Sexual Therapy 101

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Guiding Course Principles: Consent

- I will provide content/information on sexual health and recovery, emphasizing what we know from research (v. myth and societal norms/beliefs). I will sometimes use humor.
- What I ask of you: to listen (avoid side conversations, etc.), ask questions in via raise hand or popcorn in Q and A, communicate how you feel and think (avoid "they" statements and speaking for others). These are only requests from me to you.

(continued)

Guiding Course Principles: Consent

- Sometimes participants share about themselves in these workshops— we do not have confidentiality as we are not under a consent for treatment. I request we consider confidentiality anyway being mindful to avoid gossip/sharing outside class as a courtesy to each other.
- If someone shares something in here and you want to say something in group or later to that person, please ask if they want to hear what you may have to say.

Guiding Course Principles: Consent

- If at some point you find personal material is triggered (or other concerns – i.e. you are unhappy with the class content or style even) and you need or want to leave class, please do so. You and I will work out a task (reading or something) for you to get your CEUS if you need them.
- If someone you know leaves the class and you happen to notice, please respect their privacy and allow them to share with you what happened only if they choose. Make no assumptions (could be they weren't feeling well physically or didn't like the class – many options).

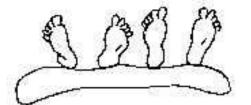
Breaks

I will aim to take a break in the morning and afternoon. Admittedly, I have been known to run late or forget a break. (You are welcome to remind me of course.)

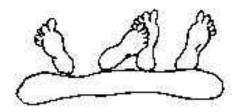
You are welcome to simply take a break when you need one – get food, beverage, stretch, use bathroom....

This class is about bodies and bodies need breaks. You may need extra breaks etc. Please take care of yourselves and your needs throughout.

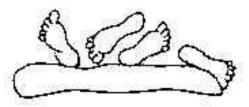
The Story of 20 Toes Told in 20 Minutes



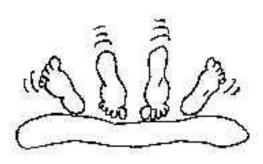
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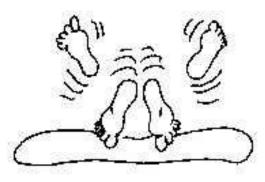
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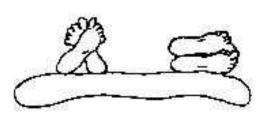
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Agenda

- Variety/Diversity
- Vulnerability/Fragility

Break

■ Ethics

Lunch

- Finish Ethics (depending on if we get our time in)
- Communication skills
- Pleasure skills will be done throughout

Pleasure Skills 1

Focusing with Fantasy

Human sexuality, as we look across disciplines, is defined by two things

- Variety/Diversity and
- Vulnerability/Fragility

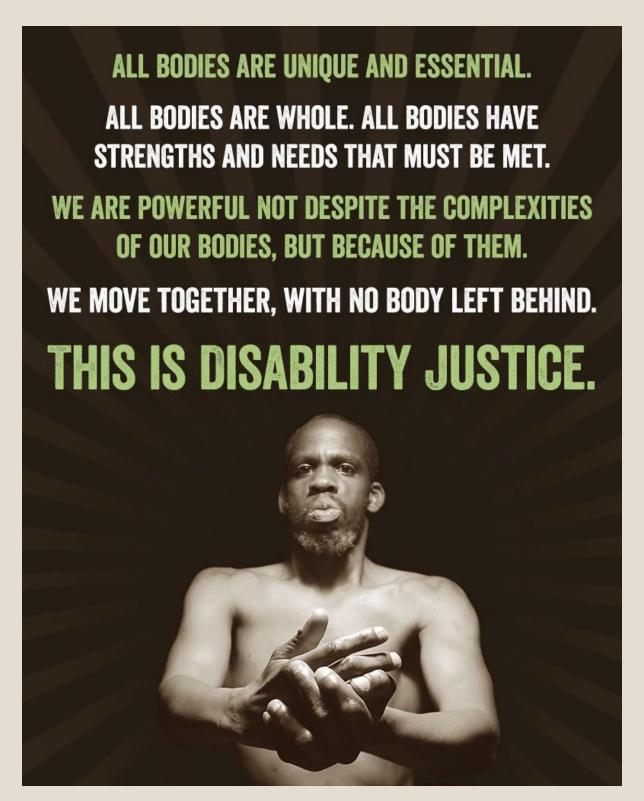
"One would expect that millions of years of evolution produced a very reliable human reproductive system with build-in redundancies, resulting in a robust sex drive, unfailing physiological mechanisms, and simple, consistent patterns of reproductive behavior and responsiveness...

"In reality, however, humans exhibit an enormous variety of sexual behaviors and preferences, while populations studies reveal a surprisingly high prevalence of sexual problems and dysfunctions. Clearly, human sexuality appears to be characterized by diversity and fragility rather than by evolutionary conformity and sturdiness."

(Verhulst & Reynolds, 2009, p. 320)

Variety

- Fat positivity and Disability justice
- Sexual configuration theory



Poster from Sins Invalid Leroy Moore

Sexual Configuration Theory (handout too)

Two parts of map: Solitary and partnered

Regions in partner sex

- Partner number
- •Gender/Sex
- Other aspects (wide range)
- Branching or coinciding
- Fluid or fixed

Pleasure Skills 2

- Physical pleasure (sensory pleasure, internal/external stimuli/experience) and how do you feel this pleasure in your body?
- Emotional pleasure and how do you feel this pleasure in your body?
- Relational pleasure and how do you feel this pleasure in your body
- Pleasure from something bigger than "me" (spiritual, cultural, identity (race, language, gender, people who share something with you), nature, physical places) and how do you feel this pleasure in your body?

Vulnerability

- In regard to the current conceptualization of the sexual response cycle (desire, arousal, plateau, orgasm, refractory period or arousal, desire, plateau, orgasm, refractory period or some other order/process with these events): This cycle is prone to problems.
- Most people will experience problems themselves or in their partners or both.
- These concerns are not limited by age, gender, race, sexual orientation, etc.
- They are cultural defined categories and culturally defined problems (i.e it's our contructs that say this process even exists and implies it should go smoothly (despite evidence to the contrary on the latter).
- And, as many cultural phenomenon: our clients may sometimes experience these events as distressing rather than ordinary.

On the other hand....What makes good sex is NOT an unfailing sexual response cycle

- Being present, focused and embodied
- Connection, alignment, being in-synch
- Deep erotic intimacy
- Heightened empathy, extraordinary communication
- Authenticity, being genuine, uninhibited, transparency
- Bliss, peace, transformation, healing
- Exploration, interpersonal risk-taking, fun
- Vulnerability and surrender

(Kleinplatz and Ménard, 2020)

The nature of human variety and vulnerability bring us to the doorstep of our ethics...

Our profession has a history and a present tradition that pathologies these two fundamental aspects of human sexuality, making us an unreliable (at best) resource and often a resource that does harm.

What if...

- Our research would suggest in our DSM we might consider other "problems" as more relevant to having great sex:
- Rather than: I cannot get aroused, I ejaculate too quickly, I cannot ejaculate/orgasm, I do no have sexual desire anymore
- We might be more on track if we had: I have trouble being present, I am struggling to be authentic and uninhibited, I find myself afraid of connection, I don't have empathy for my partner(s), I cannot seem to have fun, I am distrustful and cannot take risks, I am unable to surrender and be vulnerable...

These findings lead us right to the doorstep of our ethics....

Ethics: Do No Harm

- Media Literacy
- **DSM history** sexual problems defined primarily related to response cycle, identifies variety as problematic (gay, trans, fetishes, partialism)
- Theories that define meaning of sex in certain ways (attachment, bonding, monogamy is most "evolved," etc.) and pathologize fantasy, BDSM, Kink, asexual, aromatic, differently-abled bodies
- History of these concerns: Heteronormativity, cisnormativity, eugenics (who should/should not procreate)

Ethics: Do no harm

- -Understanding sexual diversity and fragility has significant implications in diagnosis, case conceptualizations, sessions
- -Diverse sexualities and genders are often mistreated in our systems (mental health systems specifically)
- -Dominant cultural myths emphasize threat and downplay strengths, positive aspects, growth/health and play aspects

Case examples

- Desire concerns
- 2. Self-identified "sex addict/porn addict"
- How would these be framed through the DSM 5/ICD 10?
- How would these be framed through our dominant theories (attachment/EFT, process addiction, narrative, CBT)?
- What problems do these lenses present regarding variety and vulnerability?

Lunch Break

Pleasure Skills 3

- Pleasure spy skills
- AKA Consent (include handout)

How to get to good sex

- Qualitative research
- 60-82 years old, 25 years minimum in relationship, mix of straight, bisexual, gay, disabled, half were practicing monogamy and half were practicing CNM.
- Said the best sex is in our later years.

Individual factors

- Letting go, overcoming, and <u>unlearning</u>
- Seeking, choosing, and practice
- Openness to experience, paying attention and focusing

(Kleinplatz and Ménard, 2014)

Relational factors

- Common values, agreement, and good fit
- Changing, growth, and maturing of relationship
- Ability to tolerate own anxiety in relationship, emotional independence in relationship, and self-soothing
- Knowledge of partner, knowledge of partner's body, desires feelings, erotic wishes, etc.
- Depth (in various categories: love, caring, level of trust, safety, communication, intimacy)
- Empathy

(Kleinplatz and Ménard, 2014)

Discussion

How do these findings in research inform clients' definitions and journeys to sexual health?

What skills might your clients have already that they have not applied yet to their sex life, but could?

What skills might your clients have already in their sex lives that they have not applied yet to their other goals, but could?

Superior Sex Therapist Skills

- Unlearning
- Understand vulnerability and variety are a natural as ocean waves and the diversity of species on the earth
- Empathy
- Phenomenological framing (paying attention deeply with little "theory" overall
- Know each individual (their emotions and and know about how they think/feel/experience their own body). Let each individual be unique (AVOID myths here "what women want," "what men want," etc.)
- Build connection, trust, safety
- Counter myths in conceptualizing problems using the research we have on good sex for frameworks
- Be able to tolerate our own anxiety and emotions in session
- Lots and lots of practice!

Let's practice!

Pleasure skill 4: Develop/Keep a broad definition of sex

- Many activities offer these experiences (connection and pleasure) and can be part of developing/keeping a healthy sex life
- Often have to help clients to accept a broader view of sex as it runs so counter to cultural myths
- This process can take time.
- Existential work, grief and loss
- Videos...

Videos

Foot Massage 5 minute clip from Quentin Tarantino Movie (Samuel L. Jackson and John Travolta's characters in movie Pulp Fiction) [language/content warning – slang vagina references, slang references to oral sex with a woman, sex references, N-word, violence]

https://www.youtube.com/watch?v=TD1CNqghN7Q&t=3s

Marty Klein on Foreplay 6 minute clip, irreverent, professional; references to sex acts and body parts.

https://www.youtube.com/watch?v=BfrtQpVk0MU&list=PLUYNIp 1gjerXlqdA4e-e-Tqrioe28-1A9&index=24 Questions? Comments? Thank you for coming!