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Man Talk: It's More than Plumbing

Session Length: 2 hours

Objectives

Explore how myths about sexuality impact sexual learning

Understand male and female anatomy and reproductive functioning

Recognize symptoms of male sexual health problems

Rationale

Few men have had the opportunity to learn basic, factual information about sexual and reproductive health. Often this gap has been filled by the myths born out of locker room talk and men's magazines. This lack of solid information may result in unnecessary concerns about normal body functions, sexual response, and sexual functioning. This session seeks to provide men with a better understanding of human sexual anatomy, physiology, and functioning. In addition, issues related to overall health, such as cancer screenings and sexually transmitted diseases, are covered.

Session Outline



Procedure	Time
Welcome and Process Homework	10 minutes
Sexual Myths	25 minutes
Reproductive and Sexual Anatomy	25 minutes
Break	10 minutes
Men's Health Issues	15 minutes
Sexually Transmitted Infections	25 minutes
Homework: <i>Sexuality Myth Quiz</i>	10 minutes
Total Time for Session 6	120 minutes

Materials

Easel and flip chart (or erasable board)
 Magic markers; pencils, pens, writing paper
 Illustrations of male sexual anatomy
 Illustrations of female sexual anatomy
 Prepared flip chart *Steps for Testicular Self-Exam*
 Prepared flip chart *Symptoms of Prostate Problems*
 Prepared flip chart *Symptoms of Sexually Transmitted Infections*
 Optional: Videos and slide presentations (see Preparation Notes)
 Copies of handouts

Preparation Notes

*Study
sexual health
textbook*



Familiarize yourself with information about sexual and reproductive anatomy and physiology. Consult a textbook or see information on human sexuality contained in Appendices A and B of this manual (pp. 155-218).

These appendices contain a brief summary of male and female anatomy, sexual functioning, and health issues, along with anatomical illustrations and handout materials on sexually transmitted diseases and contraception.

*Prepare
flip charts*



Steps for Testicular Self-Exam

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

Steps for Self-Exam

1. **Visual examination in mirror**
2. **Manual examination in shower**
 - ✓ Feel surface of each testicle.
 - ✓ Gently slide testicle back and forth to examine all areas.
 - ✓ Feel for small, hard lumps on side or front
 - ✓ Tumors are usually painless and easy to feel.
 - ✓ A lump or bumpy area should be checked by a doctor.
3. **Testicular exam should be done once each month.**



Symptoms of Prostate Problems

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

Symptoms of Prostate Problems

Urge to urinate frequently

Trouble urinating; trouble starting the flow

Slow or dribbling flow of urine

Strong ache or pain in pelvic area or lower back during urination

Pain during ejaculation (“coming”)

Pus in the urine; fever, chills

**NOT ALL SYMPTOMS MAY BE PRESENT;
SYMPTOMS MAY COME AND GO**



Symptoms of Sexually Transmitted Infections

Write out key points for symptoms of sexually transmitted infections on a large piece of flip chart paper or poster board, as shown:

Symptoms of Sexually Transmitted Infections

Sores, blisters, or warts on penis, scrotum, or rectum

Burning or pain when urinating

Pus or milky discharge from penis or rectum

Swelling, inflammation, or pain in the testicles

Weight loss, swollen glands, diarrhea, fatigue, fever, night sweats

White patches or coating in mouth or throat

Teaching aides



See **Appendix B** (pp. 222-224) for a list of suppliers of videos, slide presentations, pamphlets, and other teaching aides that may be used to present information about sexual health issues.

Photocopy handouts



Sexuality Myth Quiz (worksheet, p. 116)

Sexuality Myth Quiz Answer Sheet (handout, pp. 117-119)

Male and female anatomy illustrations (Appendix B, pp. 186-189)

Important Health Issues for Men (handout, p. 120-121)

Sexuality Myth Quiz (extra copies for homework)

Session Evaluation (form, p. 122)

Procedure



15

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 looked at a couple of ideas for managing conflict in relationships. We talked about “fighting fair” and the importance of “win-win” solutions to problems that allow both people to have their needs met.

We also went over some steps for conflict resolution that require that we use all the communication skills—listening, assertiveness, I-statements, and negotiation. Let’s talk for a few minutes about how the homework assignment to practice conflict resolution worked out:

- 2 Ask for volunteers to share their experiences with the homework. Here are a few questions to start the ball rolling:**



Process
questions

How did using the conflict resolution steps work out?

What did you find most difficult about using this approach?

What kinds of problems did you discuss with your partner?

How did your partner respond to this approach?

What did you learn from the homework?

- 3 Thank volunteers for their input.** (“Good going, guys. Keep up the good work.”)



25

Sexual Myths

- 1** During the next 20–25 minutes, lead a discussion on sexual myths and the often inaccurate things we learn about sex as we grow up.

Here are some ideas for introducing the discussion:

Today we're going to talk about sex. It's a chance to learn about some things that most of us have never had a chance to learn about. It's unfortunate that our society is uptight about the subject. It means that many of us never got good, factual information in school or at home. We ended up having to rely on movies, magazines, or what we heard in the locker room. Today's session is a chance to ask questions and learn more about our bodies, women's bodies, and issues that affect our health.



Process questions

Ask participants to think back to when they were children.

Ask for volunteers to share the very first thing they ever learned or were told about where babies come from.

What were you told and who told you?

What was your reaction?

There are a lot of myths out there about sex, anatomy, and reproduction. A myth is a story that sounds believable but has no factual basis. A lot of myths come from folk beliefs, locker rooms, or sex magazines. Just for fun, let's take a quick look at some of these myths and see if we can clear the air just a little.

Worksheet,
p. 116Handout,
pp. 117-119

- 2** Distribute ***Sexuality 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.

- 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 for the quiz. Encourage discussion and further questions. Conclude by distributing handouts of the *Sexuality Myth Quiz* answer sheet.



25

Illustrations,
pp. 186-189

Reproductive and Sexual Anatomy

- 1** Use the next 20–25 minutes to review male and female reproductive and sexual anatomy. Use handouts of anatomical drawings to illustrate the male and female reproductive systems. Discuss where major organs are located and their function. Encourage questions throughout your presentation.

Here's an idea for leading into the discussion:

Many times when sexual problems happen in relationships, one underlying cause is a simple lack of biological information. Counselors who work as sex therapists spend a lot of time just supplying couples with information about male and female bodies, how those bodies develop, and how those bodies are designed, by nature, to function. Sexual relationships between couples is more than just plumbing, but knowing about the plumbing is very important. So let's start with the basics and review male and female sexual and reproductive organs, where they are located, and how they work.

- 2** Cover the following information:

Male sexual anatomy

Erections and ejaculation

How the body changes during puberty

Female sexual anatomy

Menstruation; the menstrual cycle

Fertilization and pregnancy

Childbirth

Contraception (birth control methods)

- 3** **Encourage questions and discussion.** Move through the information at an easy pace. Your main objective is to dispel mythology, provide accurate information, and encourage comfort with the topic. Men often are reluctant to admit that they have any questions or lack any factual knowledge. If you're comfortable doing so, use self-disclosure about the misconceptions, misunderstandings, and concerns you yourself had before doing reading

and research for this session. Stress that learning about sexuality is a life-long process and all of us are confused or have questions from time to time. Attempt to normalize the importance of having a healthy curiosity about getting the facts straight. (Additional handouts on birth control methods are in Appendix B, pp. 198-208).

Note: **You may prefer to use videos, slides, or a guest speaker.** If you feel uncomfortable with the idea of presenting this material or being able to answer participants' questions, a guest speaker may be a good idea. Local health departments, doctors, nurses, or family planning organizations such as Planned Parenthood are good sources for guest speakers. These groups also may be able to lend you appropriate videos or slide presentations.



10

Break



15

Men's Health Issues

1 Use the next 15–20 minutes to review information about testicular and prostate health. Read the material in Appendix A (pp. 159-165) of this manual to help you cover these issues.

Here are some ideas for the discussion:

As we've seen from our discussion before the break, women's anatomy and physiology is a little more complicated than our own. In general, women view their reproductive functioning as more of an overall health issue than we do. They experience a monthly period that requires special care (pads, tampons, etc.) and it sometimes makes them feel a bit uncomfortable or out-of-sorts for a few days. Women also should have annual examinations of their cervix, uterus, and ovaries to screen for cancer or other problems, and their breasts need special care as well. Women should learn to check their breasts each month for lumps because breast cancer is a real concern—about 1 in 9 women will develop breast cancer in their lifetime. Starting at about age 40, women need to begin having a mammogram every two years and after age 50 they should have a mammogram every year. A mammogram is a special X-ray that can detect breast cancer early. The point is that we are all fairly aware that women's "plumbing" requires special health care—but what about men's?

As men, we're lucky. Our plumbing is relatively trouble-free from a health perspective, but there are a few things we should pay attention to in order to stay healthy.

The first one we'll talk about is testicular cancer. Younger men (men 35 and under) are at risk for testicular cancer (cancer of the testicle). Testicular cancer is a rare form of cancer—but it is one of the most common cancers in men aged 15–35. Men in this age group should learn how to perform a monthly testicle examination, much like women examine their breasts.

The most common symptoms of testicle cancer are a change in appearance or size of one testicle, a small, hard lump on the side or front part of the testicle, and sometimes a dull ache or feeling of heaviness in the groin area (the area between the navel and the pubic hair). Let's review the steps for checking out the testicles for problems:



Flip chart

Handout,
pp. 120-121

Flip chart

2 Briefly review the testicular examination steps. Use the prepared flip chart to focus attention on the steps. Encourage discussion and answer participants' questions. Conclude by distributing the *Important Health Issues for Men* handout.

3 Briefly review the symptoms associated with prostate problems. Use the prepared flip chart to focus attention. Encourage participants' questions and discussion.

Here are some ideas for discussion:

Another area of our sexual and reproductive machinery that we need to have knowledge about is the prostate gland. As we discussed earlier, this gland is located inside the pelvic area below the bladder. Here's the bad news—most of us will have some kind of prostate trouble at one time or another in our lives. The older we get, the more likely we are to have a problem. The good news is that if we do have a problem, the symptoms are very easy to recognize. The most common prostate problems are infection, enlargement, and cancer. Cancer is most likely in men over 40. After age 40, a man should have his prostate checked each year by a doctor as part of a routine checkup.

The symptoms for any prostate problem are very similar, so it's a good idea to be familiar with the symptoms and to see a doctor if you develop problems.



25

Sexually Transmitted Infections

1 Use the next 20-25 minutes to review the most common types of sexually transmitted infections and their symptoms.

Here are some ideas to include in the discussion:

The most common sexual health problem that we should be concerned about as men is sexually transmitted infections or diseases, often called STDs. We are all fairly familiar with HIV infection and AIDS because we hear about it in the media a lot. But each year there are millions of new cases of other STDs, and although most of them are not fatal like AIDS, they do cause a lot of pain, discomfort, and suffering. Also, these diseases spread very easily. If a man has an infection he can spread it to his sex partner. Some of these diseases become serious in women. Another thing we should worry about is that if we pass an infection to our partner and she is pregnant or becomes pregnant, the infection can be spread to our children. Some infections are very serious in newborns and may cause blindness, lung problems, brain damage, and even death.

Sexually transmitted infections are very common, yet no one likes to talk about them. Part of the reason is shame. We somehow believe these diseases are “dirty,” mostly because of our discomfort with sex. STDs are no more “dirty” than any other disease. A cold infects our nose and throat because the germs that cause colds can take hold in those organs. A stomach flu takes hold in our stomachs and intestines, because that’s where those germs can live. And sexually transmitted diseases take hold in our genital and urinary organs only because that’s where those germs can survive. Colds are transmitted by sneezes, stomach flu by touching a contaminated surface and then touching your mouth, and STDs are transmitted by sex. STDs aren’t “dirty” diseases, they are simply “specialized” diseases. The germs invade a certain part of the body and that just happens to be the part of the body we use when we have sex. STDs aren’t “dirty” but they are serious.

2 Ask participants to tell you the STDs they have heard about and what they have heard about them.

List the diseases they mention and what they know about those diseases on flip chart paper or erasable board. The main idea is to clarify misconceptions and dispel myths and half-truths about these infections. You may want to use a video to cover this information.



Flip chart

Give information on the following STDs:

Gonorrhea: Gonorrhea is caused by bacteria. In men, gonorrhea causes burning and pain during urination and pus or a thick discharge from the end of the penis. If left untreated it can go on to cause complications and scarring in the urinary tract. In some cases it can settle in the joints and cause a painful kind of arthritis. Women usually don't have any symptoms of gonorrhea when they are first infected. Later they may develop a discharge from the vagina. If a woman goes too long without treatment she can develop a serious infection up inside in her ovaries and uterus. If she gets pregnant, the infection can be spread to the newborn baby during childbirth. Gonorrhea can be treated with antibiotics.

Chlamydia: Chlamydia is a bacterial infection similar to gonorrhea. For the most part, it causes the same symptoms and problems as gonorrhea for both men and women. If a woman is infected, her newborn may become infected during childbirth. Chlamydia also can be treated with antibiotics.

Herpes: Herpes is caused by a virus. There's no cure for herpes. Herpes causes clusters of small, painful, fluid-filled blisters on the sex organs or around the rectum. These blisters take about 6 to 8 weeks to heal. Once infected with herpes, people may have outbreaks of the blisters several times a year. If a woman has herpes her newborn may become infected during childbirth. Herpes is very serious for newborns and can cause brain damage, nerve damage, blindness, and death.

Syphilis: Syphilis is caused by bacteria that enter the blood stream during sexual contact. It is a very serious disease and can cripple and cause death if not treated. The first symptom is the appearance of an ulcer or sore called a *chancre* (pronounced "shanker"). This ulcer is painless and usually shows up on the penis or in the genital area. It lasts about 2–4 weeks then heals itself. But the disease stays. Later on, symptoms may include hair loss, a rash on the body (including the palms of the hands and soles of the feet), swollen glands, and flu-like symptoms. After that there are no symptoms, but the disease is still there. It can destroy the heart, brain, spinal cord, and circulatory system. If a woman is pregnant or gets pregnant when she has syphilis, her newborn will become infected. The disease can cause death, deformity, and other problems in newborns. Syphilis can be easily treated with antibiotics. It must be treated early in order to avoid serious damage.

Genital Warts: Genital Warts (also called condyloma) are caused by a virus. These warts are different from the warts that people get on their hands or feet. (Warts on your hand cannot be spread to the genital area.) The genital wart virus causes flat, dry warts and clus-

ters of warts to grow on the penis, around the vagina, inside the vagina, and/or around the scrotum and rectum. This virus is very difficult to control. The warts may be removed but often will return. Some types of genital warts have been linked to cancer. They can cause problems with urination and childbirth.

HIV/AIDS: AIDS is caused by the human immunodeficiency virus (HIV). When a person is infected the virus enters the bloodstream and lives in white blood cells. This virus is spread through sex and by sharing injection equipment. It is the most serious STD. There is no cure for AIDS. HIV slowly destroys a person's immune system. Without this natural defense against diseases the person with HIV may become ill with cancers, pneumonia, stomach infections, and brain and nervous system infections. A woman with HIV may pass the infection to her newborn. Although there is no cure, many of the infections and diseases brought on by HIV can be treated.



Flip chart

4 Briefly review the symptoms of STDs. Use the prepared flip chart to focus attention. The main point to get across is that any type of symptom or problem should be checked by a health clinic or doctor immediately. The list of symptoms is very broad and general. The best advice is to avoid self-diagnosis and seek medical attention for any of these symptoms. Be sure to mention that sometimes STDs cause no symptoms or the symptoms go unnoticed. If someone knows or suspects that they've been exposed, they should visit a clinic for tests regardless of whether or not symptoms are present. (Additional handouts on STDs are in Appendix B, pp. 209-218).

5 Conclude with the following ideas:

Sexually transmitted infections and diseases are nothing to take lightly. As we've been discussing, they can be serious, life-threatening diseases. By knowing about symptoms and what to watch for we can know when to get medical attention. If you ever experience any of these symptoms (or if a friend or family member tells you they are having these kinds of symptoms), the best advice is to visit a health clinic or doctor immediately. Only a clinic or doctor can treat these infections—each one requires evaluation to make sure the correct antibiotic or other medicine is given. It's a bad idea to treat infections yourself or to use folk medicines. Folk medicines may be helpful for some illnesses, but they are useless for treating STDs.

Last week we talked about how blaming can be a communication problem. That's especially true with STDs. When a person finds out he's got an STD, the first thing he (or she) may want to do is blame the person he had sex with. Although blaming is an understandable angry response to the situation, it's not helpful or realistic. First, most

of the time a person who is infected with an STD is not even aware that he or she is infected. Women often will not have noticeable symptoms and therefore don't know they are infected. Men may not have symptoms, either. Second, if two people have sex they are both equally responsible for the sex act. Prevention is always better than a cure. It's hardly fair to "blame" someone for giving you an infection when you could have used a condom to protect yourself. That's the bottom line here. We are responsible for keeping ourselves healthy. If you ever have the slightest doubt, whip a condom out!

The most foolproof way to avoid a sexually transmitted infection is to not have sex. Since few people choose this option, the next best thing is to not sleep around. A longtime, committed, faithful relationship will protect both people from sexual infections. (This protects your future children, too.) Using condoms also is important. If you have sex outside your primary relationship, always use a condom. This way you won't bring an infection home with you and you protect your family from harm.

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

Here are some ideas for closing comments:

We've covered a lot of ground today. We included this information in the workshop because we believe it is important. This workshop is about improving our relationships, and our sex life is an important part of relationships. The more we know and understand about our bodies and our partner's body, the more comfortable we can become discussing sex.

We show respect for ourselves in a lot of ways, and one important way is taking care of our health. Although men don't have as much to worry about as women in terms of sexual health, it's important to know the signs and symptoms of potential problems.

6 Briefly go around the room and ask each participant to tell you the most important thing he learned today.

Now that we've gone over the "medical" type of information, we'll have some background for discussing other types of sexual issues that come up in relationships. That's where we'll take up next week. If any questions come up for you during the week, jot them down and bring them to group.



Homework: Sexuality Myth Quiz

Use the last 10 minutes to introduce the homework assignment.



Homework,
p. 116

1 Distribute extra copies of the *Sexuality Myth Quiz*.

Here are some ideas for introducing the homework:

When you get home or sometime during the coming week, sit down with your partner and share with her some of the information you learned today.

Talk with her about myths and folk stories about sexuality that she may have heard while growing up, and share with her some of the stories you once believed.

For fun, ask her to complete the extra copy of the *Sexuality Myth Quiz* that you've just been handed. You have the answer sheet already. When she's finished, go over the answers like we did in group. Show her your quiz and talk about your answers.

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



Evaluation,
p. 122

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

SEXUALITY MYTH QUIZ

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

QUESTION	TRUE	FALSE	DON'T KNOW
If a woman is menstruating (having her period), she will cause well water to go bad, if she drinks from the well.			
It is possible for animals such as chimpanzees or dogs to breed with human beings.			
After menopause, a woman has no desire for sex.			
Homosexuals are born that way.			
A man with a big penis is better able to satisfy a woman.			
Masturbation is dangerous and immature.			
Sexually Transmitted Diseases (STDs) always cause symptoms.			
When men get older they can no longer have erections.			
Alcohol increases sexual desire and makes you a better lover.			
Women don't need sex as often as men do.			

SEXUALITY MYTH QUIZ

Answer Sheet

If a woman is menstruating (having her period), she will cause well water to go bad, if she drinks from the well. (FALSE)

Menstruation, the female “period,” is the subject of myth and taboo. Many religions, including Judaism and Islam teach that women are “unclean” during their periods and must purify themselves afterwards. Many ancient cultures made women stay in special “menstrual huts” during their periods. They believed that if a man touched a menstruating woman, he would die. If she walked across his fields, all his crops would die. If she drank from the well, then the water would turn poisonous. These superstitions probably have to do with the fact that menstruation involves blood, and blood was viewed as powerful magic. Today we understand that menstruation is a clean, natural function of the human body. When a woman menstruates, her uterus (womb) is simply shedding a lining made of tissue and blood that would have nourished a fetus if pregnancy had occurred.

It is possible for animals such as chimpanzees or dogs to breed with human beings. (FALSE)

From time to time, supermarket tabloids carry headlined stories such as **DOCTORS AMAZED! WOMAN GIVES BIRTH TO PUPPIES** or **I WAS RAPED BY A GORILLA AND HAD ITS BABY!** Rest assured that it is not genetically possible. Human sex cells will not accept genetic material from another species, nor will other species accept human genetic material. So **MAN FATHERS PUPPIES** is not possible, either. In fact, other species won't voluntarily copulate with human beings, although they may appear to be trying (such as when a pet dog wraps around your leg). In “sex shows” that feature humans and animals, the animals have been trained and are not behaving instinctively.

After menopause, a woman has no desire for sex. (FALSE)

The most important factor in desire is a woman's feelings for her partner and her attitude toward sex. Menopause indicates that a woman's ovaries have stopped producing eggs and that hormone production is reduced. Most women continue to experience satisfying and fulfilling sex lives after menopause. Reduced amounts of naturally-produced estrogen may cause vaginal drying or thinning in some women, but there are a variety of lubricants and hormone replacements available to provide relief. Menopause is a natural, healthy aspect of sexuality.

Homosexuals are born that way. (FALSE/DON'T KNOW)

Research has not found an answer to why some people are homosexual. Genetics, hormones, overbearing mothers, and mental illness have all been suggested at one time or another. None is correct. What we know is that homosexuality exists in all cultures, in all parts of the world, and at all times in recorded history. It is estimated that 15% of the world's population is homosexual or bisexual. This allows for speculation that it is a normal, natural phenomenon. It is also important to bear in mind that many people who are not "homosexual" engage in same-sex sexual encounters.

A man with a big penis is better able to satisfy a woman. (FALSE)

Maria Muldaur said it best: "It ain't the meat, it's the motion...." The center of sexual excitement and release for a woman is the clitoris, a small, pearl-like organ located above the urinary opening. Whereas some women may prefer a large penis, it's not necessary for sexual satisfaction. The vagina itself has relatively few sensitive nerve-endings. This is because the vagina is the birth canal. If the vagina had as many sensitive nerve-endings as the clitoris, no woman would ever be able to give birth — it would be too painful.

Masturbation is dangerous and immature. (FALSE)

Masturbation is sexual self-stimulation which may or may not be carried through to orgasm. In Victorian times, doctors preached that it could lead to insanity, blindness, warts and hair growing on the palms of the hands. Masturbation is harmless. People of all ages, including people with a steady sex partner, may masturbate. Many religions have strong taboos against masturbation, which may cause some people to feel guilty. If masturbation causes excessive guilt, it should probably be avoided. Otherwise, it's normal to masturbate and it's also normal not to masturbate.

Sexually Transmitted Disease (STDs) always cause symptoms. (FALSE)

Unfortunately, this is not true. Public health officials believe that the primary reason why Sexually Transmitted Diseases (STDs or VD) are so prevalent is because they are unknowingly transmitted from person to person. For example, chlamydia and gonorrhea seldom produce obvious symptoms in women, and as many as 20% of men may have no symptoms. In the case of syphilis, a chancre (a painless ulcer) appears in the first weeks after exposure then heals on its own. It can easily go unnoticed, especially if it is located inside a woman's vagina. New evidence shows that herpes may be transmitted even when herpes sores are not present. The HIV virus that causes AIDS can produce no symptoms for years. In fact, most people with HIV who are in danger of passing the virus to someone else don't even know they have it. They look and feel fine.

When men get older they can no longer have erections. (FALSE)

Erections are caused by blood flowing into the spongy tissue of the penis, causing it to engorge (swell). If a man stays healthy, he can have erections until the day he dies, even if he lives to be 95. Studies show that about three out of four men in the 60s and 70s have satisfactory erections; two-thirds of men in their 80s have erections; and nearly half of all men in their 90s do also. Diseases such as prostate cancer or cardiovascular (heart and circulatory) problems may interfere with erections. Also, certain drugs such as high blood pressure medication may reduce erection capacity. Other drugs such as alcohol, tobacco, heroin, high dose methadone, marijuana, and cocaine may also cause erectile dysfunction.

Alcohol increases sexual desire and makes you a better lover. (FALSE)

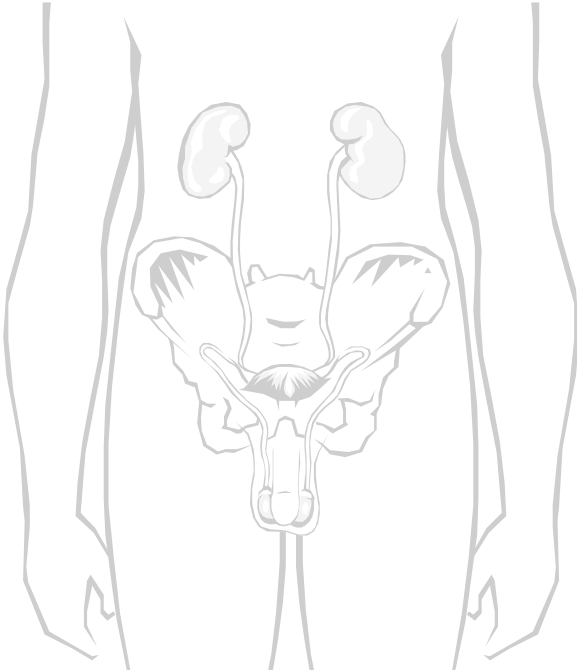
Actually, the opposite is true. Alcohol in small amounts may cause relaxation and openness to sexual experiences, but in large amounts and with chronic use it reduces both desire and performance in men and women alike. Heavy drinking may cause men to have problems keeping an erection and may cause both men and women to have problems achieving orgasm.

Women don't need sex as often as men do. (FALSE)

Sex is a basic biological drive with physical and emotional rewards for women as well as men. Within a fulfilling sexual relationship, men and women establish patterns as to when and how often they need and want sex. For women and men alike, need for and interest in sexual intercourse varies over the course of a lifetime. It may be stronger sometimes, weaker others. Culture and religion may place restrictions on women vocalizing their need for sex, but that doesn't mean it doesn't exist.

Important Health Issues For Men

Testicular Health



- Cancer of the testes (testicular cancer) is rare, BUT it is the most common kind of cancer in men aged 15-35.
- Symptoms include:
 - A lump or hardened area, often painless, on one testicle.
 - One testicle becoming larger, firmer, or swollen compared to the other.
 - Swelling, pain, a feeling of fullness, or any change in the normal feeling or appearance of the testicles.
- Visit a doctor or health clinic for a complete check-up if you have any of these symptoms. Early detection is the key to a successful cure.

Prostate Health

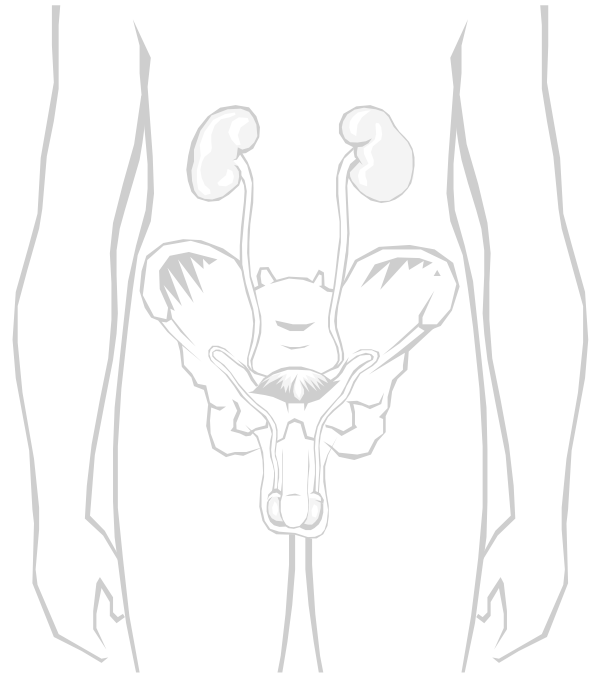
- Prostate cancer is the most common cancer in men. Over 30% of all cancer diagnosed in men is prostate cancer. Men aged 50 and over are at greatest risk.
- Early prostate cancer may have no symptoms. Later symptoms may include:
 - Problems with urination; slow urine stream; trouble emptying the bladder completely.
 - Trouble getting or keeping an erection.
 - Blood in the urine.
 - Pain, swelling, or a feeling of heaviness in the pelvis, lower abdomen, spine, or hips.
- Early detection is a man's best weapon, because prostate tumors are generally slow-growing. Routine screening is an important part of men's health.

Contact the American Cancer Society for more information about cancer risks for men
www.cancer.org

Important Health Issues For Men

Testicular Self-Examination

- The best time to do a testicular self-exam is during or after bathing, as the skin of the scrotum is more relaxed.
- First, stand in front of a mirror carefully examine the front and back of each testicle. Look for changes in the shape or size of one testicle compared to the other.
- Continue the exam by holding each testicle between the thumb and fingers using both hands, and gently rolling it between the fingers. Feel for any hard lumps or bumpy or grainy-feeling areas under the scrotum skin.
- Tumors are usually painless and easy to feel during an examination.
- Visit a doctor or health clinic if you see or feel any lumps or changes.



Early Detection of Prostate Cancer

- Starting around age 45-50, men should have a Digital Rectal Examination (DRE) and a special blood test (called PSA) that checks for traces of proteins related to prostate cancer. These tests should be done every year.
- African-American men, and men with brothers or fathers who have had prostate cancer may be at higher risk for the disease and should begin these tests at a younger age.
- If the rectal exam or the PSA test reveals a potential concern, a biopsy or sample of cells from the prostate is needed. A biopsy is the only way to confirm that a man has prostate cancer. During biopsy, a small probe is used to remove a sample of tissue from the prostate for microscopic examination.
- Talk with your doctor or health clinic about establishing a schedule for routine rectal exams and screening tests for prostate cancer.

Contact the American Cancer Society for more information about cancer risks for men

www.cancer.org

SESSION EVALUATION *Time Out! For Men* Session 6

THIS BOX IS TO BE COMPLETED BY DATA COORDINATOR:

SITE # __ __ [1-2]	CLIENT ID# __ __ __ __ [3-6]	DATE: __ __ __ __ __ __ MO DAY YR [7-12]	COUNSELOR ID# __ __ [13-14]
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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 did you learn today about men's health that you didn't know before?

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	__ __
<hr/>										[15-16]
Poor					Pretty Good					Excellent

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