

BLACK AND WHITE MEN TOGETHER - SAN FRANCISCO BAY AREA
AIDS TASK FORCE
AIDS SUPPORT SURVIVAL
PROGRAM

"AIDS is a Manageable Disease"

June 14, 1989

PROGRAM PURPOSE:

The purpose of this program is to provide a process by which an individual infected with the HIV virus can work through their AIDS issues and crisis from the point they are tested positive or diagnosis to returning to a proactive, productive action plan for living.

The quality of the program and its results will depend on the investment and commitment made by the participating individual. We are not guaranteeing that the positive HIV will become negative or that the AIDS diagnosis will change. It is hoped we can build on your accomplishments and provide a passage to new levels of fulfillment and enrichment of your life. The passage will be a journey over rivers of tears, around the forest of lost dreams and bitter memories, and through the valleys of despair, denial, hate, and depression. It is hoped after exploring the current events in your life during the next several weeks, you will see you are a vital part of life with much to offer others and a future for yourself.

We will go through the three major modules over a period of twenty to twenty-one weeks. (Five weeks for Module I, fifteen to sixteen weeks for Module II, and Module III is on-going Group supported) Whenever the process becomes too painful, you are free to leave. However, we recognize that this can be and is a difficult process of awareness and self-actualization. We feel the best benefits of this support program can be achieved by your participation. The choice is yours, now or later the journey must be made to bring back meaning to your life.

MODULE I. Support Group 101

SESSION I. - Support Group 101

Week 1

TITLE: Getting together.

Section 1. Orientation, Program overview and outline and expectation

- o Trust
- o Bonding
- o Confidentiality

Section 2. Administrative and housekeeping information

Section 3. Social

Week 2
(Free Forum)

SESSION II. - Support Group 101a

TITLE: Dealing with the infection

Section 1 -

Section 2. Round table discussion - how do you feel about yourself.

Week 3

Section 3. Dealing with your feelings.

Week 4

Section 4. Where do I go from here or where do I want to go?

Section 5. Buddy Support System (BSS) Program

- o Prepare telephone list of participants and their respective buddy assignments. (Lottery Drawing)

Week 5

SESSION III - Support Group 101b

TITLE: Closure (Pot Luck)

Section 1. Review

Section 2. Accomplishments and achievements

Section 3. How do you feel about yourself? Have you learned anything about your feelings and how to deal with them?

Section 4. Commitment to the Buddy Support System (BSS)

- o Information on Module II Support Group

Section 5. Module I Evaluation.

Week 1

MODULE II. Support Group 200

Session I - AIDS 101

TITLE: History of the virus

Section 1. What is AIDS?

- o History
- o Epidemiology

Section 2. How did I get AIDS?

- o Methods of Transmission

Section 3. AIDS Prevention.

Week 2/3

SESSION II - AIDS 200

TITLE: Why Me? (Self-guilt)

Section 1. Dealing with self and ownership of feelings.

- o Depression
- o Anger
- o Hate
- o Blame
- o Confusion
- o Self-image
- o Fear

- o Abandonment
- o Lonely
- o Betrayal of trust and security
- o Love

Week 3/4

Section 2. Mourning a passing of a way of life and living.

- o What I enjoy doing before
- o You can still live life

Week 4/5

SESSION III - Social Impact

TITLE: Who do I tell? When, How! How will with affect my relationships?

Section 1. People I can tell or not tell.

- o Family
- o Friends
- o Lover
- o Co-workers

Week 5/6

Section 2. Relationship

- o Self
- o Close Relationship
- o Others

Week 6/7

SESSION IV -

TITLE: Sorting through the issues

Section 1. What are my priorities?

Section 2. What are my needs now?

Section 3. What are my resources?

Week 7/8

Section 4. What are my legal rights?

Section 5. What are my legal responsibilities?

Week 8/9

Session V.

TITLE: In touch with myself and others

Section 1. Looking at self and others.

- o Establish self identity

Section 2. Non-sexual touching of self and others

Section 3. Dealing with stress in your life

Section 4. Mutual massage

Week 9/10

Section 5. Communication - Your Needs

- o Clear and concise
- o Active listening

Section 6. Risk taking exercises

- o Establishing new friends and support systems
- o Family relationships
- o Work relationships

Week 10/11

(Free Forum)

Section 7. Discussion of self and feelings

Week 11/12

Session VI

TITLE: Future Planning

Section 1. Why think about the future?

Section 2. You are still in control

Section 3. Positive thinking about self worth and what you have to share/offer

Week 12/13
(Writing Exercise Section)

Section 4. Proactive Thinking

- o New life and new hopes

Section 5. Planning Future Event(s)

Week 13/14

Section 6. Life Style Changes

- o Diet
- o Stress
- o Exercise
- o Relationship(s)

Week 14/15

Section 7. Available Treatments and alternatives

Week 15/16

SESSION VII

TITLE: End of Passage - Graduation Celebration

Section 1. Summarization of Module II

Section 2. A renewed start - Your days are in **YOUR** control.

Section 3. Module II Evaluation.

On-Going Program

MODULE III. SUPPORT GROUP 300

SESSION I - Follow-up

Section 1. Check in with buddy at least once a week

Section 2. Check in with Group Leader at least once a month

Section 3. Attend follow-up group reaffirmation and progress meeting once every two months

Section 4. Whenever there is a problems check in with your buddy, members of your group or your Group leader.

Group Facilitated Activity

SESSION II - Personal Care

Section 1. Dietary

- o Cooking Classes

Section 2. Home Maintenance

Section 3. Rights

Section 4. Legal Responsibilities

Section 5. Quality of Life

Section 6. Social Events and Activities

Section 7. Module III and Program Evaluation

NATIONAL TASK FORCE ON AIDS PREVENTION
OF
THE NATIONAL ASSOCIATION OF BLACK AND WHITE MEN
TOGETHER

PLAYSHOP FACILITATOR'S MANUAL

For Bath Houses

NTFAP WS-001-0A1

Updated: April 1, 1990

Developed by

Black and White Men Together/ San Francisco Bay Area
and

Men of All Colors Together - Greater Bay Area's

BWMT/MACT AIDS TASK FORCE

*Need to % between
directions for facilitator
& other directions.*

I. COURSE TITLE: PLAYSHOP FOR BATHHOUSE

II. FACILITATOR'S GUIDE: NTFAP WS 001-0A1

III. PRESENTATION TIME:

- A. Preparation Time: 0.5 Hours
- B. Presentation Time: 1.5 Hours

IV. FACILITATOR:

- 1 - Workshop Coordinator
- 1/2 Facilitators

IV. REFERENCES:

V. INSTRUCTIONAL AIDS:

A. TRAINING AIDS:

1. Safer Sex Kit (See Inventory List)

- a. Selection of Condoms - lubricated and non-lubricated.
- b. Latex Grooves
- c. Dental Dams
- d. Sex Toys - Dildos, butt plugs, handcuffs, cock rings, etc
- e. Selection of Lubricants
- f. Draw the line Card Set

2. Handouts

- a. Workshop Host Sign-up Sheet
- b. National Task Force on AIDS Prevention Mission Statement
- c. (Report form)
- d. Confidentiality Statement
- e. Chapter Literature

B. INSTRUCTIONAL MATERIAL:

- a. Easel
- b. News print
- c. Felt Tip Pens
- d. Masking Tape

*Salon Sex Poster Series
Program Evaluation*

- e. Note Pads
- f. Pencils

VI. TERMINAL OBJECTIVE OF THE PLAYSHOP:

Completion of the Playshop, the participants will be able to understand the history of the HIV infection, methods of transmission, high and low risk sexual behaviors, types and how to use condoms and how to negotiate safer sex with their partners.

VII. ENABLING OBJECTIVE(S): The Participants will:

Utilizing this information, will know the the stages of HIV+ progression, how to correctly put on condoms and their care and the difference between high risk and low risk sexual behaviors.

VIII. ~~PROGRESS TEST:~~ *evaluation*

Workshop Coordinator to administer a pre and post test. Test material to be supplied by the National Task Force office.

~~VI: HOMEWORK:~~

~~None~~

VII: Outline of Instruction:

A. INTRODUCTION TO THE LESSON

Activity

1. Preparing for presentation

Instructor's Activity

1. Arrive approximately half hour before the presentation time to allow sufficient time to set up and talk with the host/sponsor of the workshop.
2. Dress Code: Dress down. T-shirt and shorts. Check with owner or manager first. Do not recommend facilitators use towels. If in doubt ask the Bathhouse management
3. Prior to class, place a pre-test form in each chair, information about the National Task Force, local Task Force or Prevention Team, Chapter and any other pertinent information.
4. Have Easel up with chart open with welcome and name of organization presenting the workshop.
5. Discuss with co-facilitators what sections will be covered by whom during this presentation.

not high risk but

Note: It is a good idea for facilitators to rotate through the material so they can become familiar with the whole workshop instead of bits and pieces.

2. Beginning the Workshop

6. Make sure you have the correct name of your host/or establishment.

7. Thank everyone for attending. Thank the host by name for opening their establishment for the workshop.

NOTE: At this point you read your audience to determine which workshop routine and modules will be use. If the group is too small, 6 or less attendees, then reduce the playshop by removing or modifying modules. This will be noted in this lesson guide.

3. Introduction

8. Introduce the Workshop Team by their first names.

9. Give background history of the workshop and why it is important for the attendees attendance and participation.

10. Stress the point that this a Gay and Sex positive program.

11. Inform the participants what will be taught during this presentation. This will reduce questions that will be covered when you reach that module.

4. Workshop Ground Rules

12. This is very important. Must stress that we do not judge people, their questions or answers. This is a confidential setting and information is not to go beyond the group. Everyone has the right to speak and be heard. Keep other conversation to a minimum. This is how we learn from others through sharing.

5. Administrative Housekeeping

13. Pre-test. Tell them why it is important to complete the test. Also inform them there will be a post

*Nothing
will be taught.
what will be explained
explain
format*

test at the end of the workshop and that it is important for them to complete this form also.

14. Inform them of the Host's house rules, location of toilets and where people can smoke and if they can smoke during the presentation. It is suggested that the workshop be a smoke free environment. Participants are free to move around and do not have to sit through the entire program.

Why?

6. Workshop:
Introduction of Participants
(Exercise)

15. Ice breaking exercise. Have people pair up and find out how AIDS has impacted on their lives.

NOTE: If group is 7 or less, do not pair people off. Have each person introduce themselves to the group and state how AIDS has impacted their lives.

16. One co-facilitator to list key words/statements from each participant statement on newsprint sheet and summarize after everyone has made input.

7. Start with Module I

HIV+ History.

**BLACK AND WHITE MEN TOGETHER - SAN FRANCISCO BAY AREA
MEN OF ALL COLORS TOGETHER - GREATER BAY AREA**

BWMT/MACT AIDS TASK FORCE

**HIV SURVIVAL SUPPORT
PROGRAM**

"HIV is a Manageable Disease"
May 1990

PROGRAM PURPOSE:

The purpose of this program is to provide a process by which an individual infected with the HIV virus can work through their AIDS issues and crisis from the point they are tested positive or diagnosis to returning to a proactive and productive action plan for living.

ROUNDTABLE DISCUSSIONS:

All Roundtable Discussions (RTD) are optional and are to be used only if the group can not come up with a topic. It is suggested that the facilitators try to keep the program moving in a self awareness direction, where the participants can begin to recognize their value and start looking forward.

BUDDY SUPPORT SYSTEM:

The purpose of this system is to provide a process in which people with life threatening diseases have a support system to improve the quality of their lives. It is not to replace professional services that can help the person process issues in their lives, but to provide an identified resource person in which a safety net is available when a support group member needs help.

Support group facilitators are not the main component of the Buddy Support System (BSS). The BSS is for and supported by the group members. The group members are paired off with each other. During times when the support group members need to talk to someone, their support buddy will be the immediate contact person. If that person is not available then the other members in the group are to be contacted. In the event a group member is not able to contact the above individuals, then the support group facilitator should be contacted.

The Buddy Support System offers resources and alternative support systems for support group members when they are in a crisis situation.

BUDDY SUPPORT SELECTION (Lottery Drawing):

The Buddy Support Selection (Lottery Drawing) will work in the following manner: Two sets of numbers ranging from 1 - 4 (8 members) will be written on a piece of paper and placed in a hat, dish, or bag. The support group member will then be allowed to draw a number. The two support group members who get the same number will be buddies. This process will continue until all support group members have been paired off.

MODULE I. Support Group 101

The goals of module I are to build Trust, Bonding, and Support between members. Support group members will examine their feelings about HIV and being seropositive, look at past and present accomplishments, decide on future accomplishments, and form personal support systems.

SESSION I. - Support Group 101

Week 1

TITLE: Getting together.

Section 1. Orientation, Expectation and Program Overview and Outline

Orientation:

- Introduce yourself and Co-Facilitator
- Explain Ground Rules (see Appendix A)
- Explain meeting format (see Appendix B)
- Explain group facilitators responsibilities (see Appendix C)
- Have everyone in the group introduce themselves and share some background.

Expectation:

- Commitment:** Participants are expected to commit to the entire (8) eight week program
- Participation:** Participants are encouraged to participate in group check in, group discussion, and sharing of information
- Attendance:** Participants are asked to attend every meeting. If this is not possible, participants are asked to notify facilitators they will be absent.
- Confidentiality:** By signing consent to participate form participants are agreeing to keep all group names and information confidential

Program Overview and Outline:

- Give synopsis of entire program
- Cover content of each module

Section 2. Administrative and Housekeeping Information

- Have everyone complete consent to participate form (see Appendix D)
- Have everyone complete client intake form (see Appendix E)
- Ask group if they want a phone sign-in sheet. If so start one.
- Distribute program packets to group members of Module I

Section 3. Social

- Roundtable discussion - group decided topic

Section 4. Wrap Up

- During the week, have members write down anything they want to discuss at the next meeting

SESSION II. - Support Group 102

Week 2
(Free Forum)

TITLE: Dealing with the infection

Section 1. Announcements and Check-in

Section 2. Roundtable discussion - How do you feel about HIV.

Section 3. Roundtable discussion -How do you feel about yourself.

Section 4. Wrap Up

Week 3

TITLE: Dealing with self and ownership of feelings (Pt 1)

Section 1. Announcements and Check-in

Section 2. Roundtable dicussion

- Depression
- Anger
- Hate
- Blame
- Confusion
- Fear

Section 3. Wrap Up

Week 4

TITLE: Dealing with self and ownership of feelings (Pt 2)

Section 1. Announcements and Check-in

Section 2. Roundtable dicussion

- Self-image
- Abandonment
- Loneliness
- Betrayal of trust and security
- Love

Section 3. Wrap Up

Week 5

TITLE: Mourning the passing of a way of life

Section 1. Announcements and Check-in

Section 2. Roundtable discussion - What I enjoyed doing before HIV

Section 3. Wrap Up

Week 6

TITLE: Looking Forward

Section 1. Announcements and Check-in

Section 2. Buddy Support System (BSS) Program

- Explain Buddy Support System (BSS).
- Prepare telephone list of participants and their respective buddy assignments. (Lottery Drawing)

Section 3. Round table discussion -Where do I go from here or where do I want to go?

- Look back on ones accomplishments and direction before HIV.
- Make a list of what one wants to accomplish now and in the future.

Section 4. Wrap Up

SESSION III - AIDS 101/Risk Reduction

Week 7

TITLE: History of the virus

Section 1. What is AIDS?

- History
- Epidemiology

Section 2. How did I get AIDS?

- Methods of Transmission

Section 3. AIDS Prevention.

Section 4. Wrap Up

Note: For **SESSION III** The BWMT/MACT AIDS Task Force's Hot, Horny, and Healthy Playshop can be used as the educational tool.

SESSION IV - Support Group 103

Week 8

TITLE: Closure (Pot Luck)

Section 1. Review Accomplishments and achievements

- Where was I, where am I

Section 2. Roundtable discussion

- How do you feel about yourself?
- Have you learned anything about your feelings and how to deal with them?
- Feedback on the 8 week program (what have they gained)

Section 3. Commitment to the Buddy Support System (BSS)

- Confirm lottery selections
- Information on Module II Support Group

Section 4. Module I Evaluation.

- Distribute evaluation form for Module I (see Appendix F)
- Have members complete evaluation form

**NATIONAL TASK FORCE ON AIDS PREVENTION
OF
THE NATIONAL ASSOCIATION OF BLACK AND WHITE MEN
TOGETHER**

**PLAYSHOP FACILITATOR'S MANUAL
FOR BATHHOUSE**

NTFAP WS-001-01A

Updated: July 5, 1990

Developed by

Black and White Men Together/Men of All Colors Together

BWMT/MACT AIDS TASK FORCE

I. **WORKSHOP TITLE:** HOT, HORNY AND HEALTH PLAYSHOP FOR BATHHOUSES

II. **FACILITATOR'S GUIDE:** NTFAP WS 001-01A

III. **PRESENTATION TIME:**

A. Preparation Time: 0.5 Hours
B. Presentation Time: 1.5 Hours

IV. **FACILITATOR:**

1 - Workshop Coordinator
1- 2 Facilitators

IV. **REFERENCES:**

Workshop Facilitator's Manual (NTFAP W-001-000)

V. **EDUCATIONAL AIDS:**

A. TRAINING AIDS:

1. Safer Sex Kit (See Inventory List)

- a. Selection of Condoms - lubricated and non-lubricated.
- b. Latex Groves
- c. Dental Dams
- d. Sex Toys - Dildos, butt plugs, handcuffs, cock rings, etc
- e. Selection of Lubricants
- f. Draw the line Card Set

2. Handouts

- a. Workshop Host Sign-up Sheet
- b. National Task Force on AIDS Prevention Brochure Statement
- c. NTFAP Report form
- d. Confidentiality Statement
- e. Chapter Literature
- f. Pre-Workshop Test
- g. Post-Workshop Test
- h. MACT & BWMT Chapter information
- i. Workshop evaluation form

B. INSTRUCTIONAL MATERIAL:

- a. Easel
- b. News print
- c. Felt Tip Pens
- d. Masking Tape
- e. Note Pads
- f. Pencils

VI. **EDUCATIONAL OBJECTIVE OF THE PLAYSHOP:**

Upon the completion of the Playshop, the participants will have an understanding of the history of the HIV infection, methods of transmission, high and low risk sexual behaviors, types and how to use condoms and how to negotiate safer sex with their partners.

VII. **LEARNING OBJECTIVE(S):** The Participants will know:

- o Know the the stages of HIV+ progression
- o How to correctly put on condoms and their care
- o Difference between high risk and low risk sexual behaviors
- o Negotiate safer sex activities.
- o How to eroticize sex for self and partner(s)

VIII. **PROGRESS TEST:**

Workshop Coordinator to administer a pre and post test. Test material to be supplied by the National Task Force or the BWMT/MACT AIDS Task Force office.

IX: **HOMEWORK:**

Practice Safer Sex and become familiar with condoms, trying different types of lubricants and other latex products.

X: **OUTLINE OF INSTRUCTION:**

A. INTRODUCTION TO THE LESSON

<u>Activity</u>	<u>Instructor's Activity</u>	<u>Instructor's Notes</u>
1. Meeting Site	1. Arrive approximately half hour before the presentation time to allow sufficient time to set up and talk with the host/sponsor of the workshop. 2. Dress Code: appropriate to your audience/environment.	
2. Preparing for presentation	3. Prior to class, place a pre-test form in each chair, information about the National Task Force, local Task Force or Prevention Team, Chapter and any other pertinent information. 4. Have Easel up with chart open with welcome and name of organization presenting the workshop. 5. Discuss with co-facilitators what sections will be covered by whom during this presentation.	

Note: It is a good idea for facilitators to rotate through the workshop material so you can become familiar with the whole workshop instead of bits and pieces.

6. Make sure you have the correct name of your host/or establishment.

7. Place a blank piece of paper up to record questions that come up during the workshop with the person's first name. As you complete the module/section refer to the question list to see if you have covered the question. Also confirm with the person if their question has been answered.

3. Beginning the Workshop

8. Thank everyone for attending. Thank the host by name for opening their establishment (state name of the place) for the workshop.

NOTE: At this point you read your audience to determine which workshop routine and modules will be use. If the group is too small, 6 or less attendees, then reduce the playshop by removing or modifying modules. This will be noted in this lesson guide.

4. Introduction

9. Introduce the Workshop Team by their first names.

10. Give background history of the workshop and why it is important for the attendees attendance and participation.

11. Stress the point that this a Gay and Sex positive program.

12. Inform the participants what will be taught during this presentation. This will reduce premature questions that will be covered when you reach that module.

5. Workshop Ground Rules

13. This is very important. Must stress that we do not judge people, their level of knowledge, questions or answers. This is a confidential setting and information is not to go beyond the group. Everyone has the right to speak and be

heard. Mutual respect. Keep other conversation to a minimum. This is how we learn from others through sharing our experiences.

6. Administrative Housekeeping

14. Pre-test. Tell them why it is important to complete the test. Also inform them there will be a post test at the end of the workshop and that it is important for them to complete this form also.

15. Inform them of the Host's house rules, location of toilets and where people can smoke and if they can smoke during the presentation. It is suggested that the workshop be a smoke free environment. Participants are free to move around and do not have to sit through the entire program.

7. Start the Workshop

16. Welcome the participant

17. Explain Hot, Horny, Healthy and who it is sponsored by.

18. Goals of the workshop

19. Working Definition of the workshop

"On me, not in me unless you are in me with a condom"

20. Why use the word "Safer Sex" - active word

6. Workshop:
Introduction of Participants

21. Ice breaking exercise. Have people pair up and find out how AIDS has impacted on their lives.

NOTE: If group is 7 or less, do not pair people off. Have each person introduce themselves to the group and state how AIDS has impacted their lives.

22. One co-facilitator to list key words/statements from each participant statement on newsprint sheet and facilitator to summarize after everyone has made input to show impact of AIDS on the group.

Module I

8 HIV+ History.

23. HIV Disease Spectrum:

Human Immunodeficiency Virus (HIV)

HIV- We all basically start off HIV-
(exceptions infants born to HIV- mothers)

24. Infected

Window period. Person test negative but
has HIV. 2 weeks to 6 months (or more)

25. Sero Conversion - the process of becoming HIV+

26. HIV+

No symptoms. 6 months to many years.

27. (ARC) - AIDS Related Condition

Symptoms will develop in 50% of HIV
infected over 10 Years.

Asymptomatic - no medical problems

Symptomatic - medical problems

Wasting

Night Sweats

Thrush in the month

Diagnosis

28. AIDS

Person has one of the opportunistic
infections in the CDC definition.

PCP

KS

CMV

Toxoplasmosis

Severe Thrush

Lymphoma

Early Intervention

Reduce Stress

Exercise

Plenty of rest

Reduce or eliminate Smoking and
Drinks and substances

AZT

Alternative TreatmentsTherapies

HIV infects T-Cells

HIV- / HIV+ - 1000-1200 T- Cells

HIV+ - 1000-1200 T-Cells

ARC - 500 T-Cells

AIDS - 200 T-Cells

T-Cells /Immune System

How virus invades the T-Cell

Anti-bodies - DNA

Loss of T-Cells

HIV+ having sex with HIV+ person

Reinfection with a different strain
of HIV virus

Infection by an opportunistic
disease or infection

Module II

9 Mourning

29 What's wrong with safer sex?

List the issues of safer sex on paper

Summarize what's on the paper

These are physical interaction

30. (Note: Onit this question if your
audience came out in the 80s)

What do you miss about Pre-AIDS sex?

a. List Pre-AIDS sex activities on
paper

- b. Summarize what's on the paper
- c. These are changes

Note: Acknowledge - some people became sexually active after AIDS started

Module III.

10. Affirmation

- 31. What do you enjoy about safer sex?

List the positive statements
on paper

Summarize what's on the paper

Compare this list with the list of
what is wrong with Safer Sex. These
items are more emotional.

- 32. Compare what is wrong with Safer Sex that it is physical and Safer Sex is Emotional that this creates a change of sexual behavior. Use model of "Safer Sex = AIDS = Death" Safer Sex is to break that concept. Show participants that many activities listed on the Pre-AIDS is still available using safer sex techniques.

- 33. Eroticizing - Erotic ways of touching

- 34. **EXERCISE:** Break-up into small groups to discuss ways you like to be touch erotic ways or share an erotic experience. One person to record and report back to larger group - 15 minutes

- 35. In the large Group - Have each group recorder report their groups list

- 36. List on newsprint each groups comments

- 37. Experiences - Inform the group that this is one way of share other alternative ways of have erotic sexual/non-sexual experiences.

Module IV

11 Condoms

- 38. Condom usage

Types of Condoms

Breakage

Condom Sizes

Lubrication

Sex Toys

Dildos

How to put on a condom correctly

39. **EXERCISE:** Condom races - Depending on the size of the groups, divide the participants into two to three groups. the object of this exercise is to see how fast each group can put a condom on a dildo and take it off and pass it to the person behind them.

Time: 10 Minutes

Have them line up behind each other.

Have them open a condom packet

Tell them to start. The first team that finishes first is entitled to a door prize if they are available.

Ask the group if they had problems getting the condom on. Explain that when in a rush trying to put a condom on during the heat of passion. It is important to practice with the condom and your partner should be part of the program. Become a condom expert!

Module V

12. Negotiation

40. HIV Concentration - from highest to lowest:

Blood

Semen - Cum

Pre-semenial - Pre-cum

Vaginal Fluid

Saliva (2 gallons)

41. **EXERCISE:** - Ways of transmission
Draw the line. Give each person a card or if there is not enough people place cards on

the floor. Ask for a volunteer to arrange the card according to the Highest to lowest risk to them. After they have finished, then ask them to draw the line on sexual activities. Then give them one of series a scenarios.

Time: 2-3 Minutes per person

- a. If it was a number 25 on a scale of 10 and he wanted you. would you change?
- b. If he stated that he was HIV-, would you change?
- c. If he stated that he was HIV+, would you change?
- d. If he was your lover, would you change?
- e. If he stated that he had AIDS, would you change ?

NOTE: Thank people for their honesty in the choices. Reinforce the fact no one really knows their status if they are having unprotected sex and people will not always tell you their status for fear of rejection. Be safe.

42. **EXERCISE:** Safer Sex Negotiation - have two volunteer sit in front of the group and give them the scenario of negotiating a safer sex. Have one not in favor and one in favor of Safer Sex.

Module VI

13. Closing

43. Have participants complete the post test and evaluation form.

44. Form a circle and thank everyone for their participation and sharing. Thank the host/sponsor for the use of their place.

45. Getting involved

- a. Safer Sex Club
- b. Hosting Playshops in homes
- c. Volunteering for the Task Force
- d. Volunteering for organizations of your choice

e. Announcements

f. Thanking the Host

46. Wishing everyone a safe journey
home

**NATIONAL TASK FORCE ON AIDS PREVENTION
OF
THE NATIONAL ASSOCIATION OF BLACK AND WHITE MEN
TOGETHER**

**PLAYSHOP FACILITATOR'S MANUAL
FOR BARS**

NTFAP WS-001-01B

Updated: July 5, 1990

Developed by

Black and White Men Together/Men of All Colors Together

BWMT/MACT AIDS TASK FORCE

I. **WORKSHOP TITLE:** HOT, HORNY AND HEALTH PLAYSHOP FOR BATHHOUSES

II. **FACILITATOR'S GUIDE:** NTFAP WS 001-01B

III. **PRESENTATION TIME:**

- A. Preparation Time: 0.5 Hours
- B. Presentation Time: 1.5 Hours

IV. **FACILITATOR:**

- 1 - Workshop Coordinator
- 1- 2 Facilitators

IV. **REFERENCES:**

Workshop Facilitator's Manual (NTFAP W-001-000)

V. **EDUCATIONAL AIDS:**

A. TRAINING AIDS:

1. Safer Sex Kit (See Inventory List)

- a. Selection of Condoms - lubricated and non-lubricated.
- b. Latex Groves
- c. Dental Dams
- d. Sex Toys - Dildos, butt plugs, handcuffs, cock rings, etc
- e. Selection of Lubricants
- f. Draw the line Card Set

2. Handouts

- a. Workshop Host Sign-up Sheet
- b. National Task Force on AIDS Prevention Brochure Statement
- c. NTFAP Report form
- d. Confidentiality Statement
- e. Chapter Literature
- f. Pre-Workshop Test
- g. Post-Workshop Test
- h. MACT & BWMT Chapter information
- I. Workshop evaluation form

B. INSTRUCTIONAL MATERIAL:

- a. Easel
- b. News print
- c. Felt Tip Pens
- d. Masking Tape
- e. Note Pads
- f. Pencils

VI. **EDUCATIONAL OBJECTIVE OF THE PLAYSHOP:**

Upon the completion of the Playshop, the participants will have an understanding of the history of the HIV infection, methods of transmission, high and low risk sexual behaviors, types and how to use condoms and how to negotiate safer sex with their partners.

VII. **LEARNING OBJECTIVE(S):** The Participants will know:

- o Know the the stages of HIV+ progression
- o How to correctly put on condoms and their care
- o Difference between high risk and low risk sexual behaviors
- o Negotiate safer sex activities.
- o How to eroticize sex for self and partner(s)

VIII. **PROGRESS TEST:**

Workshop Coordinator to administer a pre and post test. Test material to be supplied by the National Task Force or the BWMT/MACT AIDS Task Force office.

IX. **HOMEWORK:**

Practice Safer Sex and become familiar with condoms, trying different types of lubricants and other latex products.

X. **OUTLINE OF INSTRUCTION:**

A. INTRODUCTION TO THE LESSON

<u>Activity</u>	<u>Instructor's Activity</u>	<u>Instructor's Notes</u>
1. Meeting Site	1. Arrive approximately half hour before the presentation time to allow sufficient time to set up and talk with the host/sponsor of the workshop. 2. Dress Code: appropriate to your audience/environment.	
2. Preparing for presentation	3. Prior to class, place a pre-test form in each chair, information about the National Task Force, local Task Force or Prevention Team, Chapter and any other pertinent information. 4. Have Easel up with chart open with welcome and name of organization presenting the workshop. 5. Discuss with co-facilitators what sections will be covered by whom during this presentation.	

Note: It is a good idea for facilitators to rotate through the workshop material so you can become familiar with the whole workshop instead of bits and pieces.

6. Make sure you have the correct name of your host/or establishment.

7. Place a blank piece of paper up to record questions that come up during the workshop with the person's first name. As you complete the module/section refer to the question list to see if you have covered the question. Also confirm with the person if their question has been answered.

3. Beginning the Workshop

8. Thank everyone for attending. Thank the host by name for opening their establishment (state name of the place) for the workshop.

NOTE: At this point you read your audience to determine which workshop routine and modules will be use. If the group is too small, 6 or less attendees, then reduce the playshop by removing or modifying modules. This will be noted in this lesson guide.

4. Introduction

9. Introduce the Workshop Team by their first names.

10. Give background history of the workshop and why it is important for the attendees attendance and participation.

11. Stress the point that this a Gay and Sex positive program.

12. Inform the participants what will be taught during this presentation. This will reduce premature questions that will be covered when you reach that module.

5. Workshop Ground Rules

13. This is very important. Must stress that we do not judge people, their level of knowledge, questions or answers. This is a confidential setting and information is not to go beyond the group. Everyone has the right to speak and be

heard. Mutual respect. Keep other conversation to a minimum. This is how we learn from others through sharing our experiences.

6. Administrative Housekeeping

14. Pre-test. Tell them why it is important to complete the test. Also inform them there will be a post test at the end of the workshop and that it is important for them to complete this form also.

15. Inform them of the Host's house rules, location of toilets and where people can smoke and if they can smoke during the presentation. It is suggested that the workshop be a smoke free environment. Participants are free to move around and do not have to sit through the entire program.

7. Start the Workshop

16. Welcome the participant

17. Explain Hot, Horny, Healthy and who it is sponsored by.

18. Goals of the workshop

19. Working Definition of the workshop

"On me, not in me unless you are in me with a condom"

20. Why use the word "Safer Sex" - active word

6. Workshop:
Introduction of Participants

21. Ice breaking exercise. Have people pair up and find out how AIDS has impacted on their lives.

NOTE: If group is 7 or less, do not pair people off. Have each person introduce themselves to the group and state how AIDS has impacted their lives.

22. One co-facilitator to list key words/statements from each participant statement on newsprint sheet and facilitator to summarize after everyone has made input to show impact of AIDS on the group.

Module I

8 HIV+ History.

**NATIONAL TASK FORCE ON AIDS PREVENTION
OF
THE NATIONAL ASSOCIATION OF BLACK AND WHITE MEN
TOGETHER**

PLAYSHOP FACILITATOR'S MANUAL

NTFAP WS-001-010

Updated: July 5, 1990

Developed by

Black and White Men Together/Men of All Colors Together

BWMT/MACT AIDS TASK FORCE

I. **WORKSHOP TITLE:** HOT, HORNY AND HEALTH PLAYSHOP

II. **FACILITATOR'S GUIDE:** NTFAP WS 001-000

III. **PRESENTATION TIME:**

- A. Preparation Time: 0.5 Hours
- B. Presentation Time: 2.5 - 3.0Hours

IV. **FACILITATOR:**

- 1 - Workshop Coordinator
- 1- 2 Facilitators

IV. **REFERENCES:**

Workshop Facilitator's Manual (NTFAP W-001-000)

V. **EDUCATIONAL AIDS:**

A. TRAINING AIDS:

1. Safer Sex Kit (See Inventory List)
 - a. Selection of Condoms - lubricated and non-lubricated.
 - b. Latex Groves
 - c. Dental Dams
 - d. Sex Toys - Dildos, butt plugs, handcuffs, cock rings, etc
 - e. Selection of Lubricants
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16. Welcome the participant

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"On me, not in me unless you are in me with a condom"

20. Why use the word "Safer Sex" - active word

6. Workshop:
Introduction of Participants

21. Ice breaking exercise. Have people pair up and find out how AIDS has impacted on their lives.

- a. Ask person's name
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- c. Spend about three minutes on this exercise.

NOTE: If group is 7 or less, do not pair people off. Have each person introduce themselves to the group and state how AIDS has impacted their lives.

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Module I

8 HIV+ History.

23. HIV Disease Spectrum:

Human Immunodeficiency Virus (HIV)

HIV- We all basically start off HIV-
(exceptions infants born to HIV- mothers)

24. Infected

Window period. Person test negative but
has HIV. 2 weeks to 6 months (or more)

25. Sero Conversion - the process of becoming HIV+

26. HIV+

No symptoms. 6 months to many years.

27. (ARC) - AIDS Related Condition

Symptoms will develop in 50% of HIV
infected over 10 Years.

Asymptomatic - no medical problems

Symptomatic - medical problems

Wasting

Night Sweats

Thrush in the month

Diagnosis

28. AIDS

Person has one of the opportunistic
infections in the CDC definition.

PCP

KS

CMV

Toxoplasmosis

Severe Thrush

Lymphoma

Early Intervention

Reduce Stress

Exercise

Plenty of rest

Reduce or eliminate Smoking and
Drinks and substances

AZT

Alternative TreatmentsTherapies

HIV infects T-Cells

HIV- / HIV+ - 1000-1200 T- Cells

HIV+ - 1000-1200 T-Cells

ARC - 500 T-Cells

AIDS - 200 T-Cells

T-Cells /Immune System

How virus invades the T-Cell

Anti-bodies - DNA

Loss of T-Cells

HIV+ having sex with HIV+ person

Reinfection with a different strain
of HIV virus

Infection by an opportunistic
disease or infection

Module II

9 Mourning

29 What's wrong with safer sex?

List the issues of safer sex on paper

Summarize what's on the paper

These are physical interaction

30. (Note: Onit this question if your audience came out in the 80s)

What do you miss about Pre-AIDS sex?

- a. List Pre-AIDS sex activities on paper
- b. Summarize what's on the paper
- c. These are changes

Note: Acknowledge - some people became sexually active after AIDS started

Module III.

10. Affirmation

31. What do you enjoy about safer sex?

List the positive statements
on paper

Summarize what's on the paper

Compare this list with the list of
what is wrong with Safer Sex. These
items are more emotional.

32. Compare what is wrong with Safer Sex
that it is physical and Safer Sex is
Emotional that this creates a change of
sexual behavior. Use model of "Safer Sex =
AIDS = Death" Safer Sex is to break that
concept. Show participants that many
activities listed on the Pre-AIDS is still
available using safer sex techniques.

33. Eroticizing - Erotic ways of touching

34. **EXERCISE:** Break-up into small groups
to discuss ways you like to be touch erotic
ways or share an erotic experience. One
person to record and report back to larger
group - 15 minutes

35. In the large Group - Have each group
recorder report their groups list

36. List on newsprint each groups
comments

37. Experiences - Inform the group that this
is one way of share other alternative ways
of have erotic sexual/non-sexual
experiences.

Module IV

11 Condoms

38. Condom usage

Types of Condoms

Breakage

Condom Sizes

Lubrication

Sex Toys

Dildos

How to put on a condom correctly

39. **EXERCISE:** Condom races - Depending on the size of the groups, divide the participants into two to three groups. the object of this exercise is to see how fast each group can put a condom on a dildo and take it off and pass it to the person behind them.

Time: 10 Minutes

Have them line up behind each other.

Have them open a condom packet

Tell them to start. The first team that finishes first is entitled to a door prize if they are available.

Ask the group if they had problems getting the condom on. Explain that when in a rush trying to put a condom on during the heat of passion. It is important to practice with the condom and your partner should be part of the program. Become a condom expert!

Module V

12. Negotiation

40. HIV Concentration - from highest to lowest:

Blood

Semen - Cum

Pre-semenial - Pre-cum

Vaginal Fluid

Saliva (2 gallons)

41. **EXERCISE:** - Ways of transmission
Draw the line. Give each person a card or if there is not enough people place cards on the floor. Ask for a volunteer to arrange the card according to the Highest to lowest risk to them. After they have finished, then ask them to draw the line on sexual activities. Then give them one of series a scenarios.

Time: 2-3 Minutes per person

- a. If it was a number 25 on a scale of 10 and he wanted you, would you change?
- b. If he stated that he was HIV-, would you change?
- c. If he stated that he was HIV+, would you change?
- d. If he was your lover, would you change?
- e. If he stated that he had AIDS, would you change ?

NOTE: Thank people for their honesty in the choices. Reinforce the fact no one really knows their status if they are having unprotected sex and people will not always tell you their status for fear of rejection. Be safe.

42. **EXERCISE:** Safer Sex Negotiation - have two volunteer sit in front of the group and give them the scenario of negotiating a safer sex. Have one not in favor and one in favor of Safer Sex.

Module VI

13. Closing

43. Have participants complete the post test and evaluation form.

44. Form a circle and thank everyone for their participation and sharing. Thank the host/sponsor for the use of their place.

45. Getting involved

- a. Safer Sex Club

- b. Hosting Playshops in homes
- c. Volunteering for the Task Force
- d. Volunteering for organizations of your choice
- e. Announcements
- f. Thanking the Host

46. Wishing everyone a safe journey home

Bar Contact Contract

Outreach to local bars

1. When looking for bars to host the playshop:
 - a. Consider ones that have a separate space away from the normal operation of the bar first
 - b. realize there will be alcohol and this will bring on different dynamics:
 1. alcohol alters the mental state
 2. alcohol has drawing power (people are more likely to come if they can bring their drinks).
 - c. Smokers are more likely to attend if they can smoke.
 - d. alcohol & cigarettes may make the participants more willing to attend. They may feel more comfortable participating.
 - e. Those who are too drunk should be discouraged from attending that particular playshop and another one should be suggested.
2. Contacting the bar(s):
 - a. task force member who knows owner/manager or frequents bar:
 1. can be used as contact person
 2. can be used as referral person
 - b. contact should be made with owner/manager
 - c. best times to make contact:
 1. off peak business hours (ie: mon-fri before 3pm/weekends before 12 noon).
 - d. once contact is made identify:
 1. self 2. organization
 3. purpose 4. program
3. Arrangement of dates:
 - a. if possible schedule dates at time of contact
 - b. if not, schedule dates in timely manner
 - c. notify facilitators of playshop dates & times, & get commitment
 - d. confirm dates with owner/manager
4. Correspondence:
 - a. correspondence documents work & contacts
 - b. correspondence should be written after each contact with bar owner/manager
 - c. all verbal agreements should be confirmed in writing
 - d. times when correspondence should be written:
 1. after first contact thanking owner/manager for hosting playshops
 2. to confirm dates
5. Advertising (this should be approved by bar owner/manager)
 - a. once playshop dates are confirmed advertise the playshop in the following ways:
 1. in the bar hosting the playshop
 2. if allowed, in other bars & establishments who serve your target population

3. in newspapers & periodicals who serve your target population
 4. with flyers & posters
 5. by word of mouth
6. Patron Outreach
- a. its good for the facilitators to talk with patrons about the playshop, safer sex
 - b. facilitators should get to know the clientel of the bar
 - c. promote playshops as a fun sharing, learning experience
 - d. emphasize the playshop is a sex positive focus & not a playshop on AIDS
7. Creditability
- a. Playshop Sponsors:
 1. involve them in the development of the workshop for their specific environment
 2. follow through on what you say you are going to do
 3. maintain verbal and written contact with the sponsor (this will catch any problems early)
 - b. Patrons:
 1. don't try to pull the wool over the patrons eyes
 2. If you don't know the answer, state so
 3. If they are really interested in the information, take their number or give yours and arrange to communicate in the near future
8. Professionalism
- a. Conduct yourself in a professional manner
 1. don't cruise or try to pick up anyone during the playshop
9. Dedication
- a. Set your limits
 - b. If you say you are going to do something stick to your word
 - c. If you can't keep a commitment let the proper person know as soon as possible.

Presentation of Playshop

1. Facilitator makeup:
 - a. Facilitators should be trained to do the playshop.
 - b. facilitators should give a few home parties in order to be comfortable with the playshop material.
 - c. as facilitators become seasoned new facilitators can be paired with veterans. this allows for on-job-training.
 - d. there should be at least one (1) representative from your target population in the facilitator group (this allows the target population to be able to identify with the facilitators.
 - e. it suggested at ;east two (2) facilitators per playshop
2. Reading the audience:
 - a. this will take some practice
 - b. listen to questions asked
 - c. notice if audience is gettiing bored:

1. side conversations
 2. leaving
- d. reactions to portions of playshop
- e. These will give signs if you need to modify playshop as you go along.
3. Groundrules:
 - a. cover groundrules ie: no side conversations, using "I" statements
 - b. enforce groundrules
 - c. acknowledgement of Health Care professionals
 1. if it is apparent there is a health care professional in audience, acknowledge them and ask them to give you feedback at the end of playshop
 2. if they are unwilling to do this but insist on confronting the information you are giving out ask the health care professional to leave
 3. do not get into a battle with health care professional in front of audience
 4. if health care professional is persistent you can always put the health care professionals position to the audience and let them either validate or invalidate their position
4. Materials used
 - a. explanation of playshop materials
5. Demonstration - Erotizing Module

Question and Answer

BWMT/MACT AIDS TASK FORCE
P. O. Box 811
Oakland, CA 94604

March 27, 1990

Bar Name
Bar Address
Bar City and CA

Dear

I would like to introduce our organization to you. We are of Black and White Men Together/San Francisco Bay Area and Men of All Colors Together - Greater Bay Area (BWMT/MACT) AIDS Task Force. We are a multi-cultural team conducting Safer Sex Playshops, also known as the Playshop, primarily focused for Gay and Bisexual men in Alameda and San Francisco Counties. We have been presenting our Playshops at the Steamworks in Berkeley since last year and at Cabel's Reef in Oakland since March of this year.

We are looking for other East Bay Bar owners to host a Safer Sex Playshop within Alameda County. If you are interested and do not have the space, you could co-sponsor the workshop with another bar in your area that has space. We would provide all publicity and flyers if you are hosting the Playshop.

We are having a special Safer Sex Workshop at Cabel's on 00/00/00 from 7:00 - 9:30 PM. This will give you and your staff an idea of the program, how it is presented, what information we will be giving your patrons and how we might tailor it to your respective locations.

If you are interested in attend the workshop on 00/00/00 or hosting a workshop at your place, please give me a call at 255-8378.

In brotherhood,

Lee Y. Woo
Co-Chair

cc: Jack Everheart, Cabel's Reef

BAY AREA HIV SUPPORT AND EDUCATION SERVICES

OF

BLACK AND WHITE MEN TOGETHER/MEN OF ALL COLORS TOGETHER

(BAHSES-BWMT/MACT)



PLAYSHOP FACILITATOR'S MANUAL

BAHSES WS-001-010

Updated: March 18, 1991

I. **PLAYSHOP TITLE:** HOT, HORNY AND HEALTHY PLAYSHOP

II. **FACILITATOR'S GUIDE:** BAHSES WS 001-010

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- A. Preparation Time: 0.5 Hours
- B. Presentation Time: 2.0 - 3.0 Hours

IV. **FACILITATOR:**

- 1 - Playshop Coordinator
- 1- 2 Facilitators

IV. **REFERENCES:**

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V. **EDUCATIONAL AIDS:**

A. TRAINING AIDS:

1. Safer Sex Kit (See Inventory List)
 - a. Selection of Condoms - lubricated and non-lubricated.
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 - c. Dental Dams
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 - e. Selection of Lubricants
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- a. Playshop Host Sign-up Sheet
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- o The stages of HIV+ progression
- o How to correctly put on condoms and their care
- o Difference between high risk and low risk sexual behaviors
- o Negotiate safer sex activities
- o How to eroticize sex for self and partner(s)
- o Identify Relapse Issues

VIII. **PROGRESS TEST:** Identify Relapse Issues

Playshop Coordinator/Reviewer to administer a pre and post test. Test material to be supplied by BAHSES-BWMT/MACT.

IX. **HOMEWORK:**

Instruct the participants to practice Safer Sex and become familiar with using condoms, use and care of toys trying the different types of lubricants and latex products.

X. **OUTLINE OF INSTRUCTION:**

A. INTRODUCTION TO THE LESSON

<u>Activity</u>	<u>Instructor's Activity</u>	<u>Instructor's Notes</u>
A Meeting Site	1. Arrive approximately half hour before the presentation time to allow sufficient time to set up and talk with the host/sponsor of the workshop. 2. Dress Code: appropriate to your audience/environment.	
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Housekeeping

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- c. Spend about three minutes on this exercise.

NOTE: If group is 7 or less, do not pair people off. Have each person introduce themselves to the group and state how AIDS has impacted their lives.

22. One co-facilitator to list key words/statements from each participant statement on newsprint sheet and facilitator to summarize after everyone has made input to show impact of AIDS on the group.

Module I

I HIV+ History.

23. HIV Disease Spectrum:

Human Immunodeficiency Virus (HIV)

HIV- We all basically start off HIV (-)
(exceptions infants born to HIV- mothers)

24. Infection

Window period. Person test negative but
has HIV. 2 weeks to 6 months (or more)

25. Sero Conversion - the process of becoming
HIV (+)**26. HIV (+)**

No symptoms. 6 months to many years.

27. (ARC) - AIDS Related Condition

Symptoms will develop in 50% of HIV
infected over 15 Years.

Asymptomatic- no medical problems

Symptomatic - medical problems

Wasting

Night Sweats

Thrush in the month

Diagnosis

28. AIDS

PCP

KS

CMV

Toxioplasmosis

Severe Thrush

Lymphoma

Early Intervention

Reduce Stress

Exercise

Plenty of rest

Reduce or eliminate Smoking,
alcohol and recreational drugs.
(Weed, cocaine, crack cocaine,
poppers etc.)

AZT

Alternative Treatment Therapies

HIV infects T-Cells

HIV- / HIV+ - 1000-1200 T- Cells

HIV+ - 1000-1200 T-Cells

ARC - 500 T-Cells

AIDS - 200 T-Cells

T-Cells /Immune System

How virus invades the T-Cell

Anti-bodies - DNA

Loss of T-Cells

HIV+ having sex with HIV+ person

Reinfection with a different strain
of HIV virus

Infection by an opportunistic
disease or infection

Module II

J Change

29. HIV Concentration - from highest to
lowest:

Blood

Semen - Cum

Pre-semenial - Pre-cum

Vaginal Fluid

Saliva (2 gallons)

Person has one of the opportunistic
infections in the CDC definition.

30. What are some of issues that would cause you not to use safer sex w/your partner?

List the issues of safer sex on paper

Summarize what's on the paper

These are physical interaction

31. What sexual activities do you miss before you started safer sex?/or sexual Activities you heard about.

a. List sexual activities on paper

b. Summarize what's on the paper

c. These are changes

Note: Acknowledge - some people became sexually active after AIDS started

Module III.

K Affirmation

32. What safer sex activities do you enjoy?

List the positive statements on paper

Summarize what's on the paper

Compare this list with the list of what is wrong with Safer Sex. These items are more emotional.

33 Compare what are some of the issues regarding Safer Sex that it is physical and Safer Sex is Emotional that this creates a change of sexual behavior. Use model of "Safer Sex =AIDS = Death" Safer Sex is to break that concept. Show participants that many activities listed are still available using safer sex techniques.

34 Eroticizing - Erotic ways of touching and being touched

HIV Concentration - from highest to lowest:

Blood

Semen - Cum

Pre-semenial - Pre-cum

Vaginal Fluid

Saliva (2 gallons)

Person has one of the opportunistic infections in the CDC definition.

Note: If group is too small have each person share their experience.

35 **EXERCISE:** Break-up into small groups to discuss ways you like to be touched List some erotic ways of touching or share an erotic experience with the group. One person to record and report back to larger group - 15 minutes

36. In the large Group - Have each group recorder report their groups list

Note: If group is too small have each person share their experience.

37. List on newsprint each groups comments

39. Experiences - Inform the group of the positive aspects of having erotic sexual/non-sexual experiences.

Module IV

L Condoms

40. Condom usage

Types of Condoms

Breakage

Condom Sizes

Lubrication

Sex Toys

Dildos

How to put on a condom correctly

41. **EXERCISE:** Condom races - Depending on the size of the groups, divide the participants into two to three groups. the object of this exercise is to see how fast each group can put a condom on a dildo and take it off and pass it to the person behind them.

Time: 10 Minutes

Have them line up behind each other.

Have them open a condom packet

Tell them to start. The first team that finishes first is entitled to a door prize if they are available.

Ask the group if they had problems getting the condom on. Explain that when in a rush trying to put a condom on during the heat of passion. It is important to practice with the condom and your partner should be part of the program. Become a condom expert!

Module V

M Negotiation

42. **EXERCISE:** - Ways of transmission
Draw the line. Give each person a card or if there is not enough people place cards on the floor. Ask for a volunteer to arrange the card according to the Highest to lowest risk to them based on AIDS 101. After they have finished, then ask them to draw the line on sexual activities. Then give them one of series a scenarios.

Time: 2-3 Minutes per person. Ask each person one question from the list below.

- a. If it was a number 25 on a scale of 10 and he wanted you, would you change?
- b. If he stated that he was HIV-, would you change?
- c. If he stated that he was HIV+, would you change?
- d. If he was your lover, would you change?
- e. If he stated that he had AIDS, would you change ?

NOTE: Thank people for their honesty in the choices. Reinforce the fact no one really knows their status if they are having unprotected sex and people will not always tell you their status for fear of rejection. Be safe.

43 **EXERCISE:** Safer Sex Negotiation
have two volunteers sit in front of the group
and give them the scenario of negotiating a
safer sex. Have one not in favor and one in
favor of Safer Sex.

Module VI

N Relapse

NOTE: This section discuss why
people stop having safer sex with their
partners.

44. What might cause you to stop having
safer sex with your partner? (list reasons)

45. Does substance abuse play a roll in
changing your commitment to safer Sex?

- a. Alcohol
- b. Drugs

46. Does loneliness play a role in changing
your commitment?

47. Impact on safer sex decision under the
influence.

48. Are there other reasons that might
impact on your safer sex recommitment?

49. How can you prevent from unsafe
activities and keep to your commitment to
safer sex? (list responses)

Module VII

O Closing

50. Have participants complete the post
test and evaluation form.

51 Form a circle and thank everyone for
their participation and sharing. Thank the
host/sponsor for the use of their place.

52. Getting involved

- a. Safer Sex Club
- b. Hosting Playshops in homes
- c. Volunteering for the Task Force
- d. Volunteering for organizations of
your choice
- e. Announcements
- f. Thanking the Host

53 Wishing everyone a safe journey home.

B. POST WORKSHOP ACTIVITIES

1. Facilitator's are to individual critique their presentation and the overall workshop.

2. The workshop Coordinators/Reviewers are to critique the facilitators and workshop presentation and record information .

3. If there is a Reviewer, they are to comment on the performance of the entire workshop team.

4. Playshop Coordinators are responsible for completing the BAHSES Report Form with the following information:

- a. Total number of attendees
- b. Break information do by:
 - 1) Number of men by race sexual identity.
 - 2) Number of women by race and sexual identity
- c. Names of the facilitators
- d. Name of the Coordinator
- e. Name of Reviewer.
- f. Summary of the review of the workshop

5. Route copies of the report:To

- a. Program Coordinator
- b. BAHSES Central Files
- c. National Association on Aids Prevention.

BAY AREA HIV SUPPORT AND EDUCATION SERVICES

OF

BLACK AND WHITE MEN TOGETHER/MEN OF ALL COLORS TOGETHER

(BAHSES-BWMT/MACT)

PLAYSHOP FACILITATOR'S MANUAL

BAHSES WS-001-010

Updated: January 24, 1992

PLAYSHOP TITLE: HOT, HORNY AND HEALTHY PLAYSHOP

FACILITATOR'S GUIDE: BAHSES WS 001-010

PRESENTATION TIME:

Preparation Time: 0.5 Hours
Presentation Time: 2.0 - 3.0 Hours

FACILITATOR:

1 Playshop Coordinator
2 Facilitators

REFERENCES:

Playshop Facilitator's Manual (BAHSES W-001-010)

TRAINING AID

Safer Sex Kit (See Inventory List)

Selection of Condoms - lubricated and non-lubricated.
Latex Gloves
Dental Dams
Sex Toys - Dildos, butt plugs, cock rings, etc.
Selection of Lubricants
Draw the line Card Set

Handouts

Playshop Host Sign-up Sheet
BAHSES Brochure
BAHSES.Report form.
Pre-Playshop Test
Post-Playshop Test
MACT & BWMT Chapter information
Playshop evaluation form

INSTRUCTIONAL MATERIAL:

Manual
Easel
News print
Felt Tip Pens
Masking Tape
Note Pads
Pencils

EDUCATIONAL OBJECTIVE OF THE PLAYSHOP:

Upon the completion of the Playshop, the participants will have an understanding of the history of HIV infection, methods of transmission, high and low risk sexual behaviors, types of condoms ,how to use them properly and also how to negotiate safer sex with their partners.

They will also have been made aware of the misconceptions and realities of Relapse (hereafter used in the concept of this playshop to mean when one has not engaged in safer sex for any reason.).

In addition participants will be made aware of the relationship between diet and HIV/AIDS as well as the value of vitamins in maintaining a healthy lifestyle.

LEARNING OBJECTIVES: The Participants will know:

- o The stages of HIV+ progression
- o How to correctly put on condoms
- o Difference between high risk and low risk sexual behaviors
- o Negotiate safer sex activities
- o How to eroticize sex for self and partner(s)
- o Identify Relapse Issues

EVALUATION (optional):

Playshop Coordinator/Reviewer to administer a pre and post test. Test material to be supplied by BAHSES-BWMT/MACT.

HOMEWORK:

Instruct the participants to practice safer sex and become familiar with using condoms, use and care of sex toys trying the different types of lubricants and latex products.

OUTLINE OF INSTRUCTION:

<u>Activity</u>	<u>Instructor's Activity</u>	<u>Instructor's Notes</u>
(A) MEETING SITE	Arrive approximately half hour before the presentation time to allow sufficient time to set up and talk with the host/sponsor of the workshop. Dress Code: appropriate to your audience/environment.	
(B) PREPARING FOR PRESENTATION	Prior to playshop place a pre-test form in each chair, information about BAHSES and any other pertinent information. Have Easel up with chart open with welcome and name of organization presenting the workshop. Discuss with co-facilitators what sections will be covered by	

whom during this presentation.
Note: It is a good idea for facilitators to rotate through the workshop material so they can become familiar with the whole workshop instead of bits and pieces.

Make sure you have the correct name of your host/or establishment.

Hang a blank piece of paper up to record questions that come up during the workshop with the person's first name. As you complete the module/section refer to the question list to see if you have covered the question. Also confirm with the person if their question has been answered.

(C) BEGINNING THE PLAYSHOP

Thank everyone for attending.
Thank the host by name for opening their establishment (state name of the place) for the workshop.

NOTE: At this point you observe your audience to determine which workshop routine will be used. If the group is too small, 6 or less participants, then reduce the playshop by removing or modifying modules. This will be noted in this lesson guide.

(D) INTRODUCTION

Introduce the Playshop Team by their first names.

Give background history of the workshop and why it is important for the participants attendance and participation.

Stress the point that this is a Gay and Sex positive program.

Inform the participants what will be taught during this presentation. This will reduce premature questions that will be covered when you reach that module.

(E) PLAYSHOP GROUND RULES

This is very important. Must stress that we do not judge people, their level of knowledge, questions or answers. This is a confidential setting and information is not to go beyond the group. Everyone has the right to speak and be heard. Mutual respect.

Keep other conversation to a minimum.
This is how we learn from others
through sharing our experiences.

(F) **ADMINISTRATIVE
HOUSEKEEPING**

Post-Test. Tell them why a post test
at the end of the workshop ,and that
it is important for them to complete
this form.

To assess how much of the Playshop they
have retained and how much new
information they might have attained.

Inform them of the Host's house rules,
location of restrooms and where people
can smoke and if they can smoke
during the presentation. It is suggested that
the workshop be a smoke free
environment. Participants are free
to move around and do not have to
sit through the entire program.

(G) **START THE PLAYSHOP**

Welcome the participants

Explain **Hot, Horny, Healthy:**

The Hot Healthy and Horny workshop was
developed by and for gay and bisexual African-
American men. The focus of the workshop is to
provide sex positive and gay positive messages in a
culturally appropriate environment.

Goals of the workshop

Working Definition of the workshop

"On me, not in me unless you are in me with
a condom"

Why use the phrase "Safer Sex"

We use the phrase safer sex instead of safe sex
because Safer is an active word that acknowledges
your role in the process.

(H) **PLAYSHOP**

Ice breaking exercise. Have people pair up
and discuss what was their last safer sex activity.

NOTE: If group is 7 or less, do not
pair people off. Have each
person introduce themselves to the
group and state how AIDS has
impacted their lives.

One co-facilitator to list key words/statements from each participant statement on newsprint sheet and other facilitator to summarize after everyone has made input to show impact of HIV/AIDS on the group.

Module I

HIV+/AIDS 101

HIV Disease Spectrum:

HIV = Human Immunodeficiency Virus.

AIDS = Acquired Immunodeficiency Syndrome

Infection

Window period. Person tests negative but has HIV It takes 2 weeks to 6 months (or more) to develop antibodies which would indicate the presence of HIV.

Sero Conversion - the process of becoming HIV (+)

HIV (+) Asymptomatic- Neither causing nor displaying symptoms

HIV (+) Symptomatic - displaying symptoms.

(ARC) or disabling HIV - AIDS Related Condition

Symptoms will develop in about 50% of HIV infected people over 15 Years.

Wasting

Night Sweats

(Candidiasis) A yeast-like infection caused by candida albicans which affects mucous membranes, the skin, and internal organs.
eg.(Thrush in the mouth)

Diagnosis

To have a HIV Test Positive is quite different than an AIDS diagnosis .

AIDS

Some Opportunistic infections are;

PCP (Pneumocystis Carinii Pneumonia) A lung infection seen in immunocompromised people.

KS (Kaposi's Sarcoma) A tumor of the walls of blood vessels. Usually appears as pink to purple painless spots on the skin but may also occur internally.

CMV (Cytomegalovirus) causes blindness in persons with AIDS.

(Toxoplasmosis) An opportunistic infection caused by a parasite in uncooked meat and cat feces.

(Severe Thrush) An advanced state of Candidiasis.

Lymphoma

Early Intervention

Reduce Stress

Exercise

Plenty of rest

Reduce or eliminate smoking, alcohol and recreational drugs. (Weed, cocaine, crack cocaine, poppers etc.)

AZT

Alternative Treatment Therapies

HIV infects T-Cells

HIV- / HIV+ - 1000-1200 T- Cells

HIV+ - 1000-1200 T-Cells

ARC - 500 T-Cells

AIDS - 200 T-Cells

T-Cells /Immune System

How virus invades the T-Cell

Anti-bodies - DNA

Loss of T-Cells

HIV+ having sex with HIV+ person

Reinfection with a different strain
of HIV virus

Infection by an opportunistic
disease or infection

Module II

(I) Methods of Transmission

HIV Concentration - from highest to
lowest:

Blood

Semen - Cum

Pre-semenial - Pre-cum

Vaginal Fluid

Saliva (2 gallons)

Three conditions for HIV transmission

1) Virus must be present

2) Virus must be in high
concentration

3) Virus must have access to blood
supply

All these condition must be present
for HIV transmission.

Ask participants what are some of the
issues around safer sex.

Cofacilitator list the issues on safer
sex on paper

Summarize what's on the paper

Show that these are physical
interaction

Note: Acknowledge - some people became
sexually active after AIDS started

Module III.

(J) Affirmation

What safer sex activities do you enjoy?

List the positive statements
on paper

Summarize what's on the paper

Compare this list with the list of
issues with Safer Sex. Show
participants that many activities
listed are still available using safer
sex techniques.

EXERCISE: Break-up into small
groups to discuss ways you like to be
touched List some erotic ways of touching
or share an erotic experience with the
group. One person to record and report back
to larger group eg. massaging.

In the large Group - Have each group
recorder report their groups list

Note: If group is too small have each person
share their experience.

List on newsprint each groups
comments

Experiences - Inform the group of the
positive aspects of having erotic
sexual/non-sexual experiences.

Module IV

(K) CONDOMS

Condom usage

Types and sizes of Condoms

Breakage

How to put on a condom correctly

Lubrication

Sex Toys

Dental Dams

Dental Dams from Condoms

Dildos

EXERCISE: Condom races -

Depending on the size of the groups, divide the participants into two to three groups. the object of this exercise is to see how fast each group can put a condom on a dildo and take it off and pass it to the person behind them.

Have them line up behind each other.

Have them open a condom packet

Tell them to start. The first team that finishes first is entitled to a door prize if they are available.

Ask the group if they had problems getting the condom on. Explain that when in a rush trying to put a condom on during the heat of passion. It is important to practice putting on a condom with or without your partner(s) Become a condom sexpert!

Note: Facilitators should monitor and encourage participants.

Module V

(L) Negotiation

EXERCISE: -

Draw the line. Have participants pick a card. Ask for a volunteer to arrange the card from the lowest risk to the Highest risk to them. based on AIDS 101 After they have finished, then ask them to draw the line on sexual activities. Then give them one of a series of scenarios.

Use one or two volunteers only. Ask each person one question from the list below.

- a. If s/he was a number 25 on a scale of 10 and s/he wanted you would you move the line?
- b. If s/he stated that s/he was HIV-, would you move the line ?
- c. If s/he stated that s/he was HIV+, would you move the line.?
- d. If s/he was your lover, would you move the line?
- e. If s/he stated that s/he had AIDS, would you move the line?

NOTE: Thank people for their honesty in the choices. Reinforce the fact no one really

knows their status if they are having unprotected sex and people will not always tell you their status for fear of rejection.

Be safe.

EXERCISE: Safer Sex Negotiation
Have two volunteers sit in front of the group and give them the scenario of negotiating safer sex. Have one not in favor and one in favor of Safer Sex.
Give 2-3 different scenarios.

Module VI

(M) Relapse

NOTE: This section discusses why people stop having safer sex with their partners.

What might cause you to stop having safer sex with your partner? (list reasons)

Does substance abuse play a roll in changing your commitment to saferSex?

Alcohol
Drugs

Impact on safer sex decision under the influence.

Does loneliness play a role in changing your commitment?

Are there other reasons that might impact on your safer sex recommitment?

How can you prevent engaging in unsafe activities and keep to your commitment to safer sex? (list responses)

Module VII

Closing

Have participants complete the post test and evaluation form.

Form a circle and thank everyone for their participation and sharing. Thank the host/sponsor for the use of their place.

Getting involved

Safer Sex Club

Hosting Playshops in homes

Volunteering for BAHSES

Volunteering for organizations of
your choice

Become a Safe Sex Cop
Join the SWAT Team

Announcements

POST WORKSHOP ACTIVITIES

Facilitator's are to individually critique
their presentation and the overall
workshop.

The workshop Coordinators/Reviewers
are to critique the facilitators and
workshop presentation and record
information.

If there is a Reviewer, they are to
comment on the performance of the
entire workshop team.

Playshop facilitators are responsible
for completing the BAHSES Activities
Report form with the following
information:

Total number of participants

Break information down by:

Number of men by race
and sexual orientation.

Number of women by
race and sexual orientation.

Names of the facilitators.

Name of the Coordinator.

Name of Reviewer.

Summary of the review of the
workshop.

Route copies of the report to:

Program Coordinator -Education

BAHSES Files

SAFER SEX WORKSHOP - PARTICIPANT EVALUATION

We continually want to improve workshop content and/or presentation style in order to better serve you and our community. Therefore, please take a moment to evaluate the workshop just completed. Simply read each statement then circle the number on a sliding scale which describes your reaction to the statement. If you have any comments you wish to make, please record them on the back of this form. THANK YOU

Statement	Not at All		Somewhat			Definitely
1. Workshop began on time	1	2	3	4	5	6
2. Facilitators told us workshop goals	1	2	3	4	5	6
3. Workshop gave me new information	1	2	3	4	5	6
4. Exercises done during workshop were helpful	1	2	3	4	5	6
5. Goals of workshop were met	1	2	3	4	5	6
6. Facilitators encouraged questions & participation	1	2	3	4	5	6
7. Facilitators presented information in a positive manner.	1	2	3	4	5	6
8. Facilitators avoided personal bias/judgements about opposing views.	1	2	3	4	5	6
9. I want to practice safe sex	1	2	3	4	5	6
10. Did workshop help you identify personal risk for HIV?	1	2	3	4	5	6
11. Has your denial been decreased by workshop?	1	2	3	4	5	6
12. Has your comfort level increased enough to discuss safer sex with a partner?	1	2	3	4	5	6
13. This workshop showed me how to reduce "risky" sexual behaviors	1	2	3	4	5	6

Please circle your ethnic/racial background:

Asian/Pacific Islander African-American Native American Latino
 European American Other _____

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9. I want to practice safe sex	1	2	3	4	5	6
10. Did workshop help you identify personal risk for HIV?	1	2	3	4	5	6
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12. Has your comfort level increased enough to discuss safer sex with a partner?	1	2	3	4	5	6
13. This workshop showed me how to reduce "risky" sexual behaviors	1	2	3	4	5	6

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 European American Other _____

SAFER SEX WORKSHOP - PARTICIPANT EVALUATION

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GMOCC Meeting
January 21, 1992
GCHP Office
4:00 - 6:00 p.m.

1. Announcements

2. Program Reports

a. EACH

b. OMH

c. Technical Assistance

3. Old Business

a. Job Description - EACH Program Coordinator

b.

c.

4. New Business

114015

**Facilitator's
Manual**

**Hot,
Horny
and
Healthy!**

**A
Close Encounter
of the
Safer Kind**

Published by the National Task Force on
AIDS Prevention of the National Association
of Black and White Men Together.

Written by Phill Wilson and the Health Edu-
cation Committee of BWMT / Los Angeles.

Introduction

Outline

WELCOME: 15 Minutes

Ground rules	5 min
About Hot, Horny and Healthy	5 min
Introduction exercise	5 min

MOURNING: 20 Minutes

What's wrong with safer sex?	10 min
What do you miss about pre-AIDS sex?	10 min

AFFIRMATION: 20 Minutes

How do you feel about PWAs having sex?	10 min
What's good about safer sex?	10 min

EROTICIZING: 40 Minutes

How to use a condom	5 min
Condom races	10 min
Sex toys	3 min
Fantasies	7 min
On me, not in me – orgasm	15 min

NEGOTIATION: 30 Minutes

The safer sex game	10 min
What to do when you meet someone new?	5 min
Role play: A Safer Sex Contract	15 min

CLOSING: 15 Minutes

Welcome

Objectives

To explain the goals of the party
and to set guidelines.

Method

Lecture and group exercise

Time

15 Minutes

1. Facilitator introduces him/herself, his/her assistant and the Host.
2. Make everyone comfortable. Give directions to the bathroom. Tell everyone to feel free to take off their shoes, sit on the floor and/or get refreshments when ever they like. Explain house rules in regard to smoking.
3. Explain that Hot, Horny and Healthy is sponsored by the National Task Force on AIDS Prevention and is funded by a grant from the Centers for Disease Control. The National Task Force on AIDS Prevention is a project of the National Association of Black and White Men Together.
4. The goal of today is to help you reclaim the fun and joy of being sexual. This is an experiential event. You will only get out as much as you put in. Please try to participate as fully as you are able. The issue of safer sex is really for everyone regardless of gender, sexual orientation, HIV antibody status or relationship status.
5. The working definition for Safer Sex is *"On me, not in me, unless you're in me with a condom."*
6. We use the phrase *safer sex* instead of *safe sex* for two reasons:
 - Safer is an active word that acknowledges the fact that each and everyone of us can and must use our existing power to protect ourselves and our partners from the AIDS virus.
 - Safer Sex acknowledges that if you want a guarantee, the only thing that works all the time, every time is abstinence or celibacy. Only if you have never *had* sex, you never plan to *have* sex and in fact you never *do* have sex, can you be guaranteed you will not get AIDS from having sex.

For every thing we say is safer tonight, any one of us could think of a scenario in which it would not be safe. So we're talking about typical

...Welcome

circumstances when we say *safer*.

7. Explain guidelines to participants.
 - Did everyone sign the confidentiality statement during sign-in? Please sign it if you haven't already.
 - Speak from your own experience. Use *"I"* or *"it's been my experience."* We are more interested in how you feel than what you think.
 - We must agree to refrain from making judgements, criticisms and from giving advice.
 - Do not censor saying anything you may be thinking.
 - Be creative and have fun. This party is about sex! We're going to use language that describes sexual activity!
8. Introduction Exercise: Have everyone stand up, walk around the room, cruise each other and introduce yourself to someone you did not know before you got here. Sit down introduce yourselves and tell each other three ways in which AIDS has impacted your sex life. Allow three minutes. Then ask for volunteers to share with the group what they were told.

Mourning

Objectives

To help participants express the negative feelings they might have concerning changes in their lives.

Method

Group response

Time

20 Minutes

1. "What's wrong with Safer Sex?"

Useful comments:

"I hear lots of people say similar things."

"There are a lot of people nodding their heads in agreement with what you're saying, so that certainly seems to relate to many peoples' experience."

"Doesn't anyone here feel that safer sex is just foreplay, and not the real thing?"

"Doesn't anyone think safer sex is boring?"

"What about condoms? Don't you just love em?"

"Is anyone just plain pissed off?"

2. "What do you miss about sex before AIDS?"

Useful comments:

"This is usually a very long list!"

"What about the baths or the good times in the park?"

3. Summarize:

- We need to recognize and mourn how many behaviors we may have given up. There's a lot of sadness and anger around this, and these are important feelings that need to be acknowledged. When one grieves a loss there are various reactions that often include feeling sad, angry or even depressed.
- Not everything on this list has to be given up. It is not where sexual behaviors take place or how many people one does it with that makes something high-risk, but rather what you do, or how you do it. You can have as much sex as you want, wherever you want it – just make it safer!

Affirmation

Objectives

To support and acknowledge the changes individuals have made and are making.

Method

Group discussion

Time

20 Minutes

1. How do you feel about PWAs having sex?

Useful comments:

- *"How about people who are HIV positive?"*
- *"Some people think PWAs should be castrated to make sure they don't have sex."*

2. What do you enjoy about safer sex?

Useful comments:

- People say safer sex is more sensual.
- You can't get [someone] pregnant.
- It reduces morning after anxieties.
- More dating.
- Longer love making
- No more V.D.

3. Compare the list of what they like about Safer Sex with what they miss about sex before AIDS.

4. Erotic ways of touching

Have the teams form small circles. Each group is asked to make up and write down a list of extremely erotic but safer ways of touching or being touched.

Useful Comments:

- Describe ways you would like to be erotically touched, that may or may not have actually happened.
- What would your dream man do to you that would make you go through the roof in ecstasy.

Eroticizing

Objectives

To get participants to explore safer alternatives to risky behavior. To educate participants about proper condom use.

Method

Demonstration, group participation and discussion

Time

40 Minutes

1. Condom Usage:

"We know that condoms, when properly used, effectively stop the transmission of the virus." Stop here and emphasize. *"I did not say condoms stop the virus. I said 'condoms, **when properly used**, effectively stop transmission of the virus'"* Talk about condom failure. The #1 reason for condom failure is people don't use them! The #2 reason for condom failure is people use them to late... So lesson #1 & #2 are that you have to use condoms and you have to put them on before you have sex.

2. Condom Variety:

Dry, lubricated, plain end, reservoir end, ribbed, studded, latex, synthetic skin, different colors, different manufacturers make different sizes. Condoms are not sized and if they were they'd be medium, large and extra large. No one would sell small condoms!

3. Breakage:

Condoms can break but they are very strong under normal usage. Put your fist or head into a condom to demonstrate its strength.

4. Size:

Some men will complain that condoms are too small for them. Blow condom up to the size of a watermelon.

5. Lubrication:

Use plenty of lubrication. Use a *water-based* lubricant, not just a water-soluble one. The oils in water-soluble and oil-based lubricants will cause condoms to disintegrate and break.

The days of spit and shove are over – Condoms require better and more lasting lubrication than that.

Demonstrate how to put on a condom. Mention that putting a *small* amount

...Eroticizing

of lubricant inside the tip (only) of the condom gives added sensitivity.

Talk about the different types of lubricants. With or without spermicide, different flavors, different textures. Stress that spermicidal lubricants are *in addition to* condoms *not instead of* condoms. To be even safer you can pull out before cumming. Stress that this, too, is *in addition to* a condom (with or without spermicide), *not instead of* it.

6. Dildos:

For even more protection you can use dildos for penetration instead of a cock. Dildos, like cocks, come in different sizes, shapes and colors. Show other toys: Cock rings, dental dams, lubricators, but plugs, handcuffs, leather jockstrap, etc.

7. Condom races:

Divide the room in either two, three, or four teams for condom races. Explain the object of the game is to see which team can get their condoms on and off of the dildo first — relay race style, with the dildo as the 'baton'. After the race give prizes to the winning team.

8. Observations:

What did you notice during the condom race?

Useful comments:

- Need practice
- No need to rush
- It's fun to play with a condom

Negotiating

Objectives

To help participants open dialogue with potential partners.

Method

Group participation

Time

30 Minutes

1. Play the Safer Sex Game: Ask for volunteers. Give each volunteer a card. Instruct them to organize themselves in order of risk from least risky to the most risky activity. After they come to a consensus, ask the audience if every one agrees. Allow two or three people to change the order by moving a person (or persons) to a different place in the line. Give the following instructions before having them order themselves:
 - AIDS is caused by a blood-borne virus - This means there must be an open portal to your blood stream for you to be at risk of being exposed to the virus.
 - The body fluids containing the HIV virus are (in order from highest to lowest virus concentration):
 - Blood
 - Semen
 - Pre-seminal fluid
 - Vaginal fluid
 - There are no documented cases of any person sero-converting from exposure to saliva alone.
 - Experiments have demonstrated that HIV virus placed in saliva (in the test tube, not someone's mouth) is killed.
2. State the two necessary conditions for transmission of HIV from one person to another:
 - Presence of HIV
 - Open portal to blood stream
3. Make sure the cards are proper order:
4. Now ask for one more volunteer and ask him where he "draws the line" – which activities will he engage in, and which won't he? Repeat this process with different scenarios:
 - The sexual partner is a person with AIDS.
 - The partner is a person who is HIV positive.

...Negotiating

- The partner is a person who says he is HIV negative.
- He's the man of your dreams!
- He's your lover.
- He's a one night stand

5. Role Play: Ask for two volunteers to enact the following scenario:

You've just met at a bar or community event. You have been flirting with each other and you're both hot for each other. How do you actually negotiate safer sex?

6. Summarize:

- How did it feel doing this role play?
- What worked well?
- Where did you encounter difficulties?

Useful Comments:

- *"The purpose of this role play is to help you gain some experience in contracting for safer sex. Hopefully, this will be helpful in the future, when you are actually in this situation."*
- *"Never apologize when bringing up safer sex."*

Ask participants to volunteer what they do in this situation.

Useful Comments:

- *"I'd like to get you home and spend some slow time in the shower soaping you up and playing with the shower massage."*
- *"If I take you home tonight, safer sex means you'll love yourself tomorrow."*

Some people will be turned off or embarrassed by your bringing up the issue of safer sex. What is important is that you not allow someone else's negative response to influence your resolve to engage only in safer sex.

Closing

Objectives

To get participants to commit to safer choices.

Method

Facilitator address

Time

15 Minutes

1. Thank everyone for participating.

Explain how they can get involved in many ways: by hosting a playshop, by making a donation of cash or supplies, by becoming a facilitator or by volunteering in some other capacity for the National Task Force or for the local chapter's AIDS or health education committee.

Remind them that they don't need to fear AIDS or sex, but that Safer Sex does mean a commitment all the time, not just some of the time, or even most of the time, but *all* of the time!

Make sure everyone gets a hug!

Hot, Horny & Healthy!

Location: _____

Date: _____

Time: _____

<u>Name</u>	<u>Address</u>	<u>H/F*</u>	<u>Phone</u>

Mark H if you're interested in hosting a *Hot, Horny & Healthy!* in your own home
Mark F if you're interested in becoming a *Hot, Horny & Healthy!* facilitator

**NATIONAL TASK FORCE ON AIDS PREVENTION
OF
THE NATIONAL ASSOCIATION OF BLACK AND WHITE MEN
TOGETHER**

**PLAYSHOP FACILITATOR'S MANUAL
MINI-SAFER SEX PROGRAM**

NTFAP WS-001-01C

Updated: July 5, 1990

Developed by

Black and White Men Together/Men of All Colors Together

BWMT/MACT AIDS TASK FORCE

I. **WORKSHOP TITLE:** HOT, HORNY AND HEALTH PLAYSHOP FOR BATHHOUSES

II. **FACILITATOR'S GUIDE:** NTFAP WS 001-01B

III. **PRESENTATION TIME:**

- A. Preparation Time: 0.5 Hours
- B. Presentation Time: 1.0Hours

IV. **FACILITATOR:**

- 1 - Workshop Coordinator
- 1- 2 Facilitators

IV. **REFERENCES:**

Workshop Facilitator's Manual (NTFAP W-001-000)

V. **EDUCATIONAL AIDS:**

A. TRAINING AIDS:

1. Safer Sex Kit (See Inventory List)
 - a. Selection of Condoms - lubricated and non-lubricated.
 - b. Latex Groves
 - c. Dental Dams
 - d. Sex Toys - Dildos, butt plugs, handcuffs, cock rings, etc
 - e. Selection of Lubricants
 - f. Draw the line Card Set

2. Handouts

- a. Workshop Host Sign-up Sheet
- b. National Task Force on AIDS Prevention Brochure Statement
- c. NTFAP Report form
- d. Confidentiality Statement
- e. Chapter Literature
- f. Pre-Workshop Test
- g. Post-Workshop Test
- h. MACT & BWMT Chapter information
- I. Workshop evaluation form

B. INSTRUCTIONAL MATERIAL:

- a. Easel
- b. News print
- c. Felt Tip Pens
- d. Masking Tape
- e. Note Pads
- f. Pencils

VI. **EDUCATIONAL OBJECTIVE OF THE PLAYSHOP:**

Upon the completion of the Playshop, the participants will have an understanding of the history of the HIV infection, methods of transmission, high and low risk sexual behaviors, types and how to use condoms and how to negotiate safer sex with their partners.

VII. **LEARNING OBJECTIVE(S):** The Participants will know:

- o Know the the stages of HIV+ progression
- o How to correctly put on condoms and their care
- o Difference between high risk and low risk sexual behaviors
- o Negotiate safer sex activities.
- o How to eroticize sex for self and partner(s)

VIII. **PROGRESS TEST:**

Workshop Coordinator to administer a pre and post test. Test material to be supplied by the National Task Force or the BWMT/MACT AIDS Task Force office.

IX: **HOMEWORK:**

Practice Safer Sex and become familiar with condoms, trying different types of lubricants and other latex products.

X: **OUTLINE OF INSTRUCTION:**

A. INTRODUCTION TO THE LESSON

<u>Activity</u>	<u>Instructor's Activity</u>	<u>Instructor's Notes</u>
1. Meeting Site	1. Arrive approximately half hour before the presentation time to allow sufficient time to set up and talk with the host/sponsor of the workshop. 2. Dress Code: appropriate to your audience/environment.	
2. Preparing for presentation	3. Prior to class, place a pre-test form in each chair, information about the National Task Force, local Task Force or Prevention Team, Chapter and any other pertinent information. 4. Have Easel up with chart open with welcome and name of organization presenting the workshop. 5. Discuss with co-facilitators what sections will be covered by whom during this presentation.	

Note: It is a good idea for facilitators to rotate through the workshop material so you can become familiar with the whole workshop instead of bits and pieces.

6. Make sure you have the correct name of your host/or establishment.

7. Place a blank piece of paper up to record questions that come up during the workshop with the person's first name. As you complete the module/section refer to the question list to see if you have covered the question. Also confirm with the person if their question has been answered.

3. Beginning the Workshop

8. Thank everyone for attending. Thank the host by name for opening their establishment (state name of the place) for the workshop.

NOTE: At this point you read your audience to determine which workshop routine and modules will be use. If the group is too small, 6 or less attendees, then reduce the playshop by removing or modifying modules. This will be noted in this lesson guide.

4. Introduction

9. Introduce the Workshop Team by their first names.

10. Give background history of the workshop and why it is important for the attendees attendance and participation.

11. Stress the point that this a Gay and Sex positive program.

12. Inform the participants what will be taught during this presentation. This will reduce premature questions that will be covered when you reach that module.

5. Workshop Ground Rules

13. This is very important. Must stress that we do not judge people, their level of knowledge, questions or answers. This is a confidential setting and information is not to go beyond the group. Everyone has the right to speak and be

heard. Mutual respect. Keep other conversation to a minimum. This is how we learn from others through sharing our experiences.

6. Administrative Housekeeping

14. Pre-test. Tell them why it is important to complete the test. Also inform them there will be a post test at the end of the workshop and that it is important for them to complete this form also.

15. Inform them of the Host's house rules, location of toilets and where people can smoke and if they can smoke during the presentation. It is suggested that the workshop be a smoke free environment. Participants are free to move around and do not have to sit through the entire program.

7. Start the Workshop

16. Welcome the participant

17. Explain Hot, Horny, Healthy and who it is sponsored by.

18. Goals of the workshop

19. Working Definition of the workshop

"On me, not in me unless you are in me with a condom"

20. Why use the word "Safer Sex" - active word

6. Workshop:
Introduction of Participants

21. Ice breaking exercise. Have people pair up and find out how AIDS has impacted on their lives.

NOTE: If group is 7 or less, do not pair people off. Have each person introduce themselves to the group and state how AIDS has impacted their lives.

22. One co-facilitator to list key words/statements from each participant statement on newsprint sheet and facilitator to summarize after everyone has made input to show impact of AIDS on the group.

Module I

8 HIV+ History.

23. HIV Disease Spectrum:

Human Immunodeficiency Virus (HIV)

HIV- We all basically start off HIV-
(exceptions infants born to HIV- mothers)

24. Infected

Window period. Person test negative but
has HIV. 2 weeks to 6 months (or more)

25. Sero Conversion - the process of becoming HIV+

26. HIV+

No symptoms. 6 months to many years.

27. (ARC) - AIDS Related Condition

Symptoms will develop in 50% of HIV
infected over 10 Years.

Asymptomatic - no medical problems

Symptomatic - medical problems

Wasting

Night Sweats

Thrush in the mouth

Diagnosis

28. AIDS

Person has one of the opportunistic
infections in the CDC definition.

PCP

KS

CMV

Toxoplasmosis

Severe Thrush

Lymphoma

Early Intervention

Reduce Stress

Exercise

Plenty of rest

Reduce or eliminate Smoking and
Drinks and substances

AZT

Alternative TreatmentsTherapies

HIV infects T-Cells

HIV- / HIV+ - 1000-1200 T- Cells

HIV+ - 1000-1200 T-Cells

ARC - 500 T-Cells

AIDS - 200 T-Cells

T-Cells /Immune System

How virus invades the T-Cell

Anti-bodies - DNA

Loss of T-Cells

HIV+ having sex with HIV+ person

Reinfection with a different strain
of HIV virus

Infection by an opportunistic
disease or infection

Module II

33. Eroticizing - Erotic ways of touching

34. **EXERCISE:** Break-up into small groups
to discuss ways you like to be touch erotic
ways or share an erotic experience. One
person to record and report back to larger
group - 15 minutes

35. In the large Group - Have each group
recorder report their groups list

36. List on newsprint each groups
comments

37. Experiences - Inform the group that this
is one way of share other alternative ways
of have erotic sexual/non-sexual
experiences.

Module III

11 Condoms

38. Condom usage

Types of Condoms

Breakage

Condom Sizes

Lubrication

Sex Toys

Dildos

How to put on a condom correctly

39. **EXERCISE:** Condom races - Depending on the size of the groups, divide the participants into two to three groups. the object of this exercise is to see how fast each group can put a condom on a dildo and take it off and pass it to the person behind them.

Time: 10 Minutes

Have them line up behind each other.

Have them open a condom packet

Tell them to start. The first team that finishes first is entitled to a door prize if they are available.

Ask the group if they had problems getting the condom on. Explain that when in a rush trying to put a condom on during the heat of passion. It is important to practice with the condom and your partner should be part of the program. Become a condom expert!

Module IV

12. Negotiation

40. HIV Concentration - from highest to lowest:

Blood

Semen - Cum

Pre-semenial - Pre-cum

Vaginal Fluid

Saliva (2 gallons)

41. **EXERCISE:** - Ways of transmission
Draw the line. Give each person a card or if there is not enough people place cards on the floor. Ask for a volunteer to arrange the card according to the Highest to lowest risk to them. After they have finished, then ask them to draw the line on sexual activities. Then give them one of series a scenarios.

Time: 2-3 Minutes per person

- a. If it was a number 25 on a scale of 10 and he wanted you, would you change?
- b. If he stated that he was HIV-, would you change?
- c. If he stated that he was HIV+, would you change?
- d. If he was your lover, would you change?
- e. If he stated that he had AIDS, would you change ?

NOTE: Thank people for their honesty in the choices. Reinforce the fact no one really knows their status if they are having unprotected sex and people will not always tell you their status for fear of rejection. Be safe.

Module V

13. Closing

43. Have participants complete the post test and evaluation form.

44. Form a circle and thank everyone for their participation and sharing. Thank the host/sponsor for the use of their place.

45. Getting involved

- a. Safer Sex Club
- b. Hosting Playshops in homes
- c. Volunteering for the Task Force

d. Volunteering for organizations of
their choice

e. Announcements

f. Thanking the Host

46. Wishing everyone a safe journey
home

HIV SPECTRUM DISEASE
ADDITION TO HOT HORNY AND HEALTHY
BWMT/Andrew Feraios
March 5, 1990

Definitions:

- I) Human Immunodeficiency Virus (HIV):
HIV is the virus that causes AIDS. In recent years, the medical field has recognized that the term AIDS does not adequately reflect the scope of the disease as only very few of those infected with HIV have a full AIDS diagnosis.
- II) HIV Infection:
This term means that someone has HIV in their body.
- III) HIV Antibody:
Antibodies are what the body produces in response to any kind of infection. In this case, we are speaking about the antibody that the body produces in response to HIV infection.
- IV) The Test:
Whenever we speak about AIDS or HIV testing, we are referring to the test for HIV antibodies. This is the test for screening blood, and is the test that is normally given to see whether someone has been exposed to HIV. Caution: HIV Negative means that no HIV antibodies are present at the time of the test. Because people can be infected without having antibodies.
- V) Seroconversion:
This refers to the process by which someone goes from a negative Test result to a positive one. It is different from infection in that infection occurs before seroconversion. The time between infection and seroconversion is usually two weeks to six months. Recent studies indicate that a small number of people remain HIV Negative even though they are infected past the six month period.
- VI) Window period:
The window period is the time between infection and seroconversion, usually 2 weeks to 6 months. Another way to think about it is the time between infection showing up positive on the HIV Antibody Test.

- VII) Early Symptoms:
Increasing fatigue, unexplained loss of weight, swollen lymph nodes in neck groin and arm pits, increasing shortness of breath often accompanied by dry cough, profuse night sweats, purple lesions appearing anywhere on the body, white film that can not be scraped from inside of the mouth. Each of these symptoms are persistent and get worse over time. If any of these symptoms appear, see a doctor.
- IX) Opportunistic Infection:
This is a disease that takes 'the opportunity' of a depressed immune system to take hold. These are usually diseases that do not manifest illness in persons with normally functioning immune systems.
- VIII) AIDS Diagnosis:
The Centers of Disease Control (CDC) in Atlanta have listed a set of opportunistic diseases that indicate a full blown case of AIDS. The two most common of these are: Pneumocystis Carinii Pneumonia (PCP) and Kaposi's Sarcoma (KS).

EARLY INTERVENTION

- I) T Cells:
The T-Cell is the central unit of the immune system. It orchestrates all the complex workings of the immune system.
- II) HIV Infects T-Cells:
The main target of HIV is the T-Cell. In order for HIV to reproduce, it needs to infect the T-Cell. After infection, HIV grows inside, until the T-Cell ruptures and sends HIV to infect other T-Cells in the body.
- III) HIV Disease:
HIV Disease can be thought of as the progressive destruction of the body's T-Cells. Though a person can possess the normal 1000-1200 T-Cells per milliliter of blood even several years after HIV infection, in those that become ill the T-Cell count begins to drop as symptoms begin to appear.
- IV) 500-200 T-Cells:
Although diagnosis does not depend on T-Cell counts.

and even though there are variations between people. The 500 level is usually thought of as being associated with ARC. The 200 level usually represents a high probability for opportunistic infections found in full blown AIDS.

V)

Treatment:

There is still no cure for AIDS. but there are now drugs available to slow down the progress of the disease.

A) AZT is the only federally approved drug that deals directly with HIV. It prevents replication, and has proven that it can slow the progress of HIV Positive individuals to full blown AIDS. It is now approved for people with less than 500 T-Cells, and there are clinical trials for those with over 500 T-Cells.

B) Aerosol Pentamidine is used to prevent outbreaks of PCP in individuals with 200 or fewer T-Cells. Because PCP is the number one killer of people with AIDS, this drug is attributed with nearly doubling life expectancy from the time of diagnosis in the last two years.

C) Alpha Interferon is used to induce remission those with KS. It has also proven successful at prolonging lives.

D) There are many other drugs currently in clinical trials, and in use. These should be discussed with a doctor, though information is available through Project Inform in San Francisco. In addition, there is an entire movement that questions the use of toxic drugs in Western Medicine, that utilize a combination of therapies derived in the China and other countries.

The Most successful aspect of early intervention is that the treatments have been able to slow down destruction of T-Cells, and to hold off some opportunistic infections. Keeping up to date can be life saving for those infected with HIV.