



Safer Sex Workshop

A workshop developed by the creative folks at
AIDS COMMUNITY CARE MONTREAL



**This workshop is SHAREWARE.
Copy and distribute freely.**



A QUICK INTRO NOTE...

AIDS COMMUNITY CARE MONTREAL

ACCM is a community organisation working primarily in the English language to prevent HIV transmission, to promote community awareness and action, and to enhance the quality of life of people living with HIV/AIDS.

THE DEPARTMENT OF EDUCATION AND PREVENTION

Health is more than the absence of disease ... health is a lifelong commitment to physical and emotional well-being. Being healthy means being aware of risks and making informed choices. Everyone makes decisions about their health, but some choices are harder than others. Our goal in the Department of Education and prevention is to fight discrimination and to provide individuals with the tools to make informed choices about healthy behaviour. We're empowering individuals and communities to take charge of their health.

OUR WORKSHOPS

Our workshops are built by our team of educators, and are available to anyone who wants to integrate HIV, Hepatitis, and Health Promotion activities into their programming. Our workshops include discussions about biology, law, and the social, political, and economic aspects of HIV, as well as sexuality, identity, self-esteem, sexual orientation, assertiveness and sexual autonomy. Yes, it's SHAREWARE!! You can download, share, interpret, and use sections of our workshops. All that we ask in return is that you mention ACCM when you use our workshops. We also would appreciate any feedback that you have. We want to know what worked for you, and what didn't! We're also available if you have questions about anything in these workshops.

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HOW TO USE THIS WORKSHOP MANUAL

If you have downloaded this workshop you have taken a very important step in helping educate members of your community, school or group of friends about the importance of practicing safe sex. ACCM has made this resource available for everyone because we understood how useful it can be to have all the information in one place. This workshop, and others like it, tries to facilitate the transfer of information from you to those around you.

As such, we have tried to make the information as easy to read and decipher as possible. The table of contents outlines for you the different topics, and includes both discussions and activities. The text is split into information for you, the facilitator, and the audience. Whatever is written in normal type is to be presented, while *italic type* helps prompt you, the presenter, as to what should be happening, or gives hints as to how to keep things moving.

Any and all of this material can be moved around, elaborated on or removed, depending on time restrictions, age of the audience, or applicability of information being presented. If you don't have all of the materials needed for an activity, remove it from your presentation. Please feel free to manipulate the workshop as you wish, but do keep in mind that all the information is pertinent and relevant to anyone who is of age to be sexually active.

One last thing...

When you're doing a presentation on HIV/AIDS, it's important to remember that each group is different. What works well in one group may not apply at all to another. The best thing you, as a facilitator, can do is assess the group you want to present to, and tailor the workshop accordingly. There is a lot of information available to you, so feel free to contact ACCM if you need help sorting through it, or if you have any questions.

Remember, have a good time and keep an open mind....you'll do a great job!!!



You will need:

- Something to write on and something to write with
- 12 Steps of Condom Use, each step printed and laminated with magnets on back (magnets will stick to most black boards)
- Dildo, condoms and lube for condom demonstration
- Various types of condoms and lube for “show and tell”
- Latex gloves, at least one per participant (if possible, also have nitrile gloves for participants who are allergic to latex) for lube demonstration
- Paper towels or wet wipes for cleaning hands after lube demonstration
- Condom negotiation situations cut into individual strips
- Evaluation forms and post presentation form
- Condom packs (includes condom, lube and contact information)
- Pamphlets on STIs and sexuality

1. INTRODUCTION OF ACCM, FACILITATORS AND WORKSHOP

Write our name, website address (www.accmontreal.org), phone number ((514) 527-0928) and name of workshop on the board before you start. You can also write your name on the board.

Hi, my name is _____. I work / volunteer at ACCM, which stands for AIDS Community Care Montreal. Our organization gives workshops to groups about HIV, sex and other related topics. We also provide support to people who are HIV positive, their family and friends, including support groups, workshops, and a resource centre.

Today I'm here to talk about safe sex. There's so much information about sex available – maybe you hear stuff from your friends, or read things in books, magazines, or on the Internet. Some of this information can be confusing, so it's really common for people to have lots of questions. Feel free to ask any questions you may have and I'll do my best to answer them. You can always get a hold of me anonymously after the workshop through phone or email.

This workshop isn't just for people that are having sex right now. It's useful to think about sex and have information before you actually need to use it, or in case one of your friends wants to talk about it.

This can be an intense topic, so you may have strong reactions and people will have a lot of different opinions. How do you think we can make the space safe for everyone here?

(Write the suggestions given on the board, including respect, listening to each other, keeping what said in the room...)

2. LET'S TALK ABOUT SEX

Wait for and encourage responses after you ask each of the following questions. Write down everything the group suggests randomly on the board. Use your judgement and rephrase responses if needed to create a respectful environment.

- **When I say “sex,” what are some things you think of right away?**

Possible answers include oral, anal, vaginal, intercourse, masturbation, phone sex, cyber sex, orgasm, kink, spanking, role play, multiple partners, fingering, fisting, massage, moaning, fantasy, condoms, lube, sex toys

- **Why might someone want to have sex?**

Possible answers include to have fun, to fit in, because they think their partner wants to, to feel good about themselves, to feel good, to impress their friends, because they're in love

- **What are some feelings associated with sex?**

Possible answers include **both good and bad feelings**, such as love, lust, pleasure, nervousness, excitement, fear, romance, hot, connection, horny, commitment, rejection, anticipation, guilt, euphoria

- **What are the body parts you use for sex?**

Possible answers include penis, vagina, vulva, balls, anus, clit, hands, mouth, nose, ears, skin, breasts, eyes, semen, pre-cum, vaginal fluid, saliva, sweat, possibility of blood – any body part or fluid using **all your 5 senses**

- **What are some of the consequences of having sex?**

Possible answers include pleasure, communication, orgasm, pregnancy, STI, including HIV

Be aware of not just having a heterosexist slant. You can use “partner” or “boyfriend or girlfriend” rather than only using opposite gender examples. If participants are slow to participate, suggest some responses and ask if the group thinks they are appropriate.

Reject responses only if they are clearly discriminatory, sexist, violent, homophobic, etc. Address inappropriate responses immediately. If possible, rephrase or suggest alternate responses. (For example, if someone suggests an association with sex that has to do with coercion or force, explain right away that violence and forcing someone are not part of sex, and that sex can only happen when both / all the participants want to be doing what they're doing. You can also emphasize that sex is about pleasure, not about force, and you can ask the participant to offer another example of sex that takes this into account, or you can write “mutual pleasure” on the board).

Activity summary:

Sex can mean a wide number of things to different people. There are many different ways to be sexual with a partner. If you're sexually active, anything you want to do is fine as long as you and your partner are both in agreement with what you want to do. Let's remember that what we chose to do or not is a matter of personal preferences, and that we should all respect those choices. Get the participants to think about sexual situations, decisions and consequences. Emphasize being comfortable with personal choices and desires around sex. Emphasize importance of mutual consent, pleasure, and responsibility related to sex.

B) Things to consider before having sex OR if you're already having sex**a) We've talked about what sex is, but how do I know if I'm ready?**

You can talk about feeling ready, feeling good about your decision, having thought about the consequences, not feeling pressured or forced, feeling okay about changing your mind if things don't feel good / right. It's okay to be a bit nervous but if you are really anxious, maybe you're not ready. Who is your partner? Can you be yourself with him or her? Does your partner want the same thing? What do you think will change for you after you have sex?

b) Am I protected against STI and pregnancy (if applicable)?

What am I using? Do I know how it works? Am I using it properly?

Birth control methods do not automatically protect against STIs. You can always add a condom to any other method, or use a condom alone. We will talk about how to use a condom properly later. You must be using whatever method you use properly. The pill releases hormones into your body that prevent you from getting pregnant, but you have to take it every day and it doesn't prevent STI. If you miss doses or you're taking antibiotics, it won't be as effective. What if you do get pregnant or get an STI? Have you thought about what you would do? How would your partner react?

c) What am I comfortable with sexually? What am I ready to try?

What if something happens that I'm not ready for?

Everybody is different – you don't have to do what your friends are doing or what your partner is interested in, if you don't want to. Many people have a grey zone that they might want to explore, but they're not sure. How will you feel if you try something and you don't like it, or you got carried away and went further than you intended? It's a good idea to be clear about all three of your "yes" "no" and "maybe" activities.



**d) Do my partner and I want the same thing? How can I tell?
How can I communicate to my partner what I want?**

Communication means more than not resisting. It's a good idea to check in that your partner's enjoying themselves. You don't have to give them a checklist – you can listen for sounds of pleasure or ask them if it feels good or they want to go further. Talking about sex can be awkward at first, but you get better with practice and it means you get to the good stuff sooner.

e) What could we do if we don't have sex? Are there other ways for my partner and I to feel good?

The three important things to remember are EXPLORE, DISCOVER and INVENT. EXPLORING each other's bodies through kissing, massage, stroking, mutual masturbation and caressing can be just as satisfying as penetrative sex, and just as intimate. DISCOVERING what you like and telling your partner that what they're doing is making you feel good will help you learn about alternatives: making love is not just penetration. INVENTING can be half the fun: your body is full of erogenous zones that respond to touching or kissing. There's no map to stuff like that: just get in there!

Remember:

- Not everyone's having sex or being sexual, and not everyone equates sex with love.
- It's fine not to have sex or to decide not to do something you're not comfortable with, or to go only up to a certain point. It is useful to think about it and have information, even if you're not planning on having sex right now. You can also try something and decide that you don't like it, or that you don't want to do it this time. Just because you've done something before doesn't mean you have to do it again.

Being clear about what you want (for yourself and with your partner) will help make the experience more comfortable and enjoyable for both of you.

Clarify that...

- You should feel comfortable with what you're doing. If you don't want to do it, you don't have to. You shouldn't feel forced or pressured into something to please your partner. You shouldn't try to push your partner into doing something they're not ready for.

3. ALL ABOUT CONDOMS: THE LONG AND SHORT OF IT ALL

Preventing STIs and pregnancy are two important reasons to practice safer sex. If you are sexually active, condoms are still one of the best ways to protect against most STIs and can be used for contraception either alone or along with other methods. Other methods alone (pill, diaphragm, IUD) do not protect against STIs.

A) The 12 steps of condom use

Place the 16 steps randomly on the board. Explain that there are 12 real steps and 4 steps that don't actually have anything to do with using condoms properly. Ask the group what they think is the first step. You may have to explain that the first couple of steps happen before the condom even enters the picture. Go through the steps as they identify them in order, asking them about the reasons for each step and making sure the explanations are clear.

The Steps:

It may seem like there's a lot, but it gets faster with practice. If you try this out first when you're alone, you'll be much more comfortable with your partner.

1. Discuss what you're going to do with your partner.

Establish consent, make sure you both want the same thing and that condoms and lube will be available if the activities require them.

2. Play, explore and drive them wild without genital contact.

The penis needs to be hard (erect) for the condom to go on, and this gives both partners a chance to get sexually excited, relaxed, and lubricated (if female).

3. Check the expiration date.

Condoms are made of latex, which weakens over time, especially when stored in a hot or sunny place. A condom is much more likely to break after the expiry date or when stored in a wallet for a long time or over a radiator. Ask the group where good places to store your condoms would be – like a knapsack, underwear drawer, under the bed, etc.

4. Don't snag the condom with nails, jewellery or teeth.

Make sure you don't damage the condom while opening the package. A damaged condom may leak or break.

5. Check which way the condom rolls easily so it goes on right side out.

The condom won't roll on well the wrong way. If you start with the wrong side, you have to throw it out since there will be pre-cum on the outside when you turn it around, and this can cause pregnancy and transmit HIV.



6. Add a drop of lube on the inside of the condom.

This increases pleasure for the person wearing the condom, and makes sure that air stays out of the tip when you pinch it.

7. Pinch the tip.

This takes out the air and makes space for the ejaculate in the tip, so the condom is less likely to break when he ejaculates. This is one of the most important steps.

8. Roll the condom all the way down to the base of the penis.

This makes it less likely to slip off during sex.

9. Add lubricant for slippery, sensual s-excitation.

Lube feels better for both partners and decreases the chance of condom breakage. The vagina usually produces lubrication when a woman's sexually excited, but this varies from person to person and throughout her menstrual cycle, and it's always fine to add more. For anal sex, lubrication is essential because the anus has no natural lubrication.

10. Have yourselves a good time, adding some water if the lube dries out.

Water will make water based lube slippery again, and sex is about enjoying yourselves.

11. Guys - pull out before you get limp, holding the base of the condom.

If you pull out while still hard, it makes sure that no semen leaks out inside your partner, and holding the condom makes sure it doesn't come off inside while pulling out.

12. Throw the condom and package into the garbage. Never re-use.

You can't reuse any kind of condom, and throwing things in the trash is just plain polite. Not to mention that condoms have been known to clog toilets...

One last thing – condoms stretch. I can make this one fit over both of my hands. Some guys prefer large condoms for comfort, but unless someone has very specific elephantitis, he'll fit into whatever you have available.

The after step: Bask in the afterglow

Enjoy the good feelings, and you can use this opportunity to talk about what you liked, what you want to do again, and what you'd like to try differently next time. This is also a time to relax and come down from any intense feelings.

Activity summary:

Participants should understand the reasons behind the steps to properly use a condom.



B) Condom demonstration

Use a jelly or wooden dildo as the model. Introduce the model by name to get the participants laughing and to create a fun atmosphere. Pick the best option based on time available, number of participants, level of control / rowdiness, maturity, etc, this activity is optional.

- You can demonstrate the steps on the dildo while you go through the 12 Steps, or you can also ask a different participant to demonstrate each of the steps. (This option saves time and may work better with rowdy groups.)
- You can pass the dildo around the room and give each participant a chance to practice at the same time as the Condom and Lube Show and Tell. (This takes more time and works better with smaller, less rowdy groups.)
- You can ask for a volunteer to come to the front and demonstrate, and get the rest of the participants to guide them through the steps one by one. (This puts a lot of focus on one member of the group. It can either be hard to get a volunteer or too many people may want to have a turn.)
- You can divide the group into two teams and have a relay race. Each member of the team goes through all the steps in order and the first team to finish wins. You need two judges to make sure that all participants are following the steps, and this activity works best when there's more time and you're not worried about getting the group too excited.

Activity summary:

Allow the participants to get hands on experience putting on a condom.

C) Condom and lube show and tell

There are lots of different types of condoms available. Each person may have different preferences when it comes to condoms. Some people find certain kinds feel better or fit better for them. There are also condoms and barriers made for specific activities, such as oral sex.

Different types of lubricant, or lube, also have different consistencies, and you can pick your personal favourite. It is important to use water or silicon based lube with condoms because anything oil based (Vaseline, moisturizer, baby oil, etc.) will break down latex and will very likely cause the condom to break.

Show the various types of condoms and lube. Explain the properties of each one. Invite the participants to examine the condoms and lube hands-on. You can pass them around, or have the participants gather around if it is a smaller group.



- **female condoms**

It lines the vagina and feels different than the traditional male condom. You squeeze the ring and insert it the same way as an OB tampon, leaving an inch or two outside the body. This means it offers better protection against HPV and herpes. The ring holds it in place, you add lube to the inside, and you don't need to have an erection to put it in place, so it can be inserted ahead of time. It's made of polyurethane, so can be used by people with latex allergies, but it's expensive and can't be reused.

- **polyurethane condoms (Avanti)**

This is an option for those who are allergic to latex, but it's more expensive than the traditional latex condom. It transfers heat better than latex, so some people enjoy it because they can feel their partner's warmth better.

- **non-lubricated condoms**

For oral sex on a man, or if you prefer to use your own lubricant. You can use flavoured lubricant for oral sex as well. You can cut a condom open to make a dental dam for oral sex on a woman or for rimming (oral-anal contact).

- **dental dams**

For oral sex on a woman or for rimming. Available in specialty sex or condom stores. You can also make a dental dam by cutting open a glove or a non-lubricated condom. (You can demonstrate this by taking a glove, cutting off the fingers and cutting it open on the side opposite the thumb. Place on partner's vulva. You can place your tongue or finger in the thumb of the glove to explore inside your partner!)

- **ribbed or studded or sensation tip condoms**

For increased sensation and stimulation for the partner.

- **flavoured condoms**

The flavour is due to flavoured powder on the condom. To be used only for oral sex because the flavouring can cause infection or irritation of the vagina or anus.

- **large size condoms**

These are slightly bigger than regular condoms for men who find them too tight.

- **extra thin condoms**

These are subjected to same tests and are as safe as regular condoms if used properly. Some people find the thinner latex allows more feeling during penetration. Beyond 7 is available in the drug stores, other types are more expensive and available in sex shops.

- **glow in the dark condom**

This is a novelty item not to be used for sex. It may not have been tested for safety to be used for penetration. The liquid used for glow in the dark effect may cause irritation or infection of vagina or anus.

- **extra strong condoms**

Some people prefer them for more vigorous or anal sex, which can have more friction.

- **coloured condoms**

These are the same as regular condoms. For variety and fun!

- **latex or nitrile gloves**

For safer fingering or fisting, especially if someone has cuts on their hands or wants to smooth out the surface. Nitrile gloves can be used if allergic to latex.

- **water based lube**

There are various formulas and brands, each with it's own consistency and flavour. You can add water to rehydrate if it gets sticky. Brands that contain glycerine are more likely to cause yeast infections.

- **silicon based lube**

There are various formulas and brands, each with it's own consistency and flavour. Silicone is generally more expensive, but it remains slippery longer than water based lube. You can't add water to make it slippery again.

- **flavoured lube**

This is for oral sex only because the sugar can cause yeast infections or other irritations.

(NONOXYNOL-9 should not be used for HIV prevention. It kills sperm (it's a spermicide), but it also irritates the genital linings, making it easier for HIV to get into the body.)

Activity summary:

Participants become familiar with different options of condoms and lubricant by seeing and/or touching different kinds. Getting familiar with condoms makes it more likely that you will use them and use them properly.

D) Glove and lube activity

Now we're going to test out the difference that lube makes to the feel of latex.

Ask if anyone is allergic to latex. Distribute one latex glove to each participant, or nitrile gloves to those who are allergic to latex. Ask them to put it on the hand of their choice.

What does the glove feel like? What does it feel like to rub your fingers together? What does it feel like to shake someone's hand with the glove on?

Now I'm going to put a little lube on your glove. I'd like you to rub your fingers together. What does that feel like? What does it feel like to shake someone's hand now, with the lube on?

Which one feels better? Which one is more fun?

What is the difference in feeling with the lube compared to without the lube?

Allow time for the participants to interact with each other and test the feeling and possibly the taste of the lube. It's okay if the participants react negatively to the lube. You can say that sometimes it feels strange, especially if you're not used to it. You can also say that it usually adds sensation and pleasure in sexual situations. Suggest that they can try some at home by themselves to feel the difference.

Recap by saying:

- Lube makes things slippery. Many people find that the latex feels better when it's more slippery.
- By making things slippery, there is less friction and therefore less chance the condom will break.
- There are many different types of lube. You can try a bunch to choose your favourite. Only water or silicon based lubes are safe to use with condoms.

Get the participants to take off the gloves and throw them out (you can pass around a waste basket and tissue or wet ones to clean hands).

Activity summary:

Give the participants an opportunity to feel the difference that lube can make when used with a barrier. Recap by explaining the importance of lube for sensation and to decrease the chance of condom breakage.



E) STIs

STI stands for Sexually Transmitted Infections and people can be infected without having any symptoms. Bacterial STI (chlamydia, gonorrhoea, syphilis) can all be cured with antibiotics if they are caught early enough. Viral STI can't be cured, but some are more serious than others. Herpes causes cold sores on your genitals or mouth. HPV causes warts and some varieties are linked to cancer, which is why it's important to get an annual pap smear. Hepatitis B infects the liver, but there's a vaccine to prevent it. HIV infects the immune system and there is no cure.

COMMON STIs

This information is presented as an overview of some common STIs. You can include parts of the information as appropriate, as time allows or in response to questions. You can explain that the terminology has changed from VD to STD to STI, but these terms refer to the same infections. Depending on the group, you can talk more about the specific STIs that may be more prevalent.

Bacterial STIs – all can be cured if detected early enough

- **Gonorrhoea** (“clap”) infects a mucous membrane
 - **Transmission:** occurs by exposure of mucous membrane / genitals to infected person's semen or vaginal fluid
 - **Symptoms:** sometimes painful urination, discharge, sometimes no symptoms
 - **Testing:** swab & culture
 - **Treatment:** cure with antibiotics

- **Chlamydia** infects a mucous membrane
 - **Transmission:** occurs by exposure of mucous membrane / genitals to infected person's semen or vaginal fluid
 - **Symptoms:** sometimes painful urination, discharge, sometimes no symptoms
 - **Testing:** swab & culture or urine sample
 - **Treatment:** cure with antibiotics

- **Syphilis** infects a mucous membrane and eventually organs if untreated
 - **Transmission:** occurs by exposure of mucous membranes/ genitals or openings in the skin to infected person's chancre or rash (which contains the bacteria)
 - **Symptoms:**
 - 1st phase: painless chancre (“sore”) at site of infection,
 - 2nd phase: painless rash on any part of the body
 - 3rd phase: infection of organs such as brain and heart
 - **Testing:** blood test
 - **Treatment:** cure with antibiotics

Viral STIs remain in the body for life – no cure

- **HIV** infects the immune system (in some, also neurological system)
 - **Transmission:** entry into the body (through membranes or bloodstream) of one of four possible body fluids of an infected person (blood, semen, vaginal fluid, breast milk)
 - **Symptoms:** None initially. Eventually opportunistic infections may result due to immune system suppression.
 - **Testing:** blood test
 - **Treatment:** Antiretroviral medications. No cure.

- **Hepatitis B** infects the liver
 - **Transmission:** entry into the body (through membranes or bloodstream) of one of five body fluids of an infected person (blood, semen, vaginal fluid, breast milk, saliva)
 - **Symptoms:** sometimes none or mild. Fever, fatigue, jaundice, cirrhosis of the liver
 - **Testing:** blood test
 - **Treatment:** Rest. A preventive vaccine is available. Most people eliminate the virus on their own, but 10% become carriers for life. Medications eliminate the virus in some people.

- **HPV** infects skin or a mucous membrane
 - **Transmission:** Contact with someone's warts or infected site
 - **Symptoms:** Appearance of warts or possibly itchy lesions on skin. Linked to cervical cancer in women. There are over 200 types of HPV and many have no symptoms. The majority of sexually active people have some form of HPV.
 - **Testing:** a doctor may be able to diagnose based on observation
 - **Treatment:** Surgery, laser removal, or freezing can get rid of warts, but the virus is still in the body. Annual pap smears to detect abnormal cells and prevent cancer.

- **Herpes** infects a mucous membrane
 - **Transmission:** Contact of genitals / mucous membranes with someone's lesions or just before an outbreak
 - **Symptoms:** Periodic appearance of fluid filled blisters, flu like symptoms. Sometimes there are no noticeable symptoms.
 - **Testing:** a doctor may be able to diagnose based on observation
 - **Treatment:** Drugs can reduce the severity and frequency of outbreaks. The virus cannot be eliminated from the body.

Parasite

- **Crabs or pubic lice** live and reproduce on your body in your pubic hair
 - **Transmission:** Contact with pubic hair or underwear and other clothing (including towels) of a person who has them
 - **Symptoms:** Itchiness, rash, presence of crabs and eggs
 - **Testing:** a doctor can diagnose based on observation
 - **Treatment:** Medicated shampoo, shaving

Activity summary:

Information on common STIs, to be used at the judgement of the presenter and according to the demographic of the group and their interests

F) Negotiation of condom use

Even when people have a lot of information about condoms, they are not always using them 100% of the time. This activity encourages participants to think about why people may not use condoms, and what some possible responses to these reasons may be.

How do you feel about condoms? Do you feel like you know how to use one properly? Do you feel better prepared to use a condom after some of the activities we did today?

Most participants will respond positively. Some may say that they already felt comfortable enough before. Some may say no. It is important to ask why, and to address these concerns before moving on.

Would you feel comfortable using a condom in a sexual situation after today?

Participants will usually say “yes”. If anyone says “no”, ask why and address the situation before moving on.

Do you think that everyone uses condoms all the time?

Participants will most likely say “no”. If they say “yes”, you can say that actually this isn’t true, and that many people don’t use condoms every time. You can mention HIV and STI transmission rates as proof that not everybody does all the time.



What do you think are some of the reasons that people don't use condoms all the time?

- someone may not know how to use them properly
- someone may be embarrassed
- don't have any on you
- they're embarrassed to buy them
- things happen fast
- don't know how to bring it up
- don't know where to get them
- it's inconvenient
- it doesn't feel as good
- you may want to get pregnant
- you're in a relationship

Many other responses are also possible. Write down responses on the board.

We're going to go through some of these reasons. Imagine you're with someone who says one of these things to you as a reason for not using a condom. Here's a chance for you to think of how you might respond to that person, to let them know that using a condom is important to you.

I'm going to pass you each a slip of paper with something someone might say to you as a reason not to use a condom. How would you respond to someone who says this to you? Distribute the slips of paper.

Go through the group, asking the person to read their slip and then asking what they would say. Encourage and prompt the person to respond if they say, "I don't know". Do not overly insist. If the person doesn't respond, ask the rest of the group if anyone has any suggestions. Only offer suggestions yourself if there really are no responses forthcoming. Do not be too quick to jump in and offer suggestions. It is preferable for the participants to come up with their own way of saying things, as these will likely be more relevant and useful to them.

"It doesn't feel as good."

"I just want to feel close to you."

"Don't worry, I'm clean."

"We've been together for 6 months, and we've both been tested."

"If you loved me, you would."

"We're lesbian. We're immune."



“It’s too tight.”

“I don’t have any condoms.”

“I’ll lose my erection.”

“We’re both HIV positive.”

“You think I’m a slut!”

“I’m already on the pill.”

“Don’t you trust me?”

“I’m HIV negative.”

4. THAT'S ALL FOLKS

A) FINAL QUESTIONS AND CONCLUSION

Ask the participants if they have any questions. Answer any questions. Leave them with contact information in case they think of questions later and would like to contact you (you wrote this on the board at the beginning of the workshop.)

Ask the participants to fill out an evaluation form to “let us know what you thought of the workshop”. Tell them to be honest, and that it’s okay if there were things they didn’t like. Tell them not to put their name on it.

If you are distributing condom packs or pamphlets, distribute these at the end, either as they are filling out their form or as they hand in the completed form. Explain what the condom packs are (what is in them) and what information is in the pamphlet(s) you are giving out.

We have included a sample participant evaluation form, as well as a facilitator’s evaluation form to let us know how the workshop went for you.

B) Evaluation

ACCM Workshop evaluation

Did you learn something new during the workshop? yes no

If so, what did you learn?

Which four body fluids can transmit HIV if they gain access to the bloodstream?

Would you feel more comfortable meeting someone living with HIV after today? yes no

After this workshop, can you see yourself doing anything differently? yes no

If yes, what? If no, why not?

Was the information easy to understand? yes no

Did you feel encouraged to ask questions and participate? yes no

Was the workshop relevant to you? yes no

Why or why not?

What did you enjoy most?

What other topics or information do you think we should cover?

Do you have any other suggestions or comments?

Please tell us about yourself ... Age: _____

Gender: _____



Workshop Evaluation for Facilitators – Please send ACCM your feedback!

Please describe the group you used the workshop with. _____

Did you find the workshop useful? yes no

What did you find most useful? _____

Were the instructions clear? yes no

Was the information easy to understand? yes no

What was your group's response to the workshop? _____

Would you change anything about the workshop? yes no

If yes, what? _____

What other topics or information do you think we should cover? _____

Do you have any other suggestions or comments? _____

Thanks for your feedback! Please fax this form to Education and Prevention at (514) 527-0928.

