing orgasm.

Rebecca Chalker, my schoolmate at the [Institute of Advanced Study of Human Sexuality](#), reported in her book *The Clitoral Truth* that this description proved to be confusing for many women who couldn't find such a hypersensitive spot. Women who did not have orgasms through vaginal stimulation with fingers or the penis thought they must not have a G-spot.

Part of the confusion of where and what the G-spot is can be attributed to how so many different words have been used to define the 'spot'. Researcher Josephine Sevely referred to this tissue as *Corpus spongiosum*. In *A New View of a Woman's*

Body (1981), the Federation of Feminist Women's Health Centers called it the 'urethral sponge'. In 2005, *Our Bodies, Ourselves* called the G-spot or urethral sponge the female prostate as well. In reality, the diverse terms *Corpus spongiosum*, G-spot, urethral sponge and female prostate all refer to the same thing. The G-spot controversy was made even more contentious in 2009 when a British study on the G-spot found its existence unproven and subjective based on questionnaires and personal experience.

As a sexologist, my primary concern is how women unable to find their G-spot are being labelled as "dysfunctional". Since we are all different, there are bound to be some women whose vagina is more sensitive than others and it may not even be in the G-spot area. Just as there is no one single or best way to have sex, a woman cannot be spending her time ignoring everything else, worrying about whether she is normal, and if she has this G-spot or not.

But for those who are still intent of finding this supposed magically place, know that it is an area on the front wall of your vagina about a finger-length inside. Stimulation can cause some women to orgasm and perhaps ejaculate. Before you insert your finger, get her aroused because this is when her G-spot tends to swell and be easier to locate. Experiment with different amounts of direct and consistent pressure on where the area might be. You need to move your finger in a "come here" motion. Try also thrusting or circular movements. Ask her what feels best. The G-Spot varies in size for different women. It can be about the size of a Singapore five-cent or twenty-cent coin. Remember not to let the lack of one spot ruin your relationship. It is more important having fun in locating it.

It is an area on the front wall of your vagina about a finger-length inside.

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Vaginismus

- When a Woman's Body Says: 'No Entry'

Recently a girlfriend admitted that until she met me, she had always thought that vaginismus was a myth – a disease that was made up, or had been eradicated in the '80s, and most definitely did not exist in modern day.

In fact, vaginismus is a very real sexual concern that women experience, and more common than we might think.

Vaginismus is the instantaneous tightening of the muscles around the vagina when penetration of the vagina is attempted, making penetration difficult, painful or impossible. This involuntary reaction happens because the body perceives penetration as upsetting, painful (in anticipation of it), frightening, or dangerous. The mind may be willing, but the body is screaming “No Entry!”

Both the woman with vaginismus and her partner can feel very distressed, helpless, frustrated, and inadequate. She might experience self-blame and a loss of self-confidence for her inability to have penetrative sex. Inaccurate sexual information and the lack of understanding of the woman's body will worsen the condition, often leading to alienation and even break-ups.

Vaginismus is the instantaneous tightening of the muscles around the vagina when penetration of the vagina is attempted.

When Cindy*, 28, came to see me, she had already sought treatment from several gynaecologists who had examined her, found nothing physically wrong with her and told her to “Just relax”. One doctor suggested she use a dilator kit, which helps expand the vaginal passage gradually, but Cindy rejected it as being too intimidating.

Melissa*, 35 and married for 10 years, has the same condition. She came to see me frustrated with the lack of concrete results having paid top dollar to see the best gynaecologists. Melissa was examined each visit and instructed to do Kegel exercises (which consists of contracting and relaxing the muscles that form part of

the pelvic floor) – but not told why. Like Cindy, there was little dialogue between doctor and patient.

Realising that the cause was psychological, I made sure both ladies understood their sexual anatomy (what is what and where), and the sexual response cycle (what happens during sex). We began a conversation about what she can expect to feel and what can be done to alleviate pain during penetrative sex; this conversation continued through the course of our sessions. The process to demystify what sex was and deal directly with their condition had begun.

I taught my clients a combination of breathing and relaxation techniques, physical callisthenics, and pelvic exercises which she was to do each day. The purpose was to retrain her to develop awareness and comfort with her body as well as to sensitize and strengthen her pelvic muscles. I encouraged Cindy and Melissa to each keep a journal so she could monitor her own progress, record any feelings and memories that came up, and to better remember what she would like to share with me during our sessions.

By our second session, Cindy said she felt 'different' physically but was unable to articulate how exactly. In her determination to overcome vaginismus, she had already been practising vaginal insertion with her dildo. I

A combination of breathing and relaxation techniques, physical callisthenics, and pelvic exercises.

encouraged her to continue her daily practice. Also, I suggested that rather than push or force an object into her vagina, she could simply hold the dildo at the entrance of her vagina, incorporating her breathing and relaxation exercises, so her vagina would 'open up' and 'receive' naturally.

Similarly, I encouraged Melissa to purchase a dildo, smaller than the vibrator she already had, and to practice at home. She is to attempt penetration after having achieved her orgasm through self stimulation. When Melissa emailed to say she was able to do self penetration with her dildo without pain, I knew she was close to a break through.

In our third session, Cindy wondered aloud how penetrative sex would change her and her relationship. I was secretly delighted how our conversation had progressed from what sex was about, and dealing with pain, to what might change for her emotionally when penetrative sex did happen.

Cindy was unable to see me for a few weeks due to work. However, when I next heard from her – it was fantastic news! She had been successful in penetrative sex with her partner for the first time.

Melissa had amazing news of her own! She was able to have successful penetrative sex with her husband before our third session – thrice in fact, each time better than the previous encounter. She was overjoyed, “I cannot thank you enough. You are truly God-sent. I have been struggling for so long. This is better than winning one-million-dollar lottery.”

In her thank you note, Cindy wrote, “If I had not met you, I am certain that I would still be in the same position I was in a few months ago, struggling with something that I thought was near impossible.”

I saw Cindy for a fourth time where we discussed methods to better enjoy the sex she was already having. At our third session, Melissa was radiant, glowing with joy and more beautiful than I have seen her. Her husband and her are communicating more, happier than ever and enjoying every sexual experience. Both ladies are well on their way to greater sexual pleasure and satisfaction, and embracing life as a complete being.

Miracle worker, I am not.
Vaginismus is treatable.

Miracle worker, I am not. I provided Cindy and Melissa with the education, encouragement, and individualized treatment based on techniques that have been proven to work. Vaginismus is treatable.

* Names have been changed to maintain client confidentiality. Permission received to tell their story.

Smile - You're a Woman

A smile is a wonderful thing. Yet it appears that a smile can have more connotations than what is usually appreciated (on the surface) in our society.

At the age of eleven, I was taught this poem when I joined the Brownies (a school uniform group similar to the Girl Scouts):

“A smile is a quite funny thing, as it wrinkles up your face;
And if it's gone, you cannot find its secret hiding place.
But far more wonderful it is, to see what smiles can do:
you smile at one, he smiles at you; and so one smile makes two!”

Being a ‘good’ Brownie recruit, I took the poem to heart. However, this is what I unknowingly interpreted: I should greet people cheerfully; carry out my duties readily with a smile; and appear happy even if I am not, because, I want **him** to smile back!

Those two Brownie years aside, for most of my years growing up, I was told that I “don’t smile often enough”. I often wondered what was wrong with me. Why can’t I smile more? And on deeper reflection, I began to ask myself, “Why can’t I be allowed to smile only when I feel like it?”

Why can’t I smile more?
Why can’t I be allowed to smile
only when I feel like it?”

Last week, I read an entry posted on [Dodson and Carlin’s blog](#). In it, the author, who called herself ‘LilithLand’, related how she was with her female friend minding their own business when a group of people, including a guy, sat down next to them. He turned to her and commanded that she ‘smile’.

She looked him dead in the eye and said, “I’m not standoffish; I’m just a real bitch.”

Good for her.

The blog post reminded me of a recent experience. It was one of the many times when somebody, usually a man, asks me for a smile.

I was catching up with two male friends when, out of the blue, one of them remarked, “How come I never see you smile?”

Looking at the smiling picture on my name card, he continued, “You look much better when you smile.”

Smiling makes the clouds go away, the sun come out, and everything all right.

Doesn't everyone? I ignored him.

He persisted, “Why don't you smile now?”

Why should I? I am no clown, no performer and certainly not trying to impress him.

I fumbled a reply, “I smile when I am in the mood to.”

Somebody I know recently lamented how her husband complained about her sour face or ‘bitter gourd face’ (if you translate literally from the Chinese language). She has good reason not to smile. Her husband has repeatedly accused her of infidelity, and is physically and verbally abusive. She is miserable, depressed, and in reality, even suicidal. But, still, she is expected to smile.

Smiling makes the clouds go away, the sun come out, and everything all right.

Smiling makes us more attractive to the man.

Smiling means we are ‘good’ girls.

Smiling on command means we listen to you.

Smiling means we want you.

I am struck by how it seems to be a universal thing – from the U.S.A. to Singapore – women are expected or asked to smile!

Don't get me wrong. I am not against smiling. I am against smiling when its purpose is only to make the people across from you feel better about themselves.

The next time somebody asks me to smile, I have half a mind to reply, "How about you give me a bow then? Or pull out my chair for me? Or open the door? Isn't that what men do for women?"

Possibly, I should say, "I will smile for my sake, not yours."

Or answer, "I shall, jolly well, smile when I want to."

In reality, I will probably say "I smile when I am in the mood to."

It is amazing how many people are being sexist, downright rude, or playing 'psychological games', without even realising.

The next time you want to ask for a smile,
think again. Are you asking for a smile
because you are uncomfortable or trying to
make yourself feel better? And, if you are being asked to smile, know you have the
right to say no.

I smile when I am in the mood to.

Primal Sex for Cameron Diaz

I adore the American actress [Cameron Diaz](#).

She dares to be ridiculously funny in 'The Mask', has men swooning over her in 'There's Something About Mary', gets to kick butt in 'Charlie's Angels', and is not shy in admitting that she can't sing in 'My Best Friend's Wedding'. She smiles readily, laughs infectiously, and is 'on' about life. What's there not to like about her?

Recently she upped the antenna with her quotes (in reverse order of my favourites):

1. [On staying young:](#)

"The fountain of youth? Let's see – I guess it's exercise, healthy diet, lots of water, lots of laughter, lots of sex – yes, sex, we need that as human beings. It's healthy, it's natural."

A positive attitude about sex is the first thing to having a great sex life. We all need reminding from time to time.

*"Oh gosh, I can't even count how many times I've gotten on a plane for love."
– Cameron Diaz*

2. [On travelling for love:](#)

"Oh gosh, I can't even count how many times I've gotten on a plane for love. It's not unusual in this business; my lifestyle demands it. I'm always travelling for [whispers] cock. You've got to go where it is."

Rather than sit around and bemoan her guy not being around, Diaz is ready to travel to him. She takes responsibility to get what she wants. Do you?

3. On whether or not she is dating Alex Rodriguez:

"No, no, no. I've been in relationships since I was 16 years old. In the past three years I've made a conscious decision not to be in a relationship for as long as I want. I've stayed away from all the traps out there for me to just fall into something that will

potentially lead me down the same road...I want to have a relationship with myself right now.”

Rather than obsess about dating, marriage or babies, Diaz knows the most important relationship she needs to have is the one with herself. When you are happy and are at peace with yourself, it shows inside and then out.

4. On her famous ‘booty’:

“My booty has been on hiatus from film but certainly not from everyday life, where it doesn’t stop moving. It’s in constant sway and has a mind of its own. On camera, though, there just hasn’t been an opportunity for it to assert itself lately.”

This lady is feeding our minds (or at least my mind) with mental images of her shaking her booty and enjoying herself, much like her movies. She certainly knows how to stay on the ‘radar’ of the most notable and noticeable celebrities. When was the last time you tried to seduce your partner with some fantasy?

“I’m primal on an animalistic level, kind of like, ‘Bonk me over the head, throw me over your shoulder. You man, me woman.’”
– Cameron Diaz

5. On primal sex:

“I’m primal on an animalistic level, kind of like, ‘Bonk me over the head, throw me over your shoulder. You man, me woman.’ Not everybody has the right kind of primal thing for me...I love physical contact. I have to be touching my lover, like, always. It’s not optional.”

Diaz sounds like a kinesthetic person, where touch nurtures her. She knows what type of sexual contact she likes and is not going to be shy about asking for it. The clearer we are about what we want and like, the more likely we are to get it.

6. [On potential partners:](#)

Diaz says she’s open to all possibilities. “Sexuality and love can be different things,” she says. “I can be attracted to a woman sexually, but it doesn’t mean I want to be in love with a woman. If I’m going to be with a woman sexually, it doesn’t mean I’m a lesbian. We put these restraints and definitions on people, but it’s hard to define.”

Diaz knows that romantic love and sexual attraction are different. She also has enough understanding about human sexuality to recognise that sexual orientation and sexual behaviour are not mutually exclusive. She is not going to let others (or herself) define and compartmentalise her into a neat box which restricts sexual expression.

I appreciate how Diaz is able to so clearly articulate what most people do not get. Diaz appears to have a good head on her shoulders and probably has far greater understanding of the diversity and complexity of human sexuality than we might think. So keep your eyes and ears on the lookout for what else this quotable lady has to say next. At age 38, I still think she is a sweetheart.

Part 4 Sexual Awakening

1. Sex is Learned
2. Sex: Learning to Ride a Bicycle
3. The Elephant in the Bedroom: Talking about Sex
4. Sex is not the same as sitting the 10-year-series
5. Better, 'Betterer', 'Betterest' in Sex
6. Pouring 'Cold Water'

Sex is Learned

Sex is a learned act. That's right: l-e-a-r-n-e-d.

I remember contributing an article to an online portal a few months back. I had written the sentence: "For most people, sex is a learned act." When the portal owner's edits come back, she had written: "Don't you mean, 'For most people, sex is a natural act'?"

My immediate response was territorial: 'Who is the sexologist here? Are you saying I am wrong? What are you trying to imply here?'

When I calmed down sufficiently, I had to acknowledge that the portal owner wrote what she did because she truly thought she was right. She suspected that I had made a genuine mistake and was only trying to be helpful. I decided to store this story at the back of my head until a more opportune time to share my views arrived.

If sex was supposed to be natural, easy, and effortless between two persons in love, how would it explain the couples who seek my support, unsure of how to consummate their marriage? Are they any less in love?

If sex was natural, why do people still have fears, anxieties, concerns and questions about sex?

If sex was natural, why are there people who do not like, do not want, or do not desire sex?

Are these people (gasp!) unnatural beings?

Case in point, one of the most comfortable sexual positions for a woman is when she lifts both her legs in the air and spreads her legs wide apart as her partner mounts her. This is known as the missionary position. For the longest time, I felt like, and I

swear looked like, a frog. If sex is supposed to be natural, it most certainly didn't feel like it. And it didn't become 'natural' for a while.

Didn't it occur to the above-mentioned portal owner that what she feels is natural sexually is also learned?

The first people we learn about sexuality from are our parents, from the answer to our question 'Where did I come from'? As we enter

What she feels is natural sexually is also learned.

school, our sexual information might increasingly come from our classmates. When we reach adolescence, other sources of information may include the media such as the internet, movies, books and maybe whatever online porn you could get a hold of (even though you are not supposed to). If you were lucky, you might have received some sexual education in school – never mind the quality or depth of it.

Like much of everything we know, we acquire the knowledge, practice through trial and error, and perfect it so that it becomes a skill which we 'own'. Hence, the word: 'sexual skill'. Sex is a skill. Sex involves sexual techniques.

One can certainly buy sexual educational books in shrink-wrap plastic from Borders. Or attend one of my four sexual technique workshops.

Yes, my friend, sex is not a natural act. It is learned.

Hence, the word: 'sexual skill'.

Sex: Learning to Ride a Bicycle

Why is learning how to have sex like learning to ride a bicycle? Well, do you know how to ride a bicycle? Not the four-wheeled type. The two-wheel ones (one front, one back) upon which the rider needs to be balanced.

If yes, how long did it take you to learn to ride one? While you were learning how to ride the bicycle, did you fall? Did you feel like giving up? Was there anybody who helped, supported or encouraged you?

My younger sister and I were given a two-wheeled bicycle when we were in primary school. Our parents were both working and did not usually have much time for us. Between the two of us, we decided to support each other and learn to ride it ourselves. Every Saturday afternoon, after returning home from our extra-curricular activities (then known as ECA), we would bring the bicycle downstairs in the lift. One of us would mount the bike and attempt to keep our balance before tentatively pushing off on the pedal, whilst the other tried desperately to support. We would take turns at it until one of us gave up for the day.

It was scary, to say the least, because I knew if I fell, I could be held responsible for damaging the bicycle and/or hurting my sister. We had no clue if we were 'learning' correctly. Yet we would struggle week after week.

The holidays arrived. Even though we were frustrated with the lack of progress as we entered our third month of trying to learn, I asked my sister if we should try to practice more often that week. She agreed. Something amazing happened that day. At the end of the practice, we both admitted that we seemed to be balancing 'a bit' better. Encouraged, we decided to try again a few days later.

That fateful day, my sister was the one who got the hang of it first. She gave me the tip: "Step hard (on the pedal) and then move the handle (handlebars) to balance." Jealous of her success, I gave it my best effort, completely forgetting my fear of falling. And that was the day we both learnt to cycle.

What changed that week? And what does this little personal story have to do with sex?

When we practiced only once a week, between each session our bodies were in fact 'forgetting' the motor skills of balancing required to ride the bicycle, and we were only relearning what we had learned the week before. The week we practiced twice was the same week we reported the most progress.

I use this personal story often. I encourage my clients to do their home assignments often – certain exercises on a daily basis – because that is the fastest and most effective way their bodies will learn and help them to overcome their sexual inhibition.

The week we practiced twice was the same week we reported the most progress.

Even if they were caught up with life and work and failed to do the exercises everyday as instructed, hopefully, they would have done it often enough for progress. The ones who listened and followed instructions diligently reported the greatest progress.

Indeed, once you know how to ride a bicycle, you will never forget.

The Elephant in the Bedroom: Talking about Sex

For most people, sex is a sensitive and difficult subject to talk about.

I have come across a man who, after 15 years of marriage, admitted that he and his wife have never talked about sex. Don't get me wrong. They do have sex. They just don't talk about it.

In other words, they never talked about their preferences when it comes to sexual position or technique. And because sex has become the elephant in the bedroom, I

‘If you don't ask for what you want, you will most certainly not get it.’

would suppose they also have never shared how they would prefer to be touched – much less ask for it. Not only have they not ventured into asking each other for feedback, they would most certainly not be coming up with new ideas of what they would like to do but have not tried any time soon.

One of my favourite sayings goes like this: ‘If you don't ask for what you want, you will most certainly not get it.’ But the first thing is to know what it is you want. And how will you know what it is you want or like if you have never tried it?

If sex is as simple as: trying something (be it a position, technique or otherwise); seeing if you like it; doing more of it; being sure of what you want; and then asking for it, why aren't more people doing A, B or C to get D? What is it about S-E-X that is so scary? What is about our sexuality that we are trying to (or not to) express?

The truth of the matter is: how many of us were exposed to sexuality education growing up? And I don't mean how the sperm meets the egg. I am also not just talking about how women bleed once a month (and the men going ‘eek!’), safer sex or sexually transmitted infections. I am referring to honest conversations about all aspects of one's sexuality including: body image, sexual orientation, values, decision making, communication, dating, relationships, etc. as well as sex as a pleasurable act.

If we haven't had such exposure, just how do we begin to know what it is we don't know, but should know? And just how, with this lack of sexuality education, do we talk about sex in an adult and mature manner? We can't. We want to but do not know how.

At networking events, I have been the butt of many jokes about the nature of my work.

“Oh I won't be needing any help from you. I have X kids to prove that I have no problems.”

Somebody, with X number of kids, will

invariably say something to this effect: “Oh I won't be needing any help from you. I have X kids to prove that I have no problems.”

Surely sex is more about reproduction. And just what does it say about one when a person is so quick to dismiss any kind of a conversation related to sexuality?

This brings me back to: For most people, sex is a sensitive and difficult subject to talk about.

Sex is not the same as sitting the 10-year-series

I tell my clients that sex is not the same as sitting for the [10-year-series](#).

For those who don't know, the 10-year-series is a colloquial term unique to Singapore, where students refer to official compilation books of examination papers in past years for the GCE N-levels, O-levels and A-levels, approved by the Ministry of Education and University of Cambridge Local Examination Syndicate, respectively.

One should not compare sex with sitting for a school examination, but I am just about to.

When you sit for an exam, there is a model answer. We are talking about absolutes – you are either right or wrong. There is a set of perfect answers and the goal is to get a hundred out of a hundred. You could do very well, well, pass or fail.

And you have guessed what I am going to say: Sex is not about that.

There are no absolutes when it comes to sex. There is no right or wrong. There is rarely, if ever, a perfect lovemaking session. Sure you can have a great, fantastic, even mind-blowing lovemaking session, but it might never be perfect.

We are all unique individuals who have different bodies, sexual responses, and preferences which might change on a day-to-day basis depending on many factors.

Why? Because we are all unique individuals who have different bodies, sexual responses, and preferences – which (gasp!) – might change on a day-to-day basis depending on many factors. These might include our stress, tiredness or fitness levels; general day at work; and even hormonal levels. Hence what you did right the last month, last week or even one day before, might not feel as good for your partner the next time you do it.

To get closer to a 9.99 out of 10 from a sexual experience, communicating openly with your partner helps; providing feedback is definitely encouraged, not to mention learning new sexual techniques through reading a book, watching an online video, or attending a workshop. Coincidentally, I believe I am the only person teaching sexual techniques in Singapore. The ladies who have attended these workshops have expressed surprise at the number of different ways to pleasure the male anatomy. Indeed, the ways one can pleasure sexually are indefinite.

Is it normal to desire/ want/ have sex X number of times a day?

So if sex is not the same as sitting for the 10-year-series and there is no definitive answer, why do I get asked over and over again: Is it normal to desire/ want/ have sex X number of times a day? Is it common to do Y? What is the best way to get him or her to achieve the big 'O'?

We are all different. There is no best way. What works with person A you were intimate with might not work for person B. Even with the same person, the experience will feel different — all things being equal — on a different day.

The best way is what works for you and the person you are with. Ask, try, evaluate, then try again.

And remember: Chill out. You are not sitting for an exam.

Better, 'Betterer', 'Betterest' in Sex

Is it possible to get better, 'betterer' and 'betterest' when it comes to sex?

A certain minister in Singapore was cited in the media as saying, "If you're the best today, strive to be better. If you're better today, strive to be 'betterer' and if you're 'betterer' today, strive to be 'betterest' so that over time, Singapore's service standards can just keep getting better, 'betterer' and 'betterest'."

I couldn't stop myself from cringing and rolling my eyes when I read this. He probably thought he was endearing himself to the man on the street with his Singaporean twist to the English language. Instead, his statement had the opposite effect and offended many Singaporeans.

His message on service excellence harkens back to the maxim that has been drummed into us from when we were young school children:

"Good, better, best;
Never let it rest
Till your good is better and your better is best."

What a way to live your life! It's not enough to be good. Don't even think about taking a breather, much less stopping to pat yourself on the shoulder for a job well done. You have to hurry up and be the best!

This, further, brings to mind the 'Planting Rice' song which we were made to memorise in school:

"Planting rice is never fun,
Bending over 'til the set of sun.
Cannot sit, cannot stand,
Plant the seedlings all by hand.
Planting rice is not fun,
Bending over 'til the set of sun."

Cannot sit and cannot stand,
Plant the seedlings all by hand.”

Personally, I have never planted a single grain in my life, and I am fine with that!

In my mind's eye, I associate this fixation of better, 'betterer' and 'betterest' with the act of planting rice – bending over all day, unable to sit or stand. I am stuck in this perpetual position of discomfort, too afraid to stop for fear of losing out, and having too much at stake to give up. It is the living dead on Earth.

Inundated with messages of Better, 'Betterer', 'Betterest', that control every facet of our lives, is it any wonder that we have sexual difficulties?

We are too busy being the best boss, manager, employee, worker, and colleague, etc. Why limit your attitude of excellence to work? At home, it's about being the ideal son/ daughter; husband/ wife; father/ mother; and brother/ sister. The list of roles we play and the responsibilities we owe goes on. No respite!

No wonder we drag our feet to work, worry about money, and yell at the kids. We need to beat this relative or that neighbour in becoming 'Betterest' in the quickest amount of time!

Inundated with messages of Better, 'Betterer', 'Betterest', that control every facet of our lives, is it any wonder that we have sexual difficulties?

We find it difficult to:

- Talk about sex with our partners;
- Discuss sex with our kids;
- Not think of work during sex;
- Surrender ourselves to pleasure;
- Embrace our sexuality;
- Enjoy sensuality;
- Let go;
- Climax;

- Orgasm;
- Relax.

Even if you managed to do all that, you can't just turn over and sleep just yet!

Remember: You can always be 'betterer'! So

we want to last longer, have more intense orgasms and have it all! Why stop at five seconds? Or five minutes, for that matter? You want to be the 'Betterest' lover possible, don't you?

Is it really important to constantly strive for 'betterer'?

Does it really matter you are the 'Betterest' lover of the world?
And just who decides?

If you've read this far, I think you are beginning to get the drift of what I am getting to. Is it really important to constantly strive for 'betterer'? Does it really matter you are the 'Betterest' lover of the world? And just who decides?

In our fixation for Better, 'Betterer', 'Betterest', we might lose the plot altogether. That is: Sex involves the expression of love physical. It is about the joy of life as well as intimacy of connectedness. So quit keeping score in bed. What's the fun in that?

Pouring 'Cold Water'

Have you ever poured 'cold water' over somebody else's happiness?

In a literal translation from the Chinese language, 'pouring cold water' means dousing the flames of passion. This usually happens when the opposite party is feeling elated about a new love, promotion or business deal, and somebody comes along and ruins the 'moment'.

Many moons ago, after I bumped into a friend and shared the news of my impending marriage, I was shocked beyond words when, after enquiring about the age of the groom (8

"Yeah I am not surprised you are marrying somebody so much older. You have always been very childish." – Friend

years older as a matter of fact), she said, "Yeah I am not surprised you are marrying somebody so much older. You have always been very childish."

This came from somebody whom I had not met for over two years. We all change with time. What made her think she still knew the person I was two years ago? And who asked for her opinion? By calling me childish, what did it say about her? I was silent and kept my distance from this 'friend'.

The marriage did end five years later but, for reasons I will not go into in this piece, the end was neither hastened nor due to my 'childishness'.

Having rekindled lost friendships following the marriage, I was invited to the wedding of an ex-schoolmate from my Polytechnic. The only person I knew at my table was a polytechnic classmate who had brought his wife and infant son. I cooed at the adorable boy, watching as the parents fussed over him.

Out of the blue moon, this classmate said, "Don't worry. You will be happy one day."

"Don't worry. You will be happy one day." - Classmate

In his two sentences, was he implying that:

- 1) I was worried that I was now single?
- 2) I was not happy being single?
- 3) I will only be happy one day after I get re-married and/ or have a child?

In reality, having come out of a psychologically abusive marriage, I couldn't have been happier for myself. I was beginning to feel like the 'old me', and finally feeling hopeful and positive about life again.

Yet across from me, once again, was this classmate I hadn't met for a good six years, telling me, in not so many words, that I was doomed for misery, and should be worried because I was alone. His thinking that one can only be happy as a member of a partnership was warped.

Don't get me wrong; it is only human to want to love and be loved. There is much happiness and joy in being in a romantic relationship. I loved being in a relationship, being married, and growing as a person from it. Again, he was passing judgment – his verdict on my state of happiness.

In a few months time, I am planning to get married for the second time to an absolutely amazing person.

It is only human to want to love and be loved.

Already I am hearing reactions like, "Good!", "Congrats!", "It's about time!". The less tactful relatives are saying, "Yeah you shouldn't be alone," or better yet, "Don't wait too long before you try for a baby".

So according to the people around me so far, marrying somebody older is for people who are 'childish'; being alone means being 'worried' and 'not happy'; being married is 'good' and guarantees 'not being alone'.

People can say what they want. There might be some 'cold water' thrown at me over this second marriage too. I will take it all in my own stride. You can only live your life the way you think is best for you.

And, well-meaning people, please think twice before you speak. Start recognising when you are already passing judgment when you say things like 'Good', 'Too Bad' and the like. You might mean well or are only trying to be kind. However, in reality, you may not necessarily be 'helping' but 'pouring cold water'.

Part 5 Sexual Expression

1. What's Wrong with Sex?
2. Sexual Stereotypes
3. Heterosexuals: Come On Out
4. Sex Heroes
5. Sex and the King of Fruits

What's Wrong with Sex?

Recently, I attended a men's health forum on erectile difficulties. There were three male speakers scheduled, all of whom were medical doctors. Being a sexologist, I was always keen to learn more in the area of sexual dysfunction.

I had pre-registered for the event and was queuing to sign in. I caught a glimpse inside the seminar room, as the entrance was ajar. It was evident that more than half the seats were already occupied with men. All was in order: Men's forum, lots of men.

However, what I did not expect was what I heard from behind me: "I am not here to attend the talk. I am here to give a talk."

This person spoke in a loud, confident voice and I had no trouble believing he must indeed be one of the speakers, even though I didn't turn my head towards the direction of the voice.

Yet, he must have found some reason to repeat himself, within earshot of everybody else who was also queuing to register: "I am not here to attend the talk. I am here to give a talk."

*"I am not here to attend the talk.
I am here to give a talk."
– Mr. Speaker*

He chuckled and added, "If I am here to attend the talk, then doesn't it mean that there is something... wrong?"

I was bent over the desk signing in. The saving grace was when a lady behind the registration desk retorted, "It's okay what."

After I straightened my body, I turned in the direction of the voice but could not make out whom the speaker was. I entered the room to have several men look at me with curiosity. I was the only woman in the room who was not one of the organisers, and I came alone.

All the seats closest to the stage and in the centre isle were all taken. I found a seat in the second row, on the second to last aisle on the far left. Two men strolled in and took seats near to me on the farthest left aisle. Not long after, two more men came in and sat in the row immediately in front of me.

One of the men on the aisle on my left seemed to recognise one of the newly arrived because he exclaimed: “How come you are here? You shouldn’t be here.”

This person turned, nodded his head in acknowledgment but said nothing. I gave Loudmouth a glare.

Loudmouth was not done. He repeated himself, louder this time, “How come you are here? You shouldn’t be here!” He leaned forward, tapped his friend on the shoulder before moving to a seat next to him.

*“How come you are here?
You shouldn’t be here!”
– Mr. Loudmouth*

I did not hear the rest. They seemed to catch up for a bit, before Loudmouth moved back to his original seat, satisfied with whatever he got out of Mr. Must-be Embarrassed.

What is this? First I hear (I didn’t actually see who it was) one of the speakers express embarrassment at being seen at a men’s forum. Then one fellow talk attendee verbalised his judgment on whether his ‘friend’ should be seen attending such events.

If we are brave enough to own our sexuality and actually show up, then our ‘friends’ – whom we might bump into – will make sure we feel embarrassed enough to never do so again. Worse, speakers themselves are not comfortable enough about the topic of sexuality to normalise it for others.

I have had ladies who attended my sexual technique workshops say something to the effect of, over their dead bodies will they let their friends, family, or even husband know they came to me.

We cannot deal with our own discomfort and judgement about sexuality. We impose our beliefs and limitations on others who desire to seek out sexual coaching, attend sexual knowledge forums or participate in sexual technique workshops.

Until we do so for ourselves, sex will remain a taboo subject, the elephant in the bedroom and a big fat mystery. So, do your real friends a real favour. Show only support even if you are not brave enough to own your sexuality.

Sexual Stereotypes

Gentlemen prefer blondes? All blondes are dumb? All redheads are passionate? A man is always sex-, porn- and/ or looks-obsessed? Therefore, he is expected to sow his wild oats? The gay person is promiscuous? A woman is seductive when she is slim, and that's why every woman wants to be slim—so she can be seductive? Women are gold-diggers, headache-prone and stupid (especially if she is a wife or a girlfriend of a footballer, otherwise known as a 'WAG')? All of these make her definitely the weaker sex. Oh yes, she also can't park and men can't pack?

These are just some of the sexual stereotypes discussed in the book 'Women Can't Park, Men Can't Pack', written by Geoff Rolls. He also wrote the popular 'Taking the Proverbial'

Stereotypes are commonly held public beliefs about specific social groups or types of individuals.

which explores the psychological truth behind well-known proverbs and sayings. Needless to say, many of the above stereotypes hold no water and are debunked in his book.

I picked this book up because I have always been intrigued with the thoughts and attitudes of various groups and how it manifests in their social behaviour. And, as a sexologist, I work with clients to shape, shift, or even outright change their thoughts, attitudes, and beliefs. Stereotypes are commonly held public beliefs about specific social groups or types of individuals; and as such, I often find myself face-to-face with the stereotypes my clients hold.

While leafing through the book, I was struck by just how many stereotypes there are, and how frequently we come across them in our everyday life. Categorizing groups of people based on their ethnicity, race or religion – whether subconsciously or otherwise – helps us make sense of the world we live in, so we are encouraged to place other people into convenient and neat 'boxes'. Hence, it involves simplified and simplifying images of members of a culture or group, generalisations about people, and even initial predictions of strangers' behaviour based on superficial pieces of personal information. Such singular generalisations do not recognise the complex

and multidimensional nature of human beings; indeed, they are designed to ignore complexity. According to Rolls, stereotypes should rightly be frowned upon since they lead to bias and discrimination, which is one manifestation of prejudice.

We see stereotypes portrayed in the media all the time. This can be due to the individual and personal biases, as well as ignorance, of writers, directors, producers, reporters and editors. What stereotypes also do is provide a quick identity for a person or group that is easily recognized by an audience. It's faster, easier, and 'cleaner' to use a stereotype to characterize a person or situation, than it is to provide a more complex explanation. As viewers and readers, we can question such portrayals and demand change in the media.

Rolls goes on to add that stereotypes persist because we look for evidence that they are true in our everyday lives, which reinforce our existing beliefs. The psychological effect of labelling people can sometimes be positive but is usually negative.

It is my hope that improved understanding as well as increased awareness of stereotypes, (including and most especially sexual ones), can cause us to question them and open our eyes to individual exceptions. Take time to pause and reflect. Examine, debate, and question whether or not the stereotypes you hold are true. Let go of unfounded beliefs. Look at the individual. We are all different. The first step towards change is awareness – the willingness to put on fresh lenses and question from whence our beliefs are derived.

Heterosexuals: Come On Out

You might have come across the term [‘Coming out’](#). What does it mean?

It is a figure of speech used by the lesbian, gay, bisexual and transgender (LGBT) community in disclosing their sexual orientation and/or gender identity. Also referred to as ‘Coming out of the closet’, the beginning of this process is acceptance of oneself. Following this, openness may occur with family, friends, co-workers, the community in which one lives, etc. This is a life-long process. One can ‘come out’ similarly or in a different manner to various individuals or groups at different times.

If you are a heterosexual, ‘coming out’ might like seem like an alien concept. Below is a tongue-in-cheek questionnaire developed by Martin Rochlin, Ph.D., in 1977, designed to illustrate the implicit heterosexism in these same questions asked of lesbians and gays.

Heterosexism is the belief that everyone is, or should be, heterosexual.

Heterosexism is the belief that everyone is, or should be, heterosexual. It is the belief that rights and privileges should only go to heterosexuals and that any other sexual or romantic orientation either doesn't exist and/or is inferior to heterosexuality. Gays and lesbians experience these questions in the same way a heterosexual would.

Questions for Heterosexuals

developed by Martin Rochlin, Ph.D., 1977

1. What do you think caused your heterosexuality?
2. When and how did you first decide you were a heterosexual?
3. Is it possible your heterosexuality is just a phase you may grow out of?

4. Is it possible your heterosexuality stems from a neurotic fear of others of the same sex?
5. Isn't it possible that all you need is a good gay lover?
6. Heterosexuals have histories of failures in gay relationships. Do you think you may have turned to heterosexuality out of fear of rejection?
7. If you've never slept with a person of the same sex, how do you know you wouldn't prefer that?
8. If heterosexuality is normal, why are a disproportionate number of mental patients heterosexual?
9. To whom have you disclosed your heterosexual tendencies? How did they react?
10. Your heterosexuality doesn't offend me as long as you don't try to force it on me. Why do you people feel compelled to seduce others into your sexual orientation?
11. If you choose to nurture children, would you want them to be heterosexual, knowing the problems they would face?
12. The great majority of child molesters are heterosexuals. Do you really consider it safe to expose your children to heterosexual teachers?
13. Why do you insist on being so obvious, and making a public spectacle of your heterosexuality? Can't you just be what you are and keep it quiet?
14. How can you ever hope to become a whole person if you limit yourself to a compulsive, exclusive heterosexual object choice and remain unwilling to explore and develop your normal, natural, healthy, God-given homosexual potential?
15. Heterosexuals are noted for assigning themselves and each other to narrowly restricted, stereotyped sex-roles. Why do you cling to such unhealthy role-playing?

16. Why do heterosexuals place so much emphasis on sex?

17. With all the societal support marriage receives, the divorce rate is spiraling. Why are there so few stable relationships among heterosexuals?

18. How could the human race survive if everyone were heterosexual, considering the menace of overpopulation?

19. There seem to be very few happy heterosexuals. Techniques have been developed with which you might be able to change if you really want to. Have you considered aversion therapy?

20. Do heterosexuals hate and/ or distrust others of their own sex? Is that what makes them heterosexual?

If somebody you know is coming out to you, be neutral, non-judgmental and compassionate. We are all taught, from our youth onwards, to treat everyone with respect and this applies regardless of one's sexual orientation or gender identity.

Sex Heroes

A few weeks ago, while watching 'Robin Hood' starring Russell Crowe, I found myself cringing at the predictability of the plot. I am usually not so squeamish about my buttons being so obviously pushed. However, I walked away from the experience with a few observations about the preparation of heroes that I'd like to share with you.

Good guy [Robin Longstride](#) (Crowe) is an archer fighting under King Richard the Lionhearted during what would be Richard's final Crusade. Robin is falsely accused of disloyalty but escapes after Richard is killed. Upon finding the dead king's crown, Robin returns it to London, where Richard's brother John takes over. Unbeknownst to John, his new right-hand man Sir Godfrey, an English knight with French lineage and allegiance, is in cahoots with the French.

The film climaxes with an invasion on England's south coast by the French. Robin slays Godfrey with a well-placed arrow from long distance. The English are victorious in the ensuing battle, during which King John perceives the French surrendering to Robin, rather than to himself, as a major threat to his power. In the final scenes, King John declares Robin to be an outlaw. In response to this, Robin moves to Sherwood Forest, with his love interest Lady Marion of Loxley and his friends in tow, to form what will become the celebrated Merry Men of myth and legend.

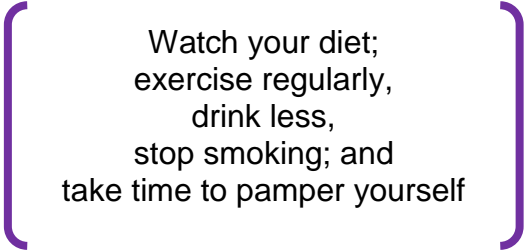
Here is the typical good guy vs. bad guy; underdog vs. person of power; hero vs. villain – not to mention fair maiden thrown in for good measure.

I asked myself: Why is it that the hero of the movie somehow always manages, in the midst of great chaos no less, to be at the right place at the right time, to make the critical difference – namely kill off the villain?

In action movies, this good guy has some heroic quality – kind, honest, integrity – in addition to being either stronger and tougher, or smarter even if not bigger in build. However, he would definitely have received more training, and therefore, he is more

skilful and more prepared for whatever may come. Hence, it is only natural that this person would be more likely to be able to watch for the signs and indeed, be at the right place at the right time.

In order to have a good, if not fantastic, sex life, there are things we can do to make sure we are at optimum shape. All these things mummy or doctor said is true: watch your diet; exercise regularly, drink less, stop smoking; and take time to pamper yourself. The saying “Take care of yourself. The rest will follow” certainly rings true.



Watch your diet;
exercise regularly,
drink less,
stop smoking; and
take time to pamper yourself

We can not only prepare ourselves physically but also acquire skills for sex. This training can come for instance, in the form of reading sex education books; attending sexual technique workshops; going for related communication, coaching or counselling sessions.

You are the Sex Hero of your life.

Sex and the King of Fruits

What is the relationship between sex and durians? Is there any at all?

Since I am paid for my time, I like to use metaphors and analogies to make sure that I get my intended message across in the most effective way in the shortest amount of time. This has a lot to do with my first career in corporate communications: where time is of the essence and clear, simple messages often work best.

When I hear of adverse reactions to male ejaculatory fluid, also known as semen, I ask follow-up questions to better understand the aversion.

“What is it about the ‘cum’ that you don’t like?”

“Is it the taste, smell, or look?”

Sometimes I find a discrepancy. There might be an assumption that because the semen looks ‘disgusting’ to the person concerned, it will smell or taste bad. Or the fluid smells bad and so the taste should be equally horrible.

I never try to disregard or dismiss their feelings. Instead I use the analogy of a [durian](#).

Widely known and revered in Southeast Asia as the ‘King of fruits’, the durian is distinctive for its large size, unique odour, and formidable thorn-covered husk. The fruit can grow as large as 30 centimetres (12 in) long and 15 centimetres (6 in) in diameter, and it typically weighs one to three kilograms (2 to 7 lb). Its shape ranges from oblong to round, the colour of its husk green to brown, and its flesh pale yellow to red, depending on the species.

Mention ‘durian’ and you evoke immediate and quite diverse reactions – from deep appreciation to intense disgust. The edible flesh emits a distinctive odour, strong and penetrating even when the husk is intact. Some people regard the durian as fragrant;

others find the aroma overpowering and offensive. The odour has led to the fruit's banishment from certain hotels and most public transportation in Southeast Asia. You would think it stops there. But then there are those who like or do not mind the aroma but detest the taste. Or yet others dislike the odour, but in reality, do not mind the taste.

The smarter ones get it immediately the moment I say, "Think of the durian." Most times I elaborate, "Some people like the smell, but don't like the taste. Others like the smell, but not the taste. So if you haven't tried, how do you know you really don't like it?"

The moment of 'A-ha' comes over their face. A shift in perception takes place.

Granted, they might find the smell and taste appalling, but at the very least they would know it for themselves. And through repeated exposure, the perceived 'offense' might reduce and result in greater comfort with sexual expression.

Some people like the smell, but don't like the taste. Others like the smell, but not the taste. So if you haven't tried, how do you know you really don't like it?

Part 6 Better Sex

1. (How to) Enjoy Sex: Don't Lie Back and Think of England
2. The Importance of Listening to Your Emotions
3. The Importance of Touch
4. Dance – Your Way Into Your Body
5. Getting Feedback after Sex (Part 1 of 2)
6. Getting Feedback after Sex (Part 2 of 2)

(How to) Enjoy Sex: Don't Lie Back and Think of England

I am surprised that, in this day and age that I still am asked: "What can women do in bed besides lying back and thinking of England?"

In case you are not familiar with this expression, it is an English saying with roughly the same meaning as "to grit one's teeth", *i.e.* to put up with what is happening. It was used both in England and among expatriates outside the country when conditions were difficult. It is given as an encouragement to perform a task that is unpalatable.

["Lie back and think of England"](#) was an instruction given to prospective brides or women in general in the Victorian Era regarding how to cope with the sexual demands of their husbands. Childbearing was considered a patriotic duty, but at the same time women were not supposed to enjoy sexual intercourse, and new brides in particular would have been largely ignorant of the facts about sex.

One version of the genesis of the saying is the legend that Queen Victoria gave this instruction to her own daughter on her wedding night. Another said that the phrase originated in Lady Alice Hillingdon's (1857-1940) Journal in 1912.

Sex should not feel like
a burden, duty, or chore.

This question is wrong on so many levels because it assumes that only the man derives pleasure from lovemaking. And that it is all about his pleasure: the woman has no say.

Granted, that there is more to any relationship than sex; my concern is why a woman would choose to stay in a relationship where she feels she has to lay back and think of England, effectively casting herself as a receptacle. Sex should not feel like a burden, duty, or chore.

This question also assumes that sex is only about penetrative sex. There are indefinite ways to engage in sexual pleasuring and enjoyment without penetration. One is limited by only by the limit to one's imagination.

In this day and age, a man who doesn't bring his partner to sexual peak is called a lousy lover. This pressure to perform and be a 'real man' is so intense that sometimes he has difficulties attaining his orgasm. Sex should not be about needing to prove your manhood, outlasting your partner, or denying your own pleasure.

It is perfectly normal that:

- ... sometimes one of you experience an orgasm first;
- ... sometimes one of you may choose not to have an orgasm;
- ... sometimes one of you do not attain an orgasm; or at
- ... other times both of you might not experience an orgasm.

It is all fine and perfectly normal. However, if this continues for a period of time and causes distress, it is also normal, and highly recommended, that you seek support by consulting a medical doctor, urologist, gynaecologist or a sexologist like myself.

It is all fine and perfectly normal.

Sex should be mutually enjoyable and pleasurable. Yes, for both of you. And it is also okay to give yourselves permission to be funny and silly. If you cannot relax with your partner in bed – making jokes, laughing at yourselves and trying new things together – then doesn't it limit the amount of enjoyment you might experience? The two of you should be relaxed, engaged, enjoying the experience and wanting more of such intimacy and joy in your lives.

The Importance of Listening to Your Emotions

If you accidentally touched a hot stove, the nerves in your skin would shoot a message of pain to your brain. The brain then sends a message back telling the muscles in your hand to pull away. Is that a bad thing?

No, you would answer. What a ridiculous question, you might retort. Hear me out. Physical stimuli we receive, or thoughts we have, produce physiological responses as well as further thoughts which tell us how to react to a situation. By adulthood we learn to become pretty good at discerning what is good or bad for us physically. We listen to the safety messages our body sends us.

Yet why do we not listen to what our heart tells us? How can so many people persistently dismiss, deny, or worse, lose touch with our emotions? Our emotions are the result of our mind's interpretation between our bodies and its sense perceptions of the

The word 'emotion' does not refer to the same thing as 'emotional'.

Feelings need not be judged or labelled 'good' or 'bad'. They just are.

outside world. Much like the way our physical feelings preserve and ensure our survival, our emotional feelings are developed, refined and perfected through time.

The word 'emotion' does not refer to the same thing as 'emotional'. Yet emotions are usually perceived as a bad thing. We may downplay emotions, seeing it as a sign of weakness. We may even underestimate problems by overlooking negative emotions. Not only that, in denying our feelings and rationalising our problems with our mind, we miss out on real solutions and holistic healing. We are so quick in running away from 'bad' feelings that we stand to also lose the renewal that positive emotions can encourage. We are numb. We have lost our true innate ability to survive. Our energy and reserves have run out.

Feelings need not be judged or labelled 'good' or 'bad'. They just are. Negative feelings can warn and help us in particular situations. These are quite normal and necessary for mature behaviour. The inability to express and channel negative

feelings is limiting and blocks whole and mature functioning. At its worst, it is crippling. Feelings are often more honest than our minds in telling us “where we are at.” It is not an intellectual reply. It is a response that comes from your core – from your gut.

This is why one of the first things a counsellor will do with a new client is to assess how the person feels. Very often, the client themselves is confused about his or her feelings. It is easy enough to verbalise what one thinks consciously, but harder to communicate what one feels from deep within. If there is no congruence of how one feels (emotions), the way one thinks (rational intent), and what one does (volition), a person cannot be whole. An effective counsellor helps to bring these feelings out, and facilitates the integration of such feelings into the client’s conscious assessment of what is wrong and how one should proceed.

It is helpful to become more aware of your emotional needs as a first step towards self-love. When we become better at identifying and expressing our emotional feelings, we invariably also become more socially adept in establishing and building relationships. The more adept we are at identifying and expressing emotional feelings, the better we feel and the better our relationships will be. I end with a quote by Robert Hendi: “Cherish your emotions and never undervalue them.”

The Importance of Touch

Touch is the medium through which we first become acquainted with the world. It is the first means of communication between the newborn baby and the mother.

Research has shown that many babies who are raised in an orphanage and are not handled and touched on a regular basis rarely live past the age of two—they literally wither away.

Some people like to touch others, and some do not. Some like being touched, yet others might not. Are you a toucher or non-toucher? Do you realise that the way your parents held you as a newborn – from the pressures, caresses, to cuddles – influence the way you have developed? And the touch you received as a child through play, punishment, and bathing directly relates to your responsiveness as an adult?

Your body remembers. If you were touched often and lovingly as a child, you are much more likely to be comfortable experiencing the pleasure of your lover's touch. If, however,

If you yearn for physical closeness, communicate your need to your partner.

your memories of being touched bring forth memories of punishment, rejection or pain, your body will inadvertently withdraw from touch fearing further hurt. This is where you might like to seek out therapeutic approaches such as counselling or massage for physical memory healing.

It's not uncommon for one partner to need more physical connection than the other. Studies have shown that touch can lower stress levels, lessen anxiety, and help a myriad of other physical disorders. There are noticeable changes in mood and even health when we're exposed to simple human kindness in the form of touch.

If you yearn for physical closeness, be it a hug or a snuggle, communicate your need to your partner. If a hug is all you want, clearly communicate this. The desire for physical closeness often gets misinterpreted as a desire for sex. Misunderstandings

that stem from miscommunication about how we want, like, or need to be touched does happen. Communicate, communicate, and communicate!

Also, if you desire more touch into your relationship, acknowledge that you feel less connected and want a way to spend more time touching him or her, and helping them feel loved.

Physical closeness and touching stimulates the continued growth of your loving relationships. It is the conduit between two individuals that allows them to connect as one.

You can:

- Hug and kiss each other before you leave for work, or when you return home.
- Give affection to each other during quiet moments of the day.
- Hold hands while walking down the street, watching a movie, or between courses at a restaurant.
- Shower or bathe together. (It has the dual function of helping the two of you to not only feel emotionally closer, but also become physically cleaner!)
- Ask for a massage and give one in return.
- Subtly keep your hand on your partner's leg, or on the small of their back, to maintain a physical connection.

Touch establishes communication, and what is transmitted has more meaning than words. Touch communicates involvement. It means you care that you are really supporting the other person. Touch heals and provides emotional sustenance. So reach out and touch your partner today.

Dance - Your Way Into Your Body

We are inundated, on a daily basis, with multiple messages about how our bodies can or should look better from slimming and facials to skin whitening and body hair removal. There is just so much we can be unhappy with when it comes to your bodies. How can we ever be happy with the way we look, much less enjoy inhabiting the only body we'll ever have? Could dance help us become more comfortable with our bodies?

I asked three female dance instructors:

According to Yuki Chua, director of [Bellydance Discovery Pte. Ltd.](#), who has been teaching for over seven years, belly dance is an expressive form of dance that derives from movements natural to women's bodies. From ancient times, it was a dance to celebrate new lives, and the movements even prepare a woman to get ready for pregnancy, child delivery, and post-natal recovery. She emphasized that confidence starts within, and not with how we look.

Yuki adds, "Women feel better when they can move better. No one feels good when one feels stiff and clumsy. When a woman is able to move well, she will be more ready to express the sensual side of herself."

Linna Tan, Director of [Bobbi's Pole Studio Singapore](#), who has been teaching Salsa, Exotic Dance and Pole Dancing for over ten years, agrees: "Dance and movement are forms of expression. Being able to use your body as a tool to express yourself will help a woman understand how her body moves and works, hence, getting better in touch with her body."

Ming Leong, Owner of [Acro Polates Pole and Aerial Fitness Studio](#), elaborates: "It takes time for a beginner to get past the initial psychological barrier, the insecurities and the self-consciousness, before she immerses herself into dancing. Once she gets past that, she is lost in her own world, and translates her thoughts and her feelings about herself through the dance and movements with the greater control of

her body. And with that, she realises she can be, and is in control, and there is always another peak she can push her body to, and she will constantly strive towards that, just like how a writer wants to have a wider vocabulary of words to express her- or himself freely.”

On Sexuality and Sensuality

Just how is dance connected to sexuality and sensuality?

Ming, who teaches pole dancing, aerial fitness classes and exotic dancing, certainly thinks the link exists: “Dance and movements are visually stimulating and a communication of body language to the audience. They can evoke strong emotions and desires, and arouse reactions and feelings according to what the dancer is trying to convey. With dance and movements, a woman can slowly discover ways in which her body can move and express itself and the vocabs (vocabulary) of her body language expands with time, so does her confidence when she realises she can string emotions along with each and every movement. Dance is an art form that embodies elements contributinal to the ‘feel-good’ factor of a woman, and ultimately it is all about the confidence that sums it up.”

Linna believes that sensuality is not about how you look but how you feel about yourself. She shares this: “Dance is a wonderful way of getting you comfortable with your body, maybe not right away but if you keep at it, you will feel more connected with your body and as you get more confident, your sensuality will naturally shine through.”

‘ABCD’ message:

- **A**ccept who you are and
- **B**e yourself, not others, as
- **C**onfidence ooze from within and
- **D**arlings will come from everywhere

Yuki has this fun ‘ABCD’ message for women out there:

- **A**ccept who you are and
- **B**e yourself, not others, as
- **C**onfidence ooze from within and
- **D**arlings will come from everywhere

Success Stories

All three instructors each have success stories aplenty to share. For Ming, pole dancing has even helped one of her students battle post-natal depression and improve her poor self-image she has had of herself after childbirth. Overall, there is a vast improvement in terms of techniques and self-confidence, as well as coordination of body movements for her students.

Linn had this touching story to share: “The transformation can be very great. I have this girl who was very timid and obviously very self-conscious when she first came to our classes. Her dress sense was dowdy and she had a very unbecoming hairstyle. She wore unattractive glasses and if I were to so much as raise my voice in class, I think she may burst into tears. I was gentle with her, of course, sensing that she needed encouragement and I made sure I paid attention to her, but not too much because I sense that too much attention will make her uncomfortable. She was very quiet and didn’t interact with the other students but she was a very determined soul. There was a particular move that she couldn’t master for the longest time and many of her classmates could already do it. I saw her struggling and I taught an exercise to practise at home that will help her to get that move.”

“By the next class, she was doing the move perfectly! She was very diligent, determined and hardworking. I was very impressed with her progress. As time passed, I noticed her starting to interact with the other students and as she got more and more confident, the glasses gave way to contact lenses and the hairstyle is now sexy and the clothes more stylish. She remains very hardworking and I sense a little bit of competitiveness with her classmates but I think it’s great because it keeps her motivated and that helped her improve by leaps and bounds. She is a totally different person from the timid, mousy girl I met long ago. She’s not super wild or loudly confident but she is certainly more out-spoken, more self-assured and definitely, sexier!”

“She is certainly more out-spoken, more self-assured and definitely, sexier!” – Linna Tan

Yuki would attest about the benefits of dance to one’s body image: “Many of our students are very shy when they start belly dance and now they have more

confidence, better posture, the ability to dance better and most importantly, they feel more confident of themselves and accept their curves. We have a couple of students who have knee and back problems, but after several months of bellydancing, their physical conditions improve and even their physio(therapists) are surprised.”

Linn added, “They start walking taller, they start wearing clothes that are more attractive, sometimes more figure-hugging, sometimes the hemlines get shorter. I have had many students who come to tell me how much better they feel about themselves.”

As a sexologist, I strongly believe that it is important to have some sort of acceptance of your body before you can comfortably share it with another person. Dance is a fantastic way to do so. It is not only a good form of exercise but also fun. Having tried all three forms of dance (belly dance, exotic dance and pole dance) myself, I would encourage all ladies to consider signing up for classes if you are at all interested.

Getting Feedback after Sex (Part 1 of 2)

In previous pieces, I have covered how sex is not a one-way experience (in ‘Don’t Lie Back and Think of England’), as well as how sex can be like an elephant in the bedroom when it comes to communicating any problems that might be occurring. This week, I would like to suggest ways in which we can get feedback from our partner after a sexual experience. And when I say sexual experience, I am not limiting it to just penetrative sex.

Open-Ended Questions

You can begin asking your partner what the sexual experience was like:

“Sweetheart, how was it for you?” or “How was it just now?”

If feedback is restricted to one-word answers or not forthcoming, you can elaborate by saying: “Ok... You know, I would really like to hear what you like about it and what would make it better. Could you share more with me?”

An open-ended question allows for your partner to communicate as little or as much as desired.

Breaking the questions down might be easier:

“How was it?”

“What was good about it?”

“What would make it better?”

Remember if you ask, be emotionally and mentally prepared for the answer – whatever it may be. If you appear defensive or react negatively, you are effectively being counter-productive and shutting out your partner at a critical time.

All of us will do well to bear this in mind: Don’t take it personally. There is no right or wrong answer. We are different physically on a day-by-day basis – depending on our

fitness level, what is going on in our lives, and how it affects our mood. What doesn't feel right or good on one day could well feel quite different on another day. The feedback you receive is not a judgment of your character, or sexual prowess. There is always room for improvement and a large part of it comes from understanding your partner, from their likes and dislikes; turn on and offs; as well as needs, wants and desires – and it probably has very little to do with you.

Don't be too hard on yourself. Constant, open and authentic communication will bring you closer.

Closed-Ended Questions

All of us would have inadvertently said something to hurt someone. Hence, when you try to get sexual feedback from your partner, their own fears of hurting you will come into play. They are not just worried of potentially hurting you, but also have a disbelief that you are genuinely willing and open to hear from them. It will take a while before your partner will begin to talk more openly about their sexual experiences.

If you have limited success with open-ended questions, don't give up. This is where you move onto closed-ended questions such as:

“Did you notice when I did.....?” (Yes or No)

“Did you like it when I did it?” (If your partner does not remember, you could imitate what you did previously.)

“Was your orgasm the same, less or more intense than the last time?” (There is only one answer.)

This is where you can encourage further dialogue by reverting to a few open-ended questions:

“That's interesting. Could you tell me more?”

“Really? Why (gently) do you think that is so?”

If your partner asks you why you have recently begun asking so many questions after sex, you could reply:

“I really want to learn more about you, what works and what would make it better... and I think one of the ways to do so is talking about it. I really want to know because I care about you.”

Or:

“I want us to be able to talk about sex and our sexual experiences. This is how one way we can learn more about each other. Is it okay?”

This is not an interrogation. There is no point pushing it if your partner is clearly uncomfortable talking about sex. Try again the next time, and the next. What you want to do is begin to open more dialogue about sex, and stopping that dialogue when your partner wishes to do so is a part of it.

Try again the next time,
and the next.

You will notice that with each attempt to discuss your sexual experiences, it will become easier. It takes time and it is well worth it to go slow.

Getting Feedback after Sex (Part 2 of 2)

In a previous piece, I talked about the role of open- and closed-ended questions to get feedback from our partner after a sexual experience.

You might begin asking for sexual feedback by using a few open-ended questions. If your partner is not forthcoming, or you wish to get clearer answers, you could consider incorporating some closed-ended questions. What else could you try?

Scale of 1 to 10

This is where the scale could come in. This is how you might begin:

“On a scale of one to ten, ten being the highest, what do you think of this (technique/position/etc.)? Give it a number.”

“How would you rank today’s (experience/ orgasm, etc) compared to the last time?”

Example: “Oh, I am just curious, why is this an eight, and that a six? What is it about this that makes it an eight? There is no right or wrong answer, baby (or add your own pet name). I love you and I want to learn more about you like.”

Using the scale method, you can drill down to get more specific feedback. You can use the scale to ask your partner, “How horny are you?” or “How much would you like to have sex today?” to get a sense of their desire for sex at that particular time. If you are at a level of ten and your partner a four, agree on a sexual activity that both of you would be willing to experience.

Or ask “How tired are you on a scale of one to ten, ten being the highest?”, to better understand how your partner is feeling physically, the amount of emotional support expected of you that evening, as well as whether sex is a possibility.

Code Words

Couples who have been together for some time say that they can gauge the 'mood' or even the response of their partner – most of the time. This is not fail proof. Unless you are a psychic or mind-reader, communication is indeed the key to a better sexual life.

How would you like to be able to communicate clearly, accurately, every single time on matters important to you? Consider using code words. A code word is a word or a phrase designed to convey a predetermined meaning to a receptive audience, while remaining inconspicuous to the uninitiated.

Take for instance: 'Red', 'Yellow' and 'Green'.

'Green' means 'Yes'.
'Yellow' for 'Back up a bit'.
'Red' is for 'Stop right now'.

No prizes for guessing that 'Green' means 'Yes', 'Go ahead', or 'It's okay'. 'Yellow' could represent 'Slow down', 'You are in a danger zone', or 'Back up a bit'; whilst 'Red' is for 'Stop right now', 'Danger', or 'No go'.

You can use code words to indicate arousal (getting there), plateau (don't stop), or orgasm (release). They can state your level of readiness for penetrative sex or indicate a state of distress, such as if an anxiety or panic attack is about to happen.

You will do well to overcome any resistance in coming up with code words and using them if you explain that the use of code words does not mean you are not in love or distrust your partner, but simply a better way to communicate where you are. Code words help take the display of emotion out of your words.

Open- or closed-ended questions are simple enough to use. Incorporating a scale and code words to give or receive feedback might seem silly to you, yet they do work. Your partner needs to believe that you are receptive to sexual feedback. Encouraging your partner to open up and express sexual feelings and thoughts takes time. The more you communicate, the more you learn and understand about what makes your partner tick. Consequently, this increases your chances of having many wonderful sexual experiences. Keep at it. Good luck.

Part 7 Life

1. Wellness – In What Other Ways?
2. Watch and Learn from Kids
3. I'd Rather Not Say
4. Don't Try. Be.

Obtain Wellness - In What Other Ways?

Living in harmony with nature's rhythms and gifts is not easy in a heavily-developed world. Nature can be very helpful in restoring sensory, behavioural and emotional balance. Are we listening?

We are constantly exposed to additives, preservatives, chemicals, artificial atmospheric and environmental changes, and so on. When you become ill, is it more severe, and for a longer period of time than you experienced previously? What do you usually do? Go to the neighbourhood medical doctor for an even stronger dose of medicine? Have you wondered if there were any other remedies you could seek out? Note that I am not advocating that you dismiss medical advice but consider alternative approaches as that might work just as well, if not more effectively at times.

Below are some popular approaches:

Traditional Chinese Medicine: In case you didn't know, the Traditional Chinese Medicine Practitioners Act was passed on 14 Nov 2000. It recognises TCM as complementary medicine in Singapore. Practices include such treatments as Chinese herbal medicine, acupuncture, dietary therapy, and both Tui na and Shiatsu massage. [Dr Choo Led Sin](#) is one practitioner I use and would recommend.

Massage: Involves the manipulation of superficial layers of muscle and connective tissue to enhance the function and promote relaxation and well-being. The word comes from the French 'massage' "friction of kneading", or from Arabic 'massa' meaning "to touch, feel or handle" or from Latin 'massa' meaning "mass, dough". You can check out [Annabelle Studios](#) or [House of Traditional Javanese Massage](#).

Reflexology: Manipulation of the feet and hand with specific thumb, finger and hand techniques in order to breakdown energy-blocking deposits in areas of the body. For reflexology, [Kenko](#) is well known in Singapore.

Chiropractic: Diagnosis, treatment and prevention of mechanical disorders of the musculoskeletal system, especially the spine. One chiropractor I would recommend is Dr Theo Kieu of [Light Chiropractor](#).

Naturopath: Focuses on natural remedies and the body's ability to heal and maintain itself. Naturopathic philosophy favors a holistic approach and minimal use of surgery and drugs. For a practitioner I know personally, check out [Sundardas Naturopathic Clinic](#).

Homeopathy: Comes from the Greek words 'homeo', meaning similar, and 'pathos', meaning suffering or disease. Homeopathy's founding principles are to stimulate the body's ability to heal itself by giving very small doses of highly diluted substances that provoke the body to initiate the healing process. Personally, I have not tried homeopathy. However, you can check out [Holistic Healing Homeopathy Center](#).

Aromatherapy: Using oils derived from plant essences through inhalation, massage or in bathing. For a private consultation of essential oils that work for you, [Frances Fuller](#) is your best person. To take classes, you can visit [AromaArt](#).

Flower essences: Essences of particular flowers can be used to combat negative emotions. [Faeries Forestrie](#) is one place in Singapore which distributes Findhorn Flower essence. I have tried Findhorn Flower essences and can attest to their gentle healing effectiveness.

Hydrotherapy: Using water and steam as a therapeutic medium in the form of massage, inhalation, taking internally, swimming, bathing. A hydropathic establishment is a place where people receive hydropathic treatment. One neighbourhood spa I have had positive experiences is Solus Spa located at Toa Payoh South Community Club (Tel: 6356-5918).

As the saying goes, health is wealth. It is worth taking the time to learn about your body, understand your physical ailment better and choosing remedies that are natural and less evasive. [What Therapy](#) is an online directory you can begin your research for holistic beauty, wellness and health options.

Watch and Learn from Kids

When I was little, all I wanted was to grow up. Grown-ups rule the world – from controlling the television remote and operating all kinds of cool gadgets to being able to choose the time they went to bed. And then there is always the sentence “You will know when you grow up,” that made adulthood all the more alluring.

We all know what happened. I came of age. Now that I am finally ‘there’, I have to admit that there have been times when I wished I could turn back the clock and relive my childhood. This might be a typical case of the grass being greener on the other side.

I look at the little children of today and recognise that, without knowing it, they continually teach us some lessons we adults could benefit from. By children, I refer to the little ones 24 months old and above. They are usually in kindergarten, old enough to begin to understand and young enough to feel that the world is their oyster.

One day at a time

Unlike adults, you are unlikely to see kids fretting over the loss of time. This has something to do with the fact that some of them are probably not old enough to tell time. Instead kids take each day, possibly even each moment, as it comes. They might have a weekly schedule at school, or a daily routine of things to do, yet you will be hard pressed to find a child worrying about what is to be done the next day. They are present, engaged and living life – one day at a time.

Keen to laugh

Kids love fun. They look for the fun in every situation, in everything they do, and in everybody they meet. They do not take themselves or life seriously, and they certainly don’t carry the weight of the world on their shoulders. They love to laugh and they are even quicker in laughing at themselves. They love when you laugh and they enjoy being able to make you or any other person laugh. And since laughter is contagious, they laugh even harder when they see that you are laughing alongside

them. Laughing make the world brighter, happier and fun. Have you forgotten your sense of humor and how to laugh?

Quick to forgive

Kids do not going around nursing grudges, plotting revenge or planning how to get even. A simple 'sorry' is sufficient. And even if an apology is not forthcoming, they are too plugged into life to worry about it. It is not uncommon to see a child sobbing one moment after being pushed to the floor by another, only to be playing alongside the same child who pushed them the next – as if it had never happened. They simply move on and focus on what is next – be it learning, playing or other ways of having fun.

Unafraid to ask

There is a reason for everything. The only way to find out is to ask. There are no dumb questions. Kids are not afraid to ask questions because they have no concept of fear, rejection or being labelled a failure. They are encouraged to ask questions and they will persist at asking until they understand the subject thoroughly. What would you ask if you knew you could ask anything and have no consequences?

Eager to learn

Kids are eager to make sense of the world around them. They are open to learning about everything put before them. It might take time. Yet you will seldom hear them lamenting about the difficulties of learning or complaining about how much time a task is taking. They try. They ask for help.

Then they might try again. They recognise that they have lots to learn and they take the time.

So take the time today. Open your heart and forgive those who have wronged you. Smell the roses. Ask some questions. Learn something new. Laugh.

Kids are:

- Taking one day at a time
- Keen to laugh
- Quick to forgive
- Unafraid to ask
- Eager to learn

I'd Rather Not Say

I was on the MRT train with a new friend the other day, and he asked me what caused my marriage to end.

We were both standing, dangling from different handrail supports. I looked around. We were surrounded by a lot of other commuters. This person is not exactly soft-spoken either.

I replied, "It's complex. I'll tell you another day."

"How complex can it be? It can only be a few things: Money... Religion... Affair...", he rattled off.

I remained silent.

First of all, I wasn't ready to dismiss six years of my life (including courtship) with a one-word answer.

Secondly, there were many reasons for the divorce, none of which are convenient, one-word answers I have stashed away for just such an occasion.

Lastly, I wasn't ready to spill my guts out on a noisy train.

The episode made me recall the many times upon which I have been asked for the reasons which led to my divorce.

The first person who had any inkling of something wrong with my marriage was my work colleague. My eyes were puffy from crying and she asked what was wrong. She was silent for the most part.

The only time she showed any reaction was when I told her how I had spent the previous night packing away my then husband's things. Uncertain if the things being stored away would ever see light of day, I described how, with tears in my eyes, I

had to go through each item – every single one of them triggering memories of a happier time. They were now objects that further pierced and added to the constant dull pain in my heart. I was fearful and unsure of what the future held. At this point, she started tearing up. Being married herself, she knew my pain. It was enough.

I then told my girl friends, many of whom were my ex-colleagues. They empathised yet did not know what to do. Except for one, none of them were married and had difficulties imagining, much less comprehending, what I was going through.

I had to tell my parents. I received their unconditional love and support.

I was married at age 21 and divorced by 26.

Very quickly, I began to resent being repeatedly asked at job interviews, networking events, social functions and all manner of forms, including lucky draws, about my marital status.

“Are you single or married?”

“Actually, I am divorced.”

【 In the first place, who are you? 】

“What happened?”

In the first place, who are you? I met you less than three seconds ago! What makes you think you are privy to my private life? And isn't what happened in my private life my own business?

Enquiring about one's marital status cannot be likened to talking about the weather, chatting about the soccer news or exchanging other pleasantries. Yet unbelievably, it kept happening!

Initially, it was therapeutic to be asked and have the opportunity to talk about what happened with those close to me. Sometimes, I would go into some of the reasons

with an empathetic person. Yet many moons later, I still find myself being plagued with insensitive, inappropriate and downright rude questions about my divorce.

Nobody taught me what to say. There is no finishing school for divorcees.

I have learnt to say:

“I know you are concerned about me. This happened a long time ago. I am all right now. I have no problems talking about my divorce, but let’s talk about it at another, more appropriate, time.”

“I will tell you about my divorce when we become closer friends.”

Or simply, “I’d rather not talk about this now.”

I am no longer defensive about my divorce. I have made peace with my past and have no problems talking about it. I also have no issues with declining to talk about it – including when I’m on a packed train.

There have been many times when I have wished for greater sensitivity towards the very personal pain I was going through. I had often wondered why “I’d rather not say” did not suffice. This was, after all, something that has absolutely no bearing on their quality of life, and frankly, was none of their business.

Granted, it is a reflection of the individual person, but since it happened to me so many times, I cannot help but feel it is also telling of how we fare as a society – high on the I.Q. (Intellectual Quotient), low on the E.Q. (Emotional Quotient).

“I’d rather not talk about this now.”

Don't Try. Be.

When I was in my third semester studying for my Doctorate in Human Sexuality, I went to the Florida Sex Therapy Institute to complete a Certificate in Sex Therapy. Dr Susan Lee, my teacher, introduced me to her clients and counterparts as 'Dr Lee'.

My first reaction was "Wait a minute! I am not a Doctor yet!" I felt like a fraud.

I pondered about why Susan would choose to introduce me as a fellow Doctor. Whilst it was true that nobody in Florida knew me, she, of all people, would know the importance of using the correct terms of reference and titles, and not misrepresent.

I had an epiphany there and then. I was one trimester from getting my doctorate. I was there to learn more from her. What separated me from being a doctorate holder besides a piece of paper, which I would undoubtedly be receiving in a few more months? Yet, I did not feel any closer to owning my identity of being a clinical sexologist.

By referring to me as 'Dr Lee' and conferring with me on client cases as she would a fellow doctor, she was, in reality, proactively and directly putting me on a path to embrace and own my new role as a sexologist.

From that day onwards, instead of 'trying' to be or thinking 'I will be', I found myself reacting and asking questions as though 'I already was'. The shift was tremendous. There was no more dodging. I was more present, sharper and asking better questions.

I shared this personal story because, periodically, during the course of our lives, we will find ourselves at a crossroads:

From being an intern to a qualified professional;
From being a student to being a teacher/ coach/ mentor;
From being single to being in love, or subsequently, engaged;

From being engaged to married;
From being with child to being a parent.

In such situations, try it on for size. Do the shoes fit? Does it feel right to you? Can you see yourself going ahead, liking it, even excelling at it? Walk, breathe, live in those shoes and you will find the metamorphosis already happening.

Do not 'try'. You will never get there because you are 'trying'. Instead, 'Be'. Embrace your role, identity, portion in life.

I tell single people, instead of waiting for Prince Charming or Princess Jasmine, already be this person deserving of love, happiness and joy. Behave as if you have found this love. When you radiate, you attract.

Now I casually but intentionally mention to couples who have sexual concerns and want kids, "When you becomes parents...". Not 'if'. When.

Somebody has to hold them in that space which they want to move into. It is much easier when there is somebody who believes and trusts that, whatever the process may be, it will be done. Get the support you need and 'Be'.

Instead of 'trying' to be or thinking 'I will be', I found myself reacting and asking questions as though 'I already was'.



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Eros Coaching is a sexuality and intimacy coaching company in Singapore which believes in the innate solutions we each already hold in achieving and enjoying a fulfilling, healthy and pleasurable life. Eros Coaching listens, informs, facilitates and empowers you to spread your wings.

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