

DR. KEESHA EWERS: Welcome back to the Women's Vitality Summit: Caring for Yourself, Body and Soul. This is your host Dr. Keesha Ewers and I am so honored and blessed to be able to interview Dr. Gina Ogden for this session, who is an award-winning sex therapist, a family therapist, a researcher, a teacher and an author, and one of my mentors.

She's the founder of the Relational Sexuality Network, which is an international collaboration of practitioners whose mission is to expand the practice of therapy and sex therapy beyond limiting notions of function and dysfunction to include a wide range of diversity and experience.

She conducts retreats and training internationally. She lectures widely. She leads tele-seminars attended by professionals from all over the world, and has appeared in the media from talk radio to the Oprah Winfrey Show. Welcome to the Women's Vitality Summit Dr. Gina.

DR. GINA OGDEN: Well I am totally delighted to be here and feeling very vital when I talk to you.

DR. KEESHA: Great.

DR. GINA OGDEN: Looking forward to whatever is going to emerge.

DR. KEESHA: Wonderful. So I usually do start, since this Summit is on the subject of female vitality, with the word vitality. Just to remind our listeners that it's your vim, it's your vigor, it's your sparkle, it's your dazzle, it's your life energy, your life force that moves through from your cells to your soul.

People that come in to my office often have had a lot of that light dim in them, and so they're feeling ill, or fatigued, or overweight – a number of things will reflect a lack of vitality. What I'm wondering, and I start with this question for everyone that's on the Summit, with all of the expert panelists, is what do you see as one of the biggest drainers of women's vitality today?

DR. GINA OGDEN: Oh interesting, because as you were talking I was feeling so connected, so I kind of want to start there and then move to the drain.

For me, it's the whole sense of connecting with the earth through my feet and then up through every chakra and up to my crown chakra.

So the drainers are feeling disconnected and pulled off-center by somebody's terrible story or being in contact with dense energy or rage. Sometimes it's just plain shock. It can be as easy as someone pulling in front of me in traffic and I go "Ahhh!" and I'm pulled off that center.

DR. KEESHA: One of the things that I think that was very powerful about what you said is being pulled out of your center. That center, you mentioned, are the chakras which are energy

centers that are often pictured and felt up the spinal column. We think of seven primary ones but, of course, there are many more than that.

From these places, of course, this is where the nervous system is joining itself in the spine. Each one of those chakras or energy centers has its own energy and we give meaning to each one of those. The lower chakras have to do with sensuality and desire and sexuality and they are part of the entire chakra system, all the way up to the crown of the head which is often thought of as the place where you can find union with the cosmos, spiritual understanding and awakening.

But it's part of that column of energy that is within each of us, as the Ayurveda would call the microcosm or the macrocosm of the universe reflected within. So when we talk about it in that way, then that means that the lowest, the very first root chakra, which is in charge of our sexual expression, and the most upper, our spiritual expression, are linked. You and I both know that there are many cultures around the world, including the one that we live in, that like to separate those.

DR. GINA OGDEN: Totally!

DR. KEESHA: And what do you see with women that have had those separated and do you have a story around that in your own practice with people?

DR. GINA OGDEN: Of course. Those are the women who come into the practice to me because they will have a complaint and the complaint might be "I'm not coming to orgasm" or "I don't feel turned on". Low libido, low sexual desire, or "I just don't feel it anymore for my partner" which may very well be heart chakra, which is right in the center.

So the work that I do, if I can just leap right into this, has morphed over four decades of being a sex therapist into using basically a medicine wheel which incorporates body, mind, heart and spirit. Because for me, Keesha, it's not just that the crown chakra is connected with the lower chakras. It's that there is a wheel of experience that includes physical, emotional, mental, and spiritual and you can't bypass any of those and have a complete relationship.

What I mean by relationship is basically relationship with ourselves, as well as relationship with a partner, or relationship with the world, people, the cosmos, your dog. We need to be aware of all of those.

Coming from your first question, I'm remembering an email I got last night from a wonderful colleague. I felt very slammed because of the way he phrased a certain question about a gift I had given from my heart. I felt sucker-punched by it and was way off-kilter. So off-kilter that I wrote a really bad email back which I actually sent and wish I hadn't. But there it is. I've learned to trust my own responses. So it took me some consciousness to come back to center and realize that I was standing on the earth and could connect with Pachamama, who is for me, the earth

spirit who actually can take all the density that you can send down to her, and digest it, compost it, and send it back up as clarity, as light, as love, as sexiness, as whatever it is you want.

DR. KEESHA: Flowers.

DR. GINA OGDEN: Flowers, that's good!

DR. KEESHA: Yeah, nutrients, I mean this is where we get our nutrients.

DR. GINA OGDEN: Exactly, nutrients.

DR. KEESHA: Wonderful. Well, you are such a pioneer in the world of the integration of spirituality and sexuality, and in fact in 1997, isn't that when you did your survey integrating sexuality and spirituality?

DR. GINA OGDEN: I did, over a period actually of a couple of years, and then went into my form of isolation, into academia, for a few years to try to crunch the numbers which actually did not do much for me because it wasn't about numbers. It wasn't until I understood that these 3,810 people who were talking about physical, emotional, mental, and spiritual connection, that the model that I needed in order to teach this could not be found in psychology or science. I found it in my practice of spirituality, in the medicine wheel. The medicine wheel is an ancient template for exploring exactly this: body, mind, heart, and spirit. And so I could overlay the ancient medicine wheel onto what I now call the 4-D, or four-dimensional, wheel of sexual experience.

DR. KEESHA: This four-dimensional wheel is something that, of course, I've been trained by you to use. I take groups to Peru, to Africa and India and go into two-week long intensives of healing each of these different parts so that they can come to wholeness in the center.

What I love about it is that it's organic. The work that you do is not come and sit down in a therapy office on a couch, you know the stereotypical with a guy with a clipboard listening to your story and saying "How do you feel?" You get people up and moving so that this is moving through them, out of them and being reframed within them, so that it can be a full-embodied experience from the heart, the soul, the body, and the mind.

I would love to have you tell a couple of stories about how this works with people that you've seen. Of course, you have thousands of cases, but do any come to mind of where this has transformed them?

DR. GINA OGDEN: The word "trans" triggers for me. I have a wonderful colleague who is in the process of transitioning from male to female. I'm going to call him "he" because that's how we met and that's our agreement. He was very concerned about whether he should take

hormones or not, which he felt would mess with his system in some ways that he wasn't clear that he wanted. Or whether he should have so-called "bottom surgery" where he would remove his penis and testicles and maybe even have an in-built vagina. And how was his wife going to deal with it, who is extremely open about all things, but saying "I fell in love with a cisgendered man, where is this going?"

So I basically invited him over and said "Let's put this on the wheel and see what we come out with." By the end of two hours, we had set aside three. He had gone into each dimension, physical, emotional, mental and spiritual. Back and forth and back and forth. As his cisgendered male self. As his trans-woman self. As going down into some eighteenth century roots. I could go on and on. But the movement, not only back and forth, but laterally, through his body, mind, heart, and spirit. Also vertically, back in time and also forward in time with the anxiety about the surgery. And somewhere in there, I drummed him a very short, probably three-minute journey, so we could go deeply into his female self, his male self, his eighteenth persona. Who knows what that is; I didn't ask him to name anything. It was simply allowing him to experience while I held space.

Because he's a colleague I did ask him "Do you see me working harder than you are?" He laughed. I was sitting on the sofa, almost twiddling my thumbs, but not really because I was holding space for this person moving between the genders and back and forth in time, defining his own experience.

Then being able to, with my hedonic sex toys, one of which is a drum that can open the heart – the heartbeat of mother earth – I drummed so he could go into a whole other space that I described and he re-described as flying beneath the radar of cultural convention. So he could be whoever and wherever and whenever he wanted to be.

The upshot of that wheel journey was that he came up laughing and said "I have these friends and colleagues in the queer community who are kind of pushing me toward the medical route to show that I'm really committed". I could point out to him as a sexologist, the medical route – that is the hormones and the surgery – is only one route to transitioning. His experience was that he could be fully whoever he wanted to be at any given time, all he had to do was breathe and be in that state of awareness. This was incredibly moving to me.

I met a couple of days later with him and his wife, they also happen to be neighbors, and we really worked out the boundary issues here. It sounds easier than it is. But his wife was so grateful about this because she realized that this was something that she could live easily with and move back and forth with. It didn't need to have a medical element right now.

DR. KEESHA: This subject matter of course is really relevant right now. I think it's been relevant for always, but it's just come up as such a topic of conversation and shutting down conversation in our culture right now. I'm so glad you brought this up as one of the cases that got

walked through on this wheel, both vertically and on the lateral plane. This example will be different from another one you tell, not even recognizable. It's not even what the example is, but what the wheel is useful for, what it does.

Each of us goes through transitions of different kinds through our entire lives if we're growing. Transition is a word that is not necessarily sexual. Transition is growth, into your next stage of life or your next chapter of life. Nature shows us how transitions work, they're happening constantly. So I just love that this is what you started with.

I have a lot of friends right now, and colleagues, whose children are going through this right now and it sounds like by using the wheel parents can also work with whatever is going on for them when their children come to them and say "I'm not really at home in the body I was born in."

DR. GINA OGDEN: I think that's a wonderful idea. I should say, as just a prologue here, that various colleagues are taking the wheel in their own direction. Clearly you are one of them taking it into Africa, doing the amazing work that you do. There's another, there's a Swedish colleague, working in a cancer rehab hospital in Sweden. She uses the wheel to help women rehabilitate their sexuality from cancer. There's an OB.GYN in Phoenix who's using it to revamp how we do pelvic exams. There's a woman in New Hampshire who is taking this into fundraising, I kid you not – how we can change our relationship to money.

I have two men who are going to come to work with me because they say that it's different for men than it is for women. So we want to create this module of how we can take this, or at least how these two men anyway, can take this into men's groups and explore their emotions in a new way. So there are many many ways of imagining how to use this.

Lindsay Jernigan is one of the 4-D practitioners in Burlington, Vermont who is starting to create a module about how to use this with parents and kids for a conversation. I've found in my own family, my granddaughter loves it because kids can negotiate the stasis in a way that adults are a little funky about just at first.

DR. KEESHA: I think that it's really important, this idea of having children use it too. First of all, the difficult conversations to be had while children are being raised often are not being had. If they are, they're not being had well. What better way than to put this conversation into the wheel so you can be in touch with what's going on in your body, what's going on in your mind, what's going on in your heart and your spirit.

What it triggers in you that could have been from the past and then what you can visualize into the future with this as it evolves, it's such a great idea. I'm so excited about it because one of my missions is to bring the subject of sex to dining room tables across America. Not only do you talk about how your eyesight is doing "Oh I went to the optometrist today and I need to change

the prescription on my glasses” but you can talk at the dinner table about sexuality and sensuality in the same kind of relaxed manner that you would about anything.

DR. GINA OGDEN: It takes the “dirty secrets” sense out of it and it becomes part of life.

Another piece is what I call the “couples issue” part of it. As a parent and a child, that’s a “couples issues”. So if your daughter is walking the wheel around her, describing her sexuality or her questions, you are able as the parent to hold space for her and see what happens, see her transitions, see her being mad or sad when she’s in the emotional or see her being uppity and didactic when she’s in the mental part. By the same token, you can step into the wheel with her and be able to say if you’re standing in the emotional “I’m angry with you when...whatever, because I’m in the emotional place. But if I move over to the mental place, I can maybe understand what makes you act that way.” Or “I’m scared for you when you’re going out with your friends late at night...”.

DR. KEESHA: With what you’re wearing.

DR. GINA OGDEN: Isn’t that blouse a little tight?

DR. KEESHA: Exactly. "And the friend you’re going out with who you just told me two months ago got into trouble and now I’m supposed to trust that you’re going out with this person, dressed like this, and be okay with it...". That can be on the wheel, such a great conversation.

DR. GINA OGDEN: And people can be moving. When I’m in the wheel saying "Oh I’m really scared you’re going to pierce yourself all over" where is my child standing? So we can literally hear and know, "where we are coming from".

DR. KEESHA: I have goose bumps. That is just beautiful. I taught my four kids when the youngest was 16 years old and she’s now 19. The rest are in their 20s but they know how to use the wheel, they know how to work it and walk it. Boy, I wish I had known this when they were younger, what a great thing. So I’m so glad Lindsay is doing that, that’s a great thing.

DR. GINA OGDEN: Well, I think that you and Lindsay need to get together and we’ll create a module so that y’all have some materials to take when you teach it to dining room tables all over the US.

DR. KEESHA: Right. One of the experts on the Summit is Elaine Eli whose whole thing is reclaiming the dinner table, bringing people back to the dinner table.

DR. GINA OGDEN: I love it.

DR. KEESHA: So they can have conversation and they can eat real food and prepare meals together. I'm adding into that really dynamic conversation. Not everybody on their cell phones, but real conversations that matter, and I have a couple examples.

It was always really important to have conversations at the dinner table when my kids were smaller and they always had friends over. I had a big table because I had four children, so with friends we had quite a crowd. One day my youngest daughter was in third grade and she had a friend over, and my oldest son, who I've always made sex openly acceptable as a topic at the dinner table, said "Mom, I have a question." And he said "How come some people like to be strangled while they have an orgasm?" I said "Well, maybe we can talk about this offline, privately" because here's my third-grader with a friend at the table. The playground discussion tomorrow is probably not going to be age-appropriate, so we're just going to go somewhere else. So sometimes of course it can go a little strange, but it was just such a funny thing. We all started laughing. We had a thing I called the ten o'clock question. He'd think very deeply when I'm trying to go to sleep and his dad and I would go "Oh, here comes the ten o'clock question" and I'd say "Let's make that a ten o'clock question, we'll talk about it."

Along with this what the wheel is also good for, as you mentioned, having relationship with yourself is where this all begins. I am doing a webinar this month – actually it's starting in November – with Dr. Jalaja Bonheim about menopause as an initiation. What I see is women at war with their own selves, their own bodies, feeling betrayed by their bodies, feeling upset by their bodies because their body is not the weight they want it to be, they don't have energy, their energy is not what they'd want it to be, intercourse is painful, different things are going on. I think menopause is one of those things where there isn't enough cultural and tribal conversation around it for women to feel held again as they transition from one stage of life into the next.

DR. GINA OGDEN: Plus you're getting older, which has got such a bad rap. I just think life gets better. I loved menopause, but that's just me.

DR. KEESHA: Yeah, but the great place to have those conversations is with yourself: with your body, with your mind, with your heart, with your spirit, and to really start understanding why you're annoyed with certain things that have to do with aging. You know when you stand in the physical part of the wheel and you start talking to your body about these wrinkles that you see in the mirror and how upsetting they are for you. Then getting in touch with who it is inside of there that wants to stay looking like they're 20. Talk to that person. They're about to then continue to move and unfold. I love watching that, these conversations with the self too.

DR. GINA OGDEN: Yeah. Here's the thing. Partly we get mad at our bodies because we're conscious of our body. We live in their space; they are our space capsules, our libraries that we have to learn in this lifetime. I think that when we get so angry with our bodies and disgusted with our bodies and treat our bodies badly, it's because we've disassociated them with our

hearts, and we've disassociated them sometimes from how we think, and we've certainly disassociated them from how we connect.

Part and parcel of that conversation itself, as well as conversation with partner, kids and others, has to do with self-care and self-knowledge. I'll begin with physical because it's literally in our faces, it is our faces. How many people in your practice do you know Keesha – I know many among my colleagues and friends – who are limping around but they're not seeing a connection between their limp and the fact that they're stuffing their faces with gluten and they're drinking a lot of wine every night. They don't get it that some kind of cleaning out or reasonable exercise could help their body. So certainly self-care is one of the keys.

But self-esteem is so closely related; emotional self-esteem. Knowing who you are and liking yourself. Not necessarily having 25 awards for things. Not being the best horseback rider or the best trainer or whatever, but having self-esteem, really caring for yourself. Mentally understanding, certainly in terms of sexuality, that great sex is a whole lot more than just performance. That it includes all of us, how we think, how we feel, how we move. I'm going around the wheel you can tell.

Finally, that whole sense of motion: how am I connected to the universe? Which for some of us, for me right now because I'm in the middle of proofreading a book, means what am I putting out into the universe? What is my purpose in life? Tomorrow, because I'm going to be celebrating the solstice with my sun sisters, it will be much more about how I am relating to the earth and the sun and the ocean. So the sense of connection can vary. But it all is about openness instead of stuckness and closeness.

It is all contained in our breath, just as it was with my colleague who is transitioning. Just with his breath, he can move from male to female and back and forth in time. With my breath as a woman who is way past menopause, I can move back and forth, into my body, into the earth, and out among my colleagues I can reach out and be creative. So we have to have our feet on the ground and our heart open and we need to stay curious. Without curiosity, it doesn't matter how smart we are or how much we know. We need to be curious.

DR. KEESHA: This is a really important thing that you're saying. So here I have this Summit on women's vitality for the body, mind and soul. So I invited this integrated urologist, who studies men's health and men's sexuality, into the Summit because who brings men into see their doctors? Their women.

So I was like, you know what, so often women take on the story that if something's going awry in the sexual partnership, they'll take it on. "What have I done? Is my partner not attracted anymore?" Or story gets in the way, they get stuck.

I've found over the years, and this is so fascinating to me, that when I talk to the woman, she's the high desire partner and her male spouse is having nothing to do with sex and she's got all kinds of story going on in her mind about what could possibly be going on. "Is he gay?" And I say "Well have you asked?" "Oh no, he's way too uncomfortable for that." For me that's such a basic thing – just ask why. Always ask why if something is stuck and not moving. Just ask why and look for the root cause.

So one of the things that I think the wheel is so amazing for is it puts it in motion. Why would you not ask? "So I notice we're not sexually intimate anymore and we used to be sexually intimate and that's not happening anymore." It used to be such a simple thing, and yet it is not for some couples.

DR. GINA OGDEN: I could go in a number of directions with this, but let me keep it simple and say that really early on in my practice of psychotherapy and eventually sex therapy, I learned that the word why is not really useful. Because that plunges us into the mental quadrant where so many people can stay really stuck. Instead, I'll use the word what or how.

Again inviting them into the wheel however you, and you out there listening, conceptualize the wheel, inviting people to tell their stories. What's happening now? What's going on? What are you feeling in your stomach right now? What are you feeling in your heart or at the top of your head or your feet? What age do you feel right now as you tell that story?

One woman said her issue was that she was furious at her husband for controlling her. She was married to the nicest guy that you'd ever want to meet, but she was really into demonizing him at that moment. "And how old do you feel?" She's standing in the emotional being "grrrr" and really mad and starting to cry and her whole body language is changing from a 48 year old woman into something that looks very much younger. "How old do you feel right now?" "Well, I feel I'm three years old. And I'm so small, and my brothers are so big and so mean." And so we get to the core of that core issue, or as you call it that root issue. We begin to grow her up. "How old do you feel now?" "Well now I'm fourteen and I have this horrible date who wants to rape me" or whatever.

She's up to her present age story by story by story, and finally can revisit that irrational but real fear she's feeling around her husband, and realizing it's not a here and now fear, it's a there and then fear. How interesting. This takes maybe eight minutes and it's done. She gets it. She can inhabit that, but can recreate it all for herself and also for her husband, so that when that feeling comes back over her again, her husband can say "How old are you feeling right now, honey?" or "I'm not your brother" or "I'm not Joey who tried to push you around when you were in college."

DR. KEESHA: Right. That's so important. What Dr. Geo said on his Summit interview was that a man will not get an erection if he's feeling squished by his partner. One of the things I had said

as well and one of the things I often hear in my practice is “But I’ve been trying to explain myself and now that I’m angry they’re finally listening.” So then you can put the man on the wheel and say when you hear your partner say x, y or z, what are you feeling? Then they’ll go back and say “My mom is nagging me” and so then you can see the roles you’ve created in your partnership where you’re projecting those into your partner and they become that for you.

DR. GINA OGDEN: Yes. Or in this case, the husband moved over into the spiritual with tears in his eyes, with tears. Because he so wanted to connect with this woman that he loved. And she couldn’t connect, she was frozen and armored. Seeing his tears, she could move toward him. So the point is there’s no way of charting them because you do not know what’s going to happen. I think this is true of much of great medicine too. You try something and you see what happens, and then you go the next step. There’s no one right universal cure for everything. Maybe for a broken leg.

DR. KEESHA: Dr. Dan Kalish and I talked about this too, why we do laboratory testing, functional medical testing in the first place is because we are all biochemically different. I do genetic testing because we all have different genetics, and there’s no cookbook for anything. Psychotherapy, from which I am now separating, is the very thing I rail against all the time. You can’t separate the mind from the body from the heart from the spirit. But we’ve done that in medicine. We have MDs, we have psychologists – we’ve done that. Part of the reason that I started working with you and having you mentor me was the integration of this. Sexology, psychotherapy, medicine as well as Ayurveda and energy work that I do, pulling that together as a whole is so important. Inside of that is this individual, unique person that’s walking the wheel, and it will never look the same.

DR. GINA OGDEN: Yes, absolutely. That said, from neurobiology we understand that in order to integrate very often you have to differentiate first. This is why I divide the wheel. Not to keep you stuck in one place but to differentiate. Our body has a language and intelligence. Our heart has a language and an intelligence. Our mind does, our spirit does. Let’s get them all talking together. Let’s get them to be fluid in all of these dimensions.

DR. KEESHA: That’s what I’m talking about. With all of this you have it all in one wheel. What I’m talking about is going to see your physician for low libido, and the only thing they talk about is an antidepressant, or go see a therapist. A therapist will know to check if you have adrenal dysfunction, if you’ve burnt yourself out at both ends of the candle and now you’re hormones have gone awry. So it’s pulling all of that together. You’ve done that with having it all in one wheel. So it is already integrated and differentiated at the same time.

The way we’ve sort of structured our medical care system is that these are not even in the same building. The science that you have in all of it rests in different places. It’s so divided. So I love the integration.

DR. GINA OGDEN: What has been beautiful for me, as I'm finally learning something about the science and beginning to present with Emily Nagoski, the new science guru of sexuality, is that doing the wheel you're doing exactly what the neuroscientists say should be happening, it's neurobiologically elegant.

DR. KEESHA: Dr. Dan Segal is also one of our panelists at the Summit, and he's one of the people I started worshipping as an integrative person.

DR. GINA OGDEN: I worship him too. When I went to study with him, he had us going around a wheel.

DR. KEESHA: Yup.

DR. GINA OGDEN: And I'm going "hello...hello" to get people up from their chairs and he does it.

DR. KEESHA: I just think that when we start talking about this, the science of the brain that is involved with sex and sexual desires, the neurotransmitters, those are co-opted trauma. Trauma has been redefined as not necessarily Hurricane Katrina and the war and war veterans and physical and sexual abuse, but also daily life stressors. Day in and day out, feeling life stress.

DR. GINA OGDEN: Exhaustion.

DR. KEESHA: That part of the brain that is required for you to have sexual desire, that's lit up on PET scans when a brain is imaged. It's the same part of the brain that lights up when you have daily stress and trauma. So the wheel allows you to release the trauma. I think of the wheel in the same way I think of a labyrinth, which looks like a brain. You're literally unwinding it neurobiologically. So you're brain now. The Buddha talked a lot about how you need to be an empty pot because if you're a full pot, nothing can go in. So if you're a cracked pot nothing stays in, so you have to be like an empty pot, right?

DR. GINA OGDEN: And if you're a crackpot you run for President. Come on!

DR. KEESHA: Dentists know this; you don't build something over the top of an abscess. Finally builders know that you don't build a school on top of a dump. So this is something that's so important. You have to unwind this part of the hippocampus of your brain, you have to dump this stuff, you have to reorganize it in a different way so it's not constantly available to be shot into fight-or-flight mode. Otherwise you will not be able to light up in the vital ways that you can as juicy, sensual, passionate, vital, sparkly, bouncy woman that's your birthright.

DR. GINA OGDEN: That's right; creative and productive women too.

I want to come back to the labyrinth image, which is another one of my icons. The wheel is like the labyrinth in that the message of the labyrinth is that you walk, walk, walk, walk, walk yourself into the labyrinth or enlightenment or nourishment or whatever it is that you find, but you cannot stay there. You need to come back out. You need to give to the world. Give yourself. I'm not talking about giving yourself away. I'm talking about creativity in whatever form that may take, whether it's parenting or writing a book, being juicily sexual.

So like the wheel, we moved through the negative emotions and thoughts and we moved to the positive emotions and thoughts and body feelings and spiritual connections. We learned how to move from one to the other, and eventually come out through the experience in a place where we're ready to step into the world that we live in.

I do this through using power objects. I ask people to bring into the wheel the object that represents a part of your sexual story, or whatever story you're carrying into the wheel, that you want to keep and nourish and nurture. I also ask them to bring in the kind of object that represents a part of your story, sexual or otherwise, that you want to release or let go of. We work the wheel with these objects which sometimes speak louder than we can.

I remember a woman who brought in a ripe mango to represent the juicy sweetness that she felt with her lover who she was about to marry. She was engaged. She also had vaginosis, which is a very painful clamping of the vaginal mucous. She brought in a knitting needle that she said her mother had tried to abort her with some fifty years earlier. So we had these two objects that she was working with.

In a drum journey, she was able to access this amazing advice with instructions to go make peace with her mother who is now in a nursing home strapped in a wheelchair with Alzheimer's. She hadn't seen her mother in many, many years and she and her mother had always hated each other. She was told to go into her top left bureau drawer and bring the wedding ring her father had left her and put in on a chain and bring her mother tulips and call her by her Dutch name. Loads of very detailed instructions.

The whole group told her to do it! She wrote us ten days after she had had this experience, and said she went to visit her mother. She did all of this. She knew where her mother had responded and heard her because even though she had Alzheimer's, she could put the wedding ring on the chain around her mother's neck. This big tear came out of her mother's eye and this woman took her thumb and took this tear and put it in her own eye. It was such forgiveness.

She left that experience and went back to her fiancé and they had the best sex ever. What she wrote is "The pain has left the planet." I can't write this up as a cure for vaginosis because it was happening. But what it says to me is when somebody is manifesting illness at a physical level, that the route to alleviating it sometimes comes through the heart, or through the mind, or

through the spirit. That to go in and do surgery on a woman with vaginosis is not always the best way. So that is one of my wheel stories.

DR. KEESHA: So beautiful. Faith Hill, another panelist, her talk was so moving. One of the things she talked about was forgiveness as a cost effective drug that you could use to heal the body. I said that's what I used in my own doctoral research as a possible intervention for female sexual desire that had been lost somewhere along the way due to an old hurt, an old pain. Forgiveness would open that back up and that's exactly what you're saying. I use the phrase "what's in your head gets to your bed". There's a lot of real estate between your brain and your vagina and a lot of space there where things can go wrong. So you've got to think about it in that way.

We're coming back now to the vertical chakra system, and then to the circular hole of how we hold all of that within us, both through space and time. So I love winding it up right there. That impacts every aspect of what we could term as our own health, our own wellness, our own vitality.

DR. GINA OGDEN: Yes, and I want to put this postscript on it that when I told this story at a conference that I was at, the psychiatrist that was running the conference took me out to lunch and he said "That was a very powerful story". He said "I bet if I just told her to forgive her mother that wouldn't work as well".

DR. KEESHA: No! No sir it wouldn't have.

DR. GINA OGDEN: Well I think we should end on a laugh. A laugh that is powerful, not a laugh that is derisive.

DR. KEESHA: No.

DR. GINA OGDEN: And dismissing of him. But a laugh that is powerful because we know that there is a whole wheel of experience that we just know a little bit about. And we are all learners. We learn from our clients, from our supervisees, and from each other.

DR. KEESHA: That psychiatrist was coming from the place of evidence-based science where we are very reductionist in our thinking, and say "Well the active constituent in this plant is this, so let's make a synthetic version of that and give that as a drug." What we've lost is how the synergy and the qualities in the plant all work together. So he was simply a reflection of that way of doing medicine. The story that you told was the synergy of the entire nature, the entire plant, the entire reflection of the universe. So it's not wrong, it's just a different way of looking at things.

DR. GINA OGDEN: Yeah, and that's where the vitality is: the synergy.

DR. KEESHA: Right. Well Dr. Ogden, thank you so much for sharing just a tiny bit of your wisdom with the listeners of the Summit. I want to tell people that you are the author of 10 books so far.

DR. GINA OGDEN: Yes. And counting.

DR. KEESHA: And counting. You are the author of *The Return of Desire*, which was published in 2008, and *The Heart and Soul of Sex* in 2006, and *Women Who Love Sex*, which is from 2007, and then your most recent books have been geared to practitioners of sex therapy and using the 4-D wheel. What I want to do is have you give the url for listeners who want to find somebody who is trained in this method using the wheel to get in touch with the center and to heal the entire being in the way that we've talked about.

DR. GINA OGDEN: Yes. I will give you two urls. One is my personal one where you can get in touch with me, and the other is the network. So mine is ginaogden.com. The network url is 4-dnetwork.com.

DR. KEESHA: Great. On this website you will see all these different applications that Dr. Ogden and I have been talking about that have been so exciting to watch develop. It's like daisies sprouting up in the spring. All these different things that are coming from this wheel and the applications that it can be used for, but all of them bring us back into this wholeness of center and integrating our mind, body, heart, and spirit with our stories. So thank you so much for the work you do in this world.

DR. GINA OGDEN: Yes. And I should say that on that website, viewers will also see you because you are very much part of this network, and part of a wonderful, downloadable online course in which you outline your work. So thank you, Keesha, for the work that you do.

DR. KEESHA: Oh, thank you.

DR. GINA OGDEN: You amaze me. I bow to you.

DR. KEESHA: And I bow to you. I want our listeners to know that if you want to go to Africa with me, you can go to drkeesha.com and I use Gina's 4-D wheel. The plant medicine from the mountains of Peru, the Andes, we work with those together. It is some serious deep exploration and healing. It is fantastic. So that information is on the website for a trip in October.

DR. GINA OGDEN: Oh, that sounds wonderful.

DR. KEESHA: Alright everybody, remember to live, love, laugh. Keep learning and be the most fantastic version of yourself, and until next time.

