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7

Loving Relationships

Session Length: 2 hours

Objectives

Understand stages of human sexual response

Explore common concerns about sexual functioning

Discuss sexual responsibility in intimate relationships

Rationale

Issues related to sexual functioning and response often are anxiety-producing for men. Many men grow up believing that it is solely the man's job to initiate sex and make sex enjoyable. Perceived problems in this area may have a negative impact on self-esteem and comfort with intimacy. This session seeks to reduce anxiety by providing factual information about sexual response (Masters and Johnson, 1984) and sexual functioning, including the impact of stress, fatigue, and drugs and alcohol. In addition, sexual responsibility issues in intimate relationships such as trust, birth control, and safer sex are discussed.

Session Outline



Procedure	Time
Welcome and Process Homework	10 minutes
Human Sexual Response	20 minutes
Concerns about Sexual Functioning	25 minutes
Break	10 minutes
Responsibility in Sexual Relationships	20 minutes
Safer Sex Issues	25 minutes
Homework: <i>Partner Interview</i>	10 minutes
Total Time for Session 7	120 minutes

Materials

Easel and flip chart (or erasable board)
 Magic markers; pencils, pens, writing paper
 Prepared flip chart *Human Sexual Response*
 Prepared flip chart *What Women Say...*
 Safer sex demonstration materials (See Preparation Notes)
 Copies of handouts

Preparation Notes

*Prepare
flip charts*



Human Sexual Response

Write out key points on a large piece of flip chart paper or poster board, as shown:

Human Sexual Response

Excitement Phase
"Ready"

Plateau Phase
"Building Up"

Orgasmic Phase
"Wow!"

Resolution Phase
"Resting"



What Women Say . . .

Write out key points on a large piece of flip chart paper or poster board, as shown:

What Women Say . . .

Never Use Force
It is never alright to use force or violence.

Share Responsibility In a Sexual Relationship
Both partners are responsible for birth control and safer sex.

Communicate Openly
Share feelings, thoughts, and needs.

Be Considerate
Care about your partner's feelings.

Respect Sexual Privacy
Don't brag or tell stories.

*Obtain
demonstration
materials*

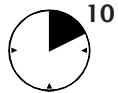


Assemble items for conducting a safer sex demonstration, including a penis model, condoms, spermicides (nonoxynol-9), water-based lubricants (K-Y), and the female condom. Local agencies such as public health department, AIDS service organizations, or family planning clinics such as Planned Parenthood may have safer sex kits available for loan.

*Photocopy
handouts*



Another Myth Quiz (worksheet, p. 135)
Another Myth Quiz Answer Sheet (handout, pp. 136-138)
Self-Help for Sexual Problems (handout, p. 139)
Condoms and Safer Sex (handout, p. 140)
Partner Interview (homework, p. 141)
Session Evaluation (form, p. 142)



Procedure

Welcome and Process Homework

Welcome participants as they arrive.

- 1 Use the first 10–15 minutes to review and process the homework assignment. Begin by reviewing a few key ideas from the previous session.**

Last week we reviewed information about male and female bodies, how they're put together and how they work. We also talked about some of the health-related issues that concern men like cancer, prostate, problems, and sexually transmitted infections. Knowing more about our bodies and our partner's body, and more about taking care of our health helps build a sense of pride and respect.

We also talked a little about sexual mythology—the “tall tales” we grow up hearing about sex that most of the time aren't true. Let's talk for a few minutes about the homework assignment:

- 2 Ask for volunteers to share their experiences with the homework.**

Here are a few ideas for questions:



Process
questions

How did your partner handle the “myth” quiz?

Did she miss any of the questions? Which ones?

How did it feel to have a matter-of-fact conversation about sex?

What did you learn from this exercise?

- 3 **Thank volunteers for their input.** Encourage participants to keep up the good work.



Human Sexual Response

- 1 **Use the next 15–20 minutes to lead a discussion about human sexual response.** (See Appendix B, p. 178, for a short article on sexual response.)

Here are some ideas to include in the discussion:

The more we learn about sex, the better our sex lives can become. A mutually satisfying sex life is an important part of a strong, committed relationship. A strong, stable relationship is good for our hearts, good for our minds, good for our children, and good for our recoveries. In today’s session, we’re going to continue talking about sexuality and issues related to sexuality in our relationships.

The history of sex is fascinating. There are several good books on sex history that trace man’s feelings, practices, and rules about sex from the days of the Pharaohs to modern times. But with all this history, it wasn’t until about 30 years ago that medical researchers actually got around to studying and identifying what happens physically when people have sex. Granted, even the Pharaohs had a pretty good idea about what was going on, but only recently have we gotten the medical or biological facts straight.

The first thing we’ll talk about today is some basic information about how we respond sexually as humans. Our sexual responses are unique and different from the responses of any other living creature on the planet. **Ask participants if they can guess why that is.**

As human beings, we **choose** to have sex—we are not driven toward sex by instinct. As human beings, having sex is not tied to the

female's fertility cycle. In most other animals, sex only happens when the female is fertile and sends out a signal that she is fertile. Human beings may choose to have sex at any time during the month or year, not just when the woman is releasing her egg.

The one thing we share as human beings is how our bodies respond during a sexual act. This is called the human sexual response cycle. It is the same for all adult males and females. It is the same regardless of which type of sexual act is performed—masturbation, vaginal sex, oral sex, or rectal sex. Let's quickly review the stages of this response cycle.



Flip chart

2 Lead a discussion on the stages of sexual response identified by Masters & Johnson. Use the prepared flip chart to focus attention on the points. Encourage questions and discussion. The key idea to stress is that both adult men and women may experience these phases of sexual response and that these responses are physical in nature.

Cover the following points:

1. Excitement Phase — “Ready”

Blood flow increases to the genital tissues; penis becomes erect; vagina lubricates; clitoris enlarges.

2. Plateau Phase — “Building Up”

Blood flow increases to the genital tissues; increased heart rate, blood pressure, breathing; tension in muscles.

3. Orgasmic Phase — “Wow!”

Muscles in pelvic area, vagina, along the urethra contract rhythmically; contractions produce waves of pleasurable feelings; males ejaculate (release semen).

4. Resolution Phase — “Resting”

Muscles relax, blood pressure and heart rate return to normal; blood flow to genitals returns to normal; erection subsides.

The sexual response cycle starts with the bodily changes that happen in the “excitement” phase. The person (or people) involved in the sex act may choose to proceed on to orgasm and resolution, or may choose to stop anywhere along the way. Although it may feel a little uncomfortable or frustrating, there is no biological necessity to finish the cycle just because it got started. In other words, sometimes the phone rings, the baby cries, or the mood is lost.



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Concerns about Sexual Functioning

- 1 Use the next 20–25 minutes to discuss common issues and concerns about sexual functioning (performance).**

Here are some ideas for introducing the discussion:

The sexual response cycle describes how our bodies are capable of responding. Unfortunately, for all of us, our bodies (or our partners' bodies) don't always respond the way we would like them to. And guess what? That's completely normal. We have bodies, not machines. Our feelings, our health, our history—all of these things can play a part in how we respond and function sexually. Unfortunately, again, as men we grow up with a lot of myths that may hurt our self-esteem, increase our anxiety, and make us worry needlessly about things that are completely normal. Just for fun, let's take a look at some more of these myths.

Worksheet,
p. 135

- 2 Distribute *Another Myth Quiz* worksheets and ask participants to complete them as quickly as possible.** Reassure them that it's not a test and that they don't have to show their worksheets to anyone in the group.

- 3 When participants have finished, go over the quiz items as a group asking participants to volunteer their answers.** Discuss correct answers to each question in detail using information from the answer sheet. Encourage discussion and further questions about the issues raised in the quiz. Distribute handouts of *Another Myth Quiz* answers at the end of the discussion.

Handouts,
pp. 136-139

- 4 Conclude by quickly reviewing handout *Self-Help for Sexual Problems*.** You may want to include phone numbers/referral information for agencies in your area that may provide counseling services (e.g., Planned Parenthood; community mental health agencies; private practitioners).



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Break



Responsibility in Sexual Relationships

- 1 Use the next 15–20 minutes to discuss responsibility issues in sexual relationships.**

Here are some ideas for starting the discussion:

Now that we've clarified some concerns many of us have had about **what** we do in bed and how we do it, let's talk a little while about **who** we are in our sexual relationships. I've never met a man who, at some level, didn't like to think of himself as a "good lover." So, what makes a man a good lover?



Flip chart

- 2 Ask participants to help you list the characteristics of a "good lover." List characteristics on flip chart paper or erasable board and discuss them. Use some of the following questions:**



Process questions

How do we learn what a "good lover" is?

What images do we get in the media, movies, TV?

Are these images helpful or realistic?

How can we learn to be better lovers?

- 3 Wrap up with the following ideas:**

To summarize this discussion, I think what we're hinting at here is that being a "good lover" is more about who a man is and how he treats his partner than it is about what he does or how he "performs" in bed. Once again, a lot of it comes back to that idea of having an assertive attitude—an attitude of mutual respect, openness, listening, and compromise. I can guarantee that 97% of women would choose a man who respects her and listens to her over a man with a large penis, any day.

In fact, we have the results of an informal survey in which women list what's important for men to remember if they want to be good lovers, husbands, and partners. Let's see what we can learn from the ladies. Here's what women say:



Flip chart

4 Use the prepared flip chart *What Women Say* to highlight the issues. Encourage participants' questions and discussion.

Here are some ideas for leading the discussion:

Never Use Force

It is **never** alright to use force or violence with a sexual partner. The media and other fantasy sources of information about relationships have presented a lot of unhealthy myths. The most unhealthy myth is that good sex is violent, rough, and aggressive and that all women have a “secret desire” to be taken by force, overwhelmed, or swept away. Another unhealthy myth is that men have a “right” to sex whenever they want it and that they can take it from a partner if it’s not given freely. “No” means “no”—any person, man or woman, has the right to refuse sex and not have to argue about it. Force, violence, and aggression work against healthy, intimate relationships.

Share Responsibility In A Sexual Relationship

Both partners are responsible for contraception and STD prevention. For some crazy reason many men believe that “protection” is the woman’s responsibility only. We sometimes hear guys say “She **got** pregnant” or even “She got herself pregnant.” Well, she didn’t do it by herself! When two people have sex, both people are responsible for the consequences. A man who’s a good lover does what he needs to do to share the responsibility.

Communicate Openly

It’s important to share feelings, thoughts, and needs with a partner. In the media, we see the strong, silent type a lot. Have you ever wondered why these characters are usually loners? The importance of communication in a close, intimate relationship cannot be overstressed. The biggest sex organ you have is your brain. Next is your heart. A good lover is willing to open up and share who he is with his partner. It’s also very important to communicate with your partner about your sexual relationship—what you like, what you don’t like, what feels good. Using I-Statements can help you communicate your needs and your preferences without sounding demanding. For example, “I really like it when you massage my shoulders.”

Be Considerate

Just as it’s important to communicate openly with your partner, it’s also important to be concerned about your partner’s feelings, thoughts, and needs. Patience and a willingness to compromise can go a long way in showing your partner you care about her. Many women are socialized to be shy or unassertive about their bodies and their sexual-

ity. A good lover can show consideration for his partner by being willing to ask about her needs and what she likes or doesn't like. As we've discussed before, listening is another way to show love and consideration for a partner.

Respect Sexual Privacy

This is a fairly self-explanatory point. It's not okay to brag or tell stories about you and your partner's sex life, past or present. Such talk is disrespectful of yourself and your partner, and it's also immature and childish. A close, intimate relationship is built on trust and respect. Telling stories "out of school" can shatter that trust and hurt the relationship.

5 Conclude by asking participants to discuss the following questions:



Process
questions

What would you tell your son is the most valuable characteristic he can develop as a husband or partner? Why?

What would you tell a daughter is the most valuable characteristic to look for in a husband or partner? Why?



25

Safer Sex Issues

1 Use the next 20-25 minutes to lead a discussion on safer sex issues.

Here are some ideas for opening the discussion:

One of the burdens we bear as men is that we are socialized to equate sexual conquest and sexual performance with our worth as human beings. Media messages about sex roles, relationships, love, etc. begin working on us very early—it's probably the way most of us first learned about sex and women. What we end up with is a pretty distorted way of relating to women. We get the message: "Go for it!! Sex is manhood! To be a 'real' man, you gotta carve notches on the bedpost. Having lots of sex proves you're a man!"

By learning that the only thing that can prove our manhood is how we "score" sexually we're cheated and cutoff from our total selves. It doesn't allow us to know and understand our feelings. It puts a lot of stress on us to perform, be in charge of sex, and always be on the make.

It hurts our self-esteem, too. Sexual conquest and sexual performance become how we judge our manhood. Sex becomes almost an obsession. We feel we have to keep proving ourselves in some way. And we feel **very** threatened when we sometimes can't deliver the goods. Being unable to perform sexually can upset us clear down to our souls. That's the price we pay for buying into the idea that sex somehow proves our manhood.

Nowadays, there's another price to pay. HIV infection and AIDS has entered the picture, on a collision course with this male "ideal" that the more sex you can have, the better. Hundreds of thousands of men have died or are dying from this disease. Countless others have brought the infection home, and their wives, partners, and children are dead or dying from the disease, too. As men, we have a responsibility to take this disease seriously, protect ourselves, and protect our families.

The public health folks will tell you that abstinence (not having sex) is the only 100% sure way to prevent getting or spreading HIV. This is true, and abstinence is always a choice. We have the right to turn down or refuse sexual contact anytime we want—and it won't make us any less of a man. Women have the right to not have sex, too. As men, we need to learn to respect that.

Let's have a heart-to-heart about the main safer sex options that we can use to protect ourselves and those we care about—condoms and monogamy (or being faithful).



Flip chart

2 Discuss issues related to monogamy as a safer sex option.

Write the word "monogamy" on a piece of flip chart paper and ask participants to help you list alternative definitions or descriptions for the term. (For example, being faithful; just one partner; not sleeping around; being a one-woman man; bringing it home to mama.)

Use some of the following questions to lead the discussion:



Process questions

Even if HIV/AIDS were not around, why is being faithful important for a close, stable relationship?

Why is monogamy difficult for some men to accept?

How do we make monogamy work in a relationship? What do we have to do?

Why is trust important for a good relationship?

What are the benefits of monogamy?

3 Wrap up with the following ideas:

Monogamy has been described as “building a safe fence around your playground.” By keeping sex as something you reserve only for your primary relationship, you do a lot to protect yourself and your family.

The use of condoms is another thing that makes sex safer. The most important things to know about condoms are how to use them correctly, and to remember to use them.



Handout,
p. 140



Safer Sex
Materials



Process
questions

4 Distribute the handout *Condoms and Safer Sex* and lead a discussion about using condoms and demonstrate safer sex materials.

Use the safer sex materials to demonstrate correct condom use. Also provide information about the female condom and show how it is used. (See Appendix A, pp. 171-176, for an outline on how to conduct condom demonstrations. Modify as needed for your group.)

Use some of the following questions to lead the discussion:

What are your feelings about condoms?

Why do men tend to have a negative attitude about condoms?

How can men improve their attitudes about condoms?

What are the benefits of condoms?

5 Discuss the importance of condoms if either partner continues to inject drugs.

Many women and children have been infected with HIV, not because they are unfaithful or their men are unfaithful, but because their men inject drugs. Sharing needles, syringes, cottons, or cookers can spread this virus. Even in a faithful relationship, a man who shoots up has the responsibility to protect his partner and his children from the threat of HIV by using condoms.

6 Provide closure by wrapping up on some of the key points raised in this session.

Here are some ideas for closing comments:

Sex is an important part of our lives and our well-being. We’ve talked today about some of the biological aspects of the sex act, and some of

the day-to-day aspects of sex, as well. Remember that learning about sex is a lifelong process. The more we know the more comfortable we become in our relationships.

It's unfortunate that many men have been brainwashed to think that what they do sexually is a reflection of how much of a man they are. A man's self-esteem and sense of pride should come from who he is, and how he treats others—not from how well or how often he performs a physical act. For many men, staying faithful is difficult. The more difficult it is for a man, the more courageous and strong he is when he's able to do it.

Next week is the last session of this workshop. We'll spend some time tying up loose ends and bringing together all that we've learned. We'll also have a graduation "party" and graduation certificates to recognize the good work that's been done in this group.



Homework,
p. 141

Homework: Partner Interview

1 Introduce the homework assignment and distribute the *Partner Interview* worksheets.

Here are some ideas for introducing the homework:

Your homework assignment is to sit down with your partner and share with her some of the information you learned today.

Also, since this is the last "homework" assignment, there's an interview exercise to do with your partner. This is similar to one from the first session. Your role is to find a quiet time to sit with your partner. Ask her to complete the questions on the homework sheet. When she is finished, sit together and discuss her answers. Remember to listen, to ask for clarification when you need it, to not argue, and to relax.

2 Thank participants for attending and invite them back next week.



Evaluation,
p. 142

3 Ask each person to complete an evaluation form before leaving.

ANOTHER MYTH QUIZ

Check an answer box for each question based on what you have been told about sexuality.

QUESTION	TRUE	FALSE	DON'T KNOW
Age-wise, a man is at his sexual peak from age 18 to 25; after that it's all downhill.			
The average couple has sex about 6-10 times per week.			
In a good relationship, the man and the woman should have orgasms at the same time (come together).			
It is very unusual for the average man to have trouble getting or keeping an erection.			
A man is responsible for a woman's sexual pleasure.			
If a man experiences "premature ejaculation," (coming too quickly), there is nothing that can be done to help him.			
All women know where their clitoris is located.			
The average man always wants and is always ready to have sex.			
Good sex must always end with intercourse.			
A woman with large breasts is more sexually sensitive than a woman with small breasts.			
In order to have good sex, the man must have an erection.			

Which of the following things can interfere with **wanting** sex or being **able** to have sex: (Circle all that apply)

Marijuana	Alcohol	"Downers"	Tension	Depression
Pain	Past experiences	Heroin	Cocaine	"Uppers"
Stress	Medications	Fear	Anger	Methadone
Diabetes	Illness	Fatigue	High blood pressure	

ANOTHER MYTH QUIZ

Answer Sheet

Age-wise, a man is at his sexual peak from age 18 to 25; after that it's all downhill.

This is not a completely true statement, although there are changes in sexual patterns as both men and women get older. A lot has to do with what the term "sexual peak" means. If we think of a sexual peak as simply the ability of the body to respond sexually, then there is some truth that younger men may have a stronger sex drive. However, men (and women) remain interested in sex into their 30s, 40s, 50s, 60s, 70s, and beyond. As we become older and more experienced, our focus of sexual pleasure becomes more well-rounded, so that instead of just being concerned with erections and genital pleasure, we have a deeper sense of total sensuality. With age we learn more about pleasing our partner, more about relaxing and enjoying the moment, and more about our own bodies. For most men, the true "sexual peak" comes with years and maturity.

The average couple has sex about 6–10 times per week.

How often a couple has sex varies a lot, and may change during the course of a relationship or marriage. Newlyweds or new partners may have sex more often than those who have been together for many years. Couples without children may have sex more often than those whose parenting duties require time and energy. A recent survey of Americans showed that most couples are satisfied with their sex lives, and that most couples report having sex an average of 2 or 3 times a week.

In a good sexual relationship, the man and woman should have orgasms at the same time (come together).

A good relationship is about meeting each others needs, not about exact timing. Once again, media-based mythology has a lot of influence. In movies we see couples making love who appear to reach a dramatic climax at the same moment. In real life, it doesn't always happen this way, nor should it. People have bodies, not machines, and each person's level of sexual excitement may not always be the same at the exact same moment. It's often much easier for partners to take turns having an orgasm - that way, each can take turns concentrating on pleasing the other. Placing demands on each other to "come together" or to "come" at a certain time can bring anxiety and pressure into what's ideally a relaxing, pleasurable event.

It is very unusual for the average man to have trouble getting or keeping an erection.

No, it's not. In fact, it is quite common for men to occasionally not be able to get or keep an erection. There are a lot of reasons and most have to do with the fact that a man is a total human being, not just a penis. Stress, depression, or just being tired and run-down can interfere with sex. A quarrel with a partner or worries about the bills or the children can be on a man's mind, and although he's not conscious of it, it can affect sexual performance. The main thing is to not worry about it. In most cases, the more a man worries, the worse it becomes. If the problem goes on for a long time, there might be another cause. Alcohol, street drugs, and prescription medicines may cause problems. The man should check with his doctor first to rule out a physical cause. If the problem isn't related to alcohol or illness, marriage or relationship counseling may help.

A man is responsible for a woman's sexual pleasure.

It is not possible for one person to be “responsible” for how another person's body reacts or doesn't react. This is another myth that men have been burdened with, and one that has placed a lot of pressure on men to think of sex as performance. (It works the other way, too—a woman isn't “responsible” for a man's pleasure, either.) Both partners are responsible for telling each other what they like or dislike. Neither partner is supposed to be a mind-reader who can guess what the other person wants or needs in bed. Once again, the solution is assertive communication—talking, listening, respect, caring, and patience.

If a man experiences “premature ejaculation,” (coming too quickly), there is nothing that can be done to help him.

Premature ejaculation or coming faster than he intends to is a common concern for men, and almost all men have experienced it. It may happen if a man is overly excited or hasn't had sex in a long time. If it is a recurring problem, there are several solutions the man can try. Some men are helped by using a condom when they have sex because a condom can help reduce sensitivity. The most successful approach is a special kind of control training that helps the man learn to recognize the sensations of an approaching orgasm and control his response. The man can learn to enjoy several “peaks” of intense sensations before he allows himself to come. With practice and patience, premature ejaculation can be overcome.

All women know where their clitoris is located.

This is not always true because many women grow up with taboos and restrictions about their bodies and about touching themselves. The clitoris is the most sexually sensitive organ in a woman's body, located above the vagina and the urinary opening where the skin folds (labia) join. It is very small, about the size of a pea, and is made of the same tissue as a man's penis. Many women mistakenly believe that the vagina is the center of sexual stimulation or that the clitoris is located inside the vagina. However, the vagina has very few nerve endings and the clitoris has as many nerve endings as the man's penis. Touching and stimulating the clitoris in a way the woman finds arousing will usually result in orgasm.

The average man always wants and is always ready to have sex.

This is another example of a myth that places a lot of pressure on men to be sexual and to base their self-esteem on performance. A man is a human being, not a machine that can just flip a switch and turn on. If a man believes this myth, he may think he must engage in sex even when he doesn't really want to. For example, he may push himself to have sex when he's too tired, not really attracted to the woman, or too stressed out. This can lead to performance problems that hurt his confidence. A man doesn't always have to be interested in sex to be a real man. A real man is interested in sex when the time is right, the partner is right, and he's able to relax and enjoy the experience. He doesn't need to “prove” himself to himself, or to anyone else.

Good sex must always end with intercourse.

This myth shows how goal-oriented we are in our society. We're always trying to get where we're going, and we forget to enjoy the journey. Good sex can happen even when intercourse is left out. Holding, touching, kissing, massage, and other types of "foreplay" can be just as enjoyable as "doing it," and many couples find it to be a nice change of pace. Intercourse is not the be-all and end-all of sex—there are many variations and options that a couple can try. To limit our definition of "good sex" to just having intercourse is like going to a fancy dinner party and only eating one thing.

A woman with large breasts is more sexually sensitive than a woman with small breasts.

This is not true. A woman's breast size has nothing at all to do with her sexual sensitivity. Breasts vary a lot in size, shape, texture, and appearance, and breast development is mostly influenced by heredity (one's parents and grandparents). All breasts function the same way—they are designed to produce milk to nourish an infant. The size and shape of a breast or nipple does not affect the amount or quality of the milk produced. In some women, the nipple and surrounding skin are very sensitive to touch and sexual stimulation; other women may not enjoy having their breast touched: size, however, has nothing to do with it.

In order to have good sex, the man must have an erection.

A couple can have very good sex even if the man does not have an erection. If you think of sex as a total body experience that is more than just the genitals, you'll understand why this is true. Touching, kissing, holding, massage, and other kinds of stimulation can happen without an erection. Sex is more than a performance and more than just having an orgasm. Men can do a lot for themselves by learning to let go of the pressure to perform and have an erection, and practice learning to relax, getting in touch with their **whole** bodies, and showing their partner how they like to be touched and caressed.

For the last question all of these items should be circled.

One myth we live with as men is the myth of "superman"—a real man is supposed to want sex and be able to perform, no matter what. The truth is that many things can cause problems with our sex lives. (This is true for women as well as men.) Heavy use of alcohol or marijuana can lower testosterone (male sex hormones). In addition, alcohol causes problems with blood flow and circulation. Heavy drinkers may have a difficult time getting and keeping an erection. Heavy use of heroin, cocaine, and other street drugs cause problems with sexual functioning as well. Illnesses such as high blood pressure and diabetes affect blood flow and circulation and can cause problems with erections. Certain medicines used to treat illnesses may have an impact on our sexuality. Negative feelings such as anger, tension, guilt, fear, depression, or shame can crawl in bed with us, too, and cause problems. Past experiences that were painful, humiliating, or frightening can leave us wounded and unable to respond sexually in the present. This is especially true for people who were sexually abused or raped.

Self-Help for Sexual Problems

- ❖ Talk it over with your partner. Be patient, gentle, and understanding with each other. Don't rush things.
- ❖ Keep communication open and stay close in other ways. Hug, touch, kiss, and express affection in other ways. Don't pressure yourself or your partner to be sexual.
- ❖ If you use alcohol, marijuana, or other street drugs, assume that these substances are likely connected to the problem. Stop using. Talk with your substance abuse counselor for advice.
- ❖ Talk with a trusted, experienced friend or family member about the problem. Choose someone who you know will keep your confidence.
- ❖ Go to the library or bookstore and read up on the problem. You can call a local help line or family planning clinic to ask for advice on books that may be helpful.

CONDOMS AND SAFER SEX

Condoms provide safety and protection, but they **must** be used properly. It is recommended that only latex (latex rubber) condoms be used. Condoms made from animal skin membrane are not effective for preventing diseases. Here are some tips to help make condoms more effective.

COVERING ALL THE BASES

Putting On A Condom

A condom should be put on when the penis becomes hard, not before.

Always use a new condom.

Place the rolled condom over the end of the erect penis and squeeze the tip end of the condom to remove any trapped air. (Trapped air in the end of the condom could cause the condom to break, like a balloon.)

Once the air is squeezed out, roll the condom down the shaft of the penis, leaving space at the tip of the condom to catch the semen (cum).

Making the condom comfortable

Choose the style and brand of condom that best fits the man. It's a good idea to try different brands (they are not all the same). Most men prefer a condom that allows a bit of friction and is thin enough to conduct warmth.

Place a tiny dab of K-Y jelly or other water-based lubricant in the tip of the condom before rolling it on.

Keep in mind that too much may cause the condom to slip-off. However, a tiny dab will help increase sensations for the man.

Keep several condoms ready for use when having sex. If you are interrupted, or if the erection is lost, you'll have a condom handy to start again.

Have fun with your condoms. Condoms come in different colors, with pretty patterns, even in flavors like strawberry and peppermint.

Keeping the condom from breaking

Never store condoms where they are exposed to heat or freezing. Heat or freezing can destroy the latex and make it break. Store condoms in a cool, dry place (such as a medicine cabinet or closet). Don't keep them in a wallet or glove box of the car.

Be careful with fingernails,

rings and jewelry when putting on the condoms. Nails or anything sharp can tear the condom.

Use only water-based lubricants like K-Y jelly. Oil-based lubricants such as Vaseline, baby oil, hand lotion or cooking oil can cause the latex in the condom to break or tear.

Taking the condom off

After the man has come, withdraw the penis while it is still hard. One partner should hold on to the condom at the base of the penis to keep it from slipping.

Remove the condom so that the semen (cum) can't spill on either of you. Gently slide the condom off the penis. Wrap in tissue and dispose of in the trash can. Avoid flushing condoms down the toilet as they may clog pipes.

Session 7 Homework
Loving Relationships
Partner Interview

Ask your partner to complete the following sentences. When she is finished, sit down together and discuss her answers. Be sure to listen. Don't argue or try to comment on the answers.

One change I have noticed since you've been in the workshop is

One thing I really appreciate about you is

One thing I'd like you to work harder on is

One thing I've learned about myself is

One thing I'd like to do better myself is to

One thing I think that has really improved in our relationship is

One thing I would like for us to keep working on is

SESSION EVALUATION Time Out! For Men

Session 7

THIS BOX IS TO BE COMPLETED BY DATA COORDINATOR:

SITE # __ __	CLIENT ID# __ __ __ __	DATE: __ __ __ __ __ __	COUNSELOR ID# __ __
[1-2]	[3-6]	MO DAY YR [7-12]	[13-14]

INSTRUCTIONS: Please take a minute to give us some feedback about how you liked this session.

1. Use one word to describe your reaction to today's class. _____

2. What is the most important thing you learned today?

3. What advice would you give a teenager today about safer sex?

4. On a scale of 1 to 10, how do you rate today's class? (Circle your rating)

01	02	03	04	05	06	07	08	09	10	__ __
			Pretty Good							[15-16]
Poor							Excellent			

5. Do you have any suggestions to help make this class better?