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THE COMPLEX ISSUE OF SEX AND SEXUALITY

It seems that the boundaries of sex and sexuality have been pushed beyond most of our imaginations. Tabloid media spews out the most titillating and the most shocking and everywhere voyeurism flourishes. The internet has broken down the barriers and, from the privacy of one's own place, exploration of activities worlds apart is possible. One could be forgiven for thinking that we have reached a point in our evolution where we would be comfortable talking about, and experimenting with sex. Almost as comfortable, perhaps, as we are talking about property. And that our ease in sharing sexual information would be done as readily as we share information regarding our latest purchase. But this is not the case. And in the confines of the therapist's clinic the shame, embarrassment and lack of understanding around sex and sexuality is frequently presented as an issue.

Conversations from parent to child, partner to partner, person to person regarding sex and sexuality can still create a strange uncomfortableness for many and the more wholesome significant interaction can be compromised by prudery. We take night classes to learn new hobbies and abilities. We take lessons to improve our foreign languages and our sports techniques but we can

have the greatest difficulty even in going as far as just discussing issues around our sexuality and enhancing our experience of sex. It is so uncomfortable that a kind of denial sets in telling us that we are enjoying it anyway or we do not need any help regarding this issue. It's almost as though we think it's embedded in our DNA and it's a naturally developed ability.

But most of our attitudes towards sex and sexuality have been learned when we were children and adults. If the TV was switched off when the kissing started in some show, what message did that give to inquisitive eyes and ears? If prejudicial attitudes towards sexual behaviours between consenting adults outside what our parents and guardians deemed as "normal" were criticised and detested, what message did that give to the same younger inquisitive people? Even sadder what messages did it give to those who were to grow up to be different from the parents perceived norm?

The sad thing is that as we grow through life we seldom make an effort to examine those basic notions we developed and in doing so we can be enabling dysfunctional sexual performance.

Sex is a function of sexuality. Sex is not something that we do which is separate from our selves. It is an integral part of us. Sex does not establish who we are, it expresses who we are.

It is a sad fact but the basics of being comfortable with ourselves as sexual beings can take years to achieve and although there is no upper age limit in sexual expression many miss out on it at their peak.

These basics could be described as

- **being aware of our own sexuality**
- **accepting and becoming comfortable about sex**
- **having the ability to express our sexuality**

So what is it about sex and sexuality, that most basic of human instincts and desires, that causes such mixed response emotions? I suspect that often the answers are very individual.

Women continue to receive more negative training and sexual education about their human sexuality than men. To have a primary belief that one's human sexuality is serious first and pleasurable a distant second causes the loss of much pleasure in many sexual processes.

That sexuality belief also leads to too much putting down of men overlooking but because "human sex should be serious and you men don't treat it seriously enough." In other words, to be lusty, wild or playful is not OK human sexuality. Immediately the stage is set for conflict.

Human sexuality includes all of the senses -- smell, touch, sound, sight, and taste.

Sexuality involves imagination, fantasy, and imagery.

And although there are no rules for the human sexual response there are serious boundaries imposed as to what is acceptable and unacceptable by our society.

We can respond to the same sex or the opposite sex. Provided these are legal, respectful of partners and mutually agreed these have a right to be respected by others.

Despite the increase of sexual awareness programmes in our educational system there is still an amazing lack of knowledge around the subject and some of the old “silent-whisper” methods prevail. Many parents and guardians are happy to leave the schools deal with it and some of the teaching leaves a lot to be desired. Boys still learn about their sexuality through peer talk, erotic magazines, movies, and of course trial and error. Girls gain their sexual knowledge through conversations with other girls and women, love stories and movies and experience. And then for both men and women there are often pre-supposed roles that they are expected to live up to. For men the sexual act is often portrayed as a combination of pleasure, sexual release, and power. For women, sexuality is often portrayed as intimacy, affection, and pleasure. Just think about the terms men and women are portrayed as using when referring to sex. Male terms tend to be viewed as aggressive, ogling and even controlling, while female terms tend to be seen as more gentle, loving, and even emotionally controlling. From what is presented to us one is led to believe that women make love while men just have sex. Of course there are always examples of this in reality but if this were a constant within a relationship there would be serious problems.

These attitudes and values affect the manner in which the genders approach sexuality and in large measure contribute to their appreciation of the sexual expression. Furthermore, these values affect how sexual partners perceive themselves and how they view each other.

Generally, men establish their identity through competitive type performance. From childhood through adulthood, they measure themselves by such things as how far they can run, how fast they can do it, how they play football, and the

number of women they can "score." One way or another, performance matters and there are constant messages of pressure and measurement.

Women on the other hand have a tendency to be measured by how attractive they are to men. The power held by the men that are attracted to them also seems important, and equally important is how they are treated by these men. If men treat them kindly then they are good, if men treat them poorly they turn this back on themselves and perceive themselves as being bad or wrong and this can cause deep psychological problems around self-worth for them.

Men and women bring these attitudes into the bedroom, playing out their roles as performer and seductress. Sometimes these roles are not the real desires of the people concerned and sexual acting enters the setting to the detriment of the relationship. The participants are no longer as "real" as would be best for healthy communication.

It may sound clinical but like dancing together it takes practice to get it right. Yet we often believe that good love-making should "come naturally," without education and practice. Many hold beliefs that people should know how to make love together and should not have to talk about it or practice with the intent of improving the experience so that it is mutually satisfying. Obviously, if a dancing partner continuously steps on their partner's toes and was unwilling to discuss the matter, it would not take long before the dancing stops or a different partner is sought. Yet the majority of couples do not communicate about their love-making and are not open to exploring their sexuality with one another. People, especially men, become defensive when their partner wants to discuss their sex life as if they were about to be criticized. They also perceive that they have to play a certain role and will try to live up to that even if it is alien to them.

So communication between dance partners and lovers is essential for having a satisfying experience. The partners must frequently communicate verbally and non-verbally with one another in order to learn to anticipate each other's moves. With sufficient practice, the dance of love seems effortless. Lovemaking should be fun, playful, affectionate, intimate, nurturing and fulfilling. When something goes awry, either because of faulty communication, inappropriate attitudes, or antiquated beliefs, a sexual dysfunction can emerge and cause serious difficulties within the relationship.

Embarrassment and fear thrive around sexual problems. Premature or delayed ejaculation, not being able to achieve orgasm and total disinterest are some of the more prevalent ones.

Most sexual dysfunction occurs because of flawed beliefs and attitudes about sex and sexuality. These coupled with poor habits, ignorance, and early experiences can result in serious sexual dysfunction.

And such dysfunction is precipitated by physiological, biological, or chemical factors. However, regarding sexual matters all physiological dysfunctions have a psychological component. When men are unable to obtain or maintain an erection, whether from physiological or psychological causes, they feel inferior, less manly. When a women are unable to reach orgasm they feel less feminine and worry about how they are seen by their partner. Therefore, in all cases of sexual dysfunction it is necessary to attend to the psychological aspects of the difficulty and what it means to the individual.

Many people prefer to think of only a medical approach to sexual dysfunction, since it is more acceptable to one's self-image to believe that there is an organic basis for the dysfunction. But even in those instances when there is a recognizable medical condition affecting sexual functioning, the psychological component cannot be overlooked. We all have varying psychological reactions to physical illness or impairment. This psychological reaction can exacerbate the physical problem. Dr. Helen Singer Kaplan a noted US sexologist states, "In a general sense we see the immediate causes of the sexual dysfunctions as arising from an anti-erotic environment created by the couple which is destructive to the sexuality of one or both. An ambiance of openness and trust allows the partners to abandon themselves fully to the erotic experience." She goes on to speak of four specific sources of anxiety and defences against full sexual enjoyment:

- 1) Avoidance of or failure to engage in sexual behaviour which is exciting and stimulating to both partners.
- 2) Fear of failure, exacerbated by pressure to perform, and over concern about pleasing one's partner rooted in fears of rejection.
- 3) A tendency to erect defences against erotic pleasure.
- 4) Failure to communicate openly and without guilt and defensiveness about feelings, wishes and responses.

Needless to say reactions to historical traumatic events also affect sexual functioning. Child molestation, rape and abuse all can contribute to later sexual dysfunction.

There is little doubt also that the guilt and shame instilled by religious beliefs equating sex to serious sin has left its mark for generations and is not that easy to eradicate. Inhibited sexual desire is almost always caused by psychological factors and people suffer if this is not addressed.

Adult sexual dysfunction has to be understood from a social, familial and psychological perspective. Attitudes, values, childhood experiences, adult trauma, all contribute to the sexual response in men and women. The attitudes and values their partners, as well as their sexual technique, play a major role in the sexual response as well.

Unexpressed anger and hurt can lead to depression, which affects desire. Sometimes these emotions are expressed in passive-aggressive ways, sexual withdrawal being one manifestation. Sexual expression in relationships is more than a form of pleasure and release; it is a form of communication.

Unfortunately, most people would rather live with a sexual dysfunction and a less than satisfying sexual life than seek help. The embarrassment they feel in discussing their sex life with a professional is too great. There are others who have adjusted to their sex life and despite the fact that their spouse might be unhappy, they refuse to seek help. When these people hear that their spouse is unhappy about their sex life, they experience it as a criticism, become defensive, and often become either hurt or angry, rather than open themselves up to exploration with a therapist.

There are four common causes of sexual dysfunction and dealing with them will help improve the situation. They are:-

Stress.

Often unidentified, stress can produce temporary sexual dysfunction which can become permanent. As mentioned, people often consider sexuality such a private matter that they are reluctant to discuss it with others. Even those who have had sexual difficulties as a consequence of disease or surgery, have difficulty seeking therapy to facilitate adjustment to the dysfunction. Many people prefer to needlessly avoid sex altogether rather than seek professional help. There is a vast amount of help available for stress.

Attitude.

One of the most significant contributing factors in sexual dysfunction is your attitude toward any dysfunction. If it is viewed as a diminishing of self-worth and reflecting negatively on the overall value as a human being, therapy will take a little longer since we first have to overcome these initial feelings and deal with any historical issues.

Motivation.

Another contributing factor is one's motivation and that of the spouse or partner. A partner's cooperation, participation, and support can accelerate the process and in many cases is essential for effective treatment. Remember, when one member of the dance team is impaired, the team is impaired. The solution, like sex itself, is a cooperative venture.

Performance anxiety.

This is frequently a prime cause of sexual dysfunction. People become so preoccupied with their sexual performance or the performance of their partner, that they lose sight of the process. Enjoying the pleasure involved in being together, the pleasure of human touch, and the process of love making ought to be the primary focus. Many individuals are more concerned with their "reviews" than they are with whether they are enjoying themselves. Being prepared to discuss the issues in the confidential and non-judgemental space of the therapist's room is a start in dealing with this.

Human sexuality rarely falls into neat categories or lends itself to simple labelling. Human sexuality is a rich and complex area of human experience. It would be remiss of me here not to touch on the issue of homosexuality.

Assumptions that others sexuality is the same as ours can cause unacknowledged strains in everyday relationships and have serious psychological consequences in the development of younger people who are different. Indeed it is extremely difficult for those who are different as most cultural and media reinforcement of sexuality is that of the dominant heterosexual mainstream. The positive affirmation is constant from advertising to real-life "role models". There is little affirmation and much maligning of those who do not fit in to what is portrayed as the norm.

For decades the debate has endured over why people's sexuality differs. Many theories have been put forward - citing genetic pre-determination, childhood influences and peer-pressure amongst other reasons. However, attempts to find a

single cause for individual's choices of sexual orientation have not been successful. Nor have attempts to influence or change individual's sexuality. Like many of our other characteristics, sexuality seems to be largely a chance product of our individual nature which is then further developed by our early interactions.

Accepting the conclusion that one is gay, lesbian or bisexual hopefully is easier nowadays than it has been in the past. Attitudes are somewhat more accepting and there are now more people living openly gay and lesbian lives than there has been in the recent past. However depending on personal and family circumstances it can still be a very scary one and can involve a period of upheaval and uncertainty. It is advisable to seek the help of the many fine helping agencies specifically geared towards this area.

Same sex relationships are not that different when it comes to the relationship dynamics and most of what has already been said applies to them also.

Remember that most sex goes on between your ears, not other parts of the body. Good sex starts with a healthy attitude about sex and sexuality.

The cardinal rules for good sex are:

- **respect the person you're with**
- **have a healthy attitude**
- **communicate your thoughts and feelings with your partner**
- **be prepared to discuss what you like and don't like**
- **be honest in your communication**
- **be open to experiment**

- **enjoy the experience and relax**
- **practice helps to enhance the experience.**

In clinical experience I have noticed that some of us are far more readily accept a broken leg than address aspects of our physical as well as our emotional sexuality.

Sexual expression requires that we become more open about our feelings than we have been in the past. This new openness does expose our true selves more, thus we become more vulnerable to others. But if we have fulfilled our first two responsibilities—coming in touch with our sexuality, and accepting what we find—then this vulnerability can be rewarding.

It is emotionally healthy to be familiar with the following terms associated with sexuality: awareness; touch; feeling; love; trust; honesty; acceptance; listening; vulnerability; giving; getting; patience; intimacy; personal; tenderness; understanding; tolerance; expression; being comfortable; warmth; caring
Old adages such as “men should change” or “she should be more interested” need to be addressed and any blame turned into motivation to do something about enhancing a couple’s sexual experience.

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