FEMALE SEXUALITY: DESIGNING AN EDUCATIONAL PROGRAM

by

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DEDICATION

To the Divine Author of all,
with love and gratitude.

Thank you for your infinite wisdom, which gives us the enchantment of sex so that together we may joyfully pleasure each other and create a loving bond.
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ABSTRACT

This project is an educational program on female sexuality. The research in this project has been in several various areas, all pertaining to female sexuality. The various areas are divided into six topics, which are:

1. Understanding Old and New Programs and Redevelopment in this Area
2. Understanding Self-pleasure and Self-awareness
3. Developing Self-respect, Self-love, and Self-worth
4. Exploring the Importance of a Trustworthy and Loving Partner
5. Having a Better Understanding of Female Orgasms
6. Being Aware of the Risks in Sexual Involvement and How to Protect Yourself

This educational program is presented in workshop style for six sessions, each to last from two to three hours each session. Each topic helps women view their sexuality in a holistic way for achieving more pleasure and more fulfilling healthy sexual relationships.
CHAPTER I

INTRODUCTION AND PROBLEM

Introduction to the Study

The goal of this research is to conduct a research and develop an educational program for women which will address female sexuality. Many people have researched and written about female orgasm, sexuality and relationships. Some are within chapters of books, some of these books, in fact, are devoted exclusively to the understanding of female sexuality. Articles on the subject also appear regularly in journals and women's magazines. This study investigated the variety of material that is already available, and drew information from interviews with a female sex therapist, and a female gynecologist.

In the Seventies, women were becoming liberated with their own sexuality. Today many are faced with new, more complicated challenges. People are more interested in developing healthy
relationships, protecting themselves from AIDS and other sexually transmitted infections, and having a better understanding of their own bodies. Women are becoming liberated, and thus continue to discover new understandings and skills. Additionally, today's women are anxious to share their newly acquired facts by discussing them with other women. Through this they can become comfortable with talking to other women about their sexuality, and ultimately they can become comfortable talking to their partners as well (Penney, 1993).

Background of the Problem

In today's busy lifestyle, few women have taken the time to truly know and understand their bodies and have an understanding of how to receive sexual pleasure and have orgasms, either with a partner or through self-pleasure.

It was not until the mid nineteen hundreds that women were informed they could have orgasms and, indeed, were capable of reaching that goal. Prior to that, it was believed that orgasms were for men only. In the past the sexual purpose of the female was merely to oblige the male in his quest for sexual fulfillment (Kline-Graber & Graber, 1975).

Many women have claimed to never have experienced an orgasm. It is a common occurrence, however, for many women, to fake orgasm, either occasionally or on a regular basis (Hayden, 1982).
Area of Concern

Many women lack information about their own bodies and are confused about their marriage and relationship roles as well as their own sexuality. Further, many women lack the confidence and skill to discuss these topics with other women and their partners. So there is a need to develop a educational program that women can learn more about their own sexuality, as well as the opportunity to discuss among themselves, with a professional, their areas of concern, as well as what they are learning and discovering, which develops their own communication skills to use with their partner.

Purpose of the Study

The purpose of this study was to research and design an educational program for women. The goals of this program are:

1. To set the stage for further growth and understanding between women and their partners,
2. To teach women more about their own sexuality,
3. To provide a forum in which women can discuss with other women their own process and have the opportunity to learn how to more comfortably verbalize sexual information.
Rationale for the Study

A workshop model is a proven means to providing a safe and effective climate for learning information, practicing skills and reducing anxiety. With this workshop model it sets the stage for further growth and understanding between women and their partners. It teaches women more about their own sexuality. And it provides a form in which women can discuss with other women their own process and have the opportunity to learn how to comfortably verbalize their sexual desires.

Female orgasms is not readily addressed in the "how to" columns which have become so popular in magazines. Sexual experiences are also not readily discussed by women. The topic is kept somewhat quiet, whispered, questioned, and wondered about. No one has ever basically "showed women how" (Mellody, 1988).

With this workshop model women will hear from other women and share their discoveries and experiences. Women will have an opportunity to understand their own sexuality better and discuss it among themselves as well as with their partners.

There is a relationship between understanding the body and enjoying the body. When women have a full understanding of female sexuality, then they are reaching the fulfillment to which they are entitled.
Question Addressed In the Study

The question addressed in this study is how to assist women in becoming more sexually fulfilled. This is addressed in dividing the subject matter into six topics and creating a workshop model that will assist women in their own knowledge to their personal sexuality, which will create for women a more fulfilling and healthy sexual relationship with themselves and their partner.

Within this workshop model women have the opportunity to truly get to know their body, how it works, and what gives them pleasure? How to change old programs, to new programs that work for their greater good and sexual fulfillment. How to develop their own self-love, self-worth, and self-respect. What women should look for in a partner, and how to get what they desire. And how to protect themselves from AIDS and STDs.

Significance of the Study

This study is important to women who want to learn more about their sexuality; and who desire to benefit from learning how to communicate with other women and their partners about their sexual selves and desires.

This study is also of value to men and others who wish to engage in and support meaningful relationships with women.

It is important for women to understand their bodies, how to give themselves pleasure and how to ask for what they desire. It is equally
important for men to understand a woman's makeup and to learn how to give their partners pleasure.

All people carry with them old programs that can keep them stuck in certain belief systems. By assessing old programs and developing new ones, beliefs change and with that change a healthier whole person will evolve. This new program will assist women in experiencing a more joyful, fulfilling life.

This study is important because it will provide large groups of women the opportunity to have a further understanding of their sexuality, and it will provide opportunities for self-exploration.

One cannot be blind to the significant fear of AIDS in this day and age, so that problem will also be treated within this study. Also, single women may choose to seek a further understanding of their own bodies for self-pleasure. Additionally, women in committed relationships may choose to further their own pleasure with an understanding of sharing sexual pleasure with their partners. This new found understanding will enhance the relationship and create stronger, healthier ties.

"... it is lack of knowledge, not psychiatric problems, that prevents most women from having orgasms" (Kline-Graber & Graber, 1975, p. 16).
Definition of Terms

The following is a list of terms and their definitions which are utilized in this study.

Astroglide. This is a light, modern lubricant. Specially created to enhance the comfort and ease of all intimate activity. Other lubricants are: KY Jelly, Probe, ForPlay.

Breasts. Breasts are parts of the female erogenous zones. They can give added sexual pleasure and assist in stimulating orgasms.

Clitoris. "The clitoris is a small rounded organ which becomes erect during sexual excitement, but otherwise it can be quite difficult to find. Its head is firm to the touch and about the size of a small pea" (Cauthery & Stanway, 1985, p. 23). The clitoris has very sensitive nerve endings. The body of the clitoris is similar to the man's penis, the clitoris head is similar to the man's glans, and the clitoris hood is a form of foreskin to protect the head from extreme sensitivity.

Dildos. Insertable toys designed to create a pleasurable sensation of fullness in the vagina.

Erogenous zone. The erogenous zones are the parts of the body that create arousal when touched, kissed, or fondled.

Female orgasm. "An orgasm is an automatic reflex caused by stimulation to the clitoris that expresses itself in vaginal contractions, which last eight-tenths of a second each" (Beck, 1993, p. 61). This pleasurable experience may also be experienced by the stimulation of the G-spot, or other erogenous zones of the body.
**Foreplay.** Foreplay is a form of touching, hugging, kissing, caressing, and licking and is an important part of stimulating a woman sexually and preparing for an orgasm.

**Foreskin.** The foreskin, if present, covers the penis (a number of males are circumcised).

**Glans.** The glans are located at the end, or head, of the penis, which is the most sensitive part.

**G-spot.** The G-spot is thought to be a small pea-size area of blood vessels, glands and sensitive nerve endings situated halfway up the front of the vagina, just behind the pubis. Different reactions may be experienced if the G-spot is touched; these extend from sexual excitement to the need to urinate, and sometimes the release of a special fluid which is neither a lubricant nor urine. The G-spot is named after Dr. Ernest Gratenberg, a German gynecologist who first described it (Hessel, 1992).

A man may have a so-called G-spot too, and he may have both a penile orgasm and a "perianal orgasm." The man's G-spot is located in the area between the anus and the scrotum, but can also be stimulated from the front wall of the anal canal (Hessel, 1992).

**Heterosexual.** Heterosexual refers to sexually desiring a partner of the opposite sex.

**Homosexual.** Homosexual refers to sexually desiring a partner of the same sex.
Kegel exercises. Kegel exercises were developed by Arnold Kegel, M.D., a gynecologist at the University of Southern California. He developed a method of teaching women to contract the vaginal muscle by using a passive-resistant device attached to a biofeedback mechanism--the Perineometer. This exercise increases vaginal sensation and can increase the achievement of orgasms.

Labia majores. The labia majores are the larger outer lips surrounding the genitals of a woman.

Labia minores. The labia minores are the smaller inner lips surrounding the vagina and urethra of the women.

Masturbation. This is a clinical term for an action used to self-stimulate or mechanically stimulate the sexual organs to an orgasm.

Multiple orgasms. More than one orgasm or several orgasms within one love making session. There is a definite resting period between climaxing; so it's basically a series of single orgasms with several minutes in between breaking up the tension.

New Programs. New programs are new beliefs a person chooses to give to themselves, after rethinking to see what thought patterns are healthy for them. One way of creating new programs is to use self-talk (Helmstetter, 1982).

Old Programs. Old programs are beliefs that a person was brought up with, the old messages that were given to them as a child. In many cases a person still holds onto old programs and continue to feed them (Helmstetter, 1982).
Oral sex. Oral sex is a technique in love making that involves using the mouth, tongue, and lips on the genital area. Cunnilingus is a man to a women. Fellatio is a woman to a man.

Partner. Partner is used in this research to refer to the person with whom the woman is sexually involved. This person could be a spouse, boyfriend, or significant other, and includes male or female, depending upon whether the woman is heterosexual or homosexual.

Penis. The penis is part of the male genitalia. It contains special veins, called corpus cavernosum penis. When the blood is blocked here the penis swells up and becomes thick and hard.

Pre-orgasmic. The definition of pre-orgasmic is a chosen term used by sex therapist. The belief is: that no one is "non-orgasmic" or "frigid." Some women have not yet experienced orgasm, because they are still in the process of experiencing how. All women, by nature, are orgasmic, which means they are capable of having orgasms.

Pubococcygeus muscle. "... the pubococcygeus muscle is one of the supportive circumvaginal muscles and, as such, aids in holding the pelvic organ in the proper position" (Kline-Graber & Graber, 1975, p. 77).

Scrotum. The scrotum is a sac of skin that covers the testicles.

Self-awareness. This term is used towards having a better understanding of self, the body, and how it works.
Self-pleasure. This is a term the author is choosing to use instead of masturbation. The author believes that masturbation gives connotation to an old program that is still often considered a "no-no." Self-pleasure is a technique in giving oneself pleasure, and goes beyond receiving isolated sexually pleasure.

Sex toys. Sex toys are a variety of things used to create more fun while having sex, such as, vibrators, dildos, feathers, massage oils, etc. Whatever objects that are desirable and pleasurable for both partners are acceptable and fun to try.

Testicles. The testicles produce sperm in males.

Vagina. The vagina is an opening in the genital area of a woman. This is the area into which a man often ejaculates for sexual pleasure and implants sperm for the impregnation of his partner. It is also considered the birth canal for the delivery of babies.

The vagina is only a potential space (Cauthery & Stanway, 1986). The walls of the vagina have very few nerve endings, and they are essentially insensitive (Sherfey, 1966). Near the entrance and outer one-third of the vagina, are reported as highly pleasurable and erotic by many women (Kline-Graber & Graber, 1975). This is also the area that the G-spot is located.

Vibrator. A vibrator is a mechanical device used to stimulate the genitals. Vibrators come in different shapes and sizes and are electrical or battery operated.
Assumptions and Limitations of the Study

The interviews in this study are assumed to represent typical attitudes, beliefs and needs of men and women concerning female sexuality.

The limitation of the interviews is that they were conducted on a small sample which were not randomly selected.

Organization of the Remainder of the Study

The organization of the remainder of the study is as follows:

Chapter two includes a review of the pertinent literature, interviews, and experience the researcher has discovered. The major themes include:

1. Understanding old and new programs and redevelopment in this area;
2. Understanding self-pleasure and self-awareness;
3. Developing self-respect, self-love, and self-worth;
4. Exploring the importance of a trustworthy and loving partner;
5. Having a better understanding of female orgasm;
6. Being aware of the risk in sexual involvement and how to protect yourself.

Chapter three provides a description of the methodology chosen for the study. The methodology used is based upon what is already in
print, interviews with a female sex therapist and a female gynecologist, and the input from selected males and females.

**Chapter four** contains the summary, conclusions and recommendations.

**Appendix** includes the educational workshop developed on female sexuality, in both outline and lesson plan form, including hand outs for the educational program.
CHAPTER II

REVIEW OF THE LITERATURE

The review of the literature is condensed into six topics related to female sexuality as drawn from the author's personal and professional experiences. The literature related to each topic is presented in a form that is useful as a resource for teachers of the workshop produced by this study. The review is not meant to follow the traditional approach of reporting relevant literature from a breadth and a depth perspective.

This study is set up to be used in a workshop form. It can be varied according to the need of the institute as well as to the people attending. This specific workshop is applied at the Franciscan Renewal Retreat Center, in Scottsdale, Arizona. It runs for six weeks, one night a week, for two hours. An added hour would be extremely beneficial to make further use of videos and discussion time. This method of learning is both conducive to the facilitator as well as the adult learners in engaging in purposeful development and growth.
Female sexuality has many complex components. The author divided the exploration into six areas to create a healthy whole concept and with some areas intertwining. The six areas are:

1. Understanding old and new programs and redevelopment in this area;
2. Understanding self-pleasure and self-awareness;
3. Developing self-respect, self-love, and self-worth;
4. Exploring the importance of a trustworthy and loving partner;
5. Having a better understanding of female orgasms;
6. Being aware of the risk in sexual involvement and how to protect yourself.

Understanding Old and New Programs and Redevelopment In This Area

As much as seventy-seven percent, if not more, of what people think and say to themselves could be working against them (Helmstetter, 1982). The programs that people grew up with may still be with them, and may still be using today, unless they have learned to reprogram their thoughts and beliefs.

Helmstetter (1982) provides an in depth discussion of the value of (beliefs) programs in influencing ones behaviors, the following concludes his process:
The elements that most directly controls success or failure is the behavior--what is done or not done. Behavior means action. How people act, what they do, each moment of each day will determine whether or not they will be successful that moment or that day in anything that they do (Helmstetter, 1982, pp. 63-64).

Every action a person takes is first filtered through his/her feelings. How a person feels about something will always determine or affect what they do and how well they do it. Feelings directly influence actions and behavior. Feelings about anything will affect the person's actions. It doesn't have to be feelings of like or dislike, joy or fear; all feelings affect the act. If feelings are positive and productive, consistent actions will follow.

Feelings are created, controlled, determined, or influenced by attitudes. Attitudes are the perspectives from which life is viewed. Whatever attitude a person has about something will affect how he/she feels about it, which in turn determines what actions will be taken, attitudes play an important part in helping people become successful. Attitudes are no accident. They don't just happen. Attitudes are created, controlled, or influenced entirely by beliefs (Helmstetter, 1982, p. 65)

Beliefs will determine attitudes, which create feelings, and direct actions, and consequently, help a person to do well or poorly, succeed or fail. Beliefs do not require something to be true. They only require a person to believe that something is true. That means that most of what reality is, is based on what a person comes to believes to be true.
Whatever a person believes about themselves affects what they do and the results they get. A belief will turn out to be correct—whether it was true or not. All social behavior is conditioned—no one is born popular and socially adept. Every social grace, skill, and comfort level that a person has, successful or unsuccessful, is based on what he/she believes about themselves. Beliefs are not accidents of nature. Beliefs are created and directed entirely by the person. Whatever a parent taught a person, can be relearned into a positive program, this also goes for teachers and other people who have influenced ones belief system (Helmstetter, 1982, pp, 68-69).

People believe what they are *programmed* to believe. The conditioning, from the day a person is born, has created, reinforced, and nearly permanently cemented most of what they believe about themselves and what they believe about most of what goes on around them. Whether the programming was right or wrong, true or false, the result of it is what they believe.

In logical progression, the beliefs determine the attitudes, affects the feelings, directs the behavior, and determines the success or failure.

1. Programming creates beliefs.
2. Beliefs create attitudes.
3. Attitudes create feelings.
4. Feelings determine actions.
5. Actions create results. (Helmstetter, 1982, p. 70)
That's how the brain works. If a person wants to manage themselves in a better way, and change their results, they can do so at any time they choose. By starting with the first step changes the programming.

All our sexual programming started in early childhood. By looking at earlier programming a person can ask, "Is this working for me in my best interest, and the best interest of my partner?"

Programming can easily be changed by what a person says to themselves—which is called self-talk. Self-talk is an easy solution to changing beliefs. Once beliefs are changed a person has created new attitudes and with new attitudes comes new feelings, and with new feeling comes the actions and results a person is looking for in life and their sexuality.

Self-talk is a new script a person gives to themselves. This is a free choice. A choice of any script and new belief a person chooses to adopt. As they repeat this self-talk over and over, it then becomes a new program. A program they have freely given to themselves.

If a person is not satisfied with their sexual life, and want to change it--just look at the results, actions, feelings, attitudes, beliefs--and change the programming--by using a new form of self-talk.

(Helmstetter, 1982)
Understanding Self-pleasure and Self-awareness

Masturbation, sex therapists tell us, is a great way to learn about our sexuality. As stated by Lonnie Garfield Barbach, author and sex therapist, "It lets you enjoy sex without any negative consequences...You can't get pregnant. You can't get AIDS. You can't get your heart broken. It allows you to really explore" (Jacobs, 1993. p.171).

And stated by Sharon Frank, a sex therapist at the Masters & Johnson Institute in St. Louis,

The more you masturbate, the better your sex life is going to be. You're priming the pump and getting the juices flowing. It also puts blood into the pelvic region and makes your vagina healthier. It relieves tension, inducres endorphines. It can really pick you up spiritually, and relax you. And it doesn't interfere with your sex life with your partner. It actually enhances it (Jacobs, 1993, p. 171).

No matter how good it is, and no matter how many do it-- a recently released national survey, reports that 38 percent of all women do it regularly--masturbation remains one of the last taboo subjects. Even those who are most open about sex are too shy to admit playing with themselves (Janus, 1993).

Nineteen percent of girls and boys according to The Janus Report, (1993) discover masturbation at the same pace until they're ten years old. After that, women become more inhibited and discover
masturbation in smaller and smaller increments. Between the ages of 11 and 13, 53 percent of men and only 25 percent of women commence masturbating.

Research shows that women stop exploring because someone, a parent, a teacher, maybe even a friend, convinces girls that when they touch themselves "down there" they are doing something very, very bad. Of course, boys are also punished and threatened with eternal damnation for playing with themselves, but somehow it's a bigger sin for girls. They are still raised with the idea that their sexual role is giving themselves to others. The fact that a woman is willing to satisfy her needs by herself violates both the rules of religion (sex is for making babies) and the rules of society (sex is for giving pleasure to men) (Jacobs, 1993).

While every other nuance of female sexuality has been exploited to spice up movie plots and sell soft drinks, masturbation is very rarely depicted. It isn't considered glamorous. It isn't considered romantic. And to some it isn't even considered sexy. And often there is this underlying idea that if you masturbate, there's something wrong with you because you can't get anything better.

In the movie Single White Female, Bridget Fonda, radiant with sensuality, crawls out of bed where she has just been making love with her handsome boyfriend. Hearing strange animal like sounds in the night, she tiptoes through her dark apartment until she locates the source of these unsavory noises. She stands at the open bedroom door of
her less attractive pathologically lonely roommate, watching as she withers on her bed with one hand below the sheets rubbing her genitals and the other hand caressing her breasts. Horrified, Fonda scurries back to her bedroom. The message: self-stimulation is the sex life of desperate women. The scene brings to mind the nineteenth-century belief that masturbation causes insanity and, in the particular case of females, nymphomania and self-destructive tendencies (Jacobs, 1993).

One reason women lag behind men in learning about masturbation is the fact that female genitals are simply less accessible, so the potential of the clitoris for giving pleasure is not always as obvious to little girls as the potential of the penis is to little boys.

In her work at Masters & Johnson, Sharon Frank (1993) observes that female patients who can't achieve orgasm during sex usually don't know how to masturbate. "We might have the man stimulate a woman, her hand on top of his, explaining 'this feels better, this doesn't feel better.' Often that's the first time she's really explored it."(Jacobs, 1993, p. 171) Frank also recommends that her patients read Dr. Barbach's book, *For Yourself*, (1975) which offers detailed instructions for the novice.

Joani Blank, the owner of Good Vibrations, a sex-toy store for women in San Francisco (catalog available by calling 415-974-8990), has published a book by the same name. Good Vibrations: The Complete Guide to Vibrators (Down There Press, Burlingame, CA, 1982) offers advice on high-tech masturbation. "Start touching yourself with your
vibrator," writes Blank. "If it has two 'speeds' try them both...Tease yourself. Stop and start again. Play with your arousal level. Stop 'trying.' This is supposed to be pleasurable, not hard work" (Blank, 1982, p. 37).

The slow acceptance of masturbation as something that normal, attractive, happy women do is one sign that the balance of sexual power has shifted

Now that women are being more honest about the fact that they masturbate, perhaps it's time to come up with a new word for this activity, something sweet and erotic that doesn't sound clinical.

Joseph Kramer, a San Francisco-based sex researcher who runs masturbation workshops, coined the term "soloving," as in soloving, because he didn't like to say masturbation (Jacobs, 1993, p. 171).

"Self-awareness" suggest the exploration of the body and a deeper understanding of what works and how it works. "Self-pleasure" creates more than the note of masturbation, but also the "whole" need of giving self-pleasure; through the environment that surrounds a women, to the soft touches that makes a women feel loved by herself (Jacobs, 1993, p. 171).

Women being able to achieve orgasm by themselves doesn't mean that they shouldn't have lovers. It means that they can enter a sexual relationship from a position of strength, knowing what they want, how it should feel, and what to communicate to their partner.
A man does not have the sole responsibility for bringing a woman to an orgasm. Most men want to know how to please their partner, but rely on the women to communicate this information to them. Men desire their women to be orgasmic, and receive a great deal of their sexual arousal from knowing they are giving their lover pleasure—however she may enjoy it.

What a woman learns in her own bed, bathroom, bedroom, or were ever, all by herself; makes time later spent with subsequent True Loves much, much nicer (Jacobs, 1993).

Developing Self-respect, Self-love, and Self-worth

Self-evaluation is the basic foundation from which a person acts and reacts, chooses values, set goals, and meets the challenges that confront them. Responses to events are shaped in part by whom and what a person thinks they are--self-respect, self-love, and self-worth.

Self-respect is to consider the self deserving of high regard. When one has self-respect one refrains from interfering with the true-self that is meant to be. When having reference to a true concern for self, and a positive regard this is called self-respect.

Self-love is to truly take time to know the person that lives within, and to cherish one's being. To feel a passion, devotion, and tenderness for the person that exist. To be enthusiastic with the self, and what one is becoming. Only when one loves self are they truly capable of loving another.
Self-worth is the value of how someone sees themselves. The value of measuring their qualities and by the esteem in which it is held.

Self-esteem is the experience of being competent to cope with the basic challenges of life and of being worthy of happiness. It consists of two components. Self-worth--confidence in the ability to think, earn, choose, and make appropriate decisions. Self-respect--confidence in the right to be happy; confident that achievement, success, friendship, respect, love, and fulfillment are appropriate to own (Branden, 1993).

The basic challenges of life include such fundamental issues as being able to earn a living and take independent care of self in this world; being competent and responsible in human relationships; and having the resilience that allows a person to bounce back from adversity and persevere in aspirations.

To say that self-worth is a basic human need is to say that it is essential to normal and healthy development. It has survival value. If a person lacks positive self-worth, psychological growth is stunted. Positive self-worth operates as, in effect, the immune system of the spirit, providing resistance, strength, and a capacity for regeneration. When self-worth is low, resilience in the face of life's problems is diminished. The tendance to be more influenced by the desire to avoid pain than to experience joy; negatives can then have more power than positives (Branden, 1993).

For women and men alike, if they have a realistic confidence on their worth, if they feel value within themselves, they tend to respond
appropriately to challenges and opportunities. Self-worth empowers, energizes, motivates. It inspires a person to achieve and allows them to take pleasure and pride in their achievements.

Self-worth seeks the challenge and stimulation of worthwhile and demanding goals. Reaching such goals nurtures self-respect. Lack of self-respect seeks the safety of the familiar and undemanding. Confining self to the familiar and undemanding serves to weaken the true-self.

The more solid one loves self, the better equipped one is to cope with troubles that arise in relationships and other issues.; the quicker one picks oneself up after a fall; the more energy one has has to begin anew. Setbacks will not stop the most self-confident of women who have experienced disappointing marriages or love affairs, and it will not devastate a confident woman's ego that she will arm herself against intimacy to avoid the possibility of future hurt, at the cost of her vitality. (Branden, 1993)

The higher one's self-respect, the more ambitious one tends to be, in terms of what one hopes to experience in life--emotionally, romantically, intellectually, creatively, spiritually. The lower one's self-respect the less they aspire to, and the less they are likely to achieve. Either path tends to be self-reinforcing and self-perpetuating.

The higher one's self-respect, the stronger the drive to express oneself, reflecting the sense of richness within. The lower one's self-respect, the more urgent the need to "prove" oneself--or to forget oneself by living mechanically and unconsciously.
The higher one's self-respect, the more open, honest, and appropriate one's communications are likely to be, because one believes one's thoughts have value and therefore are welcome rather than fear clarity. The lower one's self-respect, the more muddy, evasive, and inappropriate one communications are likely to be, because of uncertainty about one's own thoughts and feelings and anxiety about the listener's response.

The higher a person's self-respect, the more disposed they are to form nourishing rather than toxic relationships, because like is drawn to like, health attracted to health. Vitality and expansiveness in others are naturally more appealing to persons of high self-respect than are emptiness and dependency. Self-confident women and men tend to be drawn to each other. Alas, insecure women and men are also often drawn to each other and form destructive relationships. (Branden, 1993)

If a women hopes to achieve a happy relationship with a man no factor is more important than self-love--in both the man and the women.

There is no greater barrier to romantic success than the deep-seated feeling that you are unlovable. The first love affair that must be consummated successfully in this world is with oneself; only then is one ready for a healthy true relationship. Only then will one be fully able to love and only then will one be fully able to let love in--to accept that another person truly loves them. Without that confidence, another
person's love will never be quite real or convincing; and out of anxiety one may find ways to undermine it (Branden, 1993).

When a women possess self-love, she tends to treat others well and to require that they treat her well. She is clear about her boundaries and about what is and is not acceptable behavior in the man of her choice. She does not accept ill-treatment for any reason. She identifies love with joy, not suffering. She feels worthy of love, just as she feels worthy of success in her life.

Women who are struggling to build a more positive self-concept sometimes ask, "Do men want self-love in a woman?" And the answer is, men who have a decent level of self-love do value it in a woman; they do not want a frightened child for a partner. And what would a woman of self-love want with a man so insecure that her confidence scared him?" (Branden, 1993, p. 56).

Having self-love is an intimate experience; it resides in the core of one's being. It is what one thinks and feels about oneself, not what someone else thinks or feels about them. A person can be loved by family, mate, and friends, and yet not love oneself. A person can be admired by associates, and yet regard oneself as worthless. A person can project an image of assurance and poise that fools almost everyone and yet secretly trembles with a sense of inadequacy. A person can fulfill the expectations of others and yet fail at their own; a person can win every honor and yet feel they have accomplished nothing; a person can be adored by millions and yet wake up each morning with a sickening sense
of fraudulence and emptiness. To attain "success" without attaining positive self-love is to be condemned to feeling like an impostor anxiously awaiting exposure (Branden 1993).

The acclaim and love of others does not create self-love. Neither do material possessions, social status, marriage, parenthood, sexual conquests, or face-lifts. These things can sometimes make one feel better about themselves temporarily or more comfortable in particular situations. But comfort is not about self-love. Being true to self is self-love. Finding that special preciousness within.

When one truly loves oneself they care about the whole being, what they eat, there overall health, keeping their body in shape, their spiritual and emotional existence, openness to personal and mental growth.

The key virtues or practices by Nathaniel Branden, (1993), an expert on self-esteem and author of The Power of Self-Esteem are:

- Living consciously,
- Self-acceptance,
- Self-responsibility,
- Self-assertiveness,
- Living purposefully, and
- Personal integrity (p. 58).

As far as building sexual self-esteem it takes sexual confidence. It is probably the most potent aphrodisiac known to man or woman. Sexual attractiveness turns out to be a self-fulfilling attitude of the
highest order: if a woman sends out signals that she feels sexually attractive, men respond to her as if she were sexually attractive (Akeret, 1993).

No woman wants to encourage unsolicited attention from strange, undesirable men. But having sexual confidence it's synonymous with gaining unwanted attention. Once a woman has sexual confidence, it helps her to control who she allows to pay attention to her--and who she doesn't (Akeret, 1993).

Sexual self-esteem is the product of how a woman feels about herself as a sexual being. When she allows herself to feel the joys and intimacies of lovemaking without fearing how she'll be judged, she begins to feel more sexually attractive and competent. And, most important of all, she feels worthy of the pleasures of sexual intimacy. Instead of being preoccupied with doing it "right", she can focus on feeling her sexuality completely. The immortal truism about sex is: women do it best when they do what comes naturally (Akeret, 1993).

When one truly loves self, respects self, and values their own worth then, and only then, are they living the true self they are created to BE. And making the positive choices that will work in their best interest. How a person loves themselves is a choice. How one respects themselves is a choice. And how one values their worth is a choice. Make wise choices to work for you, not against you.
"You are everything that is, Your thoughts, your life, your dreams come true. You are everything you choose to be. You are as unlimited as the endless universe" (Helmstetter, 1986, p. 255).

Exploring the Importance of a Trustworthy and Loving Partner

First of all, it's important that a woman have a genuine physical attraction to her partner. This may not necessarily be love at first sight. But it is essential that there be a feeling of chemical harmony when physically close to one another. That desirable feeling of wanting to experience flesh next to flesh. It's difficult to create chemistry where none exists, but it's possible to escalate the spark that's already there.

There are chemicals in the body, called pheromones, that cause the opposite sex to be attracted to one another. Once released by the body, this chemical substance influences the physiology and behavior of the persons mate. This is important for the survival of a long lasting relationship (Beck, 1993).

If a person is attracted to their partner's natural body odor, that's a good sign. In short, a woman's pheromones should like her partner's pheromones (Beck, 1993).

Sexual chemistry needs to exist between partners in some form in order to distinguish relationship from friendship. The sexual erotic connection binds two people together in a very primal, very physical way that's difficult to experience with someone unless they have sex
with that person. A person can usually detect this chemistry in a very short period of time. If they haven't picked it up by the sixth date, it's probably not there. Often the first form of intimate touching creates a memorable experience (hand touching, a prolonged hug, or even an intimate kiss). This form of touch can be called a resonance—an energetic vibration (De Angelis, 1992).

One tends to resonate with (or are turned on by) people whose vibrational energy is similar to their own. They often like doing the same kind of things, and eating the same kind of foods. And are often attracted to the same kind of people, and may even have mutual friends.

Physical attraction and compatibility are not the same thing. Physical attraction is one element of a compatible relationship, but it alone will not be enough to create compatible partnership. For total compatibility one also needs mental attraction, emotional attraction, and spiritual attraction. Otherwise the relationship will be a case of "lust blindness", based purely on sexual resonance (De Angelis, 1992).

When meeting someone and they aren't instantly attracted to one another, it doesn't necessarily mean that they won't become attracted to them as they get to know them better. The attraction should not just be based on how a partner looks, but also who they are and how a person feels about themselves when they are with them. For this reason, gradual attraction may actually be more genuine than "lust at first sight." Because the person is attracted to the WHOLE person (De Angelis, 1992).
Studies have shown that couples who were friends before they became romantically involved have more successful and satisfying relationships. If a person becomes involved with someone based only on chemistry and attraction, they may wake up one day and find out that they don't even like this person or have very little to talk about over dinner (De Angelis, 1992).

If a person gets sexually involved with a someone too soon they miss out on knowing what each others true attributes really are and how compatible they may be (De Angelis, 1992).

Sometimes a break is needed when the relationship is new. One can loose their boundaries, and may need to reclaim them. This can take place when one starts to feel uncomfortable with the closeness and ask for space. If space is given readily and freely this provides for the opportunity for two people to explore past issues, address the present situation, and explore if this is a fit relationship for them. Is there something else besides lust involved in the relationship? Can two people still remain friends, respect one another, and have each others best interest in mind, in other words, still deeply care for the other and wish for each others greater good. Space provides opportunities for growth for both people. And to look at past and present issues that need to be delt with and healed (Wylie, 1994).

There is a tendency to carry excess baggage from childhood and past relationships. Is there some issues that need to be addressed and healed. If so this is a good time to take on that responsibility. Is there
some stuff that one wishes their partner had, or could improve upon? If they did would this create for a better relationship, and they being a better person? If so let them know in a kind loving way what they see, or what they hope for in them and the relationship. In the long run only good can come from separation. Either to see changes can be made for a better relationship, or that the relationship is unfit for one or both persons involved (Wylie, 1994).

This time creates the opportunity to think, see the whole picture, and to grow. One shouldn't expect an endless amount of time. Within six months if one doesn't see some changes taking place for the better, it's time to move on. All people can change, if they choose to, it can happen as quick as a blink of an eye. Even though some behavior may take more time to be adopted. There is no use putting one's life on hold forever, no matter how much they may love a person. By staying stuck, may also be keeping them stuck, and visa versa, so move on is the wise thing to do. If it's meant to be they can catch up. And if it's truly meant to be the person will be free and open when they come around (Viscott, 1987).

These are questions in a quiz, in De Angelis's book (1992) *Are You the One for Me?*, to help determine how sexually attracted partners can be. It measures how a person feels about their partner's sexual attractiveness, not their ability as a lover or the frequency of the lovemaking. It is rated from 4 points to 0 on the licker scale, from
almost always, frequently, sometimes, once in a while, to rarely or never.

1. I like the way my partner looks in clothing.
2. I like the way my partner looks naked.
3. I like the way my partner's skin feels.
4. I like the way my partner smells.
5. I like the way my partner tastes.
6. I like the way my partner holds me.
7. I like the way my partner kisses me.
8. I like the way my partner touches me when we aren't having sex.
9. I like the way my partner touches me when we are having sex.
10. I look forward to having sex with my partner.
11. When I think about having sex with my partner, I feel physically aroused.
12. I feel sexually excited when my partner's body is pressed against mine.
13. When I don't have sex with my partner for a while, I miss it.
14. I like the way my partner moves his or her body.
15. I think my partner is sexy (p. 287).

Sexual life style is also important for a lasting sexual relationship. It's not unusual that the first several months of a sexual relationship are very passionate and frequently sexually intimate. The true test is over time, as far as desiring sex on a frequent to non-frequent basis. The closer the sexual style to that of a partner, the more sexually compatible they'll be; conversely, the farther apart their sexual styles, the less sexually compatible they'll be (De Angelis, 1992).
Aside from love, what qualities do American women value most in a man? The winning quality begins, as Aretha Franklin sang it, with an R and ends with a T. RESPECT.

As Garth Brooks sings, "Somewhere other than the night, she needs to hear 'I love you'' (Brooks, 1992).

In a recent national survey, done by New Women magazine (October '93), the three qualities American women value most in a man are: that he respect her (72%), that he be a good friend (66%), and that he have the same values (52%). This survey on relationships was conducted by the Roper Organization. The results of the poll are based on interviews with 764 nationally representative American women between the ages of 17 and 60.

In Graham Masterton's book *How To Drive Your Woman Wild in Bed* (1987) he stresses the importance of interest and care, being understanding, patients, and most of all respect.

A women wants to know she is loved in bed, as well as out of bed. She wants to know that the man she is with truly has her best interest in mind. She wants to be shown respect at all times and all places. And by no means does this relinquish FUN. Fun can be done and shown in respectful ways. Play is important to fulfilling sex.

In watching children in unsupervised games or play? They make up their own rules as they go along. They laugh a lot. They get rowdy. They wear big grins on their faces. They get out of breath. They say things out of the ordinary. They have FUN. Sex to adults is playtime.
Time to make up the rules as you go along. Time to laugh, giggle, get rowdy, make all kinds of noises—that are out of the ordinary, and above all have FUN (Wylie, 1994).

A woman wants to know she can be trusted and that she is with a trustworthy partner. Lies are not acceptable. This is the first way to lose a person's trust. Honesty is important. No one likes to hear lies. No matter how good it may sound at the time—it's pain to pay later.

Speaking the truth is beneficial. A person then knows where they stand in the relationship, in seeking and giving sexual pleasure, and what they may expect or not expect for the future.

No one is perfect. Each and every person holds some flaws. Some can be changed, some can be covered over, and some just need to be accepted. Some people are willing to make changes and some are not, and some just don't get it. If a partner would be a better person by making a change, a suggestion can be made to them in a loving and kind way. And at the same time pointing out their good attributes, so they know that a person cares. Each individual must decide what they are willing to accept and not accept in a relationship (Wylie, 1994).

This is the ninetys and people are dying of AIDS, and women are on the upswing. It's each person's responsibility to protect themselves and encourage their partners to do the same. This is another very important reason for trust and honest in a sexual relationship. If monogamy is not the choice of both partners, then safe/protected sex is necessary and a must (Penney, 1993).
If a lasting healthy sexual relationship is desired these six qualities, according to Barbara De Angelis's recent book *Are You the One for Me?* (1992), should be looked for in a partner.

1. Commitment to personal growth.
2. Emotional openness
3. Integrity
4. Maturity and responsibility
5. High self-esteem

Commitment to personal growth means:

A partner is committed to learning everything they can about how to be a better person and a better partner.

A partner is willing to receive help and guidance in the form of books, tapes, lectures, seminars and counseling if necessary. There is no way a relationship can work if one partner refuses to seek help when necessary.

A partner is conscious of his/her blind spots and childhood programming, and is aware of what emotional baggage has been brought into the relationship. It's dangerous to become involved with someone who's oblivious to personal weaknesses and problem areas.

A partner has personal goals for their own self-improvement, and can see specific, positive changes over time (De Angelis, 1992).

Emotional openness means:

Having feelings.
Knowing what they are feeling.
Choosing to share feelings with a partner.
And a partner who knows how to express feelings.
When a partner can't identify and share feelings with a partner, then he/she is not ready to be in an intimate relationship. Staying in a relationship with a person who cannot share feelings is a form of self-punishment.

Women deserve to have someone in their life who show them their love and appreciation on a consistent basis.

The opposite of emotional generosity is emotional stinginess—hoarding love and emotions as if they were in limited quantity and offering tiny pieces of one's heart. Unless a woman wants a full-time job as a teacher, she should avoid relationships with emotionally stingy people (De Angelis, 1992).

Integrity means:

Essential ingredients for a healthy relationship are honesty, integrity, and trustworthiness.

Not telling the truth is the most significant way couples kill passion and destroy their intimacy.

People who frequently bend the truth may have a "life isn't fair" attitude, and they consider dishonesty a strategy for getting an advantage.

Finding a partner who has integrity means seeking:
- Someone who is honest with themselves.
- Someone who is honest with others.
- Someone who is honest with their partner.

A partner who is honest:
1. will not hide parts of their life or personality from their partner
2. will not tell their partner only what they want to hear in order to protect themselves.
3. will share the truth without the partner having to trick him into it, or pry it out of them.

- Someone who doesn't play games.

Look for a partner who is up front about how he feels and what he wants, and someone whose actions match his or her words. When a partner is consistently honest, a natural trust grows (De Angelis, 1992).

There are certain signs to look for to see if a partner is mature enough to have a relationship. He or she can take care of themselves. If a partner had grown up sufficiently, they'll be able to:
- earn enough money to support him/herself
- know how to keep their living space relatively clean
- know how to feed her/himself

He or she is responsible and accountable. (It isn't a concept--it's an action). When a partner is irresponsible they are, in a sense, a child in an adult body. Lovable, perhaps even sympathetic, but certainly not ready for an adult relationship (De Angelis, 1992).
Respectful is extremely important in building a healthy relationship. Certain signs to look for are:

How respectful is a partner of:

- one's feelings
- one's boundaries
- one's time
- one's possessions
- their own possessions
- shared environment
- their employees, employer, or co-workers
- other people's feelings (De Angelis, 1992, p. 268).

The meaning of high self-esteem:

"You've heard it said before, and it's true: Your partner can only love you as much as he loves himself" (De Angelis, 1992, p. 269).

A person with low self-esteem loves in order to feel good about themselves. A person with high self-esteem loves because they feel good about themselves.

The healthier a partner's sense of self-esteem, the stronger the relationship will be. That's why it's important to look for these signs of self-esteem:

- A partner who takes pride in themselves. (Is one proud of their partner?)
- A partner who doesn't abuse themselves, but takes good care of
who they are. (The more one loves self, the harder it will be for one to abuse themselves physically or emotionally.) A person can tell how someone feels about themselves by observing how they treat themselves.

- A partner doesn't allow others to abuse them. (The more you love oneself, the less one will allow other to mistreat them.)

- A partner expresses self-confidence by taking action in their own life. True self-esteem manifest itself in action. The procrastinator is a person with low self-esteem, who avoids action because they are scared to death of failing and feeling even worse about themselves (De Angelis, 1992).

Positive attitude toward life means one of two things:
There are two kinds of people in the world; positive people and negative people.

Negative people:
- always focus on the problems and resist solutions
- always find something or someone to complain about
- allow fear and worry to rule them
- are cynical and pessimistic about the future
- don't trust easily

Positive people:
- always focus on finding the solution
- turn obstacles into opportunities and adversity into lessons
- trust in their ability to make a difference
- believe that things can always get better
- use their vision to change their reality

"Love is a positive force: It thrives in an atmosphere of positivity and starves in an atmosphere of negativity" (De Angelis, 1992, p. 272).

"Relationships are much easier when you're with a positive person. Partners work through conflicts faster; there's less blame and more cooperation. Most of all there's more love" (De Angelis, 1992, p. 273).

Another thing to look for if you want a lasting relationship, is it: healthy, growthful, and productive?

It's important to note all the above information applies to both partners in creating a healthy sexual loving relationship. Like attracts like--health attracts health, and love attracts love.

Having a Better Understanding of Female Orgasms

The good news/bad news is women very seldom accomplish an orgasms through vaginal intercourse stimulation. And it is not uncommon for women to fake orgasms to satisfy their partners or bring sexual intercourse to an end. The good news is, it is in women's natural capabilities to have sexual orgasms and to have them as often as desired. The trouble is most women have not been taught. They have heard or read about them, but not actually taught or shown how it works for them.
Naura Hayden (1982) in her book *How To Satisfy a Woman Every Time* states:

"...I spoke to thousands of women who told me about the problems they had in being unsatisfied during intercourse by their mates. I interviewed 486 women, not one of whom told me she never faked orgasm. Only 52 told me they occasionally faked it, whereas 124 said they faked it most of the time, and 310 said they faked it every time. I was astonished, because I thought I was the only one who used to fake it" (Hayden, 1982, p. 15).

There are numerous surveys and magazine articles that confirm the very statement that Naura Hayden writes in her book. How sad that so many women, and their partners, have gone through their sexual lives missing out on this wonderful pleasure, that is also very fulfilling and a great stress reducer, as well as healthy for women. Well this is water under the bridge. Through education and knowledge women can easily be taught within a very short period of time how to give themselves sexual orgasm and then pass this wonderful knowledge onto their partners for the mutual pleasure of their sexual lives.

In a sex survey run by the magazine *Complete Women* (October 1993), over a thousand women responded, with Complete Women responding to the responses:

More than half (61%) admitted to faking orgasms, and 33% faked them to spare their lover's ego or so he wouldn't feel responsible that she's not orgasmic at that time. But a full fourth admitted it's just
because they wanted to quit and have him get off...either because she was tired or didn't want to have sex in the first place.

CW comments:

Faking an orgasm when you just can't have one because of something going on with you is probably not a destructive thing to do, although telling him what's happening would be better. Making a habit of faking an orgasm to protect your man's ego is another story, however. It suggests that you are not involved in the sex act for your own enjoyment, and having sex only to please him is harmful to you and your identity.

If you're afraid of his response or that he will pressure you if you don't have an orgasm, you need to have a serious talk with him. If after you explain to him what is wrong or that it's not his fault and he still reacts badly, get a new partner. He is trying to control you body and you need to see that this is his insecurity and his problems and not yours" (Complete Woman, 1993, p. 63).

One woman comments "You give up your power when you fake an orgasm". Women too have the right and deserve to have orgasm with and without their partner. Once a woman learns about her own body, she can then teach (show) her partner how she uniquely receives pleasure. There may be times when a woman is not going to achieve an orgasm, just as a man may not get or keep an erection, or have an orgasm. Each person is uniquely made, and needs to be fully present to
the sex act, feel safe with a loving partner, have an appropriate environment, physically feel up to having sex, and be touched in a way appropriate to her sexual desires. If these qualities are not met then the woman may not be orgasmic at that present time. This does not mean she is not orgasmic, it just means something has to change, or that there is a better place and time for having sex (Barbach, 1975).

Dr. Roberta Richards (1993), a sex therapist in Phoenix, confirmed the common practice of faking orgasms. She states, "...most women reach orgasm either through oral sex or a vibrator." Dr. Debbie Nemiro (1993), a gynecologist in Scottsdale, also confirms the concern of many women frustrated with the issue of not being able to achieve orgasm. She states, "...tie the mind up...the mind is the most sexual organ (fantasy) ...the worst thing to do is to concentrate on having an orgasm...women's natural state is multi-orgasmic...it's important partners create a safe and trusted environment...it's important for a woman to feel safe with her partner to achieve an orgasm."

By looking at past programming will shed light on women's beliefs of her sexuality. What was her upbringing? What where her religious beliefs? What messages did her family pass on to her? What was her mothers sexual beliefs? If a woman believes it is a sin for her to have "unclean thoughts", how is she going to allow herself to have sexual fantasies? A women often needs sexual fantasies to accomplish an orgasm. Reprogramming can take place by using self-talk (what a
person says to themselves) (Helmstetter, 1986). Also hypnotherapy and self-hypnosis is beneficial to a person's reprogramming.

The sex act is not just a physical activity as many people think. It is a combination of mind, body, emotions, and previous conditioning. The first phase of sex is in the mind. No matter when sex occurs in a relationship, it always starts with fantasy. Without the sexual fantasy, sexual arousal will be lacking, when sexual arousal is lacking the desire to be sexual is then lacking. And how can a woman have an orgasm if she is not first feeling sexual desires? A woman also will try to protect herself from sexual desires, fantasies and erotism, if she is with a partner she does not yet trust. Because she will want to be in control. And she will want to maintain control until she knows her partner well enough that she knows she can trust him.

Self-hypnosis is one of the most natural mental states. It is a basic tool the human mind has, which has been called upon probably since humans first walked the face of the earth. It is a means of concentrating the attention in a way that enables a person to achieve whatever ends they desire, including coming to grips with past negative influences in their lives.

Self-hypnosis is a potent tool for helping a person with their sex life. After a person has an understanding of their own sexuality, it can enable them to recall the past conditioning which has led to current sexual issues. Then, with this understanding, it is a simple matter to
reprogram the subconscious mind so that they can truly enjoy the most delightful of all human activities (Kappas, 1984).

Sexual pleasure means involving the body and the mind. Fantasy is one way to do this. Erotic fantasies can be pulled from many resource, such as, movies, videos, pictures, music, books, magazines, and the most precious of all gifts a persons mind. Nancy Friday has written several books filled with women's erotic fantasies, one of them being *Women on Top* (1991).

Several magazines are focused on creating erotic fantasies:

- *Oui*
- *Penthouse*
- *Penthouse Forum*
- *Playboy*
- *Playgirl*
- *Viva*
- *Variations*

Videos can be purchased for education as well as erotica, two reputable companies are:

- The Townsend Institute, P.O.Box 8855, Chapel Hill, NC 27515, 1-800-888-1900.

And the greatest of all fantasy developers is the mind. To allow the mind to develop a personalized fantasy that is just right for them. If
this fantasy be with a partner or a total stranger. And then let the mind wander (Heiman & Lopiccolo, 1988).

Kegel exercise helps many women become more aware and sensitive to their genital area, which in turn often creates their bodies to be more orgasmic.

In Kline-Graber's (1975) book *Woman's Orgasm* it states: "...it is lack of knowledge, not psychiatric problems, that prevents most women from having orgasms...Learning is growth, and growth is change" (Kline-Graber & Graber, 1975, p. 16 & 17).

The Kegel exercise was developed by Arnold Kegel, M.D., a gynecologist at the University of Southern California. He developed an exercise for the pubococcygeus muscle to help women have a stronger bladder and bladder control. As women began to develop this muscle they also discovered it enhanced their sex life.

Each time a woman holds back on urinating, it is the pubococcygeus muscle she is contracting. And each time she squeezes her vagina together, she is contracting the same pubococcygeus muscle. The healthy muscle is firm to the touch, and strong (Kline-Graber & Graber, 1975).

A woman can develop her pubococcygeus muscle, first by locating this muscle during urination, by stopping mid-stream several times. She can develop the length of time by counting higher and higher, up to 7 seconds before releasing. After she has become aware of this PC muscle she can then practice this several times during the day,
such as, at stop lights, reading, watching TV, etc. No one but herself knows she is doing this exercise.

The Kegel exercise brings blood to the vaginal area, creates for sensitivity, and can bring orgasm more readily. Her partner also benefits from some added stimulation to the penis, and a tighter PC muscle (Kline-Graber & Graber, 1975).

Along with fantasy, environment creates for a more conducive opportunity for orgasm. Orgasm involves the whole body, not just the genitals. So by creating a pleasing environment it produces a suitable experience to tune into the five senses.

The appearance of the environment can be important. Is it clean? Pleasant to look at? Is it in order? Is it private? This is not to say the kitchen or the elevator isn't conducive to occasional sexual experiences. But these are things for a person to consider that feel safe and pleasant for them at the time. Candles, low lights, off lighting, pretty sheets and pillows all make for a desirable environment.

Smells are also nice. Scented candles, incense, light perfumes, lotions and oils all adds to a pleasant environment. So does hearing. Playing music, having it quite with minimal distractions, the soft loving voices of the lovers, as well as the exciting moans and noises of expressions of delight. Taste can be included too. The taste of food and drinks shared, and the delectable taste of the body also brings alive sensuality (Wylie, 1994).
And the most important of all senses in sexual involvement is touch. Bodies desire touch from the moment they arrive into this world. It has been a proven fact that babies thrive when they are touched and handled gently. This never changes for mankind. In fact many people become involved sexually, not so much for sex, but the desire and craving to be touched. As adults many still desire to be held, hugged, kissed, fondled, and someone to snuggle close to while sleeping. Some prefer wearing clothing and some prefer being nude, or close to nudity. This preference is quite often orientated depending on a persons past or present programs, as well as personal preference (Quilliam, 1992).

Arousal can come about for both sexes, almost by touch alone. It can create security, warmth, and sexual arousal. In most women they require a great deal of foreplay to achieve sexual arousal and orgasms. Foreplay is touch in many forms. Holding hands, looking into one anothers eyes, feeling the skin of a partner, sitting close, hugging, kissing, bathing and showering together, massaging the body, fondling erotic body areas with the hands, lips, mouth and tongue are all forms of touching and foreplay. Each person can be creative as they both choose to be, and for as long as they choose to be (Yaffe, Maurice, & Finwick, 1992a & 1992b).

For some reason women seem to desire and enjoy more lengthy periods of touch/foreplay than men do. Maybe this too is part of past programming, and a way of life. Women tend to spend more time brushing and fixing their hair, shaving their legs, applying make-up,
facials, applying lotion to their bodies, having manicures and pedicures. Were men live a more simplified existence of a quick shower and shave. Just compare the time difference for a man and a woman to get ready for work in the morning, or to go on a date. In most cases it takes the women twice as long (Wylie, 1994).

Also compare the difference in a man and a women caring for an infant. A mother tends to be more tedious with the care of her infant. Allowing the infant to soak in bath water, as she gently and slowly applies soap by hand to her infant and gets into every little fold, rubs lotion in a way similar to how she applies it to herself, and maybe even more gently and lovingly. And diaper changing is also done with great care and methodology. And this is not to criticize fathers, but they do usually get right to the task, do a good job, and finish as soon as possible, so they can get on with their other duties and pleasures (Wylie, 1994).

How similar love making compares the two sexes to their other duties in life. Quite often women treat and touch men the way they want to be treated and touched, and visa versa with men to women. The opposite sexes can learn from one another, one by observations, but more importantly by communication. And the partner must be willing to listen, be understanding of the differences each person has, and be willing to accommodate. Even taking turns in pleasuring, and giving one another the opportunity to fantasy fulfillment and desires, allows for both sexes to be satisfied (Kramer & Dunaway, 1990).
One of the best ways to incorporate more touching into one's sex life is to adapt a technique used in sex therapy called "sensate focus." This technique encourages partners to enjoy the simple pleasures of touch without the expectation that it must lead to sex. The strumming and caressing of each other's bodies enriches sex by making it less hurried. It sends a partner the message that "I have you here and I want to savor all of you." One learns to take time together the way one would savor a fine wine. Teasing also builds anticipation. By not focusing on sex per se, and by breaking out of a predictable sexual routine, the brain and the body become more responsive to the wonderful sensations of sex. (Westheimer, 1994).

Sensate focus is very nurturing, healing, and a way of each partner observing what gives pleasure to the other. To sensate focus each partner takes their turn while one partner focuses on how their partner likes to be touched and what part of the body feels more sensitive to touch. This can be done through body rubs, massages, and the simple technique of focusing on different areas of the body. Lotions, oils, and powders can be used, or simply skin on skin--this again is another personal preference to be explored with a partner (Yaffe, Maurice, & Finwick, 1992a & 1992b).

A true sincere lover will want to know what gives pleasure to their partner. Will want to please them in every way that is comfortable to both. There is value in taking time to use sensate focus with one another. Making love is not always having sex, and sex is not always
making love. There are times when one is sick, too tired, injured, recovering from surgery, etc., which prevents the natural ebb and flow of sex, and one would still like to make love or show affection to one's partner. In knowing what gives a partner pleasure through touch benefits the times spent with sensate focus (Yaffe, Maurice, & Finwick, 1992a & 1992b).

Sensate focus also allows one to really be in tune to what kind of touches are more pleasing and arousing. It develops the mind to focus on the feeling of touch and how it is affecting the body. One may ask their partner some of these questions while doing sensate focus, or openly respond to one's partner the true feeling they're experiencing: Is this giving pleasure signals? Are certain areas more arousing than others? Are there certain parts of the body that like to be touched more than others? What are the touches that are most relaxing? What are the touches that are most arousing? Are there certain parts of the body that don't liked to be touched, and why? Does one like a firm touch or a soft touch on this part of their body? It benefits sex and loving making when a partner has this information filed away in the mind, to recall for giving pleasure and helping a partner to relax and/or become aroused.

Sensate focus also assist those that are having trouble with orgasms. It takes the focus off the genitals and orgasm, and puts the focus on the sensational feelings of touch. It also takes the focus off the pressure of having an orgasm, or a man having an erection, and focuses
on relaxation, and the good feelings of touch (Yaffe, Maurice, Finwick, 1992a & 1992b).

Once a person has found the appropriate partner, received adequate fantasy, created a conducive environment, has tied the mind up in the right manner (considering they have developed healthy attitudes and programs), has participated in delightful foreplay, there is still the matter of understanding how female orgasms happen, for a women to experience them as often as she desires.

The erotic sexual sensitivity of the vagina varies with each individual woman. The nerve endings that respond to touch are only contained near the entrance. So the walls of the first third of the vagina are more responsive to sexual stimulation than those of the inner two thirds. The inner two thirds is sensitive to stretch and pressure, and many women get considerable pleasure from this area during the deep thrusting which takes place during intercourse. Since it is the outer third of the vagina that is most sensitive, almost any penis is large enough to stimulate this area. It is true that some women have a preference for a larger or a smaller penis. This preference varies with the individual woman, and it's not generally based on the anatomy of the vagina. A large penis is not what makes a man a better lover (Barbach, 1975).

There are differences in the actual quantity and specific types of nerve endings existing in the various area of each woman's genitals. Each woman's task is to discern or begin to learn about her unique preferences in sexual stimulation, as they do every day in food or dress.
Only then can she show her partner what it is she likes, enjoys, and desires. A partner may have to learn new techniques, even though he has been an excellent lover in the past with another woman. Because each woman is unique, and has her own unique preference on how she enjoys being touched and stimulated.

For many, if not most, women, the most important site of sexual sensitivity is the clitoral area. In a recent research two thirds of the women studied preferred and responded more readily to clitoral than vaginal stimulation. The fact that the clitoris is usually more sensitive to sexual stimulation than the vagina is because the density of nerve endings in the clitoris is far greater than it is in the vagina (Barbach, 1975).

The entire area above, to the sides, and below the clitoris is generally highly sensitive to sexual stimulation. The exact areas that provides the most pleasure differ from each woman. This is a very important reason for women to spend time exploring their own bodies, and discovering what is most pleasurable for them personally.

Embriologically, the glans of the penis and glans of the clitoris developed from the same tissue. Therefore the glans of the clitoris itself actually has a higher density of nerve endings than does the glans (or head) of the male penis. "The clitoris has no other function than that of providing the woman with sexual pleasure" (Barbach, 1975, p. 62).

The inner lips are attached to the hood covering the clitoris and to the clitoris itself. During intercourse, the thrusting of the penis in and
out of the vagina pulls on the inner lips which in turn pulls on the hood and the clitoris. This movement of the hood back and forth over the sensitive clitoris provides sexual pleasure for most women during intercourse. Since both the vaginal and clitoral areas are being stimulated simultaneously during intercourse, it is often difficult for women to discern exactly where the pleasurable stimulation is coming from. Once the importance of the clitoris is understood, it is easy to see why the indirect stimulation of this area provided by intercourse is frequently insufficient to enable a woman to reach orgasm. The clitoral area may also receive stimulation from the rubbing of the male's pelvic bone against the clitoris, but again, this nonspecific stimulation may be insufficient to enable a woman to have an orgasm through thrusting alone. Many, if not most, women require additional direct stimulation of either the glans or the shaft of the clitoris or the adjacent areas. "It makes no more sense to justify the necessity of direct stimulation of the female sex organ, the clitoris, than it does to justify the need for direct stimulation of the male sex organ, the penis, in order for an orgasm to occur. Somehow, we have accepted the myth that additional clitoral stimulation, beyond that provided in intercourse, should be unnecessary or is unnatural. The belief is that the penis should produce the orgasm; but if the penis does not produce enough direct pressure to stimulate the woman's most sensitive area it seems sensible to add stimulation that does" (Barbach, 1975, p. 62).
Physical and psychological stimulation is required in order for a woman to reach orgasm. There are a few women, about 2 per cent of the population according to Kinsey, who are capable of having an orgasm through fantasy alone, with no accompanying genital stimulation; another small percentage, about one percent, can experience orgasm through breast or other non-genital stimulation. Some women have experienced spontaneous orgasms and many women have had orgasms while dreaming (Reinish, 1990).

Despite these exceptions, a substantial amount of stimulation of the genital area is the necessary prelude to orgasm for most women. "The exact area and type of genital stimulation needed for orgasm depends upon the physiological make-up and learned response patterns of each individual woman" (Barbach 1975, p. 63). Let's assume that two women have comparable sexual involvement with a man. His lovemaking technique might arouse the first woman, but exactly the same approach and type of stimulation might do nothing for the second woman. This is not to say the man is a poor lover. But it is to say by learning new or using different techniques, he can bring just as much pleasure to his partner, as he did with his previous lover. Most men like variety, and are open to learning what satisfies their partner. Only when he has a poor self-esteem of himself is he unwilling to learn, or is not willing to recognize he does not "know it all." Because there is no "knowing it all," since each woman is uniquely different, and has her own very unique preferences. So there will always be a getting to know
stage, beyond getting to know the person as an individual, there will be a getting to know each persons sexual preferences, and this goes for both men and women.

Sex creates for variety. And just as there are as many couples, there are as many sexual varieties. And just as there are many love making session within a couple, there are just as many varieties within each session (even though there may be favorite similarities and desires that exist often according to preferences).

Preferences for timing and sequence, for setting and mood also vary from woman to woman. As well as preferring direct and hard stimulation of the clitoris or the surrounding area, while others find this kind of stimulation irritating and enjoy a lighter touch. As Leah Potts (Lonnie Garfield Barbach's co-worker) states, "If you want to make beautiful music with me, you'll have to learn my song" (Barbach 1975, p. 64).

"Physiologically, an orgasm is an orgasm, whether it occurs during masturbation, intercourse, oral stimulation, or any other form of stimulation" (Barbach, 1975, p. 64).

Masters and Johnson (1966) divided the sexual response cycle into four general phases: the excitement phase, the plateau phase, the orgasmic phase, and the resolution phase. These phases are not totally discrete. There is no distinct end to one phase before the next phase begins. The phases represent an effort to describe a sequence of
reactions that characteristically occur in what is really a continuous process.

Before sexual excitement commences, the female sexual organs are in what is called the resting state. The inner lips are flaccid, covering the vaginal opening; the vagina is more a potential space than an actual space. Like a balloon that has not yet been inflated, the walls of the vagina are relaxed and touching.

As the woman becomes sexually aroused through fantasy, emotions, contact with her partner, self-stimulation, or any other form of stimulation, the excitement phase begins. Blood starts to accumulate in the pelvic area (Barbach, 1975).

Along with the engorgement of the sexual organs with blood, a number of other processes occur during the excitement phase. One of the first noticeable signs of sexual excitement is the presence of vaginal lubrication. This process is similar to sweating, according to the research done by Masters and Johnson (1966). This lubrication is one of the first signs of sexual arousal in a woman, just as an erection is one of the first obvious signs of a male's arousal. Lubrication is generally present internally before it reaches the vaginal orifice. Other forms of lubrication can be used, when a woman may be affected by anxiety, contraceptive pills, certain drugs, or hormonal changes. Lubrications that can be substituted are saliva, K-Y Jelly, Probe, Astroglide, etc. "The presence of lubrication does not necessarily indicate that the woman is sufficiently aroused to want intercourse to begin, although
many men may interpret the presence of lubrication as a signal for penile insertion. And it is certainly no indication that a woman is close to having an orgasm. She might be able to have intercourse at this point without it being unpleasant, but it would probably be much more pleasurable if she waited and continued other forms of stimulation first" (Barbach, 1976, p. 65).

A man should wait until he is invited into a woman's vagina before entering. A woman can do this in various ways. One way would be, a woman can say, "Please come inside me." Or another statement, such as, "I want you now." Women need to recognize sex is for their pleasure too, not just satisfying her partner. Women need to assert their desires, and ask for what they want. When a woman enjoys the sex act, and has her needs met, she will receive more pleasure and so will her partner, as long as he is caring and loving.

As sexual stimulation continues, the vagina expands and lengthens. The elastic capacity of the walls of the vagina are impressive. The vaginal space can compress enough for the wall to hold a tampon snugly and expand enough to permit the birth of a baby. As the vaginal canal expands, the uterus, which naturally extends into the back of the vagina, tips forward and up providing enough space to accommodate a penis.

"The most common cause of the discomfort that can sometimes occur during deep thrusting is the impact of the penis against the mouth of the cervix. The cervical mouth itself is not very sensitive, but contact with it can cause the attached uterus to move, and the resulting pressure
on the ligaments which hold the uterus in place may cause the pain or
discomfort a woman sometimes feels" (Barbach, 1975, p. 65). Trying a
different position can avoid this contact and eliminate the discomfort.

The accumulation of blood in the pelvic area causes the tissues to
swell in much the same way a sponge swells when it is filled with water.
The outer lips, inner lips, clitoris, and sometimes the breasts, begin to
look puffier and slightly enlarged in size. In some, but not all, women
the nipples become erect. Late in the excitement phase, the darker skin
surrounding the nipples, called the areolas, begin to swell also.

As the sexual excitement continues, the female experiences some
changes that are characteristic of what Masters and Johnson (1966) call
the plateau phase. The outer lips may become even puffier as she
approaches orgasm. The tissues of the walls of the outer third of the
vagina, including the PC muscle, swell with blood and a narrowing of
the space at the vaginal opening results. The affected area is called the
orgasmic platform. This constriction of the vaginal opening can
intensify the pleasure of the male partner because his penis, when
inserted, often feels as if it is being snugly held. "At about this time, the
clitoris may appear to be lost somewhere beneath the hood: a woman
and/or her partner may wonder where it has gone and search for it in
order to continue to respond to direct stimulation of the area around it"
(Barbach, 1976, p. 66).

The breathing and pulse rates increase. A so-called "sex flush"
may become visible at some point during the plateau phase, but it
doesn't appear on everyone. This flush is a measles-like rash which
generally appears on the stomach, breast, shoulders, neck, or face area.
The extent and description of the sex flush varies widely among women.
The areolas surrounding the nipples may swell even further. Sometimes
this area swells to such an extent that, in comparison, the nipples do not
even look erect. Many muscles may automatically and noticeably tense
up. Many women consciously tense up even further the muscles in the
pelvic area, the buttocks and thighs, to heighten their sexual pleasure
(Barbach, 1975).

The above description generally accompany the plateau phase, but
the extent to which each sign is visible depends upon the individual
woman and to some extent the particular situation. The one definite and
dependable sign of an imminent orgasm is a change in the color of the
inner lips, not the easiest sign to discern during love-making. For
women who have never had children, the inner lips turn from pink to
bright red and, in women who have had children, from bright red to a
deep purple or wine color.

After this change in color, if effective stimulation is continued,
the woman will move into the orgasmic phase. Breathing, pulse rate,
and blood pressure will continue to rise until a body reflex reverses the
process of progressively increased muscle tension and blood supply to
the sex tissue. "A person cannot force an orgasm any more than they
can force a knee jerk; both reflexes just happen naturally" (Barbach,
1976, p. 66). The mounting muscular tension and engorgement of blood
vessels reaches a peak and orgasm occurs. The first third of the vaginal passage, the PC muscle that has formed the orgasmic platform, contracts rhythmically every 0.8 seconds for a brief period. The number and strength of the contractions vary in accordance with the intensity of the orgasm. The muscles of the uterus, and possibly the anal sphincter muscle, will also contract more or less strongly. These contractions may be apparent externally as the abdominal area appears to contract in waves or spasms. In many women, these contractions are barely, if at all, noticeable. The orgasm may be accompanied by a reflex grasping-type muscular response of the hands and feet. Some women may experience a feeling of warmth emanating from the genital area. This sensation of warmth results from the release of the blood from the engorged blood vessels of the pelvic region. The orgasm triggers the release of blood, allowing it to return to other areas of the body, and the resolution phase begins (Barbach, 1975).

Regardless of what type of stimulation the woman receives, her body will progress through the physiological phases of the sexual response cycle. Whether the orgasm occurs through clitoral stimulation alone, or through the physiological phases of the sexual response cycle. Whether the orgasm occurs through clitoral stimulation alone, through manual masturbation, through use of a vibrator, through love-making with another female, as the result of intercourse with a male partner, or fantasy alone, the reactions that comprise the cycle of excitement, plateau, orgasm, and resolution will proceed as described. The Freudian
distinction between the "vaginal" and "clitoral" orgasm does not match scientific findings. "Every orgasm manifests itself in the whole pelvic region regardless of the part of the body that has been stimulated" (Barbach, 1976, p. 67). If a woman has an orgasm once through intercourse alone with no accompanying direct clitoral stimulation and another time through oral sex, it would be erroneous to label the first a vaginal orgasm and the second a clitoral orgasm. Both are simply orgasms. Both involve the same set of responses. The subjective experience of the orgasm may vary according to the woman's mood, her feelings about her partner or about masturbation, the duration of stimulation, etc., but the physiological process of the build up and release of sexual tension remains more or less the same. In the works of Masters and Johnson (1966), "From an anatomic point of view, there is absolutely no difference in the responses of the pelvic viscera to effective sexual stimulation regardless of whether the stimulation occurs as a result of clitoral body or mons area manipulation, natural or artificial coition, or for that matter, specific stimulation of any other erogenous area of the female body" (p. 66).

Since orgasm is usually triggered by genital, and more specifically clitoral, stimulation, the excitement usually stops if the stimulation stops. Stopping the stimulation does not cause the excitement level to diminish completely, but it will ebb until effective stimulation is reinstated. Effective stimulation can be anything that arouses the woman. If it doesn't arouse her, it is obviously not effective for her.
Consequently, she may be very turned on by manual or oral stimulation before intercourse and feel very close to having an orgasm, but once intercourse starts, and the focus shifts to vaginal stimulation by the penis, she may not be able to reach orgasm. This experience does not hold for all women, but a drop in excitement can occur because the kind of stimulation that was arousing her before intercourse was replaced by another kind when intercourse began. Women who have had a number of experiences of this nature may often find themselves turning off when intercourse begins because they have learned to equate intercourse with the end of the more intense stimulation (Barbach 1976).

Effective stimulation is generally required up to and during the orgasm, if stimulation is discontinued during the orgasm itself, the orgasm may stop abruptly before completion. This incomplete release can be an intensely frustrating and unsatisfying experience. So it's important that "consistent, continuous stimulation of a type dictated by individual preference is required to bring a woman to orgasm" (Barbach, 1975 p. 68).

Since many women are capable of being multi-orgasmic, and having more than one or several orgasms within a love making session, it is thoughtful of the male partner to consider letting the woman climax first. Then the cycle of the consistent and continuous stimulation necessary for orgasm is not broken or interrupted. It is possible for partners to have simultaneous orgasms, but this is rare. And if simultaneous orgasms becomes the goal this can create for distraction or
pressure on one or both partners to perform in a timely cycle, instead of allowing both partners to go with the natural ebb and flow of their sexuality at the present moment. If simultaneous orgasm do happen look at it as a gift to be received, and not achieved (Beck, 1993).

It is a known fact men tend to climax in less time than women. And this reason may go back as far as the cave men days, when men needed to plant his sperm for procreation, and still guard his territory. If it took him a long time to climax, to plant his sperm, he's territory may have been invaded, and brought harm or death to him, his partner, and family. Women are just coming into knowing about their own sexuality and being orgasmic in the last half century. They have already been programmed from past generations that they supposedly are not orgasmic, that they are there to please her partner, and bring forth children in the world. Women today are in the process of discovering their own hidden female genitals, what pleases them, and that the clitoris is for one purpose only and that is to receive sexual pleasure and obtain orgasms.

Some women reach orgasm quickly, while others respond more slowly. What is important is the woman's own pattern and her satisfaction with it. Enjoying her own sexual response and being comfortable with that response is the most important thing.

The more familiar a woman is with her own genitals, the easier it will be for her to share them with her partner in a comfortable and self-
accepting way. By not examining her genitals she will perpetuate the mystery of sexuality and prevent herself from really understanding how her genitals work in giving her pleasure (Heiman & Lopiccolo, 1988).

Genital stimulation is usually necessary for producing a satisfying and orgasmic sexual experience, but all the stimulation in the world may not produce an orgasm if desire is absent or the woman's attention is elsewhere. If a woman requires over an hour of constant clitoral and genital stimulation in order to reach orgasm, it's very likely that it's because her head is elsewhere. If her mind is focused on sexual sensation, her body can enjoy it more fully. Relaxation and enjoying the touch, sensation, and the sexual stimulation are all part of being orgasmic. Along with tying the mind up with fantasy and the sensational feelings. Truly focusing on the physical stimulation--to really feel the sensations in the breasts as they are being kissed and fondled.
Concentrating closely on the good feelings can block out all other thoughts and outside distractions. Concentrate very carefully on the tactile sensations is important. The physical stimulation is clearly important also for women. For most women, when the stimulation stops the arousal stops. Women need to free the mind to concentrate on sexual feelings. Putting the body in the right place is the first step. Putting the mind there too completes the picture (Barbach, 1976).

Lingering is another theme that comes up when focusing on sexuality. As Mary Pellauer brings into her article "Ethics That Celebrate Women's Sexuality" (Winter, 1994).
A lesbian woman said, as though it were quite obvious, "that to have sex you needed at least two hours...it's only courtesy" (Pellauer, 1994).

She's right of course. When women talk about what they'd like in sex, one of the clear responses is: more time. When partners are male, most women want them to slow down.

Women want attention and care lavished on them. It is important that women recognize they are worth the time, the time of a sexual partner if they have one, their own time if they do not have one. To spend time on self or with a partner, is one important sign of cherishing.

Taking time to stop, think, appreciate, and cherish is all about the important person that exists, and the relationship that exists.

To make a date, to set time aside for affection, sex, and lovemaking is one appropriate and practical way of having the time to express who one is and have to share with a loving partner.

There is no end to lovemaking. The little signs and forms of affection that are shown throughout the day and the week are reflections of how the sexual act will be played out and shared between two loving people.

One does not need to hop into bed when there is a little bit of desire. Letting desire build, lingering with it, makes the pleasure more serious and more intense. Make pleasure last. Just as kids often do with
all-day suckers. When one takes pleasure in someone's company, one wants to linger together. Sex is not a race, just as life is not a race.

Emphasizing lingering, one becomes better at self-care. Lingering involves paying attention to the details. The wonderful sensational feelings associated to sexual lovemaking. The concept of "outer course" instead of only intercourse helps to bring to awareness there is more than one way of having sexual love (Pellauer, 1994).

Satisfaction, not, orgasm, is what counts with most women--and there are numerous studies to prove it. As we get further into the Nineties, satisfaction and prolonged pleasure will be key words for men too. There are myriad ways to feel deeply, erotically, sensually, and sexually satisfied besides orgasms. The healthy attitude that's surfaced more recently is more is not necessarily better.

More and more information is becoming available in the areas of sexuality and orgasms. There is a current technique, Coital Alignment Technique (CAT), which creates the opportunity for women to have orgasms during intercourse, by stimulation of the base of the penis on the clitoris. There is Non-Ejaculatory Male Orgasms (NEMO's), and with this techniques some males turned out to be capable of multiple orgasms, averaging two or three orgasms before ejaculation (Penney, 1993). There is ancient love techniques that haven't yet been popularized. The Kama Sutra of India were instructing men and women in techniques and postures which were as erotic as anything found in today's most graphic sex manuals. Workshops and seminars are being
given to couples and singles on Tantric yoga, another form of sexual exploration. These topics are not dealt with within this educational design, and are being further researched by the author.

This is only the tip of the iceberg in understanding female orgasms. What was not even touched upon was the eroticism of knowing and understanding what men like and enjoy. When a woman can give her partner sexy desirable pleasure this too is very arousing and rewarding for her own sexual pleasure.

Being Aware of the Risks in Sexual Involvement and How to Protect Yourself.

The only totally "safe" way to avoid the risk of HIV, AIDS, or sexually transmitted diseases is abstinence. However few people will elect this option, so safe sex needs to be understood, taught, and practiced.

AIDS stands for acquired immune deficiency syndrome, a disease in which the body's immune system breaks down. The immune system fights off infections and certain other diseases. Because the system fails, a person with AIDS develops a variety of life-threatening illnesses.

AIDS is caused by the virus called the human immune deficiency virus, or HIV. A virus is a small germ that can cause disease. If HIV
enters the bloodstream, a person may become infected with HIV. A special blood test can detect HIV infection. A person who is infected can infect others, even if no symptoms are present. A person cannot tell by looking at someone whether he or she is infected with HIV. An infected person can appear completely healthy.

People infected with HIV can develop many health problems. These include extreme weight loss, severe pneumonia, a form of cancer, and damage to the nervous system. These illnesses signal the onset of AIDS. In some people, these illnesses may develop within a year or two. Others may stay healthy for as long as 10 or more years before symptoms appear. No one will develop AIDS unless he or she has been infected with HIV. By preventing HIV infection, a person can prevent AIDS (U.S. Department of Health & Human Service, September 1992).

The following information has been derived from the Surgeon General's Report to the America Public on HIV Infection and AIDS. The statistics in this report include information up to and including 1992.

Although most reported AIDS cases continue to be among men who have sex with men and among injected drug users, cases due to heterosexual contact have been increasing over the last several years. In 1992, 9 percent of the total AIDS cases in women were attributable to heterosexual contact, an increase of nearly 42 percent from 1990 to 1992.
More women are becoming infected, and are at risk. The Centers for Disease Control and Prevention (CDC) estimates that about 100,000 women in the United States are infected with HIV. They comprise 11 percent of all AIDS cases, and the percentage increases each year. Almost half of the cases of AIDS in women have been reported in the last 2 years (Novello, 1993).

Women can get HIV infection by having sex with somebody infected with HIV. More and more women are becoming infected through unprotected sex with infected men.

There is evidence that, like other sexually transmitted diseases (STDs), women may be more likely to get HIV during sex from an infected man than a man is to get it from an infected women. However, women infected with HIV can transmit the virus to men. Cases among women who have sex only with women have been reported, although the number of cases is small: only four cases of possible female-to-female HIV sexual transmission have been reported in the medical literature (Novello, 1993).

HIV is in the blood, semen, or vaginal secretions of an infected person. "Unprotected sex" is sex without a latex condom. HIV can be in semen (including the first drop of fluid, even before ejaculation) and in vaginal fluids. HIV can enter the body through the vagina, penis, rectum, and when engaging in oral sex, through the mouth. Anal sex is especially risky for both men and women. Any form of unprotected sex is risky, including oral sex. Although condoms are not perfect, they are
highly effective in preventing HIV and other STDs when used consistently and correctly. Condom failure is usually due to a person not using the condom correctly, rather than flaws in the condom itself (Novello, 1993).

Getting semen, vaginal secretions, or blood from an infected person in their mouth puts them at risks of HIV infection. The risk of getting HIV from oral sex is not as high as from anal or vaginal sex, but there is a risk. Sores or cuts anywhere in the mouth would make oral sex even more risky.

Some STDs, such as herpes or syphilis, produce open sores or blisters on the genitals. These sores or blisters make it easier for HIV to be transmitted during sex. Other STDs, including gonorrhea and clamydia, place a person at higher risk of getting HIV infection.

Having sex with more than one person, increases the odds of having sex with someone infected with HIV or other STDs. The more people a person has sex with, the greater the risk of getting infected. In a sense, a person is also "having sex" with all the people the partner has had sex with (Novello, 1993).

One does not get HIV from touching, hugging, and kissing a person. It has been known for years that a small amount of HIV may be present in the saliva of some infected people. However, the amount of HIV in saliva is much less than in blood, semen, or vaginal fluids. Even deep or "French" kissing seems to have little risk for transmitting HIV.
What has a sex partner done? It's hard to be absolutely sure what risks a sex partner has taken. Don't take someone's word for whether or not they might be infected, no matter how well one may know them. A person cannot tell just by looking at someone whether they are or are not infected. Some people don't understand that something they did might have infected them. Some people don't know if they are infected because they haven't been tested. Some people deny that they might be infected. Some people don't tell the truth. If a person is not sure whether their sex partner is infected, they should ask their doctor if they need to be tested. In the meantime, the safest thing to do is to avoid having sex with a partner until they are sure they are not infected, or to use a latex condom correctly each time they have sex (Novello, 1993).

Most people who test negative feel a sense of relief. If the test is negative, this is the perfect time to stop doing things that may put a person at risk.

The surest way for protection against HIV infection and STDs is not to have sex at all, or to have sex only with one steady uninfected partner. It is best for a person to wait to have sex until both people are committed to a relationship. If a person is not in such a relationship, and engage in sex, they should use a latex condom correctly every time they have sex. It's not a matter of how much a person trust someone, or how well they know him or her, or how healthy he or she looks--condoms help protect both partners. Sex with a steady, uninfected partner is one
of the surest ways to protect against HIV infection and STDs (Novello 1993).

A latex condom, used properly, helps protect partners from HIV and other infections spread through having sex. When used correctly and consistently, latex condom are highly effective in preventing HIV infection and the STDs. The latex condom, correctly used, stops semen or vaginal fluids, which might have HIV in them, from passing from one person to another. This is only true for latex condoms; natural membrane (lamb skin) condoms will not provide protection against HIV because they contain tiny pores or holes. Always look for the words "latex condom" on the package when purchasing condoms (Novello, 1993).

Female condoms look like a male condom with two exceptions: There's a ring on the closed end, which holds the sheath in place inside the woman's vagina, and a ring on the outside end, which folds back to cover the labia. The female condom was approved by the FDA in 1993. Female condoms provide some protection against STDs. However, the data are inconclusive about how effective they really are in preventing the spread of AIDS and other diseases. Indeed, the FDA still states that male latex condoms are the best protection against STDs and recommends that "couples should go on using the male latex condom" (Mackey, 1994).

Partners should agree to use condoms before they start having sex. They should not expose condoms to heat or sunlight, and they
should make sure to check the manufacturer's expiration date on the package before use. If a person has questions about selecting or using condoms, they can talk to their doctor, pharmacist, counselor, health department, AIDS service organization, or call the CDC National AIDS Hotline (1-800-343-AIDS) (Novello, 1993).

The Proper Use of Condoms:

Proper use of a new latex condom every time a person has sex—from start to finish—is an effective way of protecting oneself from HIV and other STDs. Always have more than one condom available.

- Be careful when opening the condom. Do not use teeth, fingernails, or other sharp object to open the condom wrapper because a person might tear or nick the condom inside.

- Put the condom on as soon as the penis becomes erect, roll it to the base of the penis, keep the condom on throughout intercourse, and be sure it stays on until the penis is fully withdrawn.

- If you use a lubricant for vaginal or anal sex, use one that is water-based. Water-based lubricants are for sale at any pharmacy. DO NOT use oil or grease, such as petroleum jelly, cold cream, baby oil, or cooking shortening as a lubricant; they weaken latex and make the condoms break more easily.

- Never re-use a condom.

- Never continue using a condom if it breaks during sex—stop and put on a new condom (Novello, 1993).
Studies show that some spermicides kill HIV in test tubes. However, the ability of a spermicide to kill HIV in the vagina during sex is uncertain. Spermicides alone should not be used for HIV prevention. When used with a condom, the spermicide (gel, foam, film, or suppository) should be put directly inside the vagina according to the directions on the package. The amount of spermicide in a spermicide-lubricated condom is not enough to provide protection against HIV.

Adding spermicide to the inside of a condom does not help. If the condom were to break, the semen (and any HIV) would reach the vagina before the spermicide could spread out and cover the inside of the vagina. In addition, spermicides may cause vaginal sores or irritation in some women and irritation of the penis in some men. These sores or irritations, like any sore or irritation of the vagina or penis, may make it easier for HIV to get into the bloodstream. (Novello, 1993)

The Surgeon General's report has provided enough statistics and information to almost scare anyone into either not having sex, unless it's with a monogamous committed partner, or using safe sex (condoms) every time. Avoiding casual sex and using a condom properly should by no means take the pleasure out of one of the most gratifying activities known to human mankind. Sex is about pleasure, but it's also about health. The fear of AIDS has made it necessary for partners to get to know one another before they become physically intimate and to speak honestly and openly about their innermost thoughts and feelings. This communication can only lead to a better understanding of each other
and, eventually, to the kind of deep, long-lasting, trusting intimacy that
many are searching for today. If AIDS has taught us nothing else, it's
that going to bed with someone is not a good way to get to know them.
To be healthy in the nineties a person must be aware of their behavior
and learn to think of the condom as their life preserver (Penney, 1993).

Things for a person to know and be aware of:

- People taking drugs intravenously and sharing an infected
  needle, are greatly at risk.

- People who have been sexually involved with a man who also
  has or has had sex with other men, are greatly at risk.

- People having multiple sexual partners, are greatly at risk.

- People practice unprotected anal sex with a partner who has not
  been tested, are greatly at risk.

- People having had a blood transfusion before 1985, the year
  blood banks began screening donors for HIV, are greatly at risk.

In general, the more partners a person is involved with, the
greater the risk, since multiple contacts not only increase the chances of
encountering someone carrying the virus, they increase the risk of other
sexually transmitted diseases (Penney, 1993).

Whenever a person has been infected with HIV, it takes some time
for antibodies to show up in the bloodstream. In most infected people,
the antibodies can be detected approximately three months after
infection. In some cases, however, they won't show up for six months
or more. Some doctors recommend a one year span to be on the safe side.

A person's doctor can test them for HIV. When performed in public clinics, the cost for AIDS tests is free; elsewhere, costs run from $5 to $150 depending on the tests. All blood donors are currently tested for AIDS also, and is another way for a person to discover if he/she is HIV positive/negative (Penney, 1993).

How will a person know their partner will dictate the cautions one takes? Love, as always is about trust. With AIDS, that trust should be based on the condom, the HIV test, and on long-term knowledge of the way a person behaves. How many relationships are short term? And end between three to six months--within a time period before HIV may show positive in testing.

Today's smart woman is concerned about her health and also about healthy, sexy sex. Many of today's woman eat healthy, are committed to exercise and living a balanced life--safe sex is also about being healthy, committed, and balanced. Why would a women want to forego safe sex and risk giving up all that she has worked so hard to accomplish. Safe sex is about loving oneself, it's about self-respect, and self-worth. It's knowing that as a person one is worthy of being respected and loved. And it's the responsibility of the woman to make that commitment to herself. If a man cannot respect this in a woman he then is not worthy of her love and the sexual desires that they can share.
Making love is still one of the best things about being alive and a person can enjoy it as much as they ever did.

The bottom line is, how much do you value yourself? A woman should never feel that she is obligated to have sex to please a man. If a woman has developed a firm sense of who she is, that is, if she values herself, she is the only one who is making decisions about what she will or won't do.

As one man said, "Any woman who respects herself won't sleep around and will ask a man to use a condom. What's more important? Risking his feelings or risking your life?" (Penney, 1993, p. 31).

The women is the one who must care about herself. Deciding to protect herself from AIDS is protecting her health and her body. Bringing up the subject of condoms early is important. In other words talk about precautions before passion makes a person mute. As one women stated, "The subject of the condom should come up before his penis does" (Penney, 1993, p. 32). Men would appreciate the topic being discussed before they are already aroused.

There are various ways women can bring up the subject of safe sex and using condoms. It helps to be empathetic to his feelings and desires. A women can offer to show her partner how erotic using a condom can be. If it's approached as a "matter of fact" attitude, it won't become such a big deal--it's just how it is--that's all.

Women can also use other erotic forms of being sexy with her partner, that don't involve intercourse or oral sex. As the old saying
goes, "there's more than one way to skin a cat." Both partners can use their creativity. Touching, hugging, and kissing are safe. So are body massages, sensate focusing, body-to-body rubbing (non-genital), using one's own sex toys (vibrators, dildos, etc.), and mutual masturbation (Institute for Advanced Study of Human Sexuality, 1988).

Women are famous for loving to shop. Going on a shopping spree with her partner or girl friends can be fun. In most large cities there are shops that are geared toward enhancing the erotic side of sex. Picking fragrant oils and lotions for massages, sensate focusing, and body rubs, as well as eatable products for the body that can be licked and sucked off various parts of the body. Condoms also come in flavors, which makes oral sex much more tasty than latex. Dental shields can be used for cunnilingus, but a cut open condom is much more desirable, because it is not as thick and creates more sensitivity, Saran wrap or thin plastic wrap also works.

Water based lubricants to use are:

KY Jelly

ForPlay (comes in flavors and nonoxynol-9)

Cornhuskers Lotion

Today Personal Lubricant

Surgilube

Astroglide

Probe

any water-based vaginal jelly (Westheimer, 1992)
By putting lubricant in the tip of the condom creates more pleasure and sensitivity to the male penis. Many men don't know this—this is one more added pleasure women can give to their partner. And also don't forget that there must be an air space at the top to catch the semen, and that the condom must reach the base of the penis (Penney, 1993).

Who buys the condoms? If a man knows a woman has condoms in her medicine chest next to the aspirins, or in her night stand, or carries a few condoms with her the way she carries a lipstick in her purse, neither of them has to grapple with the awkwardness of thinking that he's planning to "make a move" or that she is "aggressive" or "promiscuous". The whole issue of condoms becomes a non-issue: The woman has one, gives it to her partner, and he uses it.

Does this let men off the hook? Yes.

Does this give women yet another responsibility? Yes.

Having sex will be much better—and safer—if everyone knows there is a condom etiquette: A woman supplies the condom and the man unfailingly uses it (Penney, 1993).

Yes, the responsibility is the women's, but in accepting this control they are taking control of their health, and their bodies. Women make decisions about who their sexual partners are, they take the responsibility for their sexual pleasure, they determine the quality of their relationships with others, and they protect their own health by choosing safe sex.
The number of victims infected with HIV who are women has risen dramatically in the last two years and will continue to escalate unless each person takes the responsibility to stop its transmission. Experts project that no cure will be found for at least twenty years. The time for safe, healthy sex is now, because AIDS affects all men and women, as well as innocent children and infants. Every person choosing to be sexually involved is responsible for practicing safe sex, making wise choices and decisions, and being responsible for their own behavior (Penney, 1993).

Synopsis

This concludes the research of the six topic areas to be covered in this educational program. Female sexuality is much more than trying to understand the physical make-up and being of the female body. Understanding female sexuality is knowing how the mind works, and having the power to work it. It's understanding the importance of personal belief systems, and what women believe about themselves--how they esteem themselves. It's knowing that women deserve a loving and trusting partner, and should not settle for less than what they deserve as loving and giving human beings, and knowing that they will connect with their own likeness. It's developing themselves as the best person they can possibly be. It's knowing what feels good, how they like to be touched, caressed, fondled, and how to play as innocent playful fun
children. It's respecting themselves in every sense of the word, saying "No!" when they don't want something that feels uncomfortable, setting their own boundaries and expecting their boundaries to be respected at all times. And it's knowing how to protect themselves in this day in age of high risk factors.
CHAPTER III

DESCRIPTION OF METHODOLOGY

Introduction

The purpose of this study was to develop an educational program for understanding and communicating about female sexuality, with an emphasis on female orgasms.

Research Methodology

The descriptive method of research was used in this study. This methodology describes the variables, describes the phenomena of which the variables are part of, and may indicate degrees of relationships existing between them. The strength of the descriptive research method is in the exploratory capability it provides.

The purpose of the descriptive method is to systematically describe the facts and characteristics of a given population or area of interest. The central focus of this method is to examine available information and design educational material for female sexuality classes, workshops, and/or seminars. The purpose is not to give value to sets of
relationships between events, but simply to draw attention to the subjected area related.

The descriptive methodology is appropriate to this study because it creates a casual comparative of the information that is readily available. It provides opportunities to interview, view video tapes, and do extensive reading of others' investigations into the subject of female sexuality.

**Source of Data & Data Collection**

The data collection procedures followed in this research were: 1) extensive reading of available printed materials, 2) viewing of various video tapes, 3) listening to audio tapes, 4) unstructured interviews with two professionals: Dr. Roberta Richards, Ph.D. and Dr. Deborah Nemiro, M.D., and 5) added information from conversations with selected men and women.

1. All the books listed in the reference list were researched in part or full, and owned by the author for further references. Only the articles used as references were listed, many more were researched.

2. All of the video tapes listed in the references have been viewed at least once.

3. Some of the audio tapes listed in the references are from books, or lecture series done by professionals. The purpose of the tapes was to have the opportunity to cover more material in the time available.
4. The author selected two professional women that she knew, are knowledgeable in the area of female sexuality, to give her a broader perspective of the subject, and gather suggested research material. The interviews with Dr. Roberta Richards, Ph.D. and Dr. Deborah Nemiro, M.D. were both done in their offices, during their professional work time, and both interviews lasted approximately one hour. Dr. Richards is a counselor who also is adjunct professor at Ottawa University. One of Dr. Richards' forms of expertise is in the area of human sexuality. Dr. Nemiro is in private gynecology practice in the Scottsdale area. One of her great areas of interest is women's issues and their sexuality. Her staff is all female, and she also spends time educating women on their sexuality.

5. Various conversations have taken place in the past year with selected men and women in the area of sexuality. Some of these conversations were done in an educational setting, and some were done informally with friends. People shared very personal aspects of their life and beliefs in the area of sexuality. None of these conversations were done in a formal manner with specific questions. All were done with trust that the information given in confidence would be held confidential. The conversations were geared toward sexual or relationship topics in which the person was interested in sharing at the moment. Any quotes used in this design by personal conversation have not revealed the source.
Instrumentation

The educational program for Female Sexuality developed in this study is found in the Appendix. The educational program contains the six lesson plans for each topic, and the hand outs that will be used in the program.

The six topics were identified from the author's experience as being important in developing a better understanding and fulfillment of female sexuality. The topics are:

1. Understanding old and new programs and redevelopment in this area;
2. Understanding self-pleasure and self-awareness;
3. Developing self-respect, self-love, and self-worth;
4. Exploring the importance of a trustworthy and loving partner;
5. Having a better understanding of female orgasms;
6. Being aware of the risk in sexual involvement and how to protect yourself.

A workshop format is used for this educational program. This format provides for the opportunity for practical methods to be taught and discussed, an exchange of ideas, as well as sharing personal experiences. This also provides the opportunity to discuss problem situations that can be addressed by other women in the group, as well as input from the facilitator. Viewing videos are also included within this format for educational purposes, as well as opening ideas for discussion
and sharing, and exercises and handouts are used to enhance the learning experience.
Summary

The development of female sexuality is an ongoing educational process. The more women understand their own body, how they think, how they feel, and how they process information the more real and pleasurable their own sexuality becomes.

When women understand themselves, truly understanding how their bodies, as females functions and reacts, can they as women begin to reach the full potential of their own pleasurable and complex sexuality.

The literature review came from various books on sexuality, relationships, and self-growth issues, magazine articles, educational sexual videos, professional audio tapes, interviews with professionals, and conversations with both men and women.

From the research the author has developed an educational program designed specifically for women. This program is put into six topic areas and designed to be given with six, two to three hour sessions. Most sessions include hand outs and the viewing of a video conducive to
the subject area of sexuality, as well as time for women to share personal experiences and to have questions answered or explored in the area of personal sexual issues.

Conclusions:

Based on the findings of the study an educational program was designed to be presented to groups of women. The program consists of six topics, including lesson plans and hand outs. Each topic is covered in Chapter 2. The topics include:

1. Understanding Old and New Programs and Redevelopment In This Area

   Within this topic, information is given on how the mind works, and how women have power over developing their own thought process. By using a simple process called Self-Talk they can change their old programs (thoughts), into new programs that work better for them. The mind is presented as a powerful tool that can be used in many ways for a person's own well-being, success, and happiness. Included is the effect of the negative messages from childhood that continue to work against them, keeping them stuck, and preventing them from experiencing their full potential as happy healthy human beings. Within this subject the opportunity to explore past messages and beliefs are given, and to develop new programs that work more productively.
2. Understand Self-pleasure and Self-awareness

In this topic, information is presented about masturbation. The concept here is if women don't know what personally gives them pleasure through their own self-exploration, how can they let their partner know what gives them personal pleasure. Also through self-awareness is the importance of knowing how the female's body works, functions and consist of its many valuable parts. If women are not accustomed to indulging in various forms of self-pleasure--do they truly feel they deserve to have their partner pamper them? It is only when a person loves themselves, that they are capable of loving another.

3. Developing Self-respect, Self-love, and Self-worth

Within this topic is addressed the attitude of self esteem. If a woman hopes to achieve a happy relationship with a man, no factor is more important than self-love--in both the man and the woman. There is no greater barrier to romantic success than the deep-seated feeling that one is unlovable. The first love affair that must be consummated successfully in this world is with the true self; only then one becomes ready for a healthy loving relationship. Only then can one become fully able to love and only then can one fully be able to let love in--to accept that another person truly loves them. Without that confidence, another person's love never seems quite real or convincing; and out of anxiety one finds ways to undermine it. One cannot change the past, but one may ruin the present by worrying over the future.
4. Exploring the Importance of a Trustworthy and Loving Partner

Within this topic women have the opportunity to explore the importance of having a trustworthy and loving partner, so they may feel free to truly experience who they are sexually in a safe and accepting environment. By having a trustworthy and loving partner they, as women and human beings, truly feel free with their own sexual exploration. Trust comes over time and through personal experience with a partner. Love also comes over time and personal experience. The natural sequence for most human beings is starting with attraction and infatuation, followed with being "in love", and then over time true love blossoms like a beautiful flower, that only grows more beautiful as the relationship and the person is nourished.

5. Having a Better Understanding of Female Orgasms.

Within this topic understanding the physical make-up of the female body is important in order to comprehend how orgasms come about, how the mind works, and the importance it has on producing the success of being orgasmic. The environment, self-worth, and a loving trusting partner all play important roles in a woman's capabilities and functions of being orgasmic. This topic covers the area of how to tie up the mind. One way is to use fantasies. Fantasies can be created in the mind or through literature, pictures, videos, sex talk, and a variety of sex play. Also, this topic area covers information on the Kegal exercise, sensate focus, and Master's and Johnson's (1966) sexual response cycles
divided into four general phases: the excitement phase, the plateau phase, the orgasm phase, and the resolution phase. Understanding female orgasms is an endless study; and the more one knows the more creative and productive one can be.

6. Being Aware of the Risks In Sexual Involvement and How To Protect Yourself.

Within this topic is covered the risks women are dealing with today. In this day and age AIDS is prevalent. Many are directly affected by this killer disease. Many already know someone personally that has died from AIDS--all are some how affected by it. Women today are on the rise as sufferers from AIDS. Only as individuals can the nation slow the process, by taking personal responsibility for one's own health and protection. In this topic area women are encouraged to carry the condoms, set their own safe boundaries, put themselves first for safety reasons, and insist their partners use condoms when they are getting to know them and have not yet committed to a monogamous relationship. Having a trusting partner is essential, and while that trust is growing and being established, safety must come first.

Recommendations:

It is recommended that continued research be done in this area, exploring the area of Kama Sutra, Tantric yoga and the possibility of created psychological blocks that prevent women from experiencing their full sexually orgasmic potential. Any other topics of sexuality or
forms of sexuality that are issues for women today should also be the target of further research.

Further exploration of defining a healthy whole relationship is recommended. Relationship skills and issues go hand and hand with the area of sexuality, and both need to be addressed as possible topics of an educational program.

A recommendation for further research is to design a similar program for men only, so they would have the same opportunity to share and explore among themselves their personal sexual issues and concerns.

Another recommendation is to design a program for couples, which may include Kama Sutra and Tantric yoga. The educational design could be set up as a weekend or week long experience with homeplay.

Today many adults are single, some by choice, some are in the process of seeking a relationship. Another recommendation is to design an educational program that would assist adults to understand their own sexuality while they are choosing to be temporarily celibate and/or seeking a relationship. This program could deal with issues of temporary sexual abstinence, what to look for in a partner, setting boundaries, safe sex education, as well as skills of developing a healthy relationship. This program could be set up for singles only, which would also provide singles an opportunity to meet other singles and interact on mutually interesting subjects.
Finally it is recommended that this program continue to be evaluated on its effectiveness as a quality educational program.
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VIDEOS:


Becoming orgasmic.

Vol. 1: Better sexual techniques.  
Vol. 2: Advanced sexual techniques.  
Vol. 3: Making sex fun.  
Vol. 4: Exploring sexual fantasies.  
Vol. 5: Sharing sexual fantasies.  
Vol. 6: Acting out sexual fantasies.
APPENDIX

EDUCATIONAL PROGRAM IN FEMALE SEXUALITY
The Appendix contains a guide for instructors, workshop evaluation, lesson plans and hand outs for this Educational Program in Female Sexuality. This program consist of six lesson plans. The topics are as follows:

1. Understanding Old and New Programs and Redevelopment in this Area

2. Understanding Self-pleasure and Self- awareness

3. Developing Self-respect, Self-love, and Self-worth

4. Exploring the Importance of a Trustworthy and Loving Partner

5. Having a Better Understanding of Female Orgasms

6. Being Aware of the Risks of Sexual Involvement and How to Protect Yourself
INSTRUCTOR'S GUIDE TO ACCOMPANY
EDUCATIONAL PROGRAM IN FEMALE SEXUALITY

Instructor's Qualifications
- An instructor should feel comfortable about their own sexuality, and talking about sex and various sexual topics and issues.
- An instructor should have a sexual educational background, including college level courses on relationships, self-esteem and sexuality.
- An instructor should have read a variety of articles and books pertaining to sexuality, relationships, and self-esteem, as well as previewed all video tapes to be used in the workshop.
- It is advisable that the instructor attend this specific educational program before being an instructor.

Suggested Techniques for the Instructor
- Tell the students about your background and training. Be specific as to how your interests and accomplishments are pertinent to the subject matter of this workshop.
- Tell the students why you are teaching this workshop.
- Ask them to share the reason for attending this workshop.
- You should not assume that all the students have been introduced to open dialogue regarding the more controversial aspects of these subjects by teaching professionals who are informed, dedicated, and non-judgemental.
- Do not necessarily assume that parental and religious influences have been timely, correct, or without the imposition of anxiety and guilt.
- The exercise (Hand Out #1) Exploring Past and Present Sexual Programs provides an excellent opportunity for working through past influences.

- Learning and mastery of information is most efficient and permanent when it is introduced in a systematic, complete, and non-threatening forum.

- Recognize most women have acquired information about sexuality on a "need to know" basis, and not always from informed individuals.

- Emphasize that one of the most important applied aspects of this course lies in taking responsibility for one's sexual decisions and one's sexual health.

- From the very beginning of this course begin to stress safe sex techniques.

- Inviting guest-lecturers will offer the students a broadened and diversified view of certain topics. If this workshop is taught in a church setting inviting a priest or minister (who has a healthy outlook on sex) provides the opportunity for some students to vent and release some of their past quilt.

- Exploring attitudes within the workshop is more fruitful and interesting than attempting to describe or assess them. Although this can be very slippery material and highly private as well, student's attitudes can best be dealt with in the context of the subject matter (Lopater, 1993).

- It is encouraged that all attending the workshop participate, but without pressure. If a student ask for clarification, a question, or wants to explore an issue, encourage the other students to give her feedback.

- Previewing all material is extremely important before each session.

- Let students know ahead of time the videos include nudity and very explicit sexual acts.
Environment and Set-up

- A genuine capacity for intimacy often requires the creation of a climate of psychological safety and student's willingness to share their vulnerabilities with each other. Genuine mutuality is thought to require acceptance of another without the expectation that the other should change to please another.

- Attempt to provide for the students a conception of a "climate of psychological safety."

- Set rules of confidentiality and no judging.

- Praise honesty and openness.

- In this safe climate women may own for the first times, that they have never experienced an orgasm. Honor their honesty and openness, with respect.

- The Intimacy Exercise (Chapter V) is very important, this creates a support bond with the students. It can be done before the fifth session, depending on the closeness that is building among the group.

- If this is a women's group and since self-pleasure is taught and encouraged, the physical environment should be enhanced by fresh flowers, lighted candles, and soft music. You can elaborate on this as much as you desire, or ask the women of the group to take turns providing an environmental setting.

- Privacy is the up most importance. Viewing of sexual video tapes will be taking place, so make sure the room is private, such as no open doors or windows, or people walking through.

- If the setting could be set up similar to a home style living room this works very well. If the group is larger aim for a semicircle arrangement, where it is easy for all to view the video and see each others faces while sharing.
Resource Materials
Most books can be purchased at the book store or through:
Good Vibrations
938 Howard St. Ste. 101
San Francisco, CA 94103
(415) 974-8990

Most videos can be purchase through:
Townsend Institute
P.O. Box 8855
Chapel Hill, N.C. 27515
(800) 888-1900

Castle Boutiques has three locations in Phoenix and carries videos, condoms, lubricants, etc.

Some suggested music to use:
* Cristofori's Dream, by David Lanz
* December, by George Winston
* Radiance, by Steven Halpern
* Path of Joy, by Daniel Kobialka
Please circle the following: male  female

Age category:  18-25  26-35  36-45  46-55  56-65  65-over
               single  married  separated  single again  widowed

How many sessions did you attend?  1  2  3  4  5  6

Please indicate the level of agreement you have with each of the following questions by circling the number that most clearly matches your thoughts.

1.  Strongly Agree
2.  Agree
3.  Neither Agree nor Disagree
4.  Disagree
5.  Disagree Strongly

1.  I wanted to have interactive participation in this workshop.
    1  2  3  4  5

2.  This workshop provided me an ample opportunity to participate.
    1  2  3  4  5

3.  The course material met my expectations.
4. The instructor gave a clear and concise delivery during the workshop.

5. At the beginning of the workshop, the instructor helped define my expectations of the class.

6. By the end of the class my expectations of the content were met.

7. The content of the workshop has improved my understanding of the topics.

8. The length of the course was too short.

9. The length of the course was too long.

10. I would attend another workshop that expands on the same content.
11. I would recommend this workshop to others.

1  2  3  4  5

12. Other comments/reflections

Name (optional) __________________________ Date __________
LESSON PLAN I
Understanding Old and New Programs and Redevelopment in this Area

SUPPLIES:

file card and pens
name tags
TV & VCR
Video: Becoming Orgasmic
white board & marker
flowers & candles
Hand Out #1: Exploring Past and Present Sexual Programs

PROCEDURE:

Instructor should introduce herself

Set rules, such as:

  When do they want a break, and for how long?
  No judging of one's morals, experiences, beliefs, etc.
  Confidentiality is a must, nothing someone personally shares should be repeated outside the workshop sessions.

Each person introduces themselves, and states why they chose this workshop.
If the group is large, turn to the person next to you and introduce yourself and why you chose this workshop.
Finish giving information about self; and open up for questions about instructor's background.

Play a game referring to using sex words.
Go around the room and have each person say a sex word, until all sex words thought of are used. Have fun with this. Allow for laughter, explanation, and comments.

Lecture on old programs/new programs and how they can be changed to work for you, by using the self-talk technique.

Put on the board The Self-Management Sequence.

1. Programming created beliefs.
2. Beliefs create attitudes.
3. Attitudes create feelings.
4. Feelings determine actions.
5. Actions create results (Helmstetter, 1982)

Hand out the Exercise: Exploring Past and Present Sexual Programs.
Go over the exercise with them, so they have an understanding how to do this on their own.

Hand out file cards for them to use in an exercise on their own in class.
Old program on one side, turn the card over for a new program to be adopted. Ask for sharing participation, so they have a full understanding on what to do on their own.

With remaining time show the beginning video *Becoming Orgasmic*. Comment on the communication skills the couple uses. Allow a few minutes for reactions.
LESSON PLAN II
UNDERSTANDING SELF-AWARENESS & SELF-PLEASURE

SUPPLIES:

flowers & candles
Video: *Becoming Orgasmic*
TV & VCR
white board & marker
bring books pertaining to the subject:
*Becoming Orgasmic* by Heimand & Lopiccolo
*For Yourself* by Barbach
*Good Vibrations* by Joani Blank

PROCEDURE:

Review names or pass out name tags

Ask for comments about last class and revelations during the week.
Did the exercise help develop new programs?

Finish the video tape *Becoming Orgasmic*.

Discuss the video
Discuss various ways of giving self-pleasure
Discuss what is self-awareness

Have the women commit to a form of self-pleasure for the coming week.
Have the women commit to becoming more aware of their body and what parts give pleasure, focus on the female genitals, examine the genitals with a mirror, and spend time discovering what feels good depending on what area is touched and how. Encourage the women to experience a vibrator, if not already doing so.

Post on the Board:

Good Vibrations
938 Howard St. Ste. 101
San Francisco, CA 94103
(415) 974-8990

Townsend Institute
P.O. Box 8855
Chapel Hill, N.C. 27515
(800) 888-1900

Castle Boutiques (local)
LESSON PLAN III
DEVELOPING SELF-RESPECT, SELF-LOVE, AND SELF-WORTH

SUPPLIES:
candles and flowers
Video: Vol. #1: Better Sexual Techniques
TV and VCR
Article: Ethics That Celebrate Women's Sexuality, by Mary Pellauer
Hand Out #2: Be All That You Want To Be

PROCEDURE:

This session is dedicated to developing self-esteem based on the concept: If a woman hopes to achieve a happy relationship with a man no factor is more important than self-love—in both the man and the woman. There is no greater barrier to romantic success than the deep-seated feeling that you are unlovable. The first love affair that must be consummated successfully in this world is with oneself; only then is one ready for a healthy true relationship. Only then will one be fully able to love and only then will one be fully able to let love in—to accept that another person truly loves them. Without that confidence, another person's love will never be quite real or convincing, and out of anxiety one may find ways to undermine it.

Do exercise hand out #2: Be All That You Want To Be

Allow for discussion time. If the group is small enough, personal issues can be discussed, with input from the group, as well as the instructor.
All are here to learn from one another. If the group is larger, this can be shortened by not asking for input from the group, and limiting this time to questions from the group and answers from the instructor only.

Viewing Video:  Vol. 1: Better Sexual Techniques
LESSON PLAN IV
EXPLORING THE IMPORTANCE OF A TRUSTWORTHY AND LOVING PARTNER

SUPPLIES:
candles and flowers
TV and VCR
Video: Vol. 1: Better Sexual Techniques
Article: Pillow Talk by Patricia Love and Jo Robinson
Hand Out #3: You And Your Partner

PROCEDURE:

Discuss:
Qualities to look for in a partner:
Commitment to personal growth
Emotional openness
Integrity
Maturity
High self-esteem
Positive attitude toward life

This is the '90s and it's more important than ever that a partner is trustworthy, sharing with honesty the sexual life style of the past, as well as how one chooses to live their sexual life style in the present relationship.

We all deserve to be loved, and only in a truly loving relationship can we discover our true sexual potential.
Go over Hand Out #3,

Allow time for discussion.

Finish previewing video: Vol. #1: Better Sexual Techniques
LESSON PLAN V
HAVING A BETTER UNDERSTANDING OF FEMALE ORGASMS

SUPPLIES:

flowers & candles
New Age music tape
Video: Female Orgasms
Books: For Yourself
Becoming Orgasmic

PROCEDURE:

Allow class to share where they are at with the class, what they are learning from it, what else would they like to know or have covered (this takes about an hour).

After break do Exercise on Intimacy:
Play New Age music tape
Create a non-distracting environment and direct people through this exercise:

Stand in two rows, each facing a partner
Stand only a couple of feet apart
Look into your partner's eyes and notice what color they are
Step a little closer
Look into their eyes and see if you can see what they are thinking...
And now what they are feeling...
Get even closer, belly to belly, and toe to toe
And really feel what they are feeling...
Put right cheek to right cheek of your partner and just rest cheek
to cheek for awhile, and send your energy to this person
through your cheek...
Now share a form of affection to this person (such as a hug).
Find another partner and repeat the exercise:
This time have them touch their partners left ear with their right
hand, move their hair out of the way if you need too, and
really touch their ear, and feel their ear lobe.
Now share a form of affection to this person.
Find another partner and repeat the exercise again:
This time have them put their right index finger on the tip of
their nose, just allow positive energy to run through your
arm, and hand, and finger right to the tip of their nose...
Now share a form of affection to this person.
Depending on the size of the group and timing this can repeated
again.

Spend time talking about orgasms:
How common that women fake orgasms and why.
How women have orgasms: clitoris, oral, vibrators.
Kegel Exercise.
The importance of tying the mind-up and fantasizing.
Accessing programming--on going reprogramming.
Environment
Touch
Sensate Focus
An orgasm is an orgasm
We are each unique, and need to discover our uniqueness, and then
share this with our partner
Masters & Johnson's 4 general phases:
   excitement phase
plateau phase
orgasmic phase
resolution phase

The advantage of lingering
The eroticism of giving your partner pleasure.
LESSON PLAN VI
BEING AWARE OF THE RISK IN SEXUAL INVOLVEMENT AND HOW TO PROTECT YOURSELF

SUPPLIES:
candles and flowers
TV & VCR
Video: Safe Sex
condom and dental shield
banana or zucchini
Hand Out #4: Important Things To Know

PROCEDURE:
Focus on what is safe sex, point out that the subject has come up in some form with each prior class session, and needs to be expounded upon.
Women are on the rise of being infected with HIV (an increase of 42% from 1990 to 1992).
Discuss the various forms of contracting AIDS.
Discuss other forms of sharing affection while getting to know someone better, before having sex.
Have sexual talks before having sex--ask:
"What are your sexual fears?"
"How do you like to be touched during love making?"
"What are some of your favorite ways of making love?"
Demonstrate condom use and have everyone participate.

View video: Safe Sex
Allow time for discussion

Post on the Board:
CDC National AIDS Hotline
1-800-343-AIDS
EXERCISE 1: EXPLORING PAST AND PRESENT SEXUAL PROGRAMS

PART I: PAST SEXUAL PROGRAMS

Answer and explore the following questions:

Religious Influences:
How was sex presented in your religious upbringing? How did it influence your attitudes about your body and sex? How does your past influences still effect you today?

Growing Up Years:
How and when did you first learn about sex? How was physical affection shown to you and other family members? Did your parents openly show affection? What messages were given to you pertaining to your body, modesty, nudity, etc.? What where your parent’s attitudes toward sex and personal body parts? What attitudes where passed on to you about homosexuality? How did your friends and siblings influence your sexual attitude? What games did you play that assisted you in exploring your body and others? What are your memory recalls of exploring your body and masturbation? How and what where you taught about childbirth, menstruation, and other sexual issues? What were your feelings toward masturbation? How were you embarrassed, shamed, or sexually abused?
Dating:
What were your dating experiences like. What did you expect from your date? What did you get? Was it done in groups or singly? Was it pleasurable?

Touching:
What are your memory recalls of touching and being touched? How did it feel to hold hands or sit close to someone you liked? To be kissed--closed or open mouth? How did it feel to have your breast touched? Was genital touching and manipulation involved? How did you respond to sexual behavior? How involved did you get? How involved did your friends get? How did you feel then and now with your experiences? How would your parents have reacted to your behavior if they had known about your experiences? What messages did your parents give you?

Intercourse:
What was your belief about non-marital intercourse? Did you experience intercourse before marriage? What was the first experience like? How did you feel after experiencing intercourse for the first time? What form of birth control did you use, if any? How were your subsequent experiences? Did you have various partners, and if so, how did this experience vary. What feelings usually accompanied intercourse? Did you experience sexually transmitted diseases or pregnancy? If so, how was this handled, by you, by your parents? Was intercourse ever painful or penetration difficult?

Other Experiences:
What have been your sexual fantasies? Are there common themes or images? Have you experienced any sexual encounters with a person of the same sex? Have you fantasized having intimate encounters with the same sex? Have you had an affair or been tempted to have one?
What have been your pleasant and unpleasant physically intimate experiences?

**Premarital Behavior With Spouse:**
What sexual activities did you engage in with your spouse before marriage? How did you respond? How did you feel?

**Current Attitudes and Beliefs:**
What is your attitude, beliefs, feelings about:
- Sex in general?
- Your body?
- Your breast?
- Your genitals?
- Masturbation?
- Foreplay?
- Intercourse?
- Oral-genital sex?
- Orgasms through means other than intercourse?
- Erotic literature?
- Pornographic movies?
- Sexual fantasies?

Is your sex life satisfactory? Is the current relationship you are in kind and loving? Does this reflect your past experiences in a relationship, going back as far as your parents? What has profoundly affected your sexual attitude? Do you want to change any of your sexual beliefs, attitudes, feelings? If so, what do you want to change and why?

**PART II: CREATING A NEW PROGRAM**
Creating a new program, to change for your benefit, from your past old program.
Look at the Self-Management Sequence:
1. Programming creates beliefs.
2. Beliefs create attitudes.
3. Attitudes create feelings.
4. Feelings determine actions.
5. Actions create results.

(Helmstetter, 1986, p. 70)

What results, actions, feelings, attitudes, or beliefs do you want to change pertaining to your sexuality?

In exploring your past program, you may or may not recall where the program came from. That doesn't matter. The fact is the old program can be changed to fit your new current present program, that works for your good and benefit.

Get in touch with what you want to change. And also why you want to make the change. Is it going to work towards your greater good to make the change? If so it's all up to you. And it's easy.

What is the old message you carry with you that you want to change. How do you want that message to read for you now, so it will work toward your greater good?

Example:
Old program: "My genitals are ugly."
New program: "My genitals are beautiful, and they give me delightful pleasure."
Old program: "It is wrong to give myself pleasure."
New program: "My body is created for pleasure, all parts of my body can give me pleasure."
Create as many new programs for yourself as you desire. There is no limit.

"You are everything that is,
Your thoughts, your life, your dreams come true.
You are everything you choose to be,
You are as unlimited as the endless universe."

(Helmstetter, 1986, p. 255)

As you create your new program it's up to you to make it strong and put it into action. Once your new program is created, repeat the new programs to yourself often. Write them on a card and put them on the bathroom mirror or somewhere where you will see them often. Put your new programs on audio tape and listen to them often (three times a day).

The more you repeat your new programs and the longer you repeat them, the stronger they become. Don't get discouraged. It takes three weeks to create a new habit.

As you begin to see this work for you, you will want to make more positive changes in your life. You will want newer and better programs. Don't give up. It almost too easy to be true. But it does work. So make sure it's a program you want for yourself. And one that will be working toward your greater good.
EXERCISE 2: BE ALL THAT YOU WANT TO BE

1. If you could change only one thing in your life what would it be?

2. If you could change only one thing in your relationship what would it be?

3. If you could have three wishes granted, what would they be?

4. If you won the million dollar lottery, what would you change about your life?
5. You are the author of your own life, write your own script.

"You are everything that is,
Your thoughts, your life, your dreams come true,
You are everything you choose to be.
You are as unlimited as the endless universe."
(Helmstetter, 1986 p. 255)*

KEY VIRTUES:

- Living consciously
- Self-acceptance
- Self-responsibility
- Self-assertiveness
- Living purposefully
- Personal Integrity

*What to Say Whey You Talk to Your Self
(1982) Shad Helmstetter, Ph.D.
EXERCISE 3: YOU AND YOUR PARTNER

This is a quiz to help determine how sexually attracted partners can be. It measures how a person feels about their partner's sexual attractiveness, not their ability as a lover or the frequency of the lovemaking. It is rated:
4 points - almost always
3 points - frequently
2 points - sometimes
1 point - once in a while
0 - rarely or never

1. I like the way my partner looks in clothing.
2. I like the way my partner looks naked.
3. I like the way my partner's skin feels.
4. I like the way my partner smells.
5. I like the way my partner tastes.
6. I like the way my partner holds me.
7. I like the way my partner kisses me.
8. I like the way my partner touches me when we aren't having sex.
9. I like the way my partner touches me when we are having sex.
10. I look forward to having sex with my partner.
11. When I think about having sex with my partner, I feel physically aroused.
12. I feel sexually excited when my partner's body is pressed against mine.
13. When I don't have sex with my partner for a while, I miss it.
14. I like the way my partner moves his or her body.
15. I think my partner is sexy.

Now total your points:

50-60 points: Your partner really makes you sizzle sexually!

36-49 points: You feel naturally attracted to your partner, but there are other problems that are interfering with your ability to enjoy your partner.

21-35 points: You may not want to admit it, but you are not really attracted to your partner.

0-20 points: Your partner is a total turnoff! (De Angelis, 1992)*

If you are looking for more than a sexual partner and desiring a lasting healthy relationship these six qualities should be looked for in a partner:

1. Commitment to personal growth

2. Emotional openness

3. Integrity

4. Maturity and responsibility

5. High self-esteem

6. Positive attitude toward life (De Angelis, 1992)*

In a national survey reported in New Women magazine (October '93) most women desire a partner who can show and express:

love
respect

good friendship and

share same values.

In Graham Masterson's book How To Drive Your Women Wild In Bed
he stresses the importance of:
  interest and care,
  being understanding,
  patience, and most of all
  RESPECT

A women wants to be loved in bed as well as out. She wants to know her partner has her best interests in mind. She wants to be shown respect at all times and in all places. By no means does this relinquish FUN. Play is important to fulfilling sex.

* Are You The One For Me?, (1992), Barbara De Angelis, Ph.D.
IMPORTANT THINGS TO KNOW

Important things to know pertaining to being at great risk of contracting HIV.

- If you or your sexual partner take drugs intravenously and share an infected needle, you are greatly at risk.
- If your partner has been sexually involved with a man who also has or has had sex with other men, you are greatly at risk.
- If you have multiple sexual partners, you are greatly at risk.
- If you practice unprotected anal sex with a partner who has not been tested, you are greatly at risk.
- If you or your partner had a blood transfusion before 1985, the year blood banks began screening donors for HIV, you are greatly at risk.

In general, the more partners a person is involved with, the greater the risk, since multiple contacts not only increase the chances of encountering someone carrying the virus, they increase the risk of other sexually transmitted diseases.

Whenever a person has been infected with HIV, it takes some time for antibodies to show up in the bloodstream. In most infected people, the antibodies can be detected approximately three months after infection. In some cases, however, they won't show up for six months or more. Some doctors recommend a one year span to be on the safe side.

The surest way for protection against HIV infection and STDs is not to have sex at all, or to have sex only with one steady uninfected partner. It is best for a person to wait to have sex until both people are
committed to a relationship. If a person is not in such a relationship, and engage in sex, they should use a latex condom correctly every time they have sex. Partners should agree to use condoms before they start having sex.

CDC National AIDS Hotline
1-800-343-AIDS

The Proper Use of Condoms:

- An effective way of protecting yourself from HIV and other STDs is to use a new latex condom every time you have sex—from start to finish.
- Always have more than one condom available.
- Be careful when opening the condom. You do not use teeth, fingernails, or other sharp objects to open the condom wrapper because a person might tear or nick the condom inside.
- Put the condom on as soon as the penis becomes erect, roll it to the base of the penis, keep the condom on throughout intercourse, and be sure it stays on until the penis is fully withdrawn.
- If you use a lubricant for vaginal or anal use, use one that is water-based. Water-based lubricants are for sale at any pharmacy. DO NOT use oil or grease, such as petroleum jelly, cold cream, baby oil, or cooking shortening as a lubricant; they weaken latex and make the condom break more easily.
- Never re-use a condom.
- Never continue using a condom if it breaks during sex—stop and put on a new condom. Always carry more than one condom.
Water-based lubricants to use are:
  KY Jelly
  ForPlay (comes in flavors and nonoxynol-9)
  Cornhuskers Lotion
  Today Personal Lubricant
  Surgilube
  Astroglide
  Probe
  or any water-based vaginal jelly

Who buys the condoms? If a man knows a woman has condoms in her medicine chest next to the aspirins, or in her night stand, or carries a few condoms with her the way she carries a lipstick in her purse, neither of them has to grapple with the awkwardness of thinking that he's planning to "make a move" or that she is "aggressive" or "promiscuous". The whole issue of condoms becomes a non-issue: The woman has one, gives if to her partner, and he uses it.*

*How to Make Love to a Man (safely), Alexandra Penney
Mary Pat Wylie is a counselor in private practice. A graduate of Ottawa University, Phoenix, Arizona, she owns her own company, Success Techniques, and provides adult educational workshops at The Franciscan Renewal Center in Scottsdale, Arizona.

She is an active member on the board of Center Against Sexual Abuse, in Phoenix. She performed the position of Pastoral Minister at a Jesuit Catholic Parish, 1986 - 1991, in Phoenix, Arizona.

She is the proud mother of four sons, one daughter, and one granddaughter. She successfully manages her professional practice and single life with her younger children.

Her counseling practice empowers others to heal their past, seek inner peace, and create joy and fulfillment in their lives.