

The Sex Ed Workbook

An Incomplete Guide

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A note from campus staff to help guide you



Conversations to have with a friend or mentor



Activity to fill out/complete!



Anonymously provide feedback to help improve content for future editions of this workbook!

What is sex?



Match the word to its definition

- (a) consent
- (b) boundaries
- (c) fantasy
- (d) arousal
- (e) libido
- (f) condom
- (g) lube
- (h) contraception
- (i) oral sex
- (j) anal sex
- (k) vaginal sex
- (l) genitalia
- (m) erogenous zones
- (n) nudes

☐ Imagined sexual activity, that you may or may not want to do in real life.

☐ Water, silicone, or oil based. Used for reducing friction during any sort of penetration.

☐ A barrier method that can reduce both the risk of pregnancy and STI transmission.

☐ Physical contact where a person's vagina is penetrated by something (for example: a penis, fingers, or toy).

☐ Limits we set for ourselves and our own behavior.

☐ Otherwise known as birth control, this is the use of medicines, behaviors, or other methods to prevent pregnancy. Examples include condoms, IUDs, cycle tracking, and the birth control pill.

☐ Pictures of a sexual nature, often sent via text or DM.

☐ Physical contact where one person's tongue, lips, or mouth are used to stimulate another's genitalia or anus. Can be referred to as head, fellatio, and cunnilingus.

☐ Areas on body that are sensitive to sensual touch.

☐ A biological response to sexual inputs that may include increased heart rate, lubrication, and/or erect tissue.

☐ General term for all external reproductive organs.

☐ Physical contact where a person's anus is penetrated by something (for example: a penis, fingers, or toy).


☒ (a) Ongoing agreement between all parties to engage in sexual activity.

The word “sex” has many different meanings.


Some people use it to describe only penis-in-vagina intercourse. Some people use this term to talk about any touching that involves naked genitalia. Sometimes it is used to talk about any activity that gets a person aroused.

It is up to you to decide what counts as sex for you.

 Checkmark the activities I consider to be “sex”:

- | | |
|---|---|
| <input type="checkbox"/> Masturbation | <input type="checkbox"/> Vaginal Penetration |
| <input type="checkbox"/> Watching Porn | <input type="checkbox"/> Anal Penetration |
| <input type="checkbox"/> Reading Erotica, Smut | <input type="checkbox"/> Kissing/Licking Nipples |
| <input type="checkbox"/> Sexting | <input type="checkbox"/> Hands on Genitals |
| <input type="checkbox"/> Mutual Masturbation |  Add my own ideas! |
| <input type="checkbox"/> Dry Humping, Heavy Petting | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Giving Oral Stimulation | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Receiving Oral Stimulation | <input type="checkbox"/> _____ |

 I use the term “hooking up” to mean:

 Have I noticed any miscommunication between me and other people—like my friends, parent(s), a medical provider, or my partner(s)— when each of us mean slightly different activities when we refer to “sex”?



In this workbook and on our campus, consent is an important part of our definition of sex.



Consent is an affirmative agreement that is clear, knowing, and voluntary. Consent must include words or actions that create mutually understandable and clear permission conveying acceptance of the conditions of the sexual activity and willingness to engage in the sexual activity.



Using my own words, affirmative consent includes:



Some verbal and non-verbal cues I may use to communicate my consent for sex include:



Some verbal and non-verbal cues that my partner may use to indicate that they have changed their mind and want sex to stop:

What are my boundaries?

We develop our boundaries from social cues, our own values, and previous experiences. Boundaries are the rules and limits we set for ourselves and our own behavior. It's about how we will act or respond based on certain criteria.



Boundaries I may have about sex and hooking up:

☐ I am open to having penetrative sex if there is a condom.

☐ I will not kiss someone if I am uncertain of how much they have had to drink.

☐ I want to have sex only within an ongoing relationship.

☐

☐

☐

☐

☐



Highlight, color, or mark the boundaries that:

☐ I most consistently maintain

☐ Are flexible, in a way that I am comfortable with

☐ I experience a lot of peer pressure around

☐ I am open to changing or re-establishing




Visit this web page from Planned Parenthood for help on how to figure out your boundaries for sexual activity!



Draw, list, or collage the thoughts you have and feelings you experience when you feel safe within your boundaries.


A large, empty rectangular box with a thick black border, intended for drawing, listing, or collaging thoughts and feelings.

We can practice listening to our intuition outside of sexual situations by noticing when our body needs something—like to eat, to sleep, or to take a break— and then doing our best to meet that need.

 It can be hard to know our limits in situations we have never experienced before. Because the people, activities, and situations involved in sex can change, it is not uncommon to be learning our limits while having sex.

 How do my feelings and thoughts help me to know when I am uncomfortable or unsafe?

 What are reasons that I might not pay attention to those feelings of discomfort?

 Are there ways to make it easier for me to respond to my feelings and thoughts when I think they are telling me something useful?



CU Change has a collection of mindfulness exercises available for download.

What are reasons I might have sex?



What are reasons I might have sex?

- ☐ Feel desired
- ☐ Boredom
- ☐ Show off sexual prowess
- ☐ De-stress
- ☐ To create a pregnancy
- ☐ Gain experience
- ☐ Experience pleasure
- ☐ To not let the other person down
- ☐ To feel affirmed in my sexuality
- ☐ Demonstrate love to the other person
- ☐ _____
- ☐ _____
- ☐ _____



Do the motivations I have around having sex match my values, my morals, and the expectations that I hold for myself? If there is misalignment, is that okay or does something need to change?



How do my motivations for sex influence the way I pursue sex, treat myself during and after sex, and treat my partner?

What are the messages I have been told about sex?

Our friends, a wide range of media, religious institutions, schools, and our family can all influence what we know and think about sex.



What have I been told about having sex?



What have I been told about not having sex?



Be sure to reflect on the act of sex, as well as the morality and values attached to those activities.



Review the messages you wrote. Circle ones that you agree with and cross out the messages you disagree with.

Some of the messages we receive about sex help us to feel knowledgeable and able to advocate for our interests. Other messages can promote shame, secrecy, or harm. We each get to take the messages that we have been told and choose how to incorporate their meaning into our life.

When we have sex, we are engaging more than just our physical bodies. Most of the time, we are bringing all of the expectations, judgments, and beliefs that we have been taught about our sexuality.



What beliefs and expectations might I bring to my sexual experiences?



Do I feel like I need to behave or perform my sexuality in a certain way in order to match people's expectations? (e.g. to be man enough, to act queer enough, to be the right amount of promiscuous, etc.) How so?



How might I engage in sex differently if I didn't feel like I had to perform to society's, people's, and porn's expectations?

How do we navigate boundaries?



When I choose to have sex or engage in a particular sexual activity, how will I communicate my willingness while also holding space for the reality that I may not like it and want to stop or change what is going on?



How will I make sure that my partner knows it is okay for them to change their mind?



How will I process my feelings of rejection or disappointment should that happen?



Scarleteen has information on how to prioritize consent and handle rejection.

Sometimes our wants conflict with our own boundaries. Sometimes our wants conflict with our partner's boundaries. And sometimes our partner's wants conflict with our boundaries.



What are a few different strategies that could resolve this situation?

Wanna have sex?

Okay!
But let's use a condom.

Oh, I don't have any...





What might I do if my partner is inhibiting my choices around safer sex?

What type of touch do I want?

Sexual enjoyment can come in many forms. We can feel physical pleasure; be thrilled; have a sense of novelty, excitement, adventure, relief; feel sexy; etc.

When it comes to touch, everyone will have different preferences for what they like to give and receive. For instance, you may find it pleasurable to be spanked, to be tickled, to be lightly caressed, to be firmly held. You may also like to touch your partner with your hands, genitalia, breath, or an object.

 What can I say to let my partner(s) know that I want to be touched in a certain place or in a certain way? How do I ask for what feels good?

 What might I say to ask my partner(s) how they want to be touched?

Our chest, genitalia, perineum, anus, and buttocks can be called many different things.



Are there certain words for my body that I don't want my partner to use in sexual situations? How would I communicate those preferences to my partner?



How would I ask my partner about what words feel good to them?

Visit these resources to learn more about specific sexual activities that you may want to explore!



Bish is a sex education blog covering many topics including porn literacy and sexting.



Healthline is medically reviewed journal that publishes articles like this one on sex toy hygiene.



Go Ask Alice is a Q & A styled health information written by staff at Columbia University, including information about orgasm and ejaculation.



Smart Sex Resource is a public health website that gives more specific instructions for things like fisting, anal play, and oral sex.



SexEd is an educational resource that helps navigate sexual decision making, like understanding virginity.



Autostraddle is a queer media publication that publishes content like this sex activity inventory.





I will know that engaging in a sexual activity feels healthy, safe, good, or right to me when:

How do I feel about having non-sober sex?

If one or more people have consumed alcohol or another drug before having sex, it is incredibly important to pay extra attention to consent cues and look out for signs of incapacitation.

This is because it can become more difficult to maintain your boundaries and interpret your partner's communication when substances are on board. When in doubt, hold off on engaging in any type of sexual touch.

 Incapacitation is a legal threshold for non-consent because it is the point where people become disoriented, show impaired motor control, experience short-term memory loss, or are unconscious. If your partner is incapacitated - even if they are indicating “yes” - they cannot consent.

 What might I notice in my own body and in my thoughts that help me know when I am not sober enough to consent to sex?



Review CU Boulder's Affirmative Consent Policy for more information about consent and incapacitation.



What might I notice in a partner's behavior that will help me know that they are not sober enough for any sort of sexual contact?





What strategies am I likely to use to decline sex with someone who I think might be too intoxicated?



CU Boulder's Health Promotion team can help you gain more skills to party smart when alcohol and drugs are involved!

What are messages I have been told about bodies?

 What expectations have I heard from society, peers, and pornography about how bodies are supposed to perform, respond, or function during sexual activity?

 What expectations have I heard from society, peers, and pornography about how genitalia and naked bodies ought to look?



There is no one “normal” way for genitalia to look! Visit this Planned Parenthood webpage to learn more about vaginal, penile, and intersex anatomy.



In what ways, if at all, do these societal expectations not align with my values and beliefs? How, if at all, are any of these expectations untrue or harmful?



How can I show care to a partner, if they are insecure about how their body looks or functions during sexual activity?




How can I show care to myself when I am feeling insecure about how my body looks or functions during sexual activity?

What stressors impact my sex life?

 Some insecurities, worries, or anxieties that feel pressing to me:

- | | |
|---|---|
| <input type="checkbox"/> STI transmission | <input type="checkbox"/> Performance anxiety |
| <input type="checkbox"/> Pregnancy | <input type="checkbox"/> Difficulty orgasming |
| <input type="checkbox"/> Body image | <input type="checkbox"/> Feeling a sense of trust |
| <input type="checkbox"/> Impact on reputation | <input type="checkbox"/> Religious implications |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

 Think about one of your stressors. What about it makes it hard to address?

 Taking into account what makes this difficult to address, what are some strategies you could realistically use to reduce this stressor's (and other's) impact?

What other aspects of my health impact sex?

Visit these resources to begin exploring some of these additional topics!



CU Boulder Health & Wellness can help you navigate the different terminology of U.S.-based health insurance. Scroll to the end of this webpage to get more specific information about the student health insurance plan (SHIP).



Andrew Gurza is a disabled sex educator whose podcast explores the overlap of disability, queerness, sex, and kink.



You can search the digital library on FOLX Health for specific information about gender affirming hormone therapy, transition, fertility, and more.



The National Council on Independent Living co-created sex ed videos specifically for adults with intellectual and developmental disabilities (I/DD).



CU Boulder Health Promotion provides education and skills around stress management.

What questions might I ask a medical provider?

Overall Sexual Health

- Based on my risk factors, which STIs do you suggest I get tested for? How often should I be getting tested?
- How often should I do other routine screening like a pap smear or prostate exam?
- Are there any short- or long-term side effects I should be aware of for any of the treatment plans we've discussed today?

Medications

- How will I know if the medication (antiviral, hormones, contraception, etc.) is working?
- How does this medication impact my ability to spread certain viruses and/or to make a pregnancy?
- How might this medication influence my libido, erection, lubrication, and my ability to orgasm?

Contraception

- Which birth control option would you recommend for me and my partner? Why?
- How soon after starting birth control are my partner and I protected against creating a pregnancy?
- How soon after stopping birth control can my partner and I create a pregnancy?



Condoms are both a contraceptive and STI prevention barrier! Get some delivered for free to your on-campus residence or pick up supplies at Wardenburg.



Get free, at-home STI testing kits in the mail from the Colorado Department of Public Health.



Use the interactive guides on Bedsider to learn about the contraception options available to you, your partner, and/or your friends!

If something bad happens...

Our friends may experience confusion about their sexual experiences, conflicts about their sexuality or gender identity, or harms like sexual assault, harassment, discrimination, or abuse in a relationship.

One of the best ways to help your friend is by listening to what they need.

If something bad happens to you, care for yourself as you would care for someone you love.



Confidential advocate counselors on campus are available for free consultations and support. You don't have to know what to make of an experience whether it officially meets policy definitions for sexual assault or not - in order to get support. Contact the Office of Victim Assistance (OVA) at 303-492-8855 or online.



The Office of Institutional Equity and Compliance (OIEC) is the private but non-confidential campus department that provides resolution options in response to sexual assault reports. Separate from a resolution process, students who have been assaulted can receive assistance from OIEC's support and safety measures. Learn more about CU's official reporting process online.

Campus Support

Office of Victim Assistance (OVA)

Free and confidential consultation, advocacy, and/or short-term trauma-focused counseling for undergrads, grad students, staff, and faculty in the aftermath of a recent or past traumatic, disturbing, or disruptive life event.

303-492-8855 | colorado.edu/ova | assist@colorado.edu

Counseling & Psychiatric Services (CAPS)

Offers a range of mental health supports for undergrad and grad students including drop in services, brief therapy, group therapy, workshops and crisis supports

303-492-2277 | colorado.edu/counseling

Office of Institutional Equity and Compliance (OIEC)

Facilitates sexual violence prevention and healthy relationship work-shops for students, staff, and faculty. Addresses protected-class discrimination and harassment, sexual misconduct, abuse in a relationship, and stalking through resolution options and support and safety measures.

303-492-2127 | colorado.edu/oiec

Pride Office [part of CISC]

Provides education, support and advocacy for the LGBTQ+ population at CU Boulder.

303-492-0272 | colorado.edu/cisc/pride-office

Health Promotion

Provides education, outreach, skill-building workshops, and health resources for students around a variety of health topics. Helps students make informed decisions about their health and well-being.

303-492-2937 | colorado.edu/health/promotion

Medical Services at Wardenburg

Offers a wide range of healthcare and wellness resources, including comprehensive and affirming primary care, to CU Boulder students.

303-492-5101 | colorado.edu/HealthCenter



To learn about additional support services at CU, visit [Colorado.Edu/Dont Ignore It](https://Colorado.Edu/DontIgnoreIt)