

Sexual Wellness:  
Why It Matters for Individuals with  
Problem Sexual Behaviors

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SAFER SOCIETY  
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My plan for this session

- Conceptual models
- Ways to organize the information
- Activities and ideas
- Strategies for success
- Hope – for your clients and for you

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Dedication



"The practice of love  
is the most powerful  
antidote to the politics  
of domination."  
bell hooks  
1952-2021

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**Words from a colleague**

"I think many people working in this area are starving to have clients who are hungry for what they have to offer, rather than just clients who are resigned to attending a treatment program because they 'have no choice.' And I can say from experience that as I've switched over the years to the lens you are describing, my groups are so much more successful and satisfying. They get to the productive stages of the group process much faster, because they are engaged and curious and motivated. They connect with each other and relate to each other because they're all more willing to ask questions and share their stories. And, as incongruent as this might sound for this type of group, we have FUN together. They get to experience that they deserve to have pleasure and don't have to spend the rest of their lives feeling like a piece of s-t."

—Miranda Hughes, LPC, CSE, Former Sex Offender Program Coordinator  
PA Department of Corrections, State Correctional Institution at Albion

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**A thought experiment**

An individual in your care wants to have a healthy sexual relationship in the future.

You'd like to begin working with them *now* on mutual, consensual, pleasure-based sexual relationships to help their recovery.

But your employer is not too keen on "sex ed" for clients.

**Questions**

- ▶ Your own comfort level?
- ▶ Your team/administration's response?
- ▶ Obstacles? Allies? Tools?
- ▶ Long haul?

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**Why use a conceptual model to talk about healthy sexual relationships?**

- ▶ Helps frame issues
- ▶ Assists in conveying complex information
- ▶ Too often, stuck in "yes/no" binary
- ▶ Describes issues multi-dimensionally
- ▶ Includes issues of harm
- ▶ Speaks to the ethical nature of sexuality

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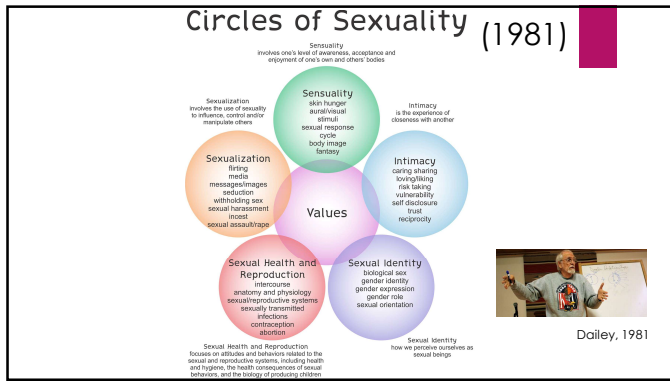
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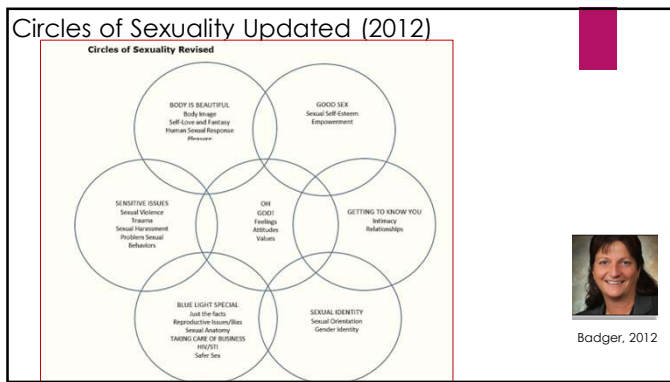
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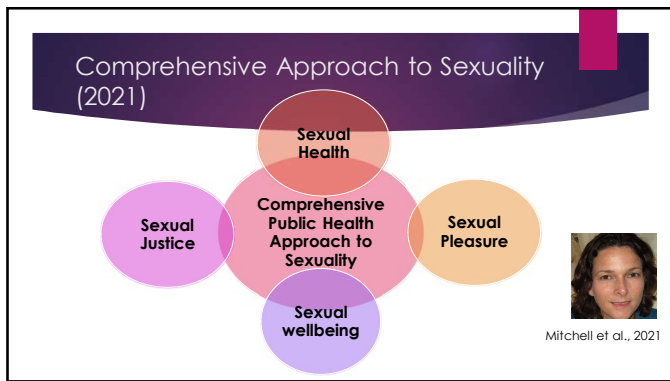
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**Sexual Health**

- ▶ Fertility and regulation
- ▶ Prevention and management of STIs
- ▶ Sexual violence prevention
- ▶ Sexual functions (desire, arousal)

Sexual Health

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**Sexual Pleasure**

- ▶ Self-determination
- ▶ Consent
- ▶ Safety
- ▶ Privacy
- ▶ Confidence
- ▶ Communications
- ▶ Negotiations
- ▶ Person-related and Event-related

Sexual Pleasure

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**Sexual Justice**

- ▶ Sexual rights
- ▶ Sexual citizenship
- ▶ Sex positive practice
- ▶ Larger efforts to ensure equity

Sexual Justice

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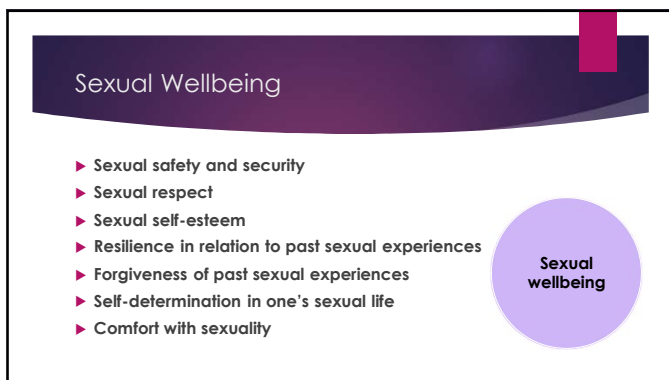
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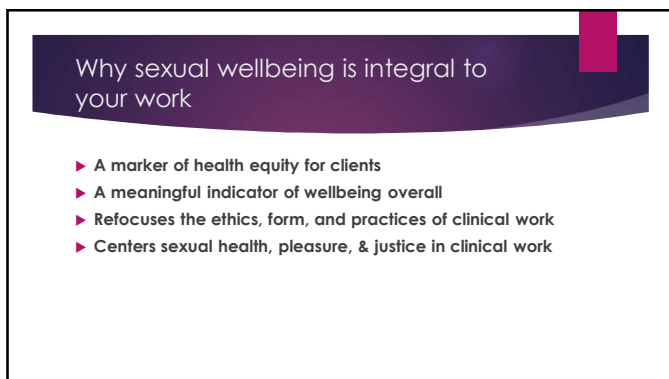
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## Sexual Wellbeing and COVID-19

- ▶ Personal losses
- ▶ Interpersonal effects of quarantine, distancing
- ▶ Pervasive economic consequences
- ▶ Widespread emotional, psychological impacts
- ▶ Enduring effects on sexual wellbeing

Allows for a shift in thinking about sexuality in our work from a binary approach to a multi-dimensional approach

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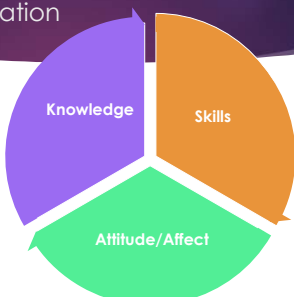
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## Sexuality Education

- ▶ Knowledge
- ▶ Skills
- ▶ Attitude/Affect



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## ACTIVITY: Using a Model in Your Work

Activity: List 3 ways the model can be useful in your work.

- 1.
- 2.
- 3.

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# SAMPLE ACTIVITIES TO PROMOTE SEXUAL WELLNESS WITH CLIENTS

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## ACTIVITY: Using Pizza to Teach Consent

Vernaccio, 2014

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**ACTIVITY: Looking at Gender and Orientation in a Sexual Wellbeing Lens**

### The Gender Unicorn

Graphic by **TSER**

The diagram features a purple unicorn with a rainbow mane and tail, a small rainbow cloud above its head, and a small rainbow unicorn icon on its chest. To the right of the unicorn are several categories with corresponding colored arrows pointing to the right:

- Gender Identity:** Female/Person/Both, Male/Person/Both, Other Gender(s)
- Gender Expression:** Feminine, Masculine, Other
- Sex Assigned at Birth:** Female, Male, Other/Intersex
- Physically Attracted to:** Women, Men, Other Gender(s)
- Emotionally Attracted to:** Women, Men, Other Gender(s)

To learn more, go to [www.transstudent.org/gender](http://www.transstudent.org/gender)  
Design by Landyn Pan and Anna Moore

© Landyn Pan and Anna Moore

22

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**ACTIVITY: THE HOURGLASS**

Consider the hourglass as a symbol:

- ▶ What felt good on your body as a child?
- ▶ At the narrowing, what traumas occurred?
- ▶ In recovery, what kinds of pleasure is possible?

23

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Remember that thought experiment we did earlier?

Consider the barriers:

- ▶ Your own confidence or knowledge?
- ▶ Your role?
- ▶ Your employer?
- ▶ Something else?

The diagram consists of four concentric circles. From the innermost to the outermost, they are: Individual (blue), Social environment (green), Physical environment (teal), and Policy (dark blue).

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## Looking at Changes in Practice at Many Levels

### SOCIAL ECOLOGICAL MODEL

**INDIVIDUAL:** Factors in an individual's biological and personal history that increase the possibility of becoming a victim or perpetrator of violence.  
*Example:* Attitudes or beliefs that support sexual violence, impulsive and antisocial behaviors, history of abuse or witnessing abuse, alcohol or drug abuse.

**RELATIONSHIP:** Factors within an individual's closest relationships, such as social peers, intimate partners, and family members that increase their risk.  
*Example:* Association with sexually aggressive peers, emotionally unresponsive physically violent or sexually coercive family environment.

**COMMUNITY:** Factors on the community level such as relationships with schools, workplaces, and neighborhoods, that may increase the individual's risk.  
*Example:* General tolerance of sexual assault, lack of support from police or judicial system, presence of sexual community structures against perpetrators.

**SOCIETAL:** Societal or cultural norms that create an environment that accepts or condones violence or inequality.  
*Example:* Inequality due to an individual's gender, religion, culture, sexual orientation, or race, inequality due to economic and social policies.

Bonnie Brenner, 1979

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## Creating Comprehensive Sexuality Education in Your Program

To make this happen:

- ▶ What KSA's do you need as an individual?
- ▶ What do you need to discuss with your team?
- ▶ What does the facility need?
- ▶ What needs to change on a policy level?
- ▶ Other concerns?

26

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## Helpful Tips to Teaching Sexuality

1. Remind yourself that it's OK to feel uncomfortable.
2. Seek "teachable moments" to share your values.
3. Don't wait until your clients ask questions.
4. Be "askable."
5. Consider the question behind the question.
6. Listen and be present.
7. Remember that facts are not enough.
8. Talk about the joys of sexuality.
9. You're talking to your clients because you care about their happiness and well-being.
10. Pleasure is possible.

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**Helpful Web Resources**

<p><a href="http://AASECT.org">AASECT.org</a>  <a href="http://Advocates_for_Youth_cancer.org">Advocates_for_Youth_cancer.org</a>  <a href="http://collegesextalk.com">collegesextalk.com</a>  <a href="http://condomania.com">condomania.com</a>  <a href="http://fatherhood.org">fatherhood.org</a>  <a href="http://MedLinePlus">MedLinePlus</a></p>	<p><a href="http://iwannaknow.org">iwannaknow.org</a>  <a href="http://www.ourbetterhalf.net">www.ourbetterhalf.net</a>  <a href="http://pfosa.org">pfosa.org</a>  <a href="http://plannedparenthood.org">plannedparenthood.org</a>  <a href="http://teenwire.com">teenwire.com</a>  <a href="http://thenationalcampaign.org">thenationalcampaign.org</a>  <a href="http://prochoice.org">prochoice.org</a>  <a href="http://Scarleteen.com">Scarleteen.com</a>  <a href="http://seweb.org">seweb.org</a></p>	<p><a href="http://sexualhealth.com/channel/view/disability/illness/">sexualhealth.com/channel/view/disability/illness/</a>  <a href="http://sticus.org">sticus.org</a>  <a href="http://Sylvia_Rivera_Law_Project">Sylvia_Rivera_Law_Project</a>  <a href="http://talkingwithkids.org">talkingwithkids.org</a>  <a href="http://teenpregnancy.org">teenpregnancy.org</a></p>
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One last thought

**What I am suggesting is daunting.**

To live as fully healthy sexual beings, your clients deserve to learn about sexual wellness.

It's quite possible that no one has ever talked with them in this way.

Why not be the person who begins to change all of that?

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Grateful for the time



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For more information and conversation:

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