

explore
dream
discover



**Working with Holistic Models of
Sexual Health and Sexuality,
Self Esteem and
Mental Health**

By Jo Adams
In partnership with Carol Painter,
with contributions from Tony Atkin

CONTENTS

FOREWORD	2
INTRODUCTION	3
WHAT IS "THE FLOWER"?	3
EXPLORING THE PACK	4
SECTION ONE THE ROOTS OF THE FLOWER	6
"WHAT IS SEXUALITY?"	6
SECTION TWO ROOTS, STEMS AND BLOSSOMS – A GUIDED TOUR	8
THE SEXUALITY FLOWER MODEL	10
SECTION THREE THE SEXUALITY FLOWER	12
POLITICAL IDENTITY - Description – or What it is and Why it's there.....	14
WORKING IN THE POLITICAL IDENTITY PETAL	15
SOCIAL RELATIONSHIPS - Description – or What it is and Why it's there.....	19
WORKING IN THE SOCIAL RELATIONSHIPS/SEXUALITY PETAL	19
SEX AND SEXUAL PRACTICE - Description – or What it is and Why it's there.....	24
WORKING IN THE SEX AND SEXUAL PRACTICE PETAL	24
EMOTIONS - Description – Or What it is and Why It's There.....	29
WORKING IN THE EMOTIONS PETAL	29
SENSUALITY - Description – Or What It Is And Why It's There.....	34
WORKING IN THE SENSUALITY PETAL	34
SELF IMAGE - Description – Or What It Is and Why It's There.....	39
WORKING IN THE SELF IMAGE PETAL.....	39
SPIRITUALITY - Description – Or What It Is And Why It's There.....	42
WORKING IN THE SPIRITUALITY PETAL	43
WORKING WITH THE SEXUALITY FLOWER - WORKSHEET	45
THE SELF-ESTEEM FLOWER MODEL	48
SECTION FOUR THE SELF-ESTEEM FLOWER	50
EXPLORING THE PETALS.....	51
POLITICAL FACTORS - Description – or What it is and Why it's there.....	52
WORKING IN THE POLITICAL PETAL	52
SOCIAL RELATIONSHIPS - Description – or What it is and Why it's there.....	57
WORKING IN THE SOCIAL RELATIONSHIPS PETAL.....	58
FEELINGS - Description – or What it is and Why it's there.....	64
WORKING IN THE FEELINGS PETAL	64
RELATIONSHIP WITH SELF - Description – or What it is and Why it's there.....	70
WORKING IN THE RELATIONSHIP WITH SELF PETAL.....	70
SELF IMAGE - Description – or What it is and Why it's there.....	75
WORKING IN THE SELF IMAGE PETAL:.....	76
SPIRITUALITY - Description – or What it is and Why it's there.....	81
WORKING IN THE SPIRITUALITY PETAL	81
THE MENTAL HEALTH FLOWER MODEL	87
SECTION FIVE THE MENTAL HEALTH FLOWER	89
EXPLORING THE PETALS.....	89
THE POLITICAL IDENTITY PETAL - Description – or What it is and Why it's there.....	91
WORKING IN THE POLITICAL IDENTITY PETAL.....	91
THE SOCIAL RELATIONSHIPS PETAL - Description – or What it is and Why it's there.....	94
WORKING IN THE SOCIAL RELATIONSHIPS PETAL.....	94
THE SELF-IMAGE PETAL - Description – or What it is and Why it's there.....	97
WORKING IN THE SELF-IMAGE PETAL	97
THE SEXUAL PRACTICE PETAL - Description – or What it is and Why it's there.....	99
WORKING IN THE SEXUAL PRACTICE PETAL.....	99
THE LIFE EVENTS PETAL - Description – or What it is and Why it's there.....	101
WORKING IN THE LIFE EVENTS PETAL	101
THE PHYSICAL VULNERABILITY PETAL - Description – or What it is and Why it's there.....	103
WORKING IN THE PHYSICAL VULNERABILITY PETAL	103
WORKING WITH THE MENTAL HEALTH FLOWER - WORKSHEET	104
SECTION SIX TENDING OUR OWN GARDEN	106
WORKING WITH SECTION SIX - TENDING OUR OWN GARDEN WORKSHEET	113
SECTION SEVEN FURTHER HELP	114
PART ONE : RESOURCES FOR THE WORK.....	114
PART TWO: KEY ORGANISATIONS AND AGENCIES WHICH CAN OFFER MORE SUPPORT.....	121

FOREWORD

At the end of the 19th Century, Mark Twain wrote these wonderful words

In twenty years time, you will be more disappointed by the things you didn't do
than by the ones you did.
So throw off the bowlines. Sail away from the safe harbour.
Catch the trade winds in your sails
Explore. Dream. Discover.

And these words will serve us well in trying to develop a more holistic, less partial and more all-encompassing approach to working in the fields of sexual health, self-esteem building and mental health. Whether we are involved in health promotion endeavours and initiatives where we are striving for maximum effectiveness or in developing and delivering services which we want to be as appropriate, sensitive and user-friendly as possible – those notions of exploration, dreaming and discovery will be beacons to us and constant reminders:-

- That we should never settle for less.
- That we should be tireless in our pursuit of a world which offers equality, justice and health for all.
- That we should not be deflected from following our dreams of a world in which everyone can hope and expect to love and be loved, to claim their rights and fulfil their responsibilities.
- That from visioning springs action or as Nelson Mandela said

“Vision without action is merely dreaming.
Action without vision is just passing the time of day.
But combine vision with action and you can change the world”.

And I do believe that

if we **EXPLORE** all the creative and imaginative ways we can of doing this work,
if we **DREAM** of a world in which everyone can give and receive love and delight,
respect and friendship, tenderness and intimacy
then we will **DISCOVER** that we have the power to change the world
beyond our wildest dreams



Jo Adams 2004

INTRODUCTION

WHAT IS "THE FLOWER"?

The flower is shorthand for three holistic models, – it refers to

- a model for sexual health and sexuality
- a model for self-esteem
- a model for mental health

These flowers are a way of re-framing and re-visiting the complex issues which interweave in these three areas of work. They are theoretical models to aid our understanding, and at the same time the learning from them can very easily be implemented in our work.

This pack introduces the theory which underpins each of the flowers and then offers a range of ways in which this can inform and be translated into work practice.

Explore Dream Discover has been a long time in growing. For years we have been contemplating writing up the flowers in some more usable form. We wanted to enable colleagues, sexual health service providers, trainers and self-esteem projects to access and apply these increasingly popular models in their work more easily. But like so many things, the good intentions stayed just that.

Then two critical things happened. Firstly, as more people became familiar with these models, the requests started coming in thick and fast for more copies of them, for permission to put them on line, for written-up versions of the models and their rationale. People were asking for resources which could be photocopied, used on courses, given out to groups. We began to realise there was a pressing need for us to produce something which would enable us to respond to these requests and fulfil these needs.

And secondly, word reached us via a participant on a training course – of the flowers being used by some trainers as far away as Australia in quite misleading ways that did not do justice to their real meanings. And that acted as the final catalyst. Because as these models get further and further away from their original authors, of course we accept that they will take on some of the character and perspectives of those using them first-hand. That's in the nature of change and growth and learning and it is always impossible to apply absolute quality control over resources which we have shared and offered and have been taken away to be used by others to the settings they are working in. Indeed, in this way the flower models can continue to be as organic as we always intended them to be, gaining a patina of new experiences and the sheen of usage as they become adapted and made relevant to a whole host of different disciplines and perspectives.

But we wanted to ensure as much as possible that the spirit and essence of these models continues to be acknowledged. The most special and different aspect about them has always been their organic, multi-faceted and inter-woven nature. So this Resource Pack is an attempt

- to grasp the flowers and make a composite 'bouquet' of them, so that each may support and inform the others
- to capture what is special and different about them in explorations and explanations
- to clarify the philosophy behind these models
- to illustrate and give some examples of the methods of working which can reflect these ideas in practice
- to provide the jumping-off point for people to take these and make them their own, using them as a reference point in their work and – we hope – as the springboard for new ways of working and framing the issues of sexual health, sexuality, self-esteem and mental health.

EXPLORING THE PACK

The pack is broken into seven main sections

Section One - “The Roots Of The Flower”

Is an introduction to the thinking behind the flowers and the history of their development.

Section Two - The Flowers, A Guided Tour

Describes the structure which is the common theme in three Flower models and the way in which they each encompass and acknowledge the political, social and individual factors which inform them all.

Section Three – Sexuality Flower

This deals with the Sexuality flower – sometimes also called the Sexual Health flower.

This starts by describing the model and the ways in which using it can help us to grow in awareness and gain greater understanding in the fields of sexual health and sexuality. It then goes on to suggest a whole number of ways in which each of the petals can be reflected in our working practice.

Section Four - The Self-Esteem Flower

This deals with the self-esteem flower in the same way as with the sexuality flower. It starts by describing the model, and the ways in which using it can help us to grow in awareness and gain understanding in the fields of sexual health and sexuality.

It then goes on to suggest a whole number of ways in which each of the petals can be reflected in our working practice. In some of the ‘petals’ which are also included in the Sexuality model, fewer instances of working practice are given since these have already been covered in greater detail in Section Three.

Section Five - The Mental Health Flower

This deals with the Mental Health Flower. It starts by describing the model, and the ways in which using it can help us to grow in understanding. It also explores the interplay between mental health, sexuality and sexual health. It then goes on to suggest some ways in which the petals can be reflected in our working practice. In some of the ‘petals’ which are also included in the Sexuality and the Self-Esteem models, very few instances are given of working practice. Also, given that this is the most recent flower to join the ‘bouquet’, this section is the least developed. No doubt that will change over the years as others develop work in this field, which we hope will in turn feed back into the model.

Section Six - “Tending our own Garden”

This considers ways in which those of us working in the fields of sexual health, self-esteem building and mental health can ensure we look after ourselves well too. It encourages us to apply the learning from this Pack not just to our work with clients and service users but also to our own lives and well-being.

Section Seven - Resources

This is the resources section and is divided into two parts. The first gives information about resources such as books,

packs, leaflets and videos, for our further reading and for use with clients and groups. The second part offers details of relevant organisations and agencies as sources of extra information, advice, training and support for us in developing this work.

Some Practical Ideas for Using the Pack

You may find a number of uses for these models in your work. For example :

- The flowers can be used in planning our work, or in monitoring our current practice. So if you are working on self-esteem building programmes with girls and young women, with Gay Men or with adults with Learning Disabilities for example, you could complete the blank 'flower' provided here for your own planning purposes. This will allow you to check that your work is balanced – acknowledging the importance of developing activities and awareness in each of the petals, so all the main determinants of self-esteem are being addressed.
- The model can be useful as a focus for group planning tasks with your team and colleagues, or with an inter-agency group to reflect on areas of potential practice. You can do this by drawing a huge flower on a piece of flip-chart, with a heading in each petal. The group can then complete the flower together. This could be done as the starting point for developing a local Sexual Health strategy, for instance.
- Every member of a training group or planning group can be give a small blank version of the model – we have provided ones here on Pages 48, 83 and 103 - and complete their own version before sharing this with others in the group to develop a final composite version.
- Or you can produce separate pieces of paper – flipchart size or smaller – all with just one petal and its heading on it – say "Social Relationships" or "Emotions." Again, a blank template of a petal is provided on page 48. Just one petal of the whole flower can be explored in detail in this way.
- Multi-agency working can sometimes lead to tensions and difficulties if people come from different disciplines and professional cultures and are perhaps not all familiar with a social model of health. Having the flower to present and talk through when working with such groups can provide a rich and fruitful route to developing a shared understanding and a value base for the work.
- Or the flower models can be used in training, given out to groups as a discussion tool, or taken as the focal point for group-work or exercises. The Flowers on pages 10, 48 and 87 can be photocopied and if you have the facilities, laminated, to make them more durable, and used as handouts, OHP's or on powerpoint

NB : ALTHOUGH THE FLOWERS ARE PROVIDED HERE TO USE AS A RESOURCE WHEREVER THEY WOULD BE HELPFUL IN CLARIFYING UNDERSTANDING AND MOVING AWARENESS FORWARD, THEY ARE COPYRIGHT AND FULL ACKNOWLEDGEMENT OF THIS IS REQUIRED WHENEVER THEY ARE USED.

SECTION ONE

THE ROOTS OF THE FLOWER

“WHAT IS SEXUALITY?”

This story starts with a dining room table in West London, a felt tip pen and a piece of flipchart paper. It begins with a question asked by a participant on a training course – to use the botanical metaphor running through this resource, that was when the seed was first planted. Carol Painter and I were running a course on sexuality and sexual health for a major London Health Service provider at Easter 1989, and at the end of the first day one of the course members asked a simple but devastating question. ***‘I’m getting lots from the course – but there’s something I still don’t understand - what is sexuality?’*** Carol and I returned to where we were staying asking ourselves that very question. Through the process of asking it again and again, we considered the scope of what we knew about sexuality –

- We knew we believed in a social model of sexual health – in which for example power relations, social inequalities and personal identity were all recognised as crucial determinants in the construction of sexual health and, correlatively, of ill-health.
- We knew it was vital for health practitioners, sexual health service providers and health promotion specialists to have an awareness of their attitudes and values as well as of the more medical, biological and technical aspects of sexual health and disease.
- We knew that complex inter-related factors were at play when it came to the development of an individual’s experience and expression of their own sexuality.
- We knew it was important for those of us working in the field of sexual health to develop a model of sexual health which was positive and affirming rather than a deficit model defined only by disease and dysfunction.
- We knew of research which explored the important relationship between people’s experience of being at the receiving end of stigma or prejudice and their capacity to take control of their lives and choices in terms of their sexual health.

In other words, we began through this process of secular catechism to clarify that sexuality was not just one thing. For instance it didn’t simply mean being lesbian, gay or bisexual – although in the common parlance that was often what it was used to convey. In all those piece-meal shards of knowledge and understanding, we had lots of aspects of the mosaic of sexuality. But they were still in fragments, we had not yet begun to assemble them into the whole picture.

So when we sat at that dining room table with a blank piece of paper we kept asking ourselves the question

“What is sexuality?”

and we began to scribble down the myriad answers. Then when we had the main elements outlined, we started to build these into a drawing, a diagram, a model. At this stage – no doubt because we are both better at words than visuals - it looked like a family tree or an umbrella of loosely connected factors. But this didn’t work for us, because they didn’t inter-relate, they didn’t speak to each other, they didn’t inter-connect – they looked too disparate and too random. We didn’t know what we wanted but we were clear that to express our thoughts it had to be something more organic. Each piece should be a separate entity and yet a vital part of the whole organism so that different aspects arose from and returned to a core of sexuality. Was it circular or a spiral? A spectacular fountain or burst of fireworks perhaps?

And this was where Jon Fox, our designer-friend, entered the picture. He took our halting, exploratory diagram and gave it exactly the life we were searching for – by making a flower.

All the analogies then came flooding in for us. How a flower so elegantly represents our sexuality in that it grows throughout our lives. If it is not nurtured it can be stunted. If it comes under the cruel glare of prejudice or discrimination, abuse or violence it can waste away into something which is problematic or a source of pain, distress and trauma. But if it is nourished and fed, tended and cared for then it has the capacity radically to transform our lives. It is a truly life-enhancing aspect of being human – some would argue the source of our greatest joy and where our sense of ourselves is most integrally experienced and expressed.

“Let a Hundred Flowers Bloom” - The Flower Since Then:

In the years since 1989, the flower has grown in all sorts of ways, as has our relationship with it. We have used it in a variety of ways including

- a training tool
- a model in presentations and speeches
- a material in resources and publications
- an audit tool for developing and monitoring good practice

In turn, this has resulted in more and more practitioners in the field of sexual health adding their own interpretations and perspectives to it, with many of these now incorporated into the model published here. In this sense it has become a collective effort, reflecting not just our thinking but also our conversations and discussions with many friends and colleagues as well as questions and suggestions raised by them. In all of this, it has been gratifying to register how positive a reception it usually receives. We hope and suspect this is due to the fact that we have captured in this explicit form understandings which those of us involved in this work always have half-known in our work, but which - without being collected together in this way - have previously simply hovered at the fringes of our consciousness.

Since its first germination, the flower has gone on to be adapted to other related topics – most notably in the Self-esteem flower and the Mental Health flowers, both of which are explored in more detail in later parts of this Pack.

SECTION TWO

ROOTS, STEMS AND BLOSSOMS – A GUIDED TOUR

The models which follow are essentially holistic in nature, seeing many aspects of our experience as inextricably entwined. They are also “works in progress” and do not claim to be definitive, entirely comprehensive or the final word on these issues. They offer, if you like

- a way of seeing
- a kaleidoscope of factors which come together to form a whole
- a visual language for coming to terms with areas of human experience and consciousness
- a series of inter-weaving and overlapping perspectives
- an understanding of the essential inter-relationship between separate but inter-connected areas

The Three Levels - Roots, Stem and Blossom

The three models have a major similarity, a theme which runs through them all. This is that in any of the areas we explore via the flowers, three main sets of factors all play their part. These are

- political factors
- social factors
- individual factors

So the **‘roots’** which feed the flowers are political – these operate at the macro level and will play an undeniably important role in the construction of any area of our humanity – whether in relation to our sexuality and sexual health, our self-esteem or our mental and emotional health. Many, many elements will play a crucial part in how the flower of our self-hood blossoms or is blighted. For example, these will include:

- How we are perceived and spoken of in our culture and our society
- How we are supported or excluded and vilified by faith and religions
- The image that the media feeds back to us of ourselves
- What legislation exists to penalise or protect us
- What international, national and local resources are committed to our health and well-being or with-held from us

The **‘stems’** – that part mediating between root and flower – relate to our social and community experience. Whether or not we are nurtured within strong and loving families, kinship and friendship networks or have a sense of being rejected, spurned and outcast will to a great extent determine how self-loving and self-determining we can become. If we have positive role-models and strong alliances with others who share our life-experience, these will offer us hope, nourishment and a sense that we can take some control over our lives and our futures.

And finally, at an individual and personal level our own **‘flowers’** bloom – or wither on the stem. If we have been given the support and opportunities to develop our own resources and understanding, if we have been encouraged and affirmed then we will probably feel confident and skilled to make choices which will be positive and healthy for us. We will hopefully have a sense of our rights to a fulfilled life and loving, safe relationships along with the responsibilities which such rights bring. But this will be very hard if we come from a stigmatised or demonised group or if we lack support and a sense of belonging at a family or community level.

So the individual and personal level is always going to be deeply influenced by the political and social contexts in which we live our lives and by which our sense of self is formed. Although it may be and sometimes is possible for a healthy flower to spring out of a diseased or malnourished plant, from starved roots and blighted stems, this is the exception rather than the rule.

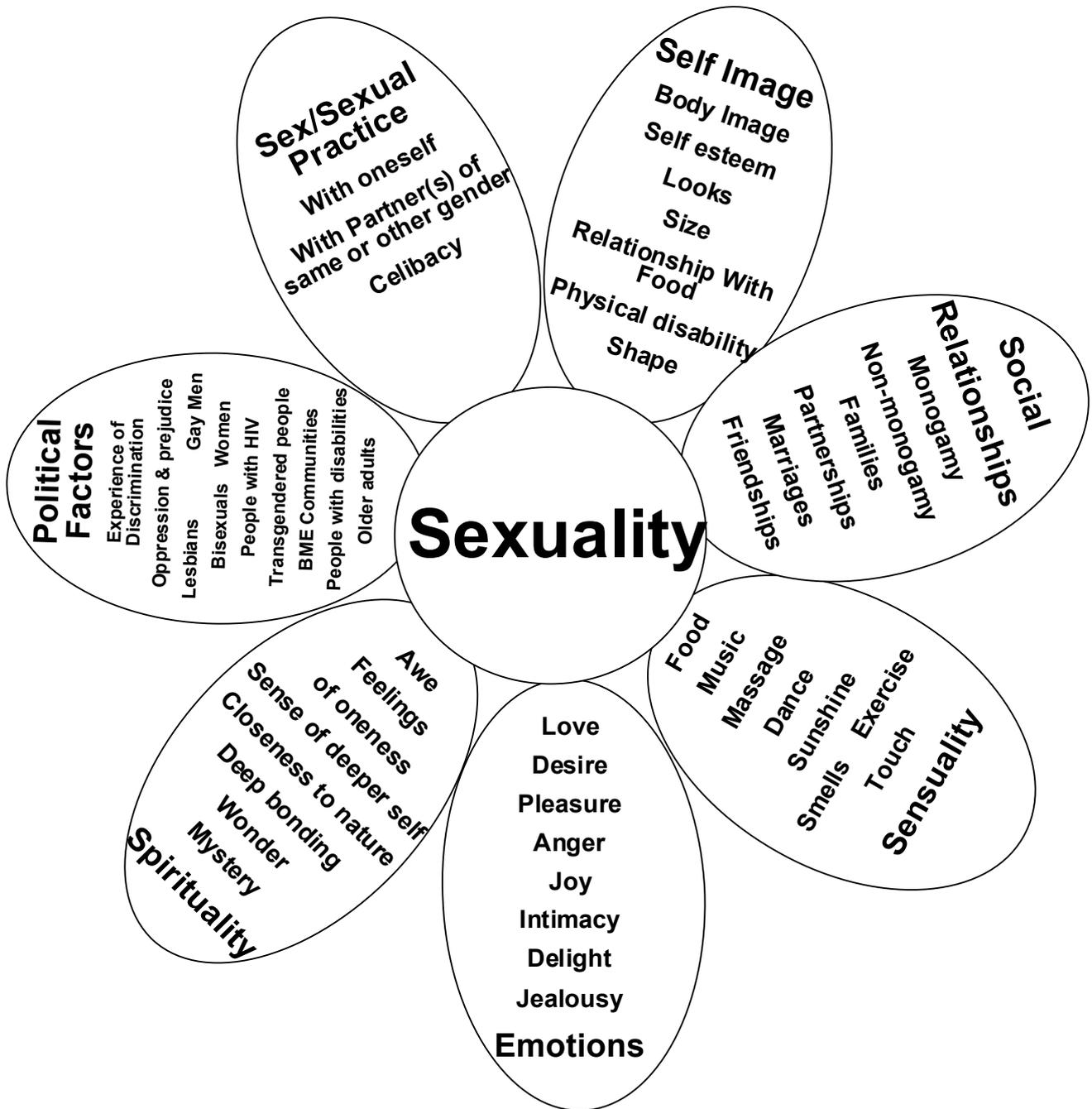
While this model does not claim or attempt to be entirely comprehensive, it can offer us a route-map to ensuring that our sexual health promotion and service provision (as well as our work in the fields of building self-esteem, emotional development and the promotion of mental health) is as multi-faceted and rounded, as holistic and positive as the sexual health, sexuality, sexual selfhood and emotional well-being that we are striving to honour and support.

In recognition of the constant interplay between the political, the social and the personal – our work should therefore whenever possible encompass activity at all three levels. Only to address personal 'lifestyle' issues, in the way some traditional Health Education programmes or "Just Say No" public awareness campaigns have done in the past, risks denying the formative factors which determine behaviours and choices. It may collude with a belief system which holds each person as being entirely in charge of their own destiny, an ideology which effectively 'blames the victim' by seeing them as free agents rather than at the mercy of the political and social forces which have influenced their growth.

Equally, only ever to engage in political campaigning work may feel bold and courageous but risks never actually trickling down into inter-personal practice which will transform people's lived realities. In other words, it can be all about rhetoric and not relate to change.

If our holistic models are to work, therefore, they need to be acted out in equally holistic practice. We need to ensure that the ways in which we frame and develop our work constantly acknowledges the influence and effect of political, social and personal factors. As illustrations of this, there are many suggestions in the pages that follow of ways in which we can exemplify such an awareness in our day to day work in whatever field - whether in commissioning, service provision, education, health promotion, research or community work.

THE SEXUALITY FLOWER MODEL

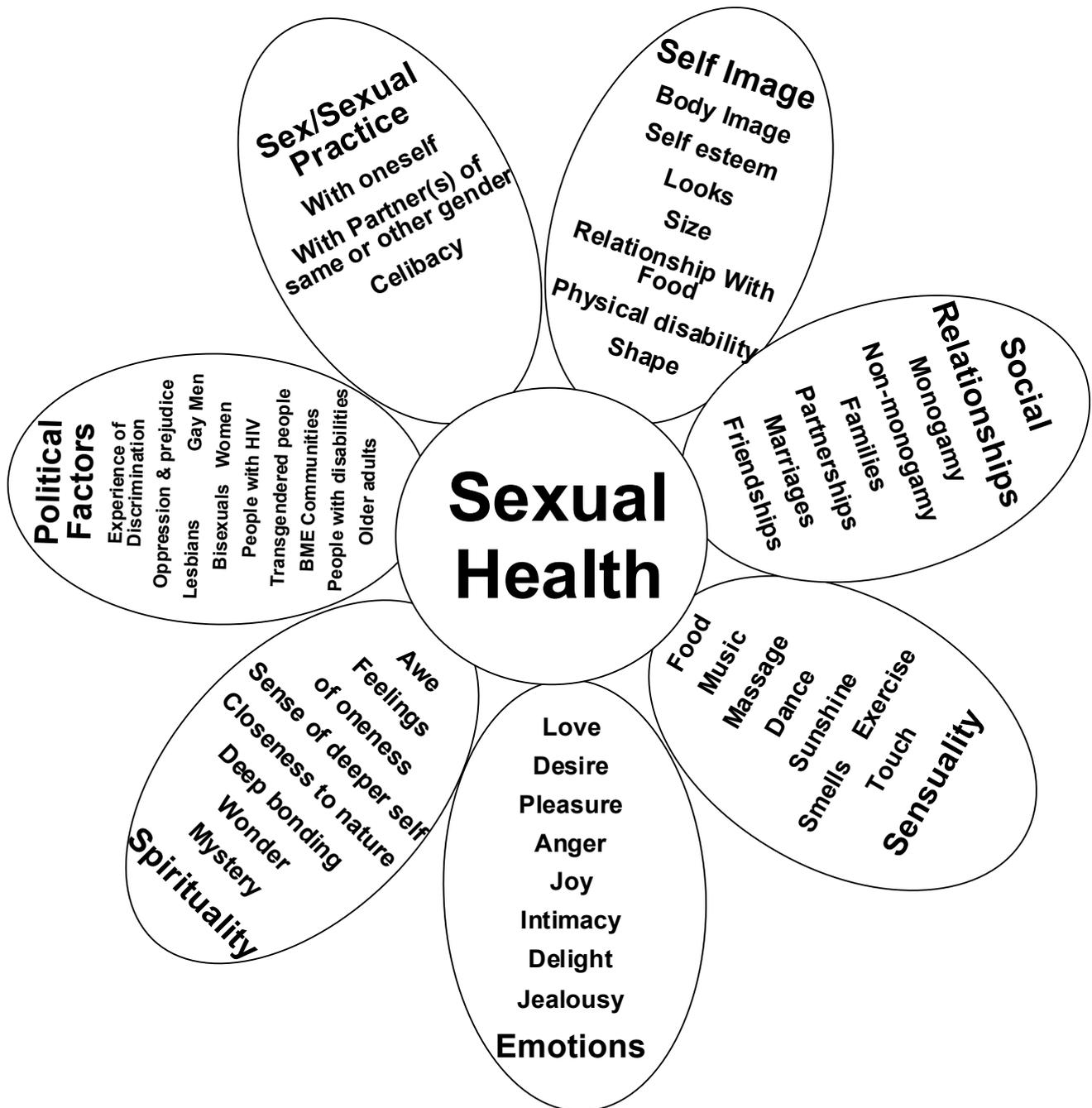


These all add up to how we define ourselves as sexual beings

Sexuality = sexual selfhood

Sexuality involves our relationships with ourselves, those around us and the society in which we live - whether we identify as gay, heterosexual, lesbian, bisexual or celibate

THE SEXUAL HEALTH FLOWER MODEL



SECTION THREE

THE SEXUALITY FLOWER

The Sexuality flower is also sometimes referred to as the 'Sexual Health' flower and works equally well as an exploration of either term. This is the case because, if we have been encouraged, supported and enabled to develop a healthy, celebratory and self-loving sexuality then it is almost inevitable that we will have positive sexual health. Obviously sometimes rogue factors outside our control may have a damaging effect on our sexual health. This might for example be the case for a man who develops erectile dysfunction as a side-effect of diabetes or for a woman who is raped. However, if we have a deep self-acceptance and sense of self-worth in terms of our sexuality we are likely to be able to withstand these and recover a positive sense of ourselves notwithstanding them.

If on the other hand we have had a negative experience of our sexuality, because of the formative factors explored particularly in the 'political identity' and 'social relationships' petals below, then our sexual health is likely to suffer great harm. We may be careless with our own well-being, allow others to abuse or treat us badly, not hold ourselves dear or protect or advocate our own rights to healthy relationships and loving, pleasurable sex.

So, in order for our sexual health promotion to be rooted in this holistic model, it is important that we do not limit our efforts within one "petal" - we need to work across the spectrum. For instance, this may mean ensuring that we are engaging with individuals, groups, communities and the broader public through at least some - and possibly all - of the following methods:

Outreach, casework, information-giving and skills development work within clinical consultations are all likely to be **with individuals**.

Sex and Relationships Education or sexual health training for staff and professionals will be **with groups**.

Community development and building capacity in marginalised and stigmatised groups will be **with communities**.

The development of public health policy and the legal framework, along with sexual health media and awareness campaigns aimed at the general public all take place at the **political level**.

Political Identity

Experience of Discrimination

Oppression and prejudice

Lesbians

Gay Men

Bisexuals

Transgendered people

BME Communities

Older adults

People with disabilities

Women

People with HIV

POLITICAL IDENTITY - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

This petal reflects how political perspectives and our experience of being part of a politically and socially disadvantaged group – such as an asylum seeker or a Gay man, living in poverty or having a Learning Disability – can severely undermine our capacity for positive sexual health. For example, if we have internalised negative and self-hating images of ourselves this can result in our feeling we are not truly worthy of love. This in turn may mean that when we come to sexual relationships we will bring little sense of our own rights and will have a great need to gain the approval of others at any price. Or we may feel that our pleasure is of little concern compared with that of others. Or if we believe the judgmental attitudes about our group in the wider culture, our response may be to seek solace and oblivion in chaotic, abusive or dangerous sex and relationships.

All of these factors clearly may damage our positive sexuality and may result in negative sexual health outcomes. On the other hand, if we grow up as part of a valued and esteemed group, we are likely to believe that we can expect good relationships, that we have the right to be treated well and that the all fulfilling interactions involve both giving and receiving respect. These very beliefs will in turn, of course, promote our sexual health in very positive ways.

Sometimes people have asked us about this petal 'Why aren't men in there?' or 'Where are heterosexuals?' or 'What about white people since you mention people from Black and Minority Ethnic communities?' So it needs to be understood that in this context the term 'political identity' directly relates to people who may have suffered damage to their self-esteem or have a limited belief in their own right to positive sexual health. This may perhaps be a result of internalising negative messages about themselves during their upbringing, their education or through images portrayed in the media. As one illustration of this, Harvey Milk, the first openly Gay Supervisor in San Francisco who was tragically assassinated by a homophobic opponent once said

**“If we are not free to be ourselves in that most human of all activities,
the expression of love, then life itself loses its meaning.”**

The groups represented in this petal, therefore, tend to be those that may not have been free to be themselves in just that way. This may be the case perhaps because their sexuality is seen as deviant, threatening or dangerous or because they have been perceived as being less-than-equal in society. These groups include women, whose sexuality has over the centuries been so constrained, feared and reviled by the major world religions. They also encompass lesbians, gay men and bisexuals whose desires and sexuality have been constructed variously as sinful, criminal or sick. The third major group represented here are those people - for example those with disabilities, learning disabilities, older adults or people with HIV - for whom sexuality and the right to sexual expression has, in the eyes of wider society, been taboo and therefore surrounded by silence.

In a world in which the groups who receive most social approval for being sexually active – or at least are at the receiving end of less active disapproval – tend to be white, male, able-bodied, heterosexual, over 16 and under 50, these groups do not need to be specifically referred to. In fact to do so would really necessitate simply writing 'Everyone' under the Political identity petal, and this would fail to make the salient point about how belonging to a group which is traditionally marginalised, penalised or pathologised for being sexual can be deeply damaging to developing a positive sexuality.

WORKING IN THE POLITICAL IDENTITY PETAL

In this petal, our work could include

Addressing Homophobic Bullying

If there is a local group for Lesbian, Gay and Bisexual young people, this could involve working with them to campaign against homophobic bullying in schools and informal youth work settings. It could also comprise helping them to negotiate the introduction of sections addressing this in schools' bullying and equal opportunities policies and training up staff to feel confident and comfortable implementing these.

Outreach and detached work

Reaching out to communities who might be deemed 'hard to reach' although all too often this is simply because no-one has made enough effort to reach them before! This might for example be done through mobile provision to young people in rural areas, or drop-ins in residential care homes for young people. Or via a Youth Bus or Women's Health Bus travelling to inner city areas of social deprivation and with high rates of teenage pregnancy such as 4YP in Enfield and Haringey. Or it might involve outreach work to men who have sex with men who use cruising areas, saunas or to Gay pubs and clubs. "Clinic in a Box" is one imaginative version of outreach, in Stoke On Trent. In this project sexual health advice, services and support along with the 'Box' of the title full of condoms, pregnancy tests, condom demonstrators and other resources are taken out to settings where young people meet and congregate.

Coming Out Courses

Offering training opportunities for gay men, lesbians and bisexuals to be confident and supported in 'coming out' about their sexuality - with their family, or at work or maybe at their church or synagogue. Although these may be provided at a group or community level, the potential impact on the political and social fabric in terms of greater visibility of lesbians and gay men in public life, for example, is considerable. In this way such an activity could in fact have an impact at all three levels – of political, social and individual experience.

Courses on 'Coming Out as HIV Positive'

These can have a similar effect in terms of the rights, status and public profile of people living with HIV and challenging the taboos around this – again with the potential for positive impact at all three levels of the 'flower'.

Training Community Educators in BME Communities

This kind of training can raise the profile of sexual health work in communities which may have anxieties or social taboos on talking about sex. Enabling members of those communities to become skilled and confident in dealing with these issues can have a profound effect on community empowerment.

Sexual Health on the Social Inclusion Agenda

Working with commissioners, policy-makers and service providers will be central to ensuring that at all levels inequalities in sexual health are addressed and reduced. A further goal might be advocating for sexual health to be acknowledged as a key element in the wider social inclusion agenda.

Red Ribbon

Developing work around this enduring and powerful symbol can demonstrate our support for HIV prevention and affirms our commitment to the rights of people living with HIV. Any activity - from a full project in schools to simply

wearing a ribbon, or providing bowls of these for our service-providers to take - can demonstrate that we wish to be counted among those people who are trying to address the problems which HIV and AIDS have caused in our society. It also makes it clear that we champion the rights of those most vulnerable to HIV – whether that is people in sub-Saharan African countries or gay and bisexual men in the UK. In some areas work includes “Red Ribbon Projects” around World AIDS Day in which supplies of ribbons are made available in a number of venues - schools or colleges, GP surgeries, health clinics or youth centres, shops, pubs and night-clubs. Backed up by small leaflets on the meaning of the Red Ribbon, or the continuing global and national impact of HIV, this can make a simple but effective project for raising public awareness. The ‘Red Ribbon Aware’ HIV education video and information pack which is available from the Centre for HIV and Sexual Health is a helpful tool for addressing these issues.

A Range of Images

Developing and providing publicity, information and education materials which reflect the needs of diverse communities and groups is vital if sexual health is increasingly to be seen as the right and concern of everyone in our society not ‘owned’ by certain groups and taboo for others. When we are producing these materials it is therefore worth considering their potential to reach a broad audience. It can be useful to ask some of the following questions, for example:

- Are people reflecting a range of ethnicities represented?
- Do we have images of older adults?
- Are the needs of disabled people and people with learning difficulties reflected?
- Do we acknowledge different sexualities?
- If the resource is a general one, are both men's and women's needs referred to?
- Do we need to think about producing large-print, Braille or taped versions of the materials?

Ageing and Loving

The taboo on ageing and sexuality can be overcome by supporting a group of older adults to produce a booklet about sexual health services and support available locally. Arrange a meeting between them and sexual health service providers so they can talk about their support needs and raise awareness among health professionals. You might even want to work with a group of older adults on ‘Sex tips and Hints’ such as:

- Take your time and don't attempt to hurry sex
- Try using a water-based lubricant such as KY jelly
- Use touch and massage with each other
- Make sure you have enough time without interruptions
- Find out the possible side-effects of any medication you are taking and discuss these with your doctor – particularly if they are likely to affect your libido and levels of sexual desire
- Don't assume penetration is the only ‘real’ way to sexual fulfilment

For more on this, see the Centre for HIV and Sexual Health leaflet: ‘Ageing, Loving and Sex’. See the Resources Section at the end of the Pack for details on this.

Sexual Health Services for Marginalised Communities

Designing and developing specific services or training opportunities for marginalised, stigmatised and vulnerable groups will be vital if they are to feel included and welcomed. This may mean providing health drop-ins which incorporate sexual health but within a wider health context, thereby avoiding the potential shame and stigma of

being seen to access sexual health services. Such approaches can be especially important, for example, when wanting to meet the needs of communities such as Asian young women who may fear being labelled and judged. Or it might include assertiveness training for adults with learning difficulties or an acknowledgement of the psychosexual difficulties experienced by some gay men living with HIV and the provision of sensitive services in response to this.

What About Wheelchair Height?

Ensuring the sexual health rights and needs of people with disabilities are taken into concern will probably necessitate a whole set of changes, and most fundamentally a change of mind-set to break the silence and taboo about the sexuality of this group. This may range from good SRE provision in schools and youth settings which make provision for people with additional needs to campaigning for there to be tampon and condom machines in Disabled Toilets and at wheelchair heights.

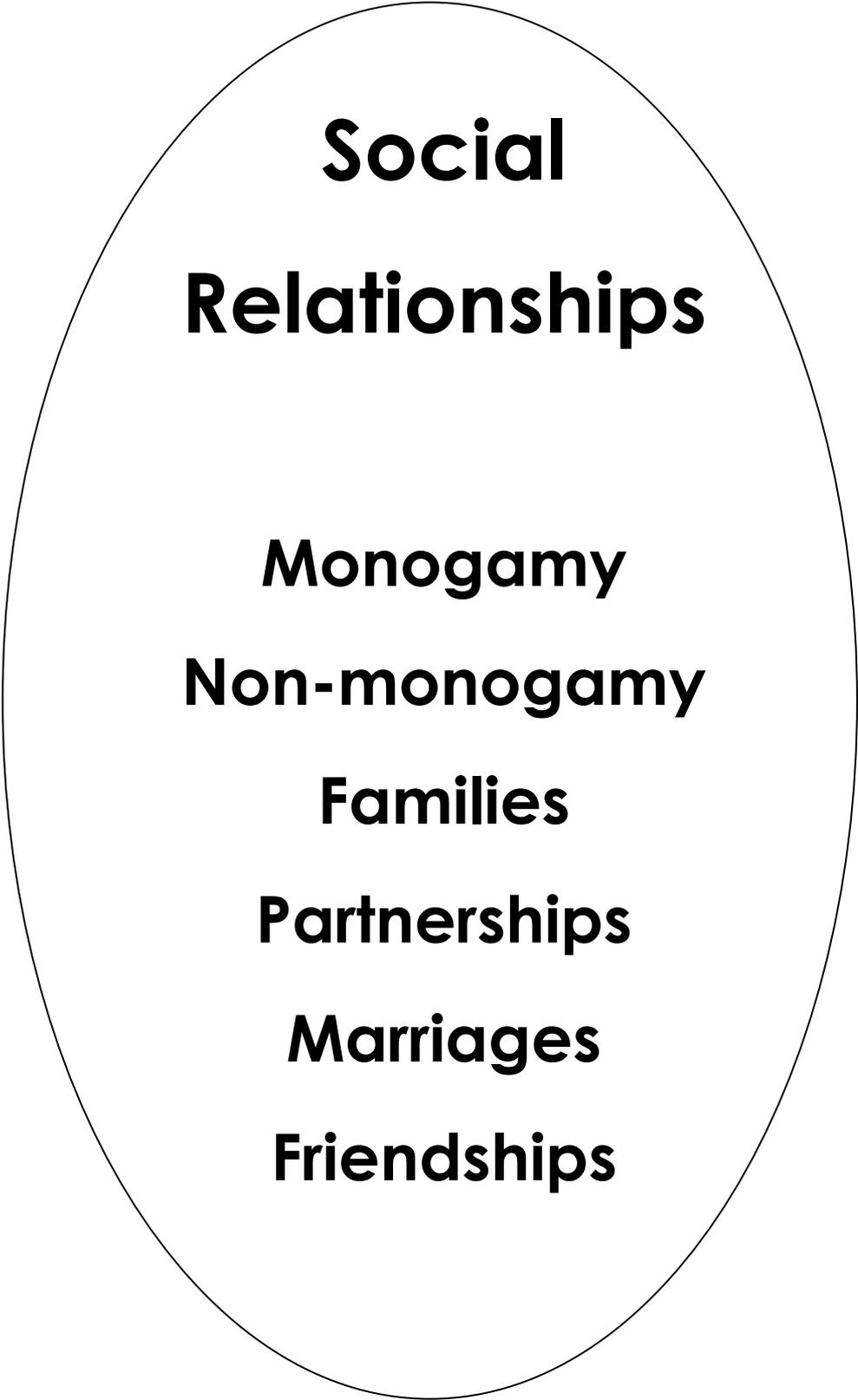
More Than Just Friends

Giving the clear message that we welcome lesbians and bisexual women to sexual health services and acknowledge their needs and right to support, information and advice will require us to consider certain questions for example :

- Do we demonstrate a positive welcome for lesbians and bisexual women?
- Could we state that services are for all women – including lesbian and bisexual women?
- Have we any positive poster images of lesbians on the walls?
- Do we have leaflets available on lesbian sexual health?
- Are we familiar with referral numbers for self-help groups and counselling organisations for lesbians, bisexual women or women questioning their sexuality and for young lesbians?

Community Languages

Thinking about the community languages used by those in our local areas with mother tongues other than English will be an important start in accessing these communities. Our responses could for example include working with local interpreting and translating services, offering training and resources for these workers – including training and protocols on confidentiality, developing and disseminating sexual health publications and information in different community languages and publicising sources of support such as the African AIDS Helpline



**Social
Relationships**

Monogamy

Non-monogamy

Families

Partnerships

Marriages

Friendships

SOCIAL RELATIONSHIPS - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

This petal is the 'stem' of the flower and refers to where we belong in our social networks, families and communities. These can be geographical – for example our neighbourhood, estate or village - or 'communities of interest' such as Gay men in a certain town or the older adults in a particular inner city area. The families and kinship networks in which we grow up will deeply affect the sexual selfhood which we develop and our ability to make loving, respectful relationships in which we are neither exploited nor exploit others.

Our partnerships and marriages exist within this petal – whether sanctioned by the state or not, whether monogamous or non-monogamous - as do our friendships. Indeed our friendships play an important role in helping us develop a positive sexuality since it is in these that we learn and practice key relationship skills such as intimacy, sharing, communication and empathy. It is our friends who often sustain and support us when sexual relationships, marriages or families fail us. It is also often they who help us re-construct a positive self-image and sense of ourselves after relationship difficulties or rejection by our families may have resulted in self-doubt.

WORKING IN THE SOCIAL RELATIONSHIPS/SEXUALITY PETAL

In this petal, our work could include

Couple Counselling and Psychosexual Work

Sexual health services are not just about the physical aspect of sex but the emotional aspects too. So providing services which are holistic in nature will necessitate our offering an effective, empathetic and practical response to people in relationship difficulties or who are experiencing sexual problems with their partners.

Young and Gay

Wanting to offer support and resources to young people who fear rejection or attack because of their sexuality has resulted in some agencies developing support courses for young gay men and lesbians. These include time on subjects such as - dealing with friends and family, coming out, being gay at school, dealing with bullying, looking after our sexual health and accessing services.

Parents, Foster-Parents and Grandparents

Developing work with parents, grandparents and other carers for children and young people acknowledges the crucial role they can play in Sex and Relationships Education if they feel they have the skills and understanding to take this on with confidence. From 'Surviving Adolescence' courses to the fpa's Speakeasy programme, there is a whole range of models. One of the most successful has been Sheffield's Parent To Parent peer education programme in which groups of parent volunteers are trained to run sessions in a wide range of community settings on 'Talking with your children about difficult issues' including sex, drugs and bullying.

See the Centre for HIV and Sexual Health's resource for parents "Let's Talk" for more help on this.

Peer Education

Drawing on theories of learning which show that people are often most likely to accept and believe what their peers and those in a similar life situation tell them, peer education provides an excellent method for developing strong role models and increasing social skills. However, to be effective it is time intensive, requiring great input in terms of the

recruitment, training and support of volunteers and in monitoring and maintaining quality in the education delivered. Also, because peer educators usually eventually move on in terms of their life and career development, there is often a built in time-scale for the length of such projects which means the cycle of recruitment and training has to be repeated on a regular basis. The positive effects on the Peer Educators themselves in terms of their skills development and growth in maturity and confidence can be some of the most successful outcomes of such an approach.

Building Friendship Skills

Running courses, activities and workshops on friendship - for example for young women, for Gay men or for adults with Learning Disabilities - can enable people to strengthen their wider networks of support. This means in turn that they may become less single-focused and over-dependent on sexual relationships to provide them with the intimacy, closeness and sharing which they need. Our friendships can also be a powerful factor in promoting self-esteem and can increase our ability to resist pressure, factors which can play a key part in supporting positive sexual health. Friendship skills might include elements such as :

- Listening skills
- Dealing with conflict
- Giving and receiving positive feedback
- Managing anger
- Handling criticism

Young Men and Fatherhood

Working with boys on what it means to be a father, on developing a positive sense of fatherhood and on the skills they might need to take on this role can make them much more aware of the responsibilities of parenting. It can also equip them with the confidence, understanding and skills to take this on in a constructive and successful way – for their children, their partners and themselves - if and when they do become fathers. For many young people, looking realistically at the realities of parenting can also encourage them to delay this stage in their lives until they feel ready to take on such a challenge.

Sex and Relationships Education

Delivering programmes which deal with information about sex and offer safe, reflective space to discuss and consider emotions, relationships and ethical dilemmas too is vital. Only in this way can we help children and young people grow into able, intelligent young adults who are thoughtful about relationships and have a sense of both their rights and responsibilities in relation to these. Putting the 'relationships' element into Sex and Relationships Education means taking it away from the limited biological model and putting it into the context of feelings, making it relevant, appropriate and sensitive to young people's real needs. And by relationships we don't just mean sexual partners but families, friends, our communities and the broad realm of those we relate to. Clearly achieving this will need comprehensive training programmes for teachers, Connexions PAs and youth-work staff and will be helped by sharing models of good practice wherever these are available.

Remember Not Everyone Is Heterosexual - Even If They Present As Such!

Basing the support and services we offer on the understanding that people who use them will have a range of different sexual experiences, desires and partnerships will mean we are likely to be genuinely inclusive in relation to sexuality.

This may mean training for staff and careful scrutiny of our publicity materials to ensure people who are not heterosexual know they are welcome - and equally that staff offering the service feel well-prepared for this aspect of their role and do not fall into the trap of making assumptions of heterosexuality. Some towns and cities now have groups for men who are married or in partnerships with women but who also have male partners or are questioning their sexuality. We need to make sure details of such support is available to and disseminated by all of those working in sexual health - and if such support does not exist, it may be helpful to consider establishing something of this kind.

Assert Yourself

Providing people with practical skills for managing relationships, emotions and sexual transactions can be one of the most powerful ways of building positive sexual health. The groups who have been targeted particularly with this approach to date have been Gay men, women and young people. But it can also be a very helpful aspect of professional and personal development for health, education and related staff or for other vulnerable groups such as people with learning difficulties and additional needs. Key skills addressed in assertiveness with particular relevance for sexual health are: Saying 'no', Dealing with difficult feelings, Managing and expressing Anger, Asking for what you want, Assertive confrontation, Negotiation and Building a sense of Rights – especially Sexual Rights.

Good Relationships - What Are They?

Working with groups or one-to-one, it can be helpful to ask them to consider what makes a good relationship.

Questions could include :

- What are you looking for in your ideal partner?
- What would you like your ideal partner to be looking for in you?
- Thinking about a good relationship you know in your family or friends, what do you think makes it good? How do they treat each other? What do they appreciate about each other? Do the partners ever row? And if so, how do they deal with conflict? If not, how do they resolve differences? How equal is the partnership – in terms of respect, who has power and control and who does most of the work?
- What do you think makes a relationship equal?
- When we say we want someone to love us – what do we mean?
- How do we want them to behave towards us?

Building on this, ask people to think about what personal qualities make a good relationship - perhaps listening or giving positive feedback, not sulking, being able to listen to criticism and make changes, communicating your feelings - and how they could develop these in themselves. It may also be worth asking them to think about the importance looks and attractiveness plays in all of this – and drawing out the point that despite the pressing cultural focus on image, most people prioritise other more personal qualities in their potential ideal partner.

Saying No - And Surviving The Guilt

Offering opportunities to gain and practise the skills of saying 'no' can be a great sexual health support. Workshops could include - what makes it hard for us to say 'no'? And what can the gains from saying 'no' be? This work can cover basic assertiveness principles as well as offering opportunities to practice skills which equip people with the ability to say 'no' –such as the 'broken record' technique.

Safety and Internet Liaisons

The fact that more and more people are using the Internet for everything from chatting and flirting to cyber-sex means we need to develop robust responses matched to the needs this throws up. One example is the Centre for HIV and Sexual Health's 'Internet Liaisons' leaflet for men looking for sex with other men. This includes practical tips on staying safe such as "Arrange meetings in a public place", 'If you can, tell someone where you are going' and 'Don't give out your address until you are sure you want to continue with a relationship'. It may also be helpful to access open web-sites and chat-rooms – particularly ones which cover our own locality – and where possible to post up details of local sexual health services and sources of support.

Safer Surfing

This section is taken from the Centre's 'Go Girls' Handbook on building self-esteem. One specific thing which we know can render girls vulnerable, even from the privacy and supposed safety of their own rooms, is use of the Internet and of chat-rooms in particular. The terrible soap 'ordeal' of Sarah Louise in Coronation Street in July 2001 illustrated this neatly (and as we know, soap characters are put on this earth to suffer experiences such as this!). It showed us a lonely, isolated and bored girl whose self-esteem was at rock-bottom, having become the first ever soap 13-year-old mother. She was literally a target for anyone on the net roving the teenage chat-rooms with an eye for abduction. The girls we are working with may potentially be equally at risk and there are some 'golden rules' which we will do well to introduce them to, so as to ensure they don't take unnecessary risks in this way.

Safer Surfing Tips

With the girls, come up with a list of "Safer Surfing" tips drawing on their knowledge and good sense. So these could include :

- Don't ever give out your personal details, photographs, address, telephone number or anything that can identify you
- Don't take other people at face value – people can assume any identity they want to on the net
- Never arrange to meet someone you've only ever met on the net without telling your parents or carers first, getting their permission and taking a responsible adult with you
- If you do eventually arrange to meet someone you first 'met' on the net, make sure the first meetings are all in safe and public places, where there are people around and you can get help should you need it
- Stay in the 'public' areas of chat-rooms where there are other people around
- Never respond directly to anything you find disturbing or that you think is suspicious. Save or print it, log off and tell an adult or report it

Once they have come up with their list, could the girls produce these on a laminated card for distribution? Or even start a Safer Surfing web-site, to share this learning with other girls?

For more on this see 'Go Girls – Supporting Girls Emotional Development and Building Self-esteem' Jo Adams Centre for HIV & Sexual Health. Also the Suzy Lamplugh Trust produces a range of excellent leaflets and resources on safety

**Sex/Sexual
Practice**

With oneself

**With Partner(s) of same
or other gender**

Celibacy

SEX AND SEXUAL PRACTICE - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

Often when we refer to sexuality, it is this aspect of 'doing it' or who does what to whom that is at the forefront of many people's minds. This sadly overlooks the fact that sexuality is about much more than sex – and indeed that we are all born sexual and are sexual until we die, whether or not we ever in fact share sex at any stage with another person, or whether we even explore sex with ourselves or not.

It is important at this stage to note two key points. The first is that few of us live our whole adult lives as sexually active. We may take time out from relationships, or time out from sex within relationships. We may lose a life-time partner through bereavement or never find one. We may value the intimacy and shared support of what began as a sexual relationship more than the sex within it. Those of us working in the field of sexual health know that there are many marriages in which the partners no longer have sex together although the world tends to assume that marriage = sex just as it used to make the equally erroneous assumption that unmarried = no sex.

The second is that the kind of sex we will choose or decide against will be incredibly dependent on the two previous petals. Our experience of acceptance or rejection, of being valued or being vilified will have an integral effect on whether or not we believe we can freely choose whether or not to have sex, with whom to have sex and what kind of sex to have. If we are desperate for acceptance because we have been at the receiving end of disapproval or harsh judgement from the world and our wider society, we will not be in a strong position to negotiate sex, because the driving factor for us may be to be desired by someone else above all things, simply to be chosen. Conversely, if we have been generally approved of and socialised to feel we are good and acceptable, then we will feel able to say 'no' to poor treatment by others or to activities which will not be pleasant or pleasurable for us, secure in the knowledge that we deserve positive experiences.

WORKING IN THE SEX AND SEXUAL PRACTICE PETAL

In this petal, our work could include

Is The Sex Chosen and Consensual?

The 2002 Natsal survey (National Survey of Sexual Health Attitudes and Lifestyles; Johnson, Wellings et al) tells us a great deal about how many people - in particular young women - subsequently regret the sex they have. Taking this disturbing information as a starting point can lead us to make sure we check out with people we are working with that, if they are having sex, this is entirely consensual. That they are not just doing it because they feel they ought to, they assume everyone else is or they don't know how to say 'no'. And the converse of this is that we should be ensuring that they are not pressurising anyone else to have sex with them.

...And Is It The Kind of Sex They Want?

Increasingly, anecdotal evidence is telling us that many girls are coming under huge pressure to have anal sex - partly because the boy assumes this means they won't need to use a condom and partly because it isn't seen as 'real' sex. Also there appears to be an increase in girls being expected to give - but not receive - oral sex. Those of us involved in this field therefore need to be putting these delicate issues on the agenda. We should be making sure by all we do and say that every girl knows she has the right to say 'no' to sex anyway, but particularly if it is not pleasurable for her or is likely to be dangerous in terms of infection.

We may also want to introduce the notion of mutuality in sex – and the fact that it is reasonable and fair to expect reciprocity in oral sex – and indeed in the giving and receiving of all sexual pleasure. One American comedienne referred scornfully to men ‘that won’t even lick a stamp’ and perhaps we should be suggesting that they are avoided at all costs until they can learn the basis of sexual ‘good manners’ - which is to return favours!

Confidentiality Matters

Having staff who are aware of confidentiality protocols, of the Fraser guidelines, and of the confidentiality policies of partner agencies is essential. This may mean offering some staff - such as receptionists or teachers – training in this specific area. Once this is assured, organisations and services should publicise their confidentiality procedures in the form of clear, accessible statements to reassure those who may have particular anxieties. These might be for example - married men who are gay, asylum seekers who may be fearful about approaching services, young people under 16 or people with HIV from communities where the stigma may be especially strong.

Promoting Condom Use

Thinking that being on the pill is ‘safer sex’ or ‘protected sex’ is still a common misconception among many young people and positively and proactively promoting condoms is therefore essential to sexual health promotion. This should always be accompanied by a condom demonstration - including the young person’s chance to try condoms out themselves on the demonstrator model - since the vast majority of condom failures are the result of incorrect use. Forget the courgette or carrot approach too – and get hold of a wide variety of life-like demonstrators including Black ones and ones which simulate ejaculation. In Sheffield we have heard of boys starting to use condoms for masturbation (otherwise known as a ‘posh wank’!) and we should be encouraging this as a way of familiarising themselves with effective condom use – as well as eroticising them by association with pleasure. The Centre for HIV and Sexual Health produce a ‘credit card’ resource on the Golden Rules of Condom Use which can be a helpful adjunct to the work. And it will always be a good idea to prepare men and young men for the fact that they may experience a slight decrease in their erection when they put on a condom but that this will return. The Section of 10 Top Tips on Promoting Condom Use in the Department of Health website on Effective Sexual Health Promotion (website address : www.dh.gov.uk) is also an invaluable resource.

A Range of Choices

Providing sexual health services also should mean providing choice - for example always offering a full range of contraception methods or making all the choices clear if someone becomes unintentionally pregnant.

....And a Range of Services

Making sure that we do not limit our sexual health services simply to issues of fertility or prevention of infection will tangibly demonstrate our holistic approach. For example, is there provision for people who are experiencing psychosexual problems, for women with PMS, for people who have been raped or sexually assaulted, for people who are questioning their sexuality or for medical as well as surgical abortions?

Condom Negotiation Skills

Training groups on condom negotiation skills and saying ‘no’ to unwanted sex can be done through one-off workshops or part of a wider assertiveness-training programme. This is in recognition of the fact that for many people, putting into practice decisions about looking after their sexual health may be sabotaged by their fear of upsetting others or, literally, by not knowing how to say “no”. When working with young people, it is important that

we do this work with boys as well as girls.

Rape and Abuse

Some life events such as rape or childhood abuse can leave long and damaging scars on people's ability to make positive sexual relationships. Giving advice and support to agencies such as Rape Crisis centres, Survivors, Victim Support Schemes or Women's Aid can enable their staff and volunteers to ensure their service-users' concerns about sexual health and sexuality can be dealt with appropriately and skilfully.

Joint projects which exemplify this approach include 'Taking Back Control' – a collaboration between Sheffield Rape and Sexual Abuse Counselling Centre and the Centre for HIV and Sexual Health. The starting point for this was the recognition that few resources existed to help support people who had been raped or sexually assaulted in terms of their questions and anxieties about their sexual health. These might for example include whether to have tests for HIV and other STIs, and the possible impact on sexual relationships. As a result a leaflet 'Taking Back Control' was produced which could be used with women or men who had experienced rape or assault. Training events were also run with local Primary Care and Health Service staff and other relevant professionals. The huge response to this made it clear that a very real need for support round this topic had previously gone completely unmet.

Mock Sexual Health Clinics

Arranging visits to local sexual health services for those who might be nervous of approaching on their own - such as local Asian women's groups, Deaf and Hearing Impaired groups or all the students in a school's Year 10 or 11 - can vastly increase service uptake by groups previously seen as 'hard to reach'. In some schools this is achieved by a group of 6 or 8 students from each school year going to visit the clinic and meet the staff and then doing a presentation to their peers at school on their learning and their advice on accessing the service. Or, in the Snapshot Project in Hampshire, young people go and take pictures of their local clinic and produce a display to demystify the process of visiting – a 'virtual visit' in effect.

Logistically these ideas may be a more feasible approach than transporting a whole year group – and will still be effective in spreading the word about youth-friendly practices.

Condom Distribution

By seeking out broad distribution networks for condoms we can vastly increase people's access to these and therefore their likelihood of using them. These networks can include Primary Care practices, youth workers, Connexions PAs, youth clinics, Family Planning Clinics, street-work with commercial sex workers or outreach work in cruising and cottaging areas. Or they can be widened to encompass postal condom distribution schemes, as operated by some Gay Men's Health organisations.

Have I Told You Lately That I Love You?

"Our expectations about sex are far too high" writes Jessica Berens, an Observer journalist. "There are other things to do, after all – gardening, singing, art". Putting the possibility of loving someone but not having sex with them on the agenda opens up all sorts of choices and counteracts the prevailing notion that love = sex, and that sex = penetration.

North Buckinghamshire Health Promotion produced an excellent poster based on this concept called "101 Ways to

show someone you love them without having sex". With groups or on a one-to-one basis we can invite people to list all the possible ways they can think of to show someone you love them without having sex. We can go on to ask - How would they like someone to show them affection in ways that don't include sex? This gives people expanded choices about how to express love, affection and a sense of valuing someone without necessarily having to use sex for this.

One exercise for this, taken from "Go Girls" is as follows :

Invite people to list all the possible ways they can think of to show someone you love them without having sex. These might be, taking them on a picnic, writing them a poem, giving them a head massage, buying them a packet of love-hearts, cooking them a romantic dinner, washing their car, singing a karaoke love song duet with them, leaving a single flower on their desk, buying their dog a squeaky toy.....the list is probably literally endless.

Then ask, How would they like someone to show them affection in ways that don't include sex?

Once they have identified what some of these ways could be, if they have a partner encourage them to ask for these demonstrations of affection, and to give them too. If they are already being sexual with a partner, perhaps group members will find they get a greater sense of being treasured and valued in these ways. And if they don't have a partner, it will give them a menu of things to try out as signs of love once they are in a relationship, without necessarily having to look to sex for this.

Inappropriate Touch

Working with especially vulnerable groups - such as adults with Learning Difficulties or children - should involve addressing issues of appropriate and inappropriate touch, saying no and setting boundaries if we are to protect them from abuse. The 'Protective Behaviours' training programme (see Resources Section for contact details) offers a useful model here for supporting people to develop strategies for staying safe and to identify key adults who will help them if they are at risk of harm or abuse.

It is important, however, to keep in mind the fact that damaged and abused people – the ones who professionals are often most careful not to touch for fear of over-stepping boundaries - may in fact be those very people who are most in need of safe and reassuring touch. If this can be done in respectful and consensual ways, with agreement sought and given – a hand on the shoulder, an affirming hug – it may be possible to re-connect them with positive, non-abusive touch and this can be an invaluable learning experience. Also this may come as water in the desert for people who are starved of touch – and may help them to re-establish their right to touch which is caring, appropriate and responsible and to set boundaries round touch for themselves. Indeed, it could be argued that if we do not help them re-learn and negotiate such boundaries, they may be especially vulnerable to manipulation or 'grooming' by others, who are offering them affection for entirely corrupt reasons.

Emotions

Love

Desire

Pleasure

Anger

Joy

Intimacy

Delight

Jealousy

EMOTIONS - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

To be sexually healthy and to be able to claim a positive sexuality, we need to be relaxed, unafraid and accepting of strong emotions – both pleasant and unpleasant. We must be able to handle difficult feelings such as anger, jealousy, upset at rejection or anxiety about being dependent on another person because sex and sexual expression will almost inevitably give rise to these at some stage. We will also need to be able to give ourselves up to more enjoyable feelings such as love and desire, intimacy and delight, joy and pleasure. I have consciously avoided the use of 'good' or 'bad', 'positive' or 'negative' to describe emotions here. This is because we need to become comfortable with the fact that emotions are just feelings, they may be pleasant or unpleasant to experience but they are not in and of themselves good or bad. Only the actions which emanate from feelings and the consequences of them being acted upon are negative or positive.

And the corollary to being in touch with and accepting our own strong feelings linked to sex and sexuality is that we will need to be comfortable around other people's feelings too, to accept them as being an important aspect of sexuality and to be open to communicating our feelings and acknowledging those of others.

Many of us involved in sexual health work may perceive some of the ways in which our culture currently seems to be colluding with a dislocation between sex and emotions as deeply disturbing. In this era of cyber-sex between people who have never met, of Club 18-30 Reps and people willingly entering into enormously graphic, explicit sex without any other kind of intimacy or sharing of emotions, it is understandable if we sometimes feel concerned about what is happening to people's emotional health and well-being. This is a long way away from being a judgmental approach or disapproving of sex which is only for the sake of pleasure. But we do ourselves and those we work with no favours if we repress any such misgivings for fear that these will be interpreted as prudish and anti-pleasure.

WORKING IN THE EMOTIONS PETAL

In this petal, our work could include:

Communicating Difficult Feelings

Helping people identify, name and then communicate their difficult feelings - such as hurt or jealousy, despair or resentment, fear of rejection or of disapproval - all helps them to take more control over these and therefore to be less in thrall to them or un-nerved by them. This can be done for example through formal means by 'emotional literacy' workshops or sessions, by skills training such as assertiveness covered earlier in this section or by offering a safe and confidential space in which people can discuss their feelings and become more familiar with these and with the process of sharing them with another person.

Anger workshops

One strong emotion which can be evoked by sexual feelings, relationships or a sense of powerlessness is that of anger. Helping people express this constructively, in ways which do not result in hurt, violence or damage can be an important area of emotional development. There is a range of ways in which this can be done - for example encouraging the discharge of adrenaline and the rush of energy which often comes with anger can make it less likely these will be channelled destructively. Such methods can include drumming, voice work and shouting, going for a run, or the use of punch-bags. Other methods which can be introduced as anger management techniques can include:

- writing a letter to the person you are angry with to get out the feelings, either to send or not
- pretending a pillow or a chair is the person you're angry with and telling them how you feel – shouting at them and bellowing out your feelings if you want to
- concentrating on breathing deeply
- screwing up paper into balls and throwing them hard at the wall
- writing down everything you're feeling in a stream of words, images and phrases
- telling someone - perhaps a friend, colleague or family member - why you are feeling so angry and all the different thoughts and feelings you are experiencing
- writing it down as a poem, in a diary or as a rap or a song
- drawing, painting or scrawling your feelings

One key point to communicate to those we are helping to feel, express and manage their anger is that it's fine to be angry, but they are responsible for what they do with it next.

Red Card Schemes

One anger management technique which has been introduced into a number of schools with the effect of vastly reducing the pupil exclusion rates is the 'Red Card' scheme. In this scheme, if a pupil who has difficulties with anger feels they might be about to lose control, they can show a 'Red Card' which allows them a fast exit out of the classroom with no need to explain their reasons. They then go to a safe, supervised space until they are calm enough to return to class. In some schools, at the end of the day they then return to discuss what happened with the teacher of the class they left so they can resolve and jointly consider any outstanding issues. In addition to helping young people manage their anger, this also expands their awareness of their own emotions, since they have to be in touch with these enough to anticipate when problems might be about to arise.

Congratulations!

Using our imagination about how our service-users or clients or the groups we work with may feel about accessing sexual health advice or services should lead us to realise that we need to dispel any anxieties they may be feeling as early as possible in the visit or transaction. So if we smile at someone approaching the service, and congratulate them on their responsibility in seeking out help and advice, that should offset any trepidation they may have had about being treated in judgmental ways. This may be particularly important if the person feels foolish or conflicted about something which has happened - for example if they have had unprotected sex or are wanting emergency contraception for a second or third time. It is also likely to be especially important if a woman is seeking an abortion, since she may well have encountered some negative anti-choice messages, which will mean we will have to consciously provide an antidote to these. We could do this for example by praising her for taking care of her sexual health and being brave enough to come to the service.

Training for staff and professionals on emotional awareness

Training and familiarising health professionals to become comfortable addressing the emotional aspects of sexual health also falls within this 'petal'. This will mean being open to the feelings that dealing with sex and relationships evoke in their clients, patients and service-users and being able to help them explore and express these. But it also offers staff the opportunity of becoming familiar with their own emotions around these issues rather than seeing sexual health as only about bodies and "bits", or to do with service users - not themselves.

All training for professionals involved in sexual health work - whether around service provision, offering information, support and advice, Sex and Relationships Education or health promotion and HIV prevention - should include an acknowledgement of the feelings associated with these topics and activities. Even straightforward clinical training should still pay attention to this aspect of sexual health along with the communication skills necessary to be able to deal with and express our feelings.

A clinician participant in a training session once told me confidently 'When I put on my white coat, I just become a professional' and reassured me they were as a result impervious to emotion. Though I did not of course say so to them directly, I could not help feeling how strongly their belief that this was a desirable way to behave must have adversely affected their transactions with their service-users.

Emotional development as part of Sex and Relationships Education

Expanding the concept of Sex Education to become 'Sex and Relationships' acknowledges the importance of relationships in our sexuality and for our sexual health. If we are best to serve the educational needs of children and young people we will need to ensure our Sex and Relationships Education programmes include many opportunities for them to become familiar and comfortable experiencing, identifying, naming and expressing their feelings. This will also of course be accompanied by them practising listening to, observing and coming to an understanding of other people's emotions too. We can give young people these opportunities through a whole host of exercises from circle time to listening exercises in pairs, from values clarification to role plays, from drama and scenario work to watching videos, discussing soaps or reading about other people's experiences and testimonies. Understanding someone else's emotional experience by 'Walking a mile in someone's moccasins' is the lovely Native American phrase which sums up the kind of empathy we will want to be developing in all young people in relation to other people's feelings, too.

Managing anxiety

Helping people come to terms with their anxieties and manage these in acceptable ways gives them greater emotional resilience and develops their overall resourcefulness, while also supporting them in getting their anxieties into perspective. Techniques for doing this can include deep breathing exercises, drawing their anxieties or writing about them, using worry dolls to 'carry' their worry for them, familiarising them with concepts such as 'Whatever happens, I can handle it', introducing them to Susan Jeffers' very practical book "Feel the Fear and do it Anyway" and working through some of its exercises.

Stress Reduction

Enabling people to learn some basic relaxation methods can be vital to their emotional well-being, particularly if they are living with high levels of stress. This may be especially relevant for people living with HIV or their carers and significant others, for people who have survived abuse or those emerging from violent or destructive relationships. Stress management techniques for example could include meditation, relaxation, deep breathing, positive self-talk and affirmations, guided fantasy or yoga.

Counselling

Providing easy-to-access and low-cost counselling services will be vital for those with emotional or relationships problems or those who are struggling with a very negative self-image. Offering this in settings such as Primary Care and Youth Advice services and drop-ins can be an important way of opening up such opportunities to those groups

who would not be able to afford private counselling and who might not otherwise seek out such help. It is important that counsellors are familiar with sexual health issues, and comfortable with a range of expressions of sexuality. It may be that in order to build up such a resource locally, it will be helpful to provide training on these matters for local counsellors and therapists both in private practice and working in the public sector.

How do we anaesthetise feelings?

Increasing awareness of our feelings immediately means we have the chance of making our peace with them. This is especially true for people who are fearful of difficult feelings and struggle to blank these out. When working with people who use drink or drugs or compulsive sex - ask what feelings they may be trying to handle or anaesthetise in this way? Then by gently introducing some of the suggestions and exercises in this Section, it may be possible to help them allay their fears of strong emotions, to make friends with their feelings and acknowledge the positive part these can play in their lives, rather than resisting and denying these and seeking escape in some form of self-destructive oblivion.

Sensuality

Food

Music

Massage

Dance

Sunshine

Smells

Exercise

Touch

SENSUALITY - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

The realm of the senses is a source of enormous almost unending delight – from the sound of birdsong to the feel of the sun on our skin, from the crunch of new snow to the smell of garlic cooking. It is a whole arena in which, with conscious awareness and mindfulness, we can revel in our animal nature and give ourselves up to direct, simple – and very often free – pleasures. And yet it seems to be an area of our sexuality which is getting more and more sidelined as 'doing it' becomes the only real sex and anything else is dismissed as foreplay or 'not the real thing'.

A Peer Educator in Washington DC was recently quoted as saying 'Girls are getting pregnant who have never even taken their clothes off' and this could be seen to sum up neatly the way in which sensuality seems to have been the frequent casualty of a rush to sex. In the late 80's when HIV prevention work was in its creative infancy, we talked widely of safer sex, by which we did not just mean condom use but the whole gamut of non-penetrative sex. We used the term to encompass a whole range of good and exciting things – from kissing and caressing, to talking dirty, nibbling and stroking, from using sex-toys and fantasy to oral sex and mutual masturbation. In all, these were things that made up the term 'heavy petting' when this was an accepted practice either pre-sex or taking the place of sex.

I remember hearing of a friend going away for a romantic - and, it had been anticipated 'dirty' - weekend with her partner and forgetting to take her contraceptive pills with her. She explained subsequently that this had meant they had to drive all the way back to her home in London to retrieve them. And I remember thinking, weren't there a whole host of other thrilling things they could have done, of other pleasures and intimacies they could have explored at that weekend and until she could begin her next cycle of pills? When penetration is deemed the only 'real' sex, we lose touch with so many other potential sources of ecstasy, sharing and pleasure.

Somewhere along the way that notion of roving through the breadth and depth of sensuality seems to have got lost and once again by sex we mean penetration – which is pretty reductive in terms of heterosexual sex, risking a return to 'man on top, get-it-over-with-quick' as the main model for sex. But it is even more ridiculous when we apply it to lesbian sex, say, where penetration may not be involved at all and where there are all sorts of other sexual delights to be explored.

In all, restoring sensuality to the subject of our sexuality will put us back in touch with our capacity for pleasure which will have positive results in the way we inter-act with the whole world and our bodies and senses, and this will not only be in relation to sex.

WORKING IN THE SENSUALITY PETAL

In this petal, our work could include:

A Senses Diary

Suggesting people keep a 'senses' diary for a week can result in them paying real and conscious attention to their sensuality and what surrounds them but goes un-remarked every day. Noticing and recording the sensory experiences they really enjoyed - from stroking their dog to the smell of new-mown grass, from the feeling of hot water in the shower to the sight of racing clouds, from the sound of silence to the taste and icy burn of their favourite ice-cream on their tongue - will waken up their senses and focus them more on the sensual world around them.

Aromatherapy, Reflexology, and Other Pleasures

Increasing a group's or individual's enjoyment of their senses can be done through aromatherapy sessions - this works on both the pleasures of scent and touch - or reflexology or something requiring even less specialist expertise, such as the group members washing or brushing each other's hair. All of these are small and manageable routes in to exploring our senses in non-sexual ways.

Sensate Focus and Safe Touch

An appreciation of the senses is part of a broader education about pleasure and fulfilment in sexual terms. It can also offer a helpful approach through "sensate focus" work in psychosexual couple-counselling or with those who are unable to, or do not wish to have penetrative sex because of impairments or for physiological reasons- for example related to their age, medical condition or disability. Work can also be done with groups or individuals on how sensuality and activities such as massage or caressing can provide ways of exploring intimacy for couples and individuals. This can replace the assumption that the only way to explore sexuality with another person is through penetration.

Try Out A Sensorium

Staging a fun 'Sensorium' can be a great way to explore the realm of the senses. This is simply an event where you bring in lots of things which can be used for trying out the different senses. Put them all on a quilt in the middle of the floor and let people choose what they try. They could even do some of this blindfold – like trying to guess the objects they are touching or the foods they are tasting – if you think this would add to their absorption in the experience. The areas of the sensorium can include:

- Taste – pineapple, herbs, strong flavours like Worcester sauce, marmite and pear drops
- Sound – wind-chimes, bells, a rain-stick, drums, tapes of the sea or a waterfall
- Touch – feathers, satin and suede, massage oils, rough emery boards and smooth pebbles
- Sight – lovely articles, pictures and photographs anything from wrapping paper to shells
- Smell – lavender, clove oil, vanilla essence, cumin and coriander, jasmine oil and mint

Use this as a starting point for a discussion on noticing our senses in everyday experiences – or for the Senses Diary, perhaps.

Talk About The Right To Pleasure

If we make it clear that we take it for granted that in sexual relationships both parties have the right to expect pleasure, this can be a powerful message to people for whom this is an alien concept. Research with young women, for example shows that often they are more fixated on their partner's pleasure than concerned about their own. In our consultations with service users and our education with young people we should therefore talk about the right to pleasure. But we should go further than this and make it clear that sex shouldn't be painful, difficult or unpleasant. After all, if we don't break this silence, then who will?

.....And Talking About Pain and Difficulties Too

Putting issues on the agenda for discussion such as painful sex - including vulval pain, which is a much greater problem than is often recognised - is an important part of our role too. We should be helping women to discuss and resolve this problem, one which can cause huge disruption in previously happy sexual relationships, and giving their partners the opportunity to discuss their anxieties about this, as well.

- We need to help people of whatever age and whichever gender to say 'no' to sex which is not a positive and pleasurable experience for them.
- We need to be supporting girls and young women to resist the group rape phenomenon which seems to be on the increase, usually instigated by their 'boyfriend' or a group of boys known to them
- We need to make it fine for people to talk about sex toys and vibrators, about learning about their bodies and what turns them on. This may take some courage but it will be a great leap forward for sexual relationships and in supporting people's sexual health and emotional well-being.

“Masturbation - Don't knock it.....it's sex with someone you love!”

Drawing on these wise words from Woody Allen, if we are going to encourage those we are working with to explore their senses, then suggesting they try out masturbation if they haven't already done so is vital. For many girls and women, discussing this is still taboo, so it is all the more important that we should discuss the fact that this is a great way of finding out about our own bodies, what turns us on and what doesn't, how we liked to be touched and how we don't.

Doing Everything But....!

Considering all the possible ways of having non-penetrative sex can broaden out people's concept of how powerful and joyful sensuality and sexuality can be, when they are explored together. One exercise for doing this is to get people - or small groups - to answer 3 questions

- Think of all the ways you can of having sexual pleasure without touching each other
- Think of all the ways you can of having sexual pleasure with no penetration
- Think of all the ways you can of having sexual pleasure just using toys - and again with no penetration

Obviously any group having such discussions together needs to have been set up very safely and respectfully so people feel able to talk about these issues - but within these parameters, this can be extremely revealing and can increase people's 'repertoire' of the sensual and sexual possibilities that exist outside penetration.

Massage - Giving, Receiving and Communicating

Helping people to make the distinction between sex and sensuality is a vital stage in enabling them to reclaim their senses. It is also a way of deepening people's understanding that our sensuality is part of our broader sexuality – but nothing necessarily directly to do with sex. This can be done by introducing the notion of massage and encouraging groups to experiment with giving - and receiving - a really good hand or foot massage. You might want to try out different 'strokes' with them before doing this, for example using a basic 'How To' manual and have a whole range of scented and unscented oils and creams for them to choose from.

Ask those receiving the massage to communicate clearly about what they do - and don't - want. For example, would they like oils or creams or not? If so, what scent do they like – or would they prefer un-perfumed? Are there any parts of their hand or foot which are ticklish or painful and which they would therefore prefer was not touched? When the massage is being given, they need to say what kind of strokes they would like, and ask for anything else they want such as a lighter or more pressing touch.

This activity has a range of aims. First of all it legitimises sensuality and the pleasure of receiving touch, without it needing to be sexual. Secondly, it literally gets participants in touch with starting to know what kind of touch they like

and what they don't like. It gives them the novel experience of being able to receive pleasurable touch without having to return it. Finally, it builds on all of this and encourages them to practice actually communicating to someone else about their experience of being touched as well as asking for and refusing different aspects of receiving touch.

In doing such an exercise, it will always be important to set all of this up in as non-threatening a way as possible, as touch even of this unthreatening nature may generate anxieties. For example, it is important to be sensitive to the fact that there may be members of any group who have in the past been touched sexually against their volition, who may have been abused, coerced or attacked. This should not stop us doing such an exercise but it does mean we need to set clear boundaries in the activity. So, for example, no-one needs to take part if they would rather opt out and participants can stop at any stage if they want to. All of this gives people an opportunity to enjoy a positive, safe and pleasurable sensual experience - and to gain some communication skills in asking for what they want.

The Dawn Chorus

If you are working with a group or away on a residential, getting up really early in the spring and summer to hear the dawn chorus together can be an astonishing experience that repays the early rise - somewhere between sensual and spiritual.

The Sensual Highs of Exercise

Encouraging people to explore sensuality through the rigors and body high of exercise - whether it's dance or working out at the gym, running or swimming, cycling, aerobics or playing football - can put them in touch with the sensual pleasures to be had in pushing ourselves, in stretching our muscles and in working up a great sweat!

Self Image

Body Image

Self-esteem

Looks

Size

Shape

Physical disability

Relationship with food

SELF IMAGE - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

It seems that increasingly in our looks-and-appearance obsessed culture, what you look like equals what you deserve. And it also seems to be true that the band of what it is acceptable to look like narrows a little further each year. So to be sexually attractive you have to be young, slim, able bodied and have supermodel looks. However as "Full Voice", the Body Shop's resource on self-esteem so wisely said, "*There are 3 billion women who don't look like supermodels – and only 8 who do!*" We bring our bodies and our faces and our deeply corporeal selves to our relationships and to our partners when we have sex. So if we feel ashamed of these bodies, or that our looks are unattractive or our shape repulsive, then we are not going to come to these relationships strong and with a sense of our own loveliness. Instead we are going to approach them feeling full of neediness - for affection, for reassurance, for a more glamorous version of ourselves reflected back to us from our partner's eyes. Such a sense of low self-worth, such an undervaluing of ourselves is bound therefore to mean that we will not feel as equal as we should, that we may be grateful for the attention we receive and therefore not expect good treatment, that we may give away any sense of rights because we have had the supposed good fortune simply to be chosen!

From all of this we can see that this looks-driven culture has enormous implications and consequences for sexual health. Only when people are able to achieve self-acceptance and self-love whatever their size, shape or particular look and only when our society has a more generous and ample notion of the huge variety of forms in which attractiveness comes - from a loving spirit to a size 22 body - will we take a huge stride forward in sexual health.

WORKING IN THE SELF IMAGE PETAL

In this petal, our work could include:

Image Education Programmes

Working to counter pressures from "body fascism", the fashion industry and the tyranny of conforming to certain images in looks and size can comprise useful educational work on feeling comfortable with our own bodies. This can be done for example with groups of young people – or with others where there is a strong "looks" imperative, such as women, gay men or people with disabilities. Issues covered could include critical analysis of the images portrayed in the media and advertising about how we should look, campaigns with local and national shops to press for a greater range of sizes and work on self-affirmation.

Living Well – For People With HIV or Hepatitis

Addressing broader issues than just looks and bodies will be appropriate in the Self-image petal. These are not only to do with size and shape, but also encompass illness and our relationships with our body's well-being. So helping people whose self-image may have been damaged by health conditions such as HIV or Hepatitis will be important. One way of doing this is through group-work and courses on Living Well with HIV or Hepatitis, covering topics such as disclosure of HIV or Hepatitis status, sexual health, rights, benefits, therapy regimes and complementary therapies

Altered Body Image

Using our understanding of how an altered body image can damage a sense of self-worth, programmes could also be developed with oncology departments or orthopaedic or surgical specialists. All of these areas of health care may provide treatment such as radical surgery which results in massive changes to a person's body image. Sensitivity will therefore be needed in helping those who have experienced this to reconcile it with their sense of their own sexuality.

The Eating Disorders Epidemic

Working on body image issues will sometimes mean engaging in programmes of education about eating disorders. As a preventive measure, this should include how to identify these conditions early on when treatment is most effective. It can also involve self-esteem building work with people with eating disorders. We need to recognise too that, although we tend to associate this condition with women and in particular young women, eating disorders are being noted with increasing frequency among young gay men.

Menstruation - Still A Curse?

Strong negative cultural attitudes about menstruation still persist among both men and women. Recognising this leads to an understanding that all women - from teenage to middle-age - are likely to have internalised a sense of this aspect of themselves and their bodies as being dirty or repulsive. We therefore need to raise awareness amongst both young men and young women of the ordinariness and importance of this body experience, lifting the silence and taboo. For a range of ideas for doing this, see the section 'A Curse on Self-Esteem' in 'Go Girls – Practical Strategies for Building Self-Esteem and Supporting Emotional Development.'

Health Promotion, Diet and Nutrition

By making partnerships with colleagues in areas related to health promotion and diet, we can develop programmes on healthy eating, nutrition, budgeting on a low income for a healthy diet, and awareness of junk food and its increasing relationship to obesity.

The Tyranny of Being 'Cool'

Working with image issues is not confined to the topics of looks, size and shape. We also need to acknowledge the great importance - especially to young people and young men in particular - of appearing 'cool'. This may mean being vulnerable to the pressure to drink heavily, use drugs, smoke or have unprotected sex. To help them withstand these, we need to help them explore their fears and fantasies about the potential losses for them from saying 'no' and then focus on what the possible gains in their lives would be. Once they have seen the potential positives to be had from putting their needs, rights and wishes first and saying "no" when people are pushing them to do something they don't positively want to, then we can help them gain the skills to say 'no' through role-playing refusal.

Our work in this area could also involve discussion with groups and individuals on the use of alcohol and drugs, risk-taking for bravado and confidence and the assumption that such behaviour presents a cool, admirable image to others. Questioning this and replacing it with an approach which is more focussed on what the individuals themselves really want can offer a refreshing voice in a world where conforming to certain rigid types of behaviour is otherwise the norm.

Involvement and Participation –

Involving people actively in taking more control over their lives is great for self-image. For example this could be by getting service-users participating in a needs assessment or in action research within their community. Or it could be by training them up as 'Mystery Shoppers' or 'Undercover' agents.

For more on working with self image see Section Two, 'The Self-Esteem Flower - Working with Self Image'

Spirituality

Awe

Feelings

of oneness

Sense of deeper self

Closeness to nature

Deep bonding

Wonder

Mystery

SPIRITUALITY - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

As the most recent addition, this was a latecomer to the flower. However it seemed to us that if we omitted this deep sense of other-ness, our capacity for awe and our sense of wonder then we risked losing a key - though sometimes hard-to-communicate facet - of our sexuality. By spirituality we mean a sense that there is more than the material world, more than just our bodies and that we are capable of awareness and experiences which transcend what we know only through our reason. Anne Dickson once memorably said that in our western polarising way we sometimes divide the world into 'mystery' and 'mastery' and yes, the gendered implication of this was intentional. She added that 'mastery' seemed to dominate the discourse and cultural experience around sexuality. So, by including the spirituality petal, we hope to restore the element of mystery to our sexuality.

By spirituality we emphatically do not mean conventional religion, although some people may explore their spirituality through this route. But all too often the major world religions have taken a deeply harmful approach to sexuality, for example by placing such rigid constraints and taboos around its expression and the delights which this can bring. In addition, these religions and all kinds of fundamentalism have resulted in the demonisation of the sexuality and sexual freedoms of whole groups in our society. For example they have promoted homophobia and institutionalised misogyny. They have also failed to act to stop child abuse and the rape of women or to punish those committing such atrocities. For many people who are not conventionally religious, the result of a kind of colonisation of the spiritual by religion has been to cut them off from a sense of their own spirituality. By placing this petal in the Sexuality flower, we hope to re-establish this possibility and presence in people's lives and the fundamental - rather than fundamentalist - relationship between our sexuality and our spirituality.

Spirituality as understood within this model is the understanding that the material world is underpinned by something more enduring and eternal and that this spirit, life force and spark runs through everything. As the great Black American writer Alice Walker said, spirituality reflects and encompasses:

“The earth, nature and the Universe - my own Trinity”.

And clearly our bodies, our desires, our relationships and our emotions are part of the earth, nature and the Universe too.

WORKING IN THE SPIRITUALITY PETAL

In this petal, our work could include:

Talking About Spirituality In Our Work

Actually just mentioning this aspect of human experience and sexuality allows people the space to explore where their sexuality and their spirituality mesh.

Going Inwards And Reaching Outwards

By introducing groups or individuals we work with to a range of techniques such as yoga, meditation and deep breathing we can help them explore their inner space and maybe reach out to a deeper sense of connection with the universe and others, too.

Altered States

When working with people who abuse alcohol or drugs, it can be helpful to offer them the experience of meditation or yoga as ways of exploring altered states of consciousness without needing drugs or alcohol to achieve this.

The Natural World

Devoting time and attention to the natural world around us can reap a harvest in terms of a growing awareness of our spirituality. This could include taking a group out for a picnic in the park, or to woods, even just to some waste ground or a river bank, watching the night sky together and looking at the stars - or experiencing real, deep country darkness. Swimming in a lake, a river or the sea is a way of getting in touch with the elements. So is simply encouraging people to lie on their backs, in the country, on a river bank or in a park and look up at the sky, the night sky and darkness, the clouds, the hugeness of it all.

Addressing Sexuality and Religion

Tackling some of the dislocation between religion and sexuality can be a positive way to restore the spiritual in the sexual and to make a more open environment for sexuality and sexual expression. The playwright Dennis Potter once said "Religion is the wound, not the bandage" and when it comes to the major world religions and their dealings with issues of sex and sexuality, for many of us this is palpably true.

This work can be done for example by training and awareness sessions for faith and religious group members, by making strong alliances with the more liberal advocates for religion who may be keen to develop anti-oppressive practices within their faith groups and offering them support in this we should also not assume religious leaders - who will usually be older and male - speak for all members of their community. So, making links with women's groups and youth groups within a faith or religion may be a positive move.

It can also be helpful when working in this way to help faith groups to explore what their key values are - which may often have to do with respect for others, kindness and charitable love for example - and inviting them to see how these can mesh with the sexual health work and values implicit in the flowers of sexuality and self-esteem, for instance. Finding the common ground and what can unite us, without compromising on our core values, is likely to be more effective than simply defining the ways in which our perspectives on sex and sexuality sharply differ.

Exploring a Sense of Connection

Helping people find their spiritual selves in any relevant part of their lives and to name and acknowledge this can be really constructive. A great example came from a participant on a training course who said she gained her experience of spirituality came from her love of football and the sense this gave her of reaching out to thousands of other people. She added that the feelings of community she had in the huge cheer when Liverpool scored at Anfield beat the best orgasm she had ever experienced for a sense of wonder!

There are more ideas of working with these issues in Section Four, the Spirituality petal of the Self-esteem Flower (page 81)

WORKING WITH THE SEXUALITY FLOWER - WORKSHEET

- **Taking at least one suggestion from each petal in this Section – consider**
Which are most relevant to our work?
How could we take a first step to putting into practice those you identify as most appropriate to your role, your situation, your service or your client or service-user group?
- **Try to identify at least one activity in each petal. By doing this you will ensure that you are maintaining a balance between work at the ‘roots’, ‘stems’ and ‘flowers’ levels.**

1. **Choose at least one activity from the ‘Political petal’ (page 15). What would be the benefits to your work from doing this?**

What are the first steps you can take?

i) _____

ii) _____

2. **Choose at least one activity from the ‘Social Relationships’ petal (page 19). What would be the benefits to your work from doing this?**

What are the first steps you can take?

i) _____

ii) _____

3. **Choose at least one activity from the ‘Emotions’ petal (page 29). What would be the benefits to your work from doing this?**

What are the first steps you can take?

i) _____

ii) _____

4. Choose at least one activity from the 'Sex/Sexual Practice' petal (page 24). What would be the benefits to your work from doing this?

What are the first steps you can take?

i) _____

ii) _____

5. Choose at least one activity from the 'Self Image' petal (page 39). What would be the benefits to your work from doing this?

What are the first steps you can take?

i) _____

ii) _____

6. Choose at least one activity from the 'Sensuality' petal (page 34). What would be the benefits to your work from doing this?

What are the first steps you can take?

i) _____

ii) _____

7. Choose at least one activity from the 'Spirituality' petal (page 43). What would be the benefits to your work from doing this?

What are the first steps you can take?

i) _____

ii) _____

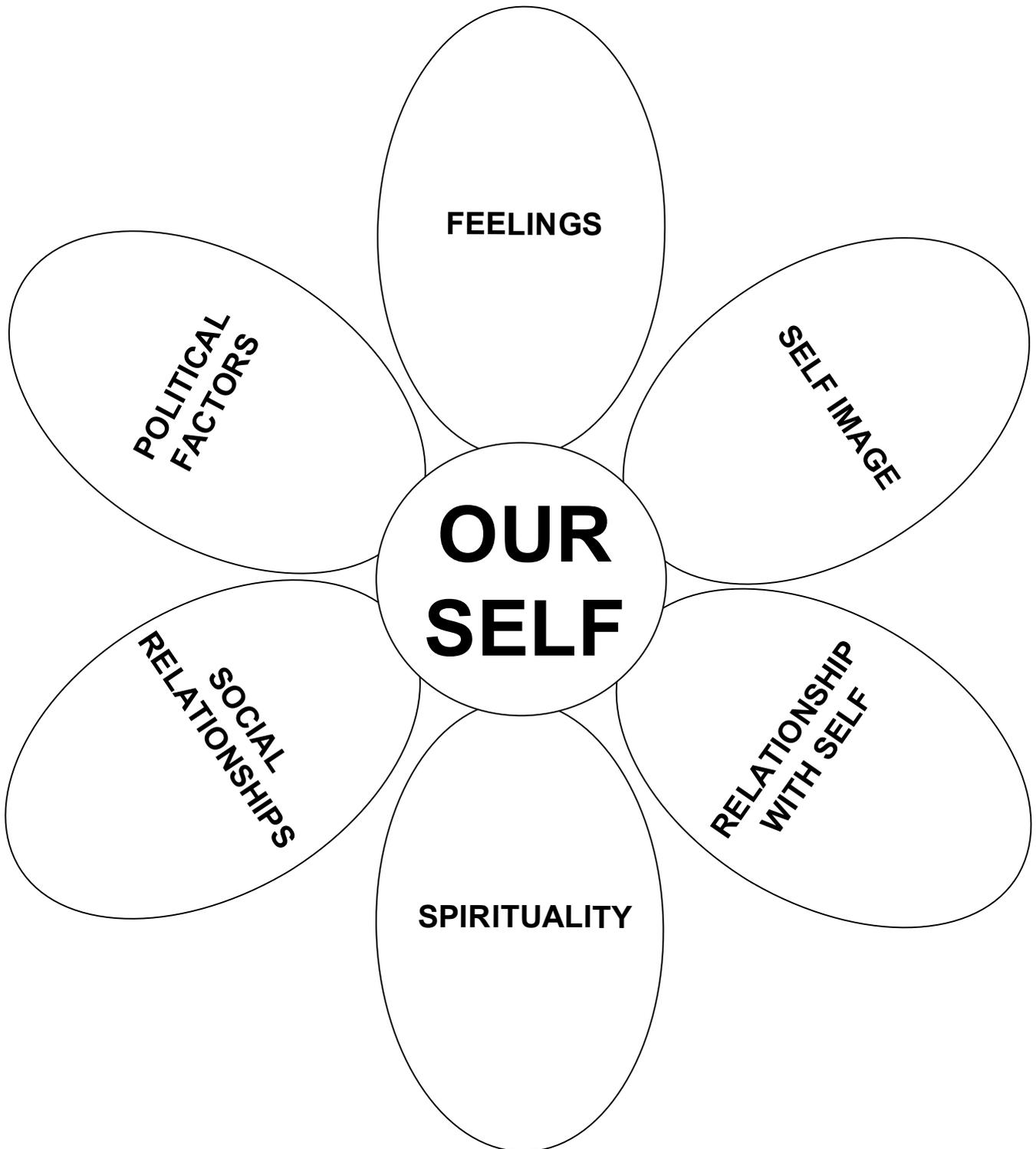
Is there anything else you could do to work with the Sexual Health/Sexuality flower?

THE SELF-ESTEEM FLOWER MODEL



Self-esteem is feeling good about, and relating positively to, our lives, our feelings, our actions and our relationships

THE SELF-ESTEEM FLOWER MODEL



Self-esteem is feeling good about, and relating positively to, our lives, our feelings, our actions and our relationships

©Carol Painter & Jo Adams

Design: Jon Fox

SECTION FOUR

THE SELF-ESTEEM FLOWER

How Our Self-Esteem is Constructed and Destroyed

In developing the Self-Esteem flower, we wanted to create a structure that made sense of the different contributory factors to positive self-esteem, to capture our approach in a form which was easy to draw and so to share with others.

But we also wanted to do this in the belief that if we are to devise practical and intelligent strategies to redress the damage which has so often been done to people's self-esteem, then we need to have an understanding of the many levels at which it is constructed. We must develop a sense of the range of determinants that impact on and sculpt someone's ability to value themselves as they grow. This understanding will ensure that we can then draw up effective responses, putting our efforts in the right places and accurately addressing the key influences. Otherwise we risk wasting our time, our energy and resources by developing strategies which tackle quite the wrong problem. So, if we only take one route into this complex web of factors, we will probably only affect one tiny aspect of it. If the problems of low self-esteem are multi-faceted, encompassing a range of intertwining but often quite separate issues, then we need to devise equally multi-faceted approaches to resolving these.

The Well Springs of Our Self-Esteem

Underpinned by the same philosophy as that of the Sexuality flower, the Self-Esteem flower explores and illustrates the myriad facets of our self-esteem, its well-springs and sources. Again it reflects the political, social and individual factors which increase or diminish our sense of self-worth. And again, in order for our endeavours to honour and acknowledge this holistic model, it is important that we do not limit our efforts just within one "petal". We will need to work across the spectrum, developing appropriate responses in each of the "petals" if possible.

Taking each "petal" one by one, we can explore in what ways this aspect of experience affects the development of self-esteem.

EXPLORING THE PETALS

**POLITICAL
FACTORS**

Education Media

Employment Money

Housing Environment

Self-help groups

Experience of

discrimination

e.g. for lesbians gay and bisexual
people, people from BME
communities, people with
disabilities

POLITICAL FACTORS - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

This petal acknowledges that people's self-esteem derives as much from their political experience and status as from the more immediate pressures and relationships around them. It's hard to feel great about ourselves if we grow up in crowded and dilapidated housing, for instance, where there is little privacy and no green play-space. It's difficult, too, to gain a deep sense of our self-worth if we are socially or culturally despised, or overlooked simply because of who we are. So if we belong to a group which is not well respected within our society, we will be constantly receiving overt or implicit messages about being unequal, about being perceived as inferior. Since these messages come to us from a very early age from those with power over us such as our families, teachers, religious and cultural leaders and the media - we are likely to believe them. Because to resist and rebel risks being disapproved of or rejected by those we are desperate to please, and this is too frightening for us to contemplate. At this stage, by believing those negative stereotypes and images that others are peddling about us, we can be said to have 'internalised our oppression'. That means that we carry within us a powerful voice which tells us we are unworthy. We then frequently believe this to be our own voice rather than recognising its true source.

So a young person in the public care system, or someone from a refugee family, a teenage mother or a Gay man, someone living with sensory impairment or someone who has learning difficulties – all these people may well lack positive role models. In addition, if as a result of belonging to such a group we suffer from being presented with a demonised or pathologised or stigmatised image of ourselves, this may well diminish our sense of self-worth still further. So may the negative (or even non-existent) media images we see portrayed of ourselves, or not having high expectations set for us at home or at school in relation to our education and career prospects, or perhaps the experience of living in poverty. From all of this we can see how intertwined our political identity and our self-esteem are almost from birth.

WORKING IN THE POLITICAL PETAL

Our work in this petal could include:

A Local Lesbian, Gay and Bisexual Health Forum

Establishing a Forum to address health issues for Lesbians, Gay Men and Bisexuals can be a powerful first step to achieving equality for these groups in terms of the services provided for them. Understandably many Gay people are fearful that they will be at receiving end of disrespectful or judgmental attitudes if they access health service provision – and, all too often, research findings tell us that this has previously been their experience. So it is up to those of us working in health and related services to make it clear that we are addressing this and that we welcome Gay, Lesbian and Bisexual service users. One step in achieving this is to establish a Forum which is attended not only by members of the Gay and Lesbian communities but also by key commissioners and planners, providers and practitioners in health and social services, from education and the voluntary/community sectors. Offering sensitive services which are tailored to the needs of these communities lets them know clearly that their health and well-being is taken seriously and is seen as a priority. After years of living in the wilderness in terms of the NHS and other statutory services, this has an enormous symbolic and practical significance, with attendant positive knock-on effects on the self-image and self-esteem of individuals, groups and communities.

A Social Inclusion and Self-Esteem Agenda

Developing services or self-esteem building opportunities for people from marginalised, stigmatised and vulnerable

groups - such as those being treated in the mental health care system, IV drug injectors, commercial sex workers or those in prisons and other secure settings - lets them know that their needs are seen as legitimate and that their sense of self-worth is important to us. Addressing this may involve working with commissioners, policy-makers and service providers to ensure that inequalities are addressed and reduced and that self-esteem building is acknowledged as playing a key role in the wider social inclusion agenda.

Self Advocacy Builds Self-Esteem

Arranging for a young mothers' group to do an article for the local press on childcare and their own experiences sends a powerful message that their ideas are of interest. Or supporting a group of visually impaired people to make a local radio broadcast about their needs in Sex and Relationships Education and sexual health services gives a platform for their voices to be heard - both literally and metaphorically. The other positive spin-off from developing such self-advocacy is that it builds a pool of expertise and understanding which can be drawn on by service planners and providers, to ensure that existing service provision and new developments are congruent with the actual needs of marginalised communities.

Fund-Raising Can Be Self-Esteem Raising Too

Working with a group to organise a fund-raising event for a local group such as a support group for HIV positive women or an international AIDS awareness charity can strongly support their sense of their own capacity to make a difference in the world. It also builds their awareness of the needs of others - and can even actually also raise some well-needed funds!

Do Gay Boys Drop In?

Supporting a group of young gay men to campaign for special provision at the local youth clinic or the school sexual health drop-in will develop their skills in speaking up for their own needs and may also deliver new much-needed services, with tangible sexual health benefits. They could even go on to get actively involved in staffing the drop-in by providing a 'meeting and greeting' service for new attendees, a model which has already been successfully piloted in some areas.

Older Adults Have Needs Too

Training up workers in residential care homes for the elderly on the sexual health rights and needs of older adults can ensure that this often overlooked group comes in from the margins in terms of their sexual health. In such training events, it will be important that we invite staff to think about all the ways in which their workplace or organisation could address these issues - and in what other practical ways the self-esteem of the older adults who are their clients and service users can be supported and enhanced? Making alliances with organisations which advocate the rights of older adults, such as Agewell and Age Concern, can result in strong partnerships which will support us in developing work which is sensitive to the needs of older adults and puts these on our agenda.

The Right To Safer Streets

Working with a women's group or young women's group to campaign for better street lighting in their area or on their estate can have a very positive impact on women's sense of self-esteem. An environmental change like this can result in women feeling more confident about going out, less at risk and clearer about their right to safety, too.

Safety for Sex Workers Too

One group of women – and indeed sometimes young men too – whose rights to such safety are often ignored are those who work in the commercial sex industry. And yet research and the testimony of the women themselves tells us that they are more at risk of rape, violence or attack than most other women. So campaigning with support groups and in partnership with sex workers for greater safety and negotiating conditions with the local police which protect sex workers' well-being can pay dividends. All of this in turn is likely to impact on both improvements in self-esteem and in sexual health since women who have a greater sense of their own rights will also be more likely to take the time and the effort to negotiate safer sex and to believe that they themselves are worth protecting.

The Power of Positive Images

Presenting positive images – maybe on posters in service waiting rooms, on information and educational resources, and in publicity materials – of groups who are not usually represented can portray a powerful message that they have a right to visibility and a presence in our society. This could include images of older adults or people with disabilities in responsible positions, gay men and lesbians in happy and fulfilling relationships or teenage parents coping well with this role. Images which can help in overturning stereotypes can also play their part in self-esteem building – for example women doing traditionally male jobs, men providing each other with emotional support and friendship, young women being assertive and saying “no” confidently or young men taking on the role of fatherhood with care and sensitivity.

Self-Help Groups for Lesbian, Gay and Bisexual Young People

If one does not exist in your area, explore the possibility of establishing a support group for these young people who all too often can experience being marginalised and at the receiving end of homophobic bullying. Involve group members in organising activities, in campaigning work and offer skills development to help them gain a greater sense of control over their lives and futures. Given the levels of bullying and violence against young gay men and lesbians, providing self-defence and ‘Stand Your Ground’ training may be particularly relevant. Produce briefing sheets for local schools, youth workers and Connexions services on ways in which they can positively support the health and well-being of young lesbians, gay men and bisexuals. Offer materials and help to parents and friends of young people who come out, too so they feel able to offer support and active alliance and do not compound the problems of prejudice or oppression which these young people may face in their lives.

Sexual Harassment – Zero Tolerance

Work with a girls' group to discover whether their school or Connexions service has a sexual harassment policy. If it doesn't, support them in developing one, negotiating its introduction and effective implementation, and running awareness-raising sessions on this with staff, governors and other students.

Helping Refugees Develop a Voice

Working with refugee groups or asylum seekers to increase their sense of personal power and self-advocacy offers opportunities to rebuild lives and hope for groups which are often demonised and vilified by the popular press. Refugees can face high levels of violence, social exclusion and harassment in this country – having often already fled their home countries because of this kind of treatment in the first place. Working with refugee or asylum-seeking groups could include offering them some training in public speaking, in writing a press release and in being interviewed by the media to develop their voice and their profile as a community resource. It could also focus on capacity-building in communities, perhaps by training up peer educators in sexual health or by offering support to

groups within the communities who are involved in campaigning and education about FGM.

Involving Groups in Peer Publicity

Promoting participation by marginalised groups in issues which affect their health and well-being can often result in them feeling more confident, more worth-while and more resourceful in their own lives and in their wider communities. Ways of doing this might be working with young people from an African-Caribbean Youth Club, a school for children with learning difficulties or a residential-care setting to help them produce a poster publicising local services or answering their peers' Frequently Asked Questions about sex and relationships.

“Ain't I A Woman?” Project with Young Black Women (this exercise is from “Go Girls”)

One example of working with girls from a marginalised group could be developing a “Heroines” project with young Black women. This might include activities such as:

- Finding some writings and pictures of Black women heroines of the past – such as Harriet Tubman, Mary Seacole and Rosa Parkes.
- Thinking of who some of today's Black role models and heroines are for girls, Venus Williams, or Oprah, Maya Angelou, Ms Dynamite or Oonah King, Tina Turner, Halle Berry or Alice Walker maybe?
- Collecting pictures of these women, and tracking down any interviews with them you can find.
- Interviewing some older Black women in your community about their life experiences, and finding some of the hidden heroines not recorded by history.
- Reading Sojourner Truth's speech “Ain't I A Woman” together (given below) and then discussing what has and hasn't changed in the 150 years since she gave it?

Sojourner Truth was the slave child Isabella, born in late 1700s, sold at auction at the age of 10 and emancipated in the 1820s. She took her name on becoming free, as she wanted to keep no trace of her former bondage. She became a crusader for women, for Blacks, for the cause of anti-slavery, and in time an inspired speaker. She gave this famous address to a meeting in Akron, Ohio in 1852:

The man over there say a woman needs to be helped into carriages and lifted over ditches and to have the best place everywhere. Nobody ever helped me into carriages or over mud puddles or gives me the best place...

Ain't I a woman?

Look at me. Look at my arm!

I have ploughed and planted and gathered into barns and no man could head me.

And ain't I a woman?

I could work as much and eat as much as a man when I could get to it and bear the lash as well.

And ain't I a woman?

I have born thirteen children and seen most all sold into slavery and when I cried out a mother's grief none but Jesus heard me....

And ain't I a woman?

That little man in black there say a woman can't have as much rights as a man cause Christ wasn't a woman.

Where did your Christ come from?

From God and a woman! Man had nothing to do with him!

If the first woman God ever made was strong enough to turn the world upside down all alone, together women ought to be able to turn it right-side up again

**SOCIAL
RELATIONSHIPS**

Sharing

Families

Intimacy

Sexual Relationships

Work teams

Alliances

Role models

Friendships

SOCIAL RELATIONSHIPS - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

Much of our self-image and sense of our own identity is forged in the crucible of home and the family, and our social relationships continue to be some of the most vital enablers or inhibitors of our self-esteem as we grow older. In order to have a strong and positive sense of ourselves, therefore, we need to be praised and encouraged, to have strong role models and to be supported in making good relationships. Our families need to reflect back to us a positive sense of ourselves and to treat us with care, love and respect. We need to be helped to develop positive relationship skills such as communication and listening, empathy and understanding and management of emotions. Ideally we need to have these modelled to us in our homes from early on. Our schools and workplaces will be important sources of support and personal development if they are focused, supportive and offer opportunities for growth. If however they are rigid, oppressive, fail to stem bullying and victimisation and give us no praise, encouragement or positive feedback, then the effects on our self-esteem will be deeply damaging.

When we come to making decisions about sexual relationships we need to know and be reassured that we can be attractive, strong, interesting and effective without necessarily having that supposedly ultimate fashion accessory – a sexual partner. The expectation and pressures to have the status symbol of a boyfriend or girlfriend (and of course heterosexuality is the only legitimate choice of relationship) is extraordinarily strong. This is particularly so for young people, but in fact in our couple-obsessed society is present at any age. This means that divorce, separation or the death of a partner or spouse can be shattering for people's sense of self-esteem as they no longer may feel they have a legitimate place as a single, unattached person.

The Power of Friendships

Friendships can be a really powerful source of our self-esteem, acting as an antidote to the driving pressure to have a partner in order to feel important. With their fun and their intimacy, their laughs and their sharing, they are a source of enormous pleasure and reward. They are also places where we can gain support to be ourselves entirely, to experiment with ideas and personas, to build up shared understandings of the world and to gain an experience of being treated with care, of being loved and of being valued. Friendships can give us a sense of belonging and being important, they can offer affection and status, the feeling of being popular and the experience of being treated well – along with hugs and reassurance. All of these things can be a magnificent recipe for the development of positive self-esteem. Often people seek all these things from sex and from sexual partners and are let-down or disappointed, whereas they would be much more likely to have these expectations met by their friends. Friendships can also help us withstand the pressures to do things which we may not be comfortable with but hope will bring us approval – and they are a source of continuing safety, thoughtfulness and reassurance when the winds of the world blow harshly through our lives.

The Power of Good Role Models

The impact of having positive role models can have a powerful effect on the development of self-esteem too. As we have seen in the political 'petals', some people in our society – for example those who are white, or further-educated, those who are able-bodied or heterosexual – tend to be granted greater social approval than those who exist outside this privileged enclave. And although this in itself will have implications for the development or stunting of a sense of self-worth, the fact that it also tends to be accompanied by other tangible factors such as higher-status jobs, higher income, better access to health care and greater social status further compounds this.

We need therefore to be imaginative and energetic in our efforts to ensure that those who fall outside this 'charmed circle' see positive images of themselves and are offered strong role models. As well as giving reassurance that they are worthy of approval, good treatment and respect, these role models can also remind people that others from their group have achieved extraordinary things. So they too can have aspirations for their own lives. Perhaps, if we are effective in supporting the development of their sense of self, in time they may even become role models for others from their communities.

WORKING IN THE SOCIAL RELATIONSHIPS PETAL

Working in this petal will include:

Positive Relationships Skills

Giving people the support to develop good skills for making and sustaining high-quality relationships provides them with vital tools. We can do this through a range of methods including setting up workshops, skills development programmes and on a one-to-one basis. Some of the potential topics for these are explored in more detail below – other more generic ones could include listening skills, friendship skills, dating and communication skills.

Working Where Strong Friendships Are Counter-Culture

Providing opportunities for developing friendship skills may be especially important when working with groups where friendships are not strongly valued or are negatively affected by cultures of competitiveness, bitchiness or hyper-criticism. These cultures can sometimes be found, for instance, among groups of girls, in sex workers competing for clients or in some groups of gay men. Working with men, young men and boys on friendship skills which go beyond male-bonding activities of watching football and drinking (a crude stereotype but one which is borne out by reality all too often) can open doors to rich sharing and support. This in turn can help break down some of the emotional isolation and repression experienced by men who otherwise exist in an ultra-macho culture.

Dealing With Pressure

Recognising that the desire for social acceptance and approval is usually the main impetus behind people giving in to pressure offers a starting point for our work. With this understanding as our backdrop, we can focus on helping people gain the awareness and skills to resist this rather than caving in, in the hope of gaining acceptance at any cost. In general our work on self-esteem building should help people to internalise a deep sense of self worth which takes as its measure whether a course of action feels right for them, not for anyone else. More specifically, working on skills development in the area of resisting pressure could include –

- Helping people deal with their anxieties and catastrophic fantasies about what will happen if they say no to pressure,
- Supporting them in practising resisting pressure over small decisions (such as saying no to going out for a drink with work-mates, to baby-sitting for their sister or to lending a friend £20)
- Asking people to consider their responses to questions such as 'What would make you more likely to give in to the pressure?', 'What might help you resist the pressure?', 'How might you feel afterwards if you did?', 'What might happen afterward if you refused to give in?', 'How would you feel?' and 'What would the benefits be?'
- Suggesting people think of a time they were under pressure to do something but didn't give into this. Discuss what stopped them, what helped them say 'no', how they felt afterwards, were they anxious about what might happen as a result and if so how did they deal with this? What did they learn about themselves in the process?
- Encouraging people to consider whether they ever put pressure on other people to do things they are reluctant

to? How do they feel about this and what can they do to make sure it doesn't happen again?

Mentoring And Buddying Systems

Developing effective friendship and support skills can be helped along by mentoring or buddying – schemes in which both the mentor and the 'mentee' get to develop new social skills and relationships. Such schemes could include adult refugees buddying unaccompanied asylum-seeking children, out Gay men acting as mentors to men in the process of coming out, or new arrivals at a residential care home for looked after children being buddied by a more long-standing resident. Or, in secondary schools, older students can "buddy" a child from the new intake from Primary School at the start of the school year and even visit the feeder schools before term starts, to pair up. All of these activities will help people polish and hone their gifts as friends and enable them to see that they have something to offer others. It should also provide younger people with role models of older ones as admirable mentors and friends.

Building Rights, Building Self-Esteem

Underpinning and overarching the self-esteem model in this Pack is the belief that we have the right to be the person we are – provided this does no harm or injury to anyone else and that everyone else has this right too. Believing that we have rights – for example to respectful treatment, to having our needs acknowledged and if possible met, to freedom from violence and abuse and to have aspirations and ambitions for our lives – is a vital first step on the road to claiming these for ourselves and being able to negotiate them with others.

The kind of rights we are discussing here are not of the nature or the scale of Human Rights which would stand up in a court of law or at Strasbourg. They are simply the conditions which we should all be able to claim in our everyday lives, if we just have the support, skills and preparation to do this. Discovering and articulating a sense of rights will be particularly powerful for people from marginalised or stigmatised groups whose early experience may have led them to believe they have no rights and can only expect – or even worse, actually deserve – to be at the receiving end of prejudice and discrimination. Believing in their right to be in the world and to have their needs met can give people the courage and strength to say 'no' to people who are trying to put pressure on them, coerce or abuse them. They are therefore the foundation-blocks of excellent decision-making and healthy choices.

One way of working with rights is to support individuals or groups to draw up their own Bills of Rights. These might for example include such things as:

I Have The Right...

To be free from violence and abuse

To be listened too...

To say 'no'

To express my feelings

To be treated with respect

To be angry

To choose my beliefs and values

To make mistakes

To be myself

To change my mind

Groups and individuals can also develop a Bill of Sexual Rights which could for example include

I Have The Right...

To sex in a caring and loving relationship	To say 'yes' or 'no'
To respectful, sensitive services	To pleasure
To sex and relationships education	To good information
To have control of my fertility	To my own sexuality

**Key to all of this work is the final point on any Bill of Rights which is
“...and remember, everyone else has these rights too”.**

Once individuals or groups have developed their Bills of Rights, other work can support them in gaining the practice, skills and confidence necessary for claiming these:

- Build up a rights programme or project – taking one right a week and working on how this could be most effectively claimed, practising this, discussing it and doing role-plays.
- Produce their Bill of Rights in a portable form so they can carry these with them as a tangible reminder and to strengthen their resolve.
- Look at other Bills of Rights – e.g. the Bill of Human Rights or the UN Rights of the Child
- Invite in a speaker from a lobbying group - such as Stonewall, the Commission for Racial Equality, or a Disability Rights group
- Have a copy of the Bill of Rights that the group has developed framed and displayed on the wall.
- Set up role plays and scenarios in which group members practice claiming one of their rights.
- Encourage group members to keep a “Rights Journal” as a place to record their observations and experiences. This could include when they asserted their rights and the effects of doing this, how they felt when they claimed a right, and how they felt if they didn't, what they noticed about other people's rights and how able they felt to respect these.
- Discuss what responsibilities come with our rights – and the implications of the last line “Remember everyone else has these rights too.”
- Discuss these issues with our teams and colleagues too since these rights will need to be supported and modelled by all members of staff.
- Draw up a Bill of Rights for ourselves as staff, as professionals and as a team. Too often we passionately advocate the rights of others, while 'selflessly' giving away our own.

One model for a service which has drawn up a contract with its service-users is Shout! - the health and community centre for Gay and Bisexual men in Sheffield. This is displayed on the walls and staff discuss it with all new members so they are clear about their rights and responsibilities.

SHOUT! CENTRE RIGHTS AND RESPONSIBILITIES

Welcome to the SHOUT! Centre - a place for all gay and bisexual men, and men attracted to men.

- You will be listened to and treated with respect.
- Your right to confidentiality and privacy will be respected.
- If you would like to talk to one of the workers in private please ask them (they will be wearing name badges so you know who they are).
- If you have any needs we cannot meet, we will endeavour to refer you to an appropriate agency or organisation.

We expect all those who attend the Centre to respect others using the service or working there, e.g. no personal insults; no malicious gossip; no aggressive or abusive behaviour; no talking about people when they are not there.

This will hopefully ensure that the SHOUT! Centre is a safe and enjoyable place for everyone.

Conflict Resolution

Teaching some basic conflict resolution skills can be invaluable. These will have their uses in many areas of people's lives - at school, at work, in their partnerships and at home as well as in their friendships. There are 6 key stages of conflict resolution –

- having the feelings, processing and expressing them
- beginning to think clearly and to gain some understanding of what has taken place
- communicating our feelings and thinking to the other party
- listening to their position too
- developing a strategy for dealing with what has happened and planning a way out of the impasse
- reaffirming the friendship and re-investing in its future

Work through some tips on resolving conflict with individuals or with a group – for example:

- Be ready to say you're sorry, if you are - far from being a sign of weakness, this shows how mature and 'sorted' you are
- Reflect on what has happened and recognise your own part in it – what 'hot spots' or flare-up points or 'crumple-buttons' the incident pressed for you
- If you talk with the other person about the conflict between you, it is worth having two or three uninterrupted minutes each way (carefully timed so it is equal) to describe how you are feeling and to listen properly to the other person's point of view.

Affirmations and Positive Feedback

One of the simplest mechanisms for increasing our self-esteem, and a key friendship skill, is giving positive feedback and affirming others. However, for such a simple technique the impediments to this happening seem surprisingly great. No doubt again this is because both giving and receiving positive feedback are seen as going counter-culture and most people have fears and fantasies about this. These may for example be that accepting praise will be seen as conceited and big-headed or that giving it will be seen as insincere, manipulative or fishing for compliments. There are a number of ways of offering the space to practice both giving and receiving compliments in our work including:

- Building into staff team meetings a round of 'something I appreciate about the person sitting on my right' or 'something I like about being in this team'
- Ending any group-work session with a 'circle of appreciations' – about the group, or the session which is finishing, or the person sitting on their right, or of ourselves

Modelling Giving Positive Feedback Ourselves

We need to take the lead in telling those we work with – our clients, or service-users or colleagues - what we appreciate and like about them. We need to practice giving them positive feedback on their skills, courage, qualities and actions. It will also help if we let people see us giving positive feedback to each other as workers and adults, women and men – so they have role models for how to give affirmations in warm, unembarrassed and genuine ways

For more on Affirmations, see Section Six – Tending our own Garden page 109

FEELINGS

Loved

Secure

Respected

Hopeful

Positive

Affirmed

Acknowledged

Optimistic

Confident

Strong

FEELINGS - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

Whether or not we have been encouraged to develop our emotional understanding is crucial to our self-esteem. If we have been supported in feeling optimistic, confident and hopeful, praised for expressing our feelings and given positive feedback about our emotional awareness and understanding, all of this will stand us in excellent stead. We will feel that we have the right both to experience our full range of emotions and also to express them. We are unlikely to feel frightened or panicky about strong emotions, because we will have had reassurances that these are perfectly normal and to be expected – maybe even welcomed!

If we have grown up in this way, having our emotional life affirmed and nurtured, we will probably have received guidance and support in managing difficult feelings. We will have been encouraged to do this in ways which are not destructive whether to ourselves or others – and our emotional development will also have probably resulted in us being comfortable around the emotions of others and skilled in helping them communicate these.

Clearly all of these things are positively supportive of our self-esteem – because we are able to love and appreciate and handle the strong emotional tides which may flow in us. Even at stormy times, times of confusion, upset and turbulence – the kinds of upheavals which can come about in adolescence, or in the process of coming out as gay, or after the death of a dearly-loved partner – we will believe in our capacity to manage our emotions and to support those of others.

If, on the other hand, we have been at the receiving end of ridicule and criticism, been punished for expressing strong feelings – particularly anger – and been pressured into looking after other people's needs and feelings rather than attending to our own, this will in turn have extremely adverse affects on the development of our sense of self-worth. Often our feelings run at odds to how we are told we should be "How could you be so ungrateful to me after all I've done for you?", "Don't you know saying you're gay is breaking your father's heart?", "You'll go to your room till you stop being angry – it isn't pretty in a little girl". When this happens, we find ourselves dislocated and all too often lose a sense of our emotions as being authentic, because we have been told they are stupid or unacceptable or unattractive.

And of course, if we don't feel our feelings are welcome, loveable, valuable and ok – then how can we feel that we ourselves, the people who are carrying those feelings, could possibly be loveable, valuable and ok in turn? And this is where the deep integral relationship between our emotions and our self-esteem comes into play – it is impossible to disentangle each from the other. So helping people to develop a stronger sense of self-worth will necessarily mean helping them to feel more at ease with, comfortable about and affirming of their own feelings – and more able to deal with and listen to the feelings of others too.

WORKING IN THE FEELINGS PETAL

Work With People Who Work With Feelings

There are many resources at hand to help us develop work on emotions. Local counsellors or those working in GP practices may be sources of support. Make links with other key agencies who may address these issues in their work – for example Rape Crisis Centres, Survivors (for male survivors of rape and sexual abuse), Samaritans and Victim

Support schemes may all be interested in partnership work on emotional development and addressing self-esteem. Or you may have local Community Psychiatric Nurses (usually called CPNs) with a special interest in this area who it would be useful to forge links with.

Problem Page Approaches

Using these very popular features from magazines can be an interesting way into exploring emotions particularly when working with groups, although this could also be done on a one-to-one basis. Problem pages and 'agony aunts' can be rubbish but they can also be witty and fun. Working with a group allows some of the following activities:

- Get hold of lots of magazines – ones for girls like Just Seventeen and Sugar as well as ones for lads like Loaded or ZOO - and spend a session looking through the problem pages.
- Ask the group some questions to sharpen their critical analysis of these. For example, these could be What do they tell us about how people see relationships? How important is it to have a boyfriend? Why? Are these relationships always worth it? Why do you think boys want a girlfriend? How can we get some of these things in other ways in our life?
- Ask the group to try to come up with some wise and witty answers themselves to the questions asked in the Problem Pages.

Helping People Through Strong Feelings

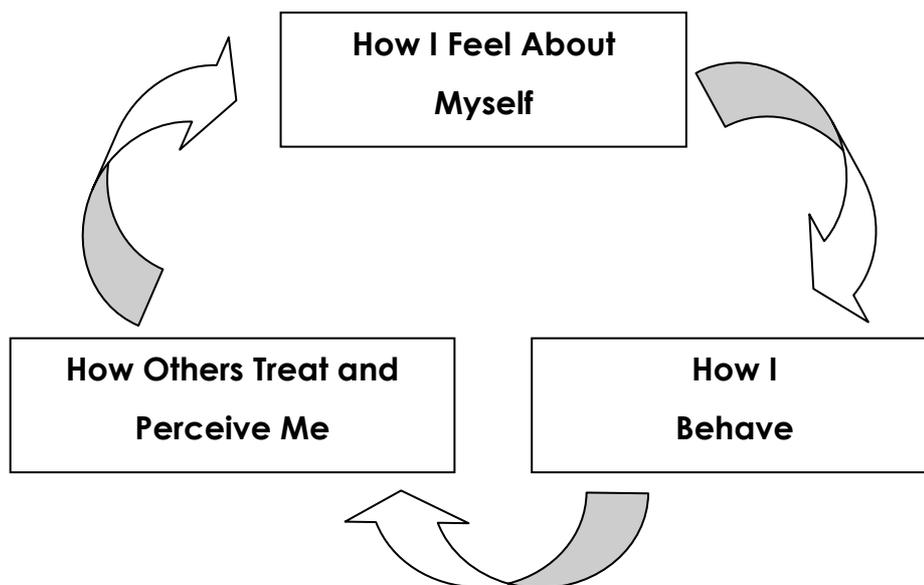
At different stages in their lives, people may face circumstances which evoke strong and unfamiliar feelings in them – or which re-stimulate old difficult emotions. So for example, if we are working with people who are recently divorced or separated, we will need to make it possible for them to talk about their strong feelings of the hurt of being rejected or replaced, the fear of growing old alone, anger at being betrayed and jealousy about their ex's new partner. Or parents of young people who are just coming out as lesbian or gay may be feeling they have failed their child, or be experiencing anger with the child for bringing this difficulty into the family, or be anxious about what this will mean for their child's future. Our help and support can be invaluable in helping people acknowledge and process such feelings, and when appropriate to move beyond these and leave them behind.

Use The 'Cycle of Self-Esteem' Model

This is a simple but devastatingly effective model, originally adapted from one used in Protective Behaviours training (see Resources Section for contact details) which helps people to understand the connection between their self-esteem, their behaviours and how other perceive them.

The cycle goes like this – How we feel about ourselves affects how we behave, this in turn influences how other people perceive and treat us which in turn – as the cycle spins round – impacts on our sense of self-esteem. So our positive self-esteem is acted out in our behaviours which mean we will tend to present as mature, open, capable and attractive. When this is how people perceive us, they are likely to treat us with respect and thoughtfulness and to take us seriously and engage with us as equals. And, of course, if this is how we are treated, we will probably feel good about ourselves, worthy of positive treatment and so we keep the cycle turning.

Cycle of Self-Esteem



On the other hand, if we have a very poor self-image, we may interact with others in ways which are desperately needy, or surly and uncommunicative or aggressive and demanding. All of these will probably result in people treating us as problematic in some way or another. So they may punish us or withdraw from us, be fearful of us or impatient with us, patronise us or take advantage of us. The consequence of being at the receiving end of such treatment is that we are likely to feel worse about ourselves – and so that negative cycle, too, grinds inexorably on.

Helping people understand this 'cause and effect' cycle gives them some power to break it, to interrupt its seemingly unstoppable progress. This can be done either in a one-to-one setting with individual clients or service - users or as a group-work exercise.

If working with an individual, you could provide the bare bones of the cycle's outline on a piece of paper (as above) and ask them to fill in their words and phrases to describe their feelings, behaviour and others' treatment of them. You could also do this if working with a group, or you can fill in the cycle on a flip-chart if this is a collective effort. Ask each person (or each group working together) to do two separate "brainstorms" or "thought-showers" of all the different words and phrases they can think of to describe their feelings, behaviours and how others treat them – one for when their self-esteem is high, and one for when it is low.

When they have done this, invite them to think of 3, or 5 or 10 things which always help them feel better about themselves. It might be ringing a close friend, giving themselves a foot massage, taking the dog for a walk, having a long bubble bath, listening to their favourite CD or cooking themselves a special meal. Then, once they have their list of these, encourage them to think of these as their 'interrupters', those things they could do when they identify that their sense of self-worth is very low. By doing positive things at these times, they can begin to send their cycle of low self-esteem spinning back upwards, interrupting its downward spiral. Or, as Carol Painter so neatly puts it "Nothing beats low self-esteem feelings like high self-esteem behaviour."

Low Self- Esteem? Be Prepared!

Help people identify what might interrupt their cycle of low self-esteem and to have some solutions and responses at the ready. Giving some thought to this in advance, so we are well-prepared when the low self-esteem blues hit us, is

incredibly important. Because once we are in the throes of low self-esteem or even self-hatred, we are not in a suitable emotional state to come up with our own solutions. In fact at these times we are also likely to have low energy, low motivation and low hopes of ever being effective in bringing about change. So, on the Blue Peter model – 'having one here which I made earlier' - a list of low self-esteem interruptors can be invaluable in enabling people to break the cycle!

Some things people could do to have strategies in place for those 'bad self-esteem days' might be to:

- make a tape of their favourite music to play
- make an agreement with a friend in advance that they will be 'low self-esteem buddies' and each will be there for the other to talk them up again – a sort of self-esteem peer mentoring system
- have a picture of somewhere peaceful and beautiful on their wall and "go there" in their imagination
- write things down in a diary or notebook
- go for a walk
- ring up a good friend and talk to them
- learn some relaxation or breathing exercises to get into a calmer frame of mind
- have a phrase or "mantra" which helps them – like "I'm ok and getting better every day" or "whatever happens, I can handle it"
- read their favourite poem or piece of writing

How £100 Can Make A Million Dollars Worth Of Difference

One Local Teenage Pregnancy Co-ordinator told me that at the end of one financial year she had £1,200 slippage. She wrote to every General Practice in her area saying she would give twelve grants of £100 each for the best ideas which were submitted for making surgeries and waiting rooms more young-people friendly - and the bright ideas flooded in. She suspected that she may have got better value out of that relatively small amount of money than the tens of thousands which had been spent before on other things! So a little creativity and imagination can pay great dividends.

Our Environment Affects How We Think About Ourselves

The environment we are offered - for example in schools, clinics, surgeries and residential care settings - has a powerful effect on our self-esteem. If we live in poor housing and our neighbourhoods are full of graffiti, litter and refuse; if we lack play space or open green areas for recreation or go to schools which are in disrepair – it is going to be hard to feel good about ourselves. If we then go to surgeries or clinics where the paint is fading and chipped, the magazines are torn and old and the notice-boards are covered in yellowing and out-of-date posters, this is likely to compound this sense of not being valuable or important.

So we need to think carefully and imaginatively about the kind of environments we offer clients, service users, members of the public and the community groups we work with. There are many reasonably cheap, simple and immediate ways of enhancing the environment – of surgeries or clinics, in community health projects or youth centres, or in classrooms where Sex and Relationships Education is offered.

For example these could include:

- Putting up attractive, colourful, nicely framed and tranquil prints, pictures and posters on the walls
- Having scented candles burning. One youth clinic I visited in Sweden had candle-lit counselling rooms, creating

a safe and very special atmosphere. So now I do the same in my own office in the winter and it makes it a cave of warmth and prettiness

- having inspirational sayings pinned up on the walls
- playing calm and serene background music – better than the radio for a more seamless and peaceful effect
- having pot plants and flowers (not sickly or dying ones!)
- offering a range of up-to-date leaflets in attractive display racks
- putting pieces of attractive fabric, cloth and colourful cushions on chairs and sofas
- making a range of drinks available – tea and coffee, fruit and herb teas, juice and iced water
- providing fresh, appropriate magazines and papers to read
- having children's books and toys available if our children or those of our service-users visit
- putting bowls of fruit out
- displaying a poster of pictures of all staff members with their names and roles and perhaps a bit about them – their favourite food or TV programme maybe

All of these things are possible on a low budget – and yet they can make a huge difference in helping people to feel valued, welcome and special.

RELATIONSHIP

WITH SELF

Creativity

Self-expression

Self-acceptance

Intelligence

Thinking

Solitude

Reflection

Sensuality

RELATIONSHIP WITH SELF - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

If, because of some of the factors explored in the petals here, we do not have a strong sense of our own self-hood, we can too easily end up like corks tossed on the waves of other people's thoughts, opinions and concerns. So gaining a positive self-concept and a well-grounded sense of identity will be productive in terms of being able to make choices for ourselves rather than to please others, to assert our own needs and to believe we have rights. These include the right to good treatment by others, the right to make mistakes and the right to respectful and appropriate sexual health services and Sex and Relationships Education.

Finding ways of expressing our thoughts, ideas and feelings is a vital part of the development of a positive relationship with ourselves. When our self-concept is positive, we want to communicate what we are feeling to other people and to explore this in a number of ways. We are also of course more open to equal, loving relationships with others and more interested in what they, too, are thinking and going through. One particularly healthy outlet for our feelings and an extremely effective way of shaping who we are and what we believe in is the route of creativity and self-expression. This allows us a way of framing and interpreting our world and our experience which in turn enables us to take some control over it, putting it in some kind of order, coming to terms with it and metaphorically embracing it.

WORKING IN THE RELATIONSHIP WITH SELF PETAL

Telling It Like It Is

When people are in touch with their creativity, this gives them an invaluable method for exploring their feelings, expressing themselves and being heard and understood by others. Again and again in training about self-esteem work we hear of instances of this. One worker told us how she encouraged a young woman she was working with in a drugs rehabilitation programme to write poetry – and the young woman took to this with verve and passion. She would sit at the computer for hours banging out her feelings – and as the pile of paper covered in her poetry stacked up beside her, so her feelings became calmer, as though she was pouring out horrors onto the page and emptying herself of toxins.

Or, in Sheffield some years ago our group of Gay Men peer educators – known then as the 'Queer Peers' - took a series of photographs of men in Sheffield on the scene, in gay-associated sites, relaxing and being themselves and staged these as an exhibition at a city-centre commercial venue. Just this sense of claiming some visibility in a world which all too often shunned and ignored them created a positive sense of pride.

There are any number of instances of this but some ways in which people can be encouraged to explore and express their sensitivity are

- By taking photographs and staging an exhibition
- By negotiating a slot with a local radio station and making a documentary tape about their experience – perhaps of being a single mum on a certain housing estate, or living with sensory impairment in a world which makes little allowance for this, or being a gay pensioner.
- Through art therapy – you could get in touch with some art therapists through your local social Care Trust to investigate the possibility of this.
- By producing a magazine to reflect the interests, concerns and perspectives of their particular community or

group – perhaps on the lives of young lesbians or HIV Positive women or as members of a refugee community.

I Want to be Alone

In a world which increasingly seems to value company, socialising and generally being a 'good-time person' or a party animal more and more, where is the incentive to relish time by ourselves? Introducing people to the concept of enjoying their own company, to seeing this as a positive aspect of their lives rather than evidence that they are 'Billy no-mates' can be a real gift. This can be done for example by

- Doing an imaginary 'desert island discs' exercise, what would you do, listen to and read if you were on a desert island alone for a week? What would be some of the advantages of this?
- Suggest to people that they try to spend some time consciously alone and appreciating their own company at least once a day – even if this is only 15 minutes. Ask them to notice what they enjoy and gain from this experience.
- Keeping a journal can be a very positive way of going inwards and having time alone which also offers a space for reflection, for writing down ideas and thoughts, for processing experiences and feelings. Starting a journal workshop with a group – where once a week they spend some time writing on their own, and then comparing their reactions and responses to this – can be helpful.
- Another way into this would be to support clients or group members to keep a diary of their thoughts and feelings and ideas every day for a whole week and reflect with them on the learning from this. Explore the possibility of setting up diary or journal workshops if this has ignited an interest, or perhaps invite in a tutor from a creative writing course to work with a group.

Stretching our Thinking

Introducing different ways of thinking can increase people's capacity to appreciate this aspect of their relationship with themselves. There are many resources out there to help people explore this part of their consciousness - from using Tony Buzan's books on mind-mapping or Edward de Bono's on expanding our thinking and questioning, to Nancy Kline's work on creating a Thinking Environment, which you can find described more in her book 'Time to Think'. You could use other starting points such as games – word searches, Scrabble, Charades – or you could make a conscious effort to ask people what they think – of a session or lesson they have just done, of the day's news, of the latest soap opera development, of the effect new technologies are having on our lives. Anything can be a starting point to thinking, reflecting, discussing ideas, philosophising, speculating and challenging our own assumptions – all of them key thinking skills.

If we are thinking well, if we are using that delicate and astonishing power we have to process our world in this way, then we are likely to feel more in control of what is happening to us, that we can order and understand it in some crucial way. And that is a key ingredient in self-esteem.

Reckless Risks or Staying Safe?

Many of the individuals and groups we work with may either realistically be at risk of physical danger and attack, or may live in fear that this is true even if it statistically unlikely. Feeling safe and secure – whether in our homes or on the streets or when we are out socialising – is a key element of feeling good about ourselves. If we feel vulnerable or at risk, it will be hard to feel strong, calm and in control of our lives.

Working on issues of safety with individuals and groups could include:

- Doing risk assessments with people on where the dangers might lie in their lives and developing a personal strategy for minimising the danger from these. For example for elderly adults this might be from falls in the home but with young men it might be from attacks on the street. So a practical safety strategy for the pensioner might be keeping items which they need to access regularly on low easy-to-reach shelves. For young men on the other hand it might be staying sober enough to recognise when danger might be approaching and feeling ok about running away, rather than giving in to the pressures of having to be 'macho' and of staying and standing their ground.
- Offering self-defence courses and quick tips on this topic – particularly for people who might be at risk of attack such as Gay men or commercial sex workers.
- Getting hold of some of the literature from the Suzy Lamplugh Trust who have packs, videos and leaflets, for example about staying safe on the streets
- Doing awareness-raising sessions – particularly with young women and Gay men – on the increase in drink-spiking and the importance of keeping aware of your drink at all times. Or running training sessions for bar staff on this growing trend and enlisting their support in countering it.

Saying Goodbye to the Chatterbox

Often our self-esteem is most damaged and depleted by the way in which we speak to ourselves, rather than by what others say and do to us or external factors which can affect us adversely. Many – in fact maybe even most - of us have internalised a powerful negative self-critic, the inner voice which tells us that we are stupid and gives us a hard time. This is the phenomenon that Susan Jeffers refers to in her book "Feel the Fear – and Do It Anyway" as "the Chatterbox". The endless jibes and sneers and put-downs of this voice usually far outdo those of the most hypercritical people around us. In other words, we frequently do a better hatchet job on our own self-esteem than others do to us. And living with the constant carping of this voice can be draining and wearing. We don't need others to find fault with us, because we usually manage to get there first.

In order to counter the exhausting and demoralising effects of our Chatterbox, we need to become aware that it exists and start to recognise it. When working with groups or individuals we can introduce them to this concept and help them to interrupt it. Questions which are useful to ask include:

- What tends to get our Chatterbox going? In other words, what circumstances and factors tend to generate our most vicious self-criticism? It might be when we have to speak in public, when we meet strangers, or when we are being judged for example in exams or competitions.
- Spend a period of time – a day, a week or a fortnight maybe, consciously noticing and identifying your Chatterbox. What are the particular triggers which set it off? Is it the voice of someone you know? For example some of us internalise the voice and phraseology of a harsh parent, grandparent, sibling or teacher.
- Think up a simple phrase or word which you can use to interrupt and silence the Chatterbox when it starts up. This needs to be one that is gentle and not yet another admonishment or put down of ourselves.
- Over a period of time, work to turn down the volume of your Chatterbox, to quieten and eventually – with luck – even to silence it and phase it out altogether.

Making Best Friends With Ourselves

Many people pay great attention to what others think of them, rather than making friends with themselves and becoming their own wise counsellors. While this can be positive, if they are surrounded by warm and insightful people who encourage them to think kindly of themselves and to treat themselves well, it means they do not

develop their own inner resources, their own sense of connection with themselves. One way we can encourage those we work with to do this is to suggest they always 'close the day' or as one course participant called it 'put the day to bed.' They can do this by reviewing what has happened and how they are feeling about it.

Suggest that at the end of every day people reflect on their experiences. What has the day meant to them and what are they glad to take from it and pleased to leave behind? They could ask themselves things like

- How have I been feeling today?
- What's made me feel like that?
- Is there anything I can do to feel more positive and better about myself?
- Am I giving myself a hard time about anything?
- What can I do myself to change this?
- And what can I ask other people to do to help?
- What have I been proud of about myself today?
- And what am I looking forward to about tomorrow?

Regularly taking their emotional pulse or temperature in this way, and making the link between what has happened to them and how they are feeling – as well as what they can actually do to change this if necessary – is a key element in their becoming more at ease with themselves and more comfortable with their own emotional inner landscape. More than that, it is a process which can help them to deepen and expand their emotional vocabulary. Or if people choose to do this same exercise sometimes or always with a friend, it will also be a great method of practising very positive friendship skills.

Get Serious About Being Sensual

Very often our over-sexualised society focuses on sex at the expense of sensuality – and it has become almost a truism to say that many people are having lots of sex but very little sensuality or pleasure. But in the mid and late-80s, in the early days of HIV prevention work there was a great emphasis on safer sex which meant non-penetrative sex. Reintroducing the notion of sensuality is a powerful method of helping people focus on what they want for themselves in terms of sensations and feelings, rather than only ever concentrating on the pleasure and needs of a partner.

One way of introducing work around the senses is to stage a 'sensorium' – see the "Sensuality" petal in Section Three (page 35) for more on this.

SELF IMAGE

Relationship with food

Body Image

Looks

Size

Clothes

Fashion

Disability

Health

Fitness

SELF IMAGE - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

In a society as hung-up on and obsessed by image and appearance as ours is, the definition of what is to be admired in terms of looks and shape seems to become narrower by the year. So it comes as no surprise that these factors are crucial in the construction - and probably even more frequently the de-construction - of a sense of self-love. For if we are repeatedly told how we should look - what it means to be a real man or a real woman - for example by the media, advertising, Hollywood, the star system, pop music, the fashion industry and if we fail to conform to these cultural imperatives, then that is likely to have a devastating effect on our self-esteem. And although this is true for both sexes, it is particularly women who are prey to self-loathing, eating disorders and deep unhappiness with their bodies, their size and their looks. The booming diet industry is founded and kept afloat on whole tidal waves of low self-esteem. We have seen the pernicious results of this tyranny of chasing after supposedly 'perfect' looks and body shape in epidemics of eating disorders, particularly among young women and young gay men.

We should also be preparing ourselves to deal with the almost inevitable paroxysms of self-hatred which will accompany the growing rates of obesity among both children and adults in Britain today. Where to be slim is a paradigm for being good, desirable and loved, the converse self-belief - that to be over-weight is to be bad, repulsive and rejected - is likely to engulf whole sections of our population, dealing devastating blows to their self-esteem. And although this applies to some extent to men and women alike, it is still deeply gendered. So the sharpest, most self-hating effects are likely to be on women who, almost 40 years after second-wave feminism, are still pressurised to prize being decorative, attractive and objects of desire above all else.

Other aspects of our body image and physical selves may also negatively affect our self-esteem. In particular, for many people being diagnosed as HIV positive and living with HIV can result in low feelings of self-worth, in internalising society's strongly negative messages about dirtiness, infectiousness and danger. Being labelled in this way and seen as some kind of threat, a ticking disease time-bomb, has impacted in hugely damaging ways on many people and has caused them to hate not just the condition but themselves for 'carrying' it. This will have implications for the importance of developing self-esteem building programmes with people living with HIV, as well as for developing public awareness programmes, education and anti-discrimination work aimed at reducing the stigma, fear and taboo which still surround this condition.

WORKING IN THE SELF IMAGE PETAL:

Size Matters!

The pursuit of the 'perfect' size and body (what is it now? Size 0 for women maybe, and power-pecs, stunning 6-pack and astonishing abs for men perhaps?) is a much-noted phenomenon in affluent, Western society. Peddled by the media, fashion and advertising and reinforced by our own self-hatred all too often – this is the driver many people live with every day of their lives. 30% of 12-18 year old girls surveyed by the YWCA in 2001 said they thought about their body shape and appearance all the time. There can be no doubt, we are living with a national and international obsession.

Work with individuals or a group to reflect on this, for example by:

- Critiquing the advertisements in magazines aimed at their group – in girls magazines, Gay magazines, lads' magazines and women's magazines for instance. What do these tell us about the pressure we are under to conform to a certain image and achieve a certain 'look'?
- Discussing and addressing the looks, youth, gym-fitness and idealised body image culture which prevails in some Gay men's groups and communities and bringing this under scrutiny. For example what impact does this have on the self-esteem of gay men who don't conform to the idealised image?
- Looking through magazines and papers trying to find ordinary, normal looking people who don't look like supermodels or comply with Wallis Simpson's dictum that 'You can never be too rich or too thin'! What roles are they in? Are these ordinary figures presented as though they are as admirable and worthy of attention and respect as the others, the ones portrayed as ultra-glamorous and chic?

And remember Anita Roddick's helpful advice on this

“There are 3 billion women in the world who don't look like supermodels....and only 8 who do!”

Spray it Loud

If you can find it, get hold of a copy of “Spray It Loud” - Jill Posener's book of photographs of graffiti. In itself, this is a great – and very funny – swingeing attack on the world of advertising and manipulated images.

Disability Awareness

Some of the people who least fit into this narrow range of how we are supposed to look are people with physical disabilities, when these are visible and set them aside from the 'normal' way to look. For example, organisations such as Changing Faces (www.Changingfaces.co.uk) do advocacy work with individuals and groups affected by facial disfigurement.

Working with people who have some visible disability which may negatively impact on their self-esteem in a world where so much store is set by looks is important. Some of the ideas offered here may be appropriate in enabling them to build a positive sense of self despite the imperatives of appearance which they are likely to feel beset by. With other groups where no members are directly affected in this way, it will also be helpful to raise the issue of the diversity in our society and the situation of people with a range of physical disabilities. All this will be important in achieving an inclusive, acknowledging approach which ensures that all members of our communities and society are welcome, whether or not they conform to the current rigid norms and stereotypes. In this way we can play a part in challenging these and raise a positive awareness of difference and disability – and the fact that looks have

nothing to do with worth.

Making a Meal Of It

If we are dealing with body image issues, we cannot ignore the topic of food. Indeed, we can make a point of focusing on this as an aspect of our lives to be celebrated – rather than shunned and pared down, viewed as an enemy and a wicked temptation. We can do work which strengthens the notion that food offers us a sensual feast of potential delights, pleasure and nourishment. Some ways for doing this might be:

- Get the group to re-write the words to "Food glorious food..." this time putting in all their favourite things and somehow making them rhyme.
- Have a 'bring and share' meal but don't plan it in advance and take pot-luck – literally. Part of the fun is seeing what happens – so you may end up with 6 puddings and no main course or 8 different kinds of salad – or by complete chance a perfectly balanced meal!
- Try eating with chopsticks – everything from Chinese food to spaghetti hoops.
- Make biscuits - sweet ones or cheese savouries – and cut them out in strange shapes and designs. Or get some letters of the alphabet cutters and get people to make their own names in biscuits.
- Make coloured feasts using foodstuff dyes. Have you tried blue butter and orange milk? Green bread and purple mashed potato? For fun I once made a cauliflower cheese in the pink- and-yellow shades and quartered form of a Battenburg cake and it was greeted with great exclamations and laughter. What wild designs can people come up with?

This exercise is taken from 'Go Girls'

Bodies - The Narrowing Image

Using a big sheet of paper – from a roll of lining paper or a flip-chart – get the group to draw the ideal that they are supposed to conform to, the 'perfect' Barbie girl, Page 3 woman, elegant face-lifted 'ageless' older adult or hunky young Gay man for example.

Now draw an outline of a figure on another sheet and get the group to draw the attributes which actually make a person loveable, a true friend, a good person. These might be a warm heart, a shoulder to cry on, a pair of helping hands, arms to hug people, legs to walk their own path in life - whatever. Compare and discuss the differences between chart numbers one and two. Who do they think would lead the happier, fuller, most satisfying and enriching life in the long run?

Take a Stand

You may remember the Marks and Spencer advertisement of the naked woman – size 16 – standing at the top of a hill calling out joyously "I'm normal". And indeed she was the average size of a woman in Britain today, although if you were a Martian and took your information from advertising billboards, the media, fashion magazines and music videos, you would be forgiven for believing we are all a size minus.

Why not organise campaigns with local and national shops and businesses to press for the provision of attractive, fashionable clothing in a greater range of sizes? There should be lots of publicity opportunities for such ventures – and only in this way do we have an effect. Remember the old hippie saying – "If you don't push it, it won't fall over"? Well, until we push the advertising industry and flex a bit of consumer muscle (but not situated in perfect pecs,

remember!) then nothing will change.

It's Starting Earlier

You may have heard about recent marketing to girls under 10 of provocative ranges of clothing and underwear. So on the one hand we quite rightly vilify paedophiles, but on the other we sexualise little girls and make them long for thongs and padded bras at the age of 8. In this case, however, consumer power did have an effect – and Bhs withdrew their 'Little Miss Naughty' range (and what sick mind thought that slogan up?) under pressure of complaints. So we can push things, and they will fall over – if we just remember our power and if we help those groups and individuals and communities we work with to get in touch with their collective power to protest and push too.

"Old is Beautiful" Exhibition

What about an exhibition of pictures and images of older adults– perhaps with quotes from them or captions about them underneath? This could include postcards and portraits of famous older adults in the past. Or an older adults group could take pictures of themselves and their contemporaries as the focus of the exhibition. They could ask for a piece of advice or an inspirational quote from each of these people to act as a caption. If they have also done some taped interviews, these could be playing while the exhibition is on. Then invite everyone to come along and see it – and ask the local press to cover it, too. Invite the local community to come – young as well as older – to spread the word about what is possible, age notwithstanding.

Makeover Madness

Have some fun with image 'makeovers' for a group without colluding with fashion imperatives and having to be perfect. Try henna-painting, nail jewellery, hair braiding, face packs, stick-on tattoos and face painting. Organise shopping trips to charity shops and stage a 'thrift shop fashion parade.' Play with different images – have a cocktail-wear and ball-gown evening with jumble sale finds or a 70s retro evening. Make looks and appearance into a matter of fun, not a pressure to fit a certain image.

What You're Not Saying

One positive thing we can do with this whole issue of looks-awareness is use it to help people we work with to become much more conscious of the realm of non-verbal communication. Ways of doing this could include:

- Going to 'people-watch' at a public place where people are communicating by talk – in a café or restaurant maybe or in a pub or on a bus. This isn't to judge or laugh at people but to see what they're expressing in non-verbal ways.
- Playing games such as charades where the group has to mime and to read and interpret each other's expressions, as well as communicating themselves without relying on words.
- Arranging a 'non-verbal feast' where no-one is allowed to speak or to feed themselves. So you have to rely on the kindness of others and on gesture and mime to get what you want to eat. Apart from being unusual and fun, this can also be a great trust-building exercise for a group.

Killing Ourselves To Be Thin

Not surprisingly, the driving imperative to be thin and conventionally attractive is leading to an increase in smoking in two communities where images of bodily perfection are probably marketed most aggressively – among young women and Gay men. If this is an issue for groups you work with, who use smoking as an appetite suppressant to

achieve the 'body beautiful', you could make contact with your local Smoking Cessation specialists. You can reach them via your Health Promotion Team, the lead Public Health Nurse for your Primary Care Trust or your GP's Practice Nurse. Ask them to run some sessions with your group on smoking, its effect and practical tips on how to quit.

It might also be useful to address the issue of drug-use here as there is good anecdotal evidence that some people may be relying on dance drugs (and even Class A drugs such as heroin) to limit their appetite. Among younger men – including gay men and men from some BME communities – a gym culture in search of that body-builder look can also lead to the use of steroids, and this may be an issue you want to address by linking up with local Drugs Education Services.

Ordinary Women - And The Others

With a pile of magazines, newspapers, and colour supplements, ask girls or women to make two collages of images and advertisements, headlines and words, photographs and drawings. One should be of "Ordinary" women (or you might want to call this "What we're really like") – bus conductresses and grandmothers, Black women and big women, older women and women who don't have perfect complexions and film star looks. The other should be of "How we're supposed to look" – from Julia Roberts and Jennifer Aniston to fashion and advertising models.

Much of the most valuable part of this work will involve the kind of conversations that occur while people cut and stick, choose and reject images, compare themselves and others they know to what they find on the pages. Then, when this is done, ask them what they have learnt – for example about how girls and women are supposed to look? Who is allowed to be glamorous and who isn't? Who gets ruled out immediately – maybe on account of their weight or height, their age, clothes or race? How many people does this actually leave who represent how we are all supposed to be?

For more on this, see the pages on Working with the Self Image petal in Section Three Page 39

SPIRITUALITY

Awe

Wonder

Relationship with nature

Meditation

Connection

Religion

SPIRITUALITY - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

Attention also needs to be paid to that aspect of our identity and being in the world which encompasses the more mysterious and mystical elements of our experience. So this might include our sense of being deeply connected to wider humanity and to the planet, and the feelings of awe and wonder which can be drawn forth by deep love, creativity, intense intimacy or sharing powerful and moving experiences with others. If we leave these out of the picture in our work, we risk presenting an image of self-esteem which is all external and omits the special "spark" which is perhaps the most profound part of our consciousness. And if we are supported and encouraged to be in touch with our spirituality, in whatever way we choose to express and discover this, then we will feed and nourish a deep part of our selves which will sustain and strengthen us.

WORKING IN THE SPIRITUALITY PETAL

Oases Of Calm *(This exercise is adapted from one in "Go Girls")*

Often the worlds in which we live – schools, offices and home, streets and leisure areas – are noisy and busy and it is hard to find any peace or quiet, or a place just for reflection and "chilling", taking time out. Yet such space can often work magic with our ability to centre ourselves, to find a core of identity deep within, far from the immediate pressures of our lives.

Work with a group to see whether they could make a special place – inside or outside, in a school or youth or community centre grounds perhaps, or in a garden where they can go for some breathing space. You might even want to suggest that they take the notion of "breathing space" literally, by helping them to gain the rudiments of deep breathing techniques. You could even bring in someone with the skills to teach them how to meditate.

This place does not have to be costly to create. It might just be a chair in a quiet corner with a pretty cushion or piece of fabric over it, or a room which is candle-lit and conducive to peace. Could you also have a poster or picture there of somewhere beautiful – mountains, a seascape or a river maybe? Or some tranquil music playing or scented oils burning? You could leave some poetry or readings there too, perhaps asking group members to bring in some of their favourite quotes. Work with the group to create this "place apart" so that it feels appropriate, safe and welcoming for them and encourage them to take time out for themselves.

There would be no harm in your using it too. We all need these breathing spaces as well, to replenish and revitalise ourselves, to touch base with what matters. We need to make sure we "refill our own well" as we give out to others for so much of the time, which can easily leave us depleted unless we consciously nourish ourselves and our own self-esteem, too.

This exercise is adapted from one in "Go Girls"

Tending Our Gardens and Nourishing Our Spirit

The wonderful African-American writer, Alice Walker once wrote,

**"The prayer involved in planting was, I am convinced,
one of the first acts of supplication, of worship in the world".**

For many people there will be recognition in these words. That feeling of hands in good soil, the miracle each year

of green tips of bulbs pushing up through the wintry earth, the extraordinary transformation that takes place when a dry dusty seed becomes a vigorous healthy plant, smelling a garden after the rain – all these things and many more feed our spirits and our sense of wonder in nature at a primitive and fiercely powerful level.

Ways of giving people the opportunity to experience this vary from the modest to the grandiose - from growing mustard and cress on blotting paper on the window sill to constructing a mini-Versailles in the grounds of your school, community centre or residential home. They include:

- Finding a piece of waste ground and starting to cultivate it - a patch within your community centre or school grounds, perhaps. Sowing this with anything from the edible (radishes and salad stuffs are easy) to the dramatic (nasturtiums are minimum input for maximum showiness, and you can use the young leaves and flowers in salads, too) will give a sense of achievement while also improving the environment for everybody.
- Container gardening is very chic these days. You can make your own from empty tins of vegetable oil begged from cafes and restaurants to old saucepans and kettles. Or if you don't even have access to a yard to brighten with these lovely objects, you could always resort to window boxes.
- Many towns and villages, and even inner-city areas, have allotments to rent for peppercorn prices.
- Growing a hyacinth bulb in one of those special glass bulb jars which shows you the development of the roots and rootlets can provide weeks of fascinating observation and take you right back to that sense of wonder you had at infants school.
- Herbs can be rewarding to grow – a pot of basil or coriander can look attractive and give good value in cooking as well.
- For minimum space, try a pineapple top in a saucer kept watered, or an avocado stone suspended in a jar with toothpicks will grow into a glossy green houseplant given time. Even orange and lemon pips, if soaked in warm water for a day or two to soften them, will eventually produce a showy little plant – albeit not a-fruit-bearing one.

A Book of Spirituality

Work with a group or an individual to put together a book to provide their own little 'oasis of calm', with pictures and sayings which resonate for them and thoughts which they can return to and will feed their spirits. From Walt Whitman's

“Let us hold hands, for we are alive at the same time”

to Voltaire's

“Whatever you do, trample down abuse and love those who love you”,

there is a host of inspiration out there to be had. They could write down favourite poems from greetings cards, lines from songs – anything that resonates for them. And they could also note down in this moments which have been important, profound or moving for them – from seeing the spring's first catkins to listening to their baby sighing and snuffling in its sleep.

This book – although it may become in time a treasured object - is not really important in itself. It is just a vehicle for encouraging people to notice, register and relish those things around them which feed and enrich their inner world and landscape.

“Long Live The Wild And The Wilderness Yet”

Gerard Manley Hopkins wrote a poem about the effects of the 'wild and the wilderness' on our spiritual selves – and this is an aspect of life which people, certainly those who grow up in urban or inner-city environments, often lack

great experience in. So find ways if you can of introducing this element – from outings to the seaside where you really look at and spend time near the waves and wildness, to walks in the country. From exploring a local botanical garden to following a river bank in the city.

These can sometimes yield strange treasures. In London some of the shores of the Thames are still strewn with oyster shells from the days when these were the common fare of the poor in the city. And in Sheffield we have wild fig trees growing on river banks in some of the most industrial areas, from seeds from packing cases which were germinated by warm water being discharged from the foundries and steel mills. Our own little bit of Italy in the city's core. So find ways of enabling people to explore the world of the outer landscape, the wilderness and wildness - and with it their inner heart and mind and spirit-scapes too.

For more on this, see the pages on Working with the Spirituality petal in Section Three (Page 43)

WORKING WITH THE SELF-ESTEEM FLOWER - WORKSHEET

Taking at least one suggestion from each petal in this Section - consider

Which are most relevant to your work?

How could you take a first step to putting into practice those you identify as most appropriate to your role, your situation, your service or your client or service-user group?

- Try to identify at least one activity in each petal. By doing this you will ensure that you are maintaining a balance between work at the 'roots', 'stems' and 'flowers' levels.

1. Choose at least one activity from the 'Political petal' (page 52). What would be the benefits to our work from doing this?

What are the first steps we can take?

i)

ii)

2. Choose at least one activity from the 'Social Relationships' petal (page 58). What would be the benefits to our work from doing this?

What are the first steps we can take?

i)

ii)

3. Choose at least one activity from the 'Feelings' petal (page 64). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

4. Choose at least one activity from the 'Relationship with Self' petal (page 70). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

5. Choose at least one activity from the 'Self Image' petal (page 76). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

6. Choose at least one activity from the 'Spirituality' petal (page 81). What would be the benefits to our work from doing this?

What are the first steps we can take?

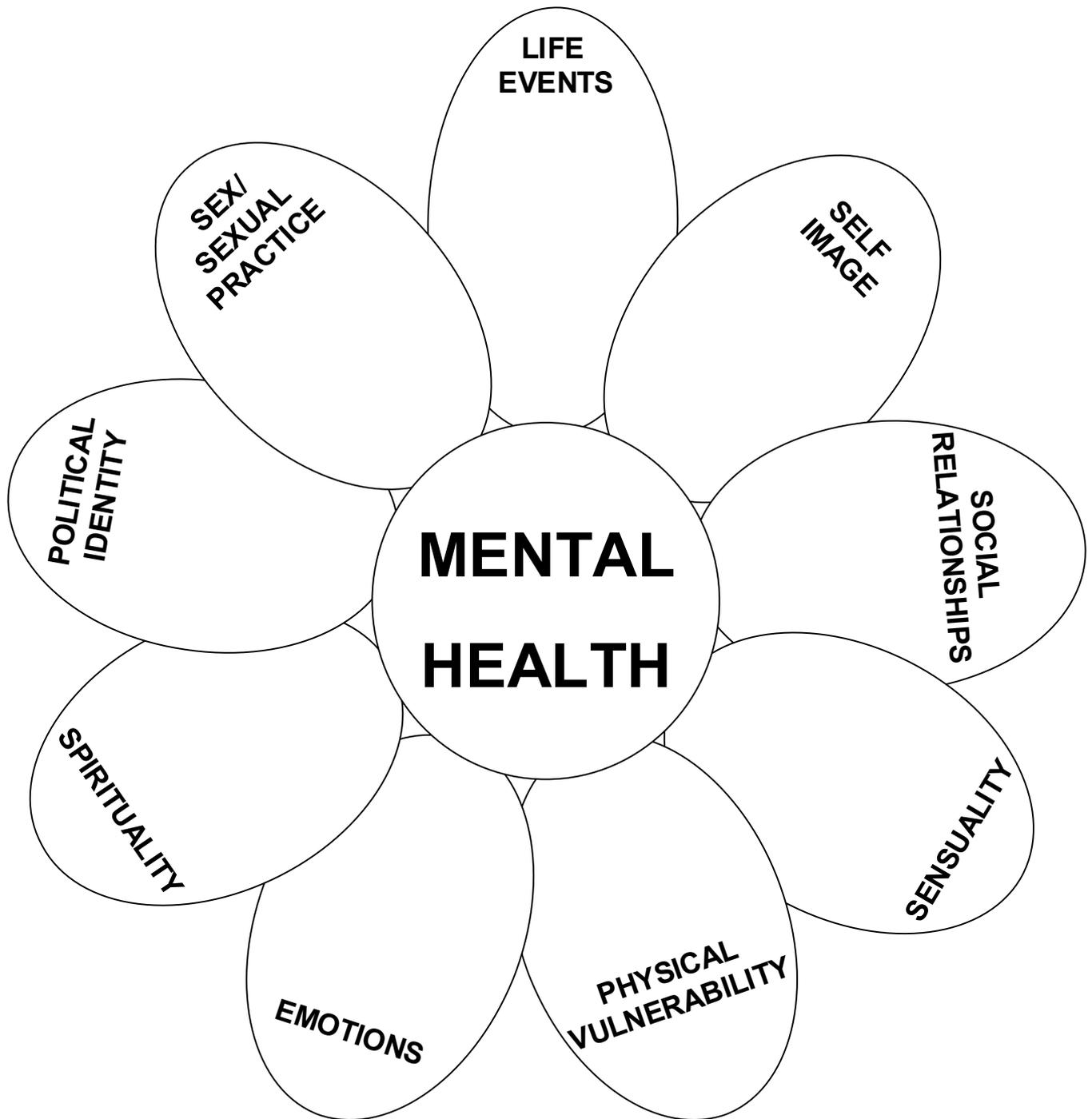
i) _____

ii) _____

THE MENTAL HEALTH FLOWER MODEL



THE MENTAL HEALTH FLOWER MODEL



SECTION FIVE

THE MENTAL HEALTH FLOWER

Background

This last flower was an un-looked for bonus, and yet again grew in an organic way, this time in direct response to input from staff working in the field of mental health. During delivering “Grasping the Nettle”, a training course for mental health workers on sexual health issues, Tony Atkin – who devised and delivered this training - used the Sexuality/Sexual Health flower model to illustrate the different and varied aspects that form our sexuality and sexual selfhood.

Whilst the original model proved useful in helping identify ways of incorporating sexual health work with people who have mental health problems, participants became intrigued by how this could be adapted and developed further to describe and illustrate the components that contribute to our mental health and well being.

The flower model has therefore been adapted to form a holistic model of mental health. It is parallel to the flowers of Sexuality/Sexual Health and Self-Esteem and extremely deftly complements those, but is separate from them. This model is not purely intended to demonstrate what can contribute to mental health problems but what strengthens and feeds our self-concept and our ability to cope robustly with the problems, stresses and difficulties which we all encounter in our lives. In doing so, it offers us a guide to how by working imaginatively and creatively in all the petals we can improve people's mental and emotional well being and their resilience in positive, enriching and enabling ways.

We are aware that this is the least developed of the flowers currently. But we hope that this will change through usage – which is exactly how the flowers of Sexual Health/Sexuality and of Self-Esteem have evolved, growing year by year as more people's ideas and perspectives contribute to them. So we would warmly welcome feedback on this model in particular, so that it can become a more and more useful resource for this vital area of work.

In describing the Mental Health flower we have not included sections on three of the Flower's petals – Sensuality, Spirituality and Emotions. This is because these have been comprehensively covered in Sections Three and Four and there would probably be little extra to say – more than this, it would risk becoming repetitive. However, all three aspects of consciousness and experience are vital to working in the field of mental health. So see the previous sections for ideas on ways of integrating work on Spirituality, Sensuality and Emotions into all approaches to mental health.

EXPLORING THE PETALS

Some minor adjustments were needed to make to the flower model more accurately reflect issues for mental health.

Political Identity

People with mental
health problems

Gay Men Women

Homeless People

People with disabilities

Black People

People with HIV

Lesbians

Older Adults

THE POLITICAL IDENTITY PETAL - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

This recognises that people with a mental health problem (whether temporary and transient or severe and enduring) often receive negative or damaging messages from society, the media and those around them. As with any other marginalised group - some of which are listed in this petal - we need to acknowledge and work towards addressing the impact of discrimination and oppression for people with mental health problems.

Being at the receiving end of the fear, prejudice and stigma which is often the response to someone experiencing problems with their mental health can adversely affect their self-image and self-esteem. More than this, experiencing the ridicule, rejection or abuse which is so often how the stigma attached to mental illness gets acted out will in turn damage people's mental and emotional well-being still further. This will be particularly true if their problems with mental health have diminished their resilience to set-backs and their ability to manage difficulties with equanimity.

WORKING IN THE POLITICAL IDENTITY PETAL

Campaigning for Change

Campaigns and education programmes which seek to increase understanding of mental health issues are likely to have a spin-off effect in terms of slow but vital changes in social and cultural attitudes towards people who experience such problems. Involving clients and service-users whenever possible in self-advocacy at this level will of course in turn feed their sense of self-worth, of having some positive impact on their world and of being capable change agents in their own lives. Making links with other campaigning groups – such as SANE, MIND, Rethink and Hearing Voices – can be an empowering experience and can provide extra resources, advice and input to developing this work at a local level.

Encouraging a Sense of Contribution

Supporting people with mental health issues to take a more active role in society - perhaps by involvement in campaigning, voluntary work or communicating their experience through creative activities will result in them being seen as taking control over their lives and futures. By doing so, this can play an important role in changing public perceptions of people living with some form of mental health problem.

Responding to Negative Media

In 2003 we saw a classic example of the ignorant and damaging media which mental health issues can attract when the Sun headlined Frank Bruno's behaviour as 'bonkers'. It was heartening to see that the outcry which followed resulted in an immediate withdrawal of this piece of trash-journalism and much more informed sympathetic coverage followed. This can be taken as a sure sign that campaigning, protesting and insisting on the rights of people experiencing difficulties with their mental health to be treated with respect, compassion and empathy is profoundly effective.

Working with groups of service-users to monitor coverage in the press, and to respond to it with demands for change when it is adverse – and congratulations (just as importantly) when it is constructive - can be a helpful and therapeutic use of energies, as well as engendering a sense of pride and accomplishment when these efforts bring about a successful outcome.

Take an Active Role in World Mental Health Day Events

This takes place annually on 10th October. Its aim is to promote and raise awareness of mental health issues. We can all contribute to this day either individually or as an organisation/service by supporting any local events or campaigns – or co-ordinating a local response or programme of events if nothing is planned for your area.

Visit the World Mental Health website for more information about each year's themes and access supporting materials at www.wmhd.org



Social Relationships

Families

Partnerships

Marriages

Friendships

Carers

Mental Health Workers

Role Models

THE SOCIAL RELATIONSHIPS PETAL - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

The relationships people may have with their carers or workers (psychiatrists, social workers, support workers etc.) can have a real impact on their mental health. For some people with severe and enduring mental health problems, these relationships may be their primary and most significant ones. Clearly, having strong role models of people who have dealt with mental health problems and have transcended or found a creative way to live with and accommodate these in their lives can also be very helpful to the self-image of those perhaps struggling to come to terms with these. Such role models can provide hopeful beacons of what is possible, as an antidote to the sense of hopelessness and powerlessness which may prevail at times of fear or despair.

WORKING IN THE SOCIAL RELATIONSHIPS PETAL

Developing Self-Help and Support Groups

Building a sense of shared experience and supporting the links between individuals and groups who face difficulties with their mental health can develop a feeling of community – a community of interest, rather than a geographical community. This can broaden the pool of resources which people in this situation can draw on and can serve to strengthen the networks between people dealing with similar challenges.

Self-help groups may focus on a common purpose (for example fund-raising for a new day facility or setting up an exhibition on Living with Mental Health problems) or on offering each other support in facing and coping with problems such as depression or hearing voices. For workers, the task is to set up and facilitate a group so that it can maximise the use of its own resources and develop its own strengths and power. This can be done with the ongoing support of a facilitator who can play a background role as the group members become more and more confident in running their own meetings and activities.

The Sustaining Power of Friendship

Friendships are a source of succour, support and comfort when our inner – or outer – world is bleak and difficult to cope with. For some people with enduring mental health problems, social isolation may have been the norm. So care will be needed to enable individuals to come together in small groups, with the aim of building friendships and supporting the group members to sustain these and to draw strength from them. Skills which will facilitate good friendships will include listening, dealing with conflict and disagreements, giving and receiving both positive and negative feedback and empathising. A whole course of sessions can be built round this topic, or one-off workshops can be run. This should also be backed up by providing the individuals involved and the group as a whole with opportunities for trying out and practising these skills. So this might be done through shared goal-setting and activities or through outings and residentials if these are appropriate.

Letting People Know – The Role of Communication Skills

For people who may feel that they and their concerns have been overlooked or ignored, or who struggle to express their strong feelings in effective ways, activities which develop communication skills can be a key developmental tool.

From engaging with the media and preparing for this through mock interviews to role-playing communicating your anger in a non-destructive way to someone, there are many ways in which people can gain new skills. This can also

be done opportunistically if the group worker or key worker or facilitator makes a point of asking people to talk about their feelings, their experiences, their ideas, their opinions, their fears and hopes – and also encourages them to listen to others doing this too.

Lean on Me - Support Work With Families and Carers of People With Mental Health Problems

Most of the work in this Section so far has concentrated on direct work with people experiencing problems with their mental health. But of course the other group profoundly affected by this are their carers, families, partners, work colleagues and friends. So any holistic approach to work in this petal will need to acknowledge and respond to their support needs too. This might include self-help support groups (for example for partners of people with Alzheimer's), one-to-one counselling, respite care and giving accurate, unbiased and non-alarmist information which will help carers to play the most constructive role possible in supporting the person directly experiencing the problems.

Self Image

Body Image

Self-esteem

Looks

Size

Shape

Physical Disability

Impact of medication

THE SELF-IMAGE PETAL - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

This includes the impact of medication - as the medication to combat the negative aspects of some mental health conditions can have problematic side effects. These can include weight gain, lack of interest in sex, erectile dysfunction and Tardive Dyskinesia (unwanted and lasting movements of the mouth and tongue). Of course these can and do impact on self image and self-esteem, and people need to be helped to find strategies for coping with them. Also, as we have already explored in the 'Political Identity' petal, people with mental health difficulties will almost certainly suffer damage to their self-image as a result of being at the receiving end of stigma, prejudice and discrimination.

WORKING IN THE SELF-IMAGE PETAL

Putting Ourselves in the Picture

Encouraging people to make exhibitions - which could include photographic displays, taped interviews with people, writing their stories and experiences, or art and craft and design-work they have done – can give them a sense of pride and achievement. It can also – as we saw in the Friendship skills section - strengthen and cement relationships in the group. But it has the extra advantage of working at a public education level too. It does this by showcasing the talents, gifts and skills of people with mental health problems, by dispelling myths and misinformation and by presenting them as contributing to their community and society rather than being figures of fear and ridicule.

Being a Change Agent

**“In order to change the world, first of all we must change ourselves,
We must become the change we want to see in the world”.**

said Reg Birch the Aboriginal leader. And so it is for the people we work with and for all of us.

To give people a sense of their own strength and capability, to help them get in touch with their own personal power and to use this to transform their lives – a process termed 'empowerment' – is a hugely significant act. But this will be so much more the case when we are enabling those who have historically been disenfranchised and de-valued to claim this power. Many of the suggestions and examples of work given elsewhere in this pack can help with this endeavour. But talking with and inviting the people we are working with - service-users, clients and group members - to consider what will help them to take more control over their lives, to feel 'empowered' is the simplest and probably most directly effective starting point. Then putting our energies into supporting them in actually achieving these things should provide a recipe for self-esteem and the improvement of people's negative self-image. For more on the process of empowerment in marginalised communities, Paolo Freire's books about his community work in Latin America in the 50's and 60's are a great read even if the titles may sound off-putting and over-worthy "Pedagogy of the Oppressed" and "Cultural Action for Freedom". Try them!

Supported Self-Advocacy

Other ways of working can include supporting clients to represent their own rights, interests and needs to organisations and agencies – such as Housing Departments, Landlords or Housing Associations, employers, Social Care Trusts, Trades Unions or Benefits Agencies – who may be making decisions about their lives and futures. Some of the other work covered elsewhere in this section – for example around communication skills, campaigning for change or building a strong sense of rights may be relevant to this aspect of the work, too.

Sex/Sexual Practice

With oneself

With partner(s)

of same or other gender

Celibacy

THE SEXUAL PRACTICE PETAL - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

This remains as part of the mental health flower. By doing so, it recognises how important the ability to be sexual, express our sexuality and develop satisfying, mutual and positive sexual are in contributing to good mental health. This is an important – we could almost say essential - aspect of all our lives which has historically either been ignored, avoided, neglected or even denied where people with mental health problems have been concerned.

WORKING IN THE SEXUAL PRACTICE PETAL

Sensitive, Responsive Sexual Health Services

If we are truly committed to reducing, and even eradicating sexual health inequalities, this will require us to ensure that people with mental health difficulties have easy access to sensitive and appropriate sexual health services. This will mean producing appropriate information and service publicity and disseminating this to workers, agencies and care settings whose clients are people with mental health problems. It will mean working with service providers to ensure they feel fully confident to deliver such services. And it may mean pressing our policy-makers and commissioners of services to ensure that adequate domiciliary services are provided for those who cannot, because of illness or their condition, access mainstream services. It may mean, too, offering outreach services in settings where disproportionate numbers of people with mental health problems may be found – such as hostels for the homeless or sheltered workshops.

Staff Training Comes First

If people are to receive the services described above, this is going to require training programmes for staff. Because these services will need to be offered by staff who believe that people with mental health problems have the right to sexual relationships and to good sexual health – as well as to the support which is needed to attain this. In addition, staff will need to feel confident and well-equipped in terms of understanding, information and skills. We should therefore be ensuring training is available in mental health issues for sexual health staff and in sexual health issues for mental health staff. Multi-agency or multi-disciplinary training which brings professionals together from the specialist fields of mental health and sexual health will also serve to strengthen relationships between agencies – and with this will come improved referral mechanisms and better support for service-users.

A Rights-Based Approach

To bring about some of the changes proposed here will require workers in the field of mental health to be strong advocates for the sexual health needs and rights of their clients. It will also call on those involved in sexual health work – perhaps in a Family Planning setting, in GU Medicine, in Psychosexual services or Primary Care – to recognise and acknowledge that people with mental health problems have the right to excellent services. And it will necessitate service providers being imaginative and thoughtful in responding to these needs.

For the purpose of the Mental Health flower model, two new petals have been added – these are: Life Events and Physical Vulnerability. The following sections describe these in more detail.

Life Events

Bereavement

Rejection

Stress/Trauma

Rape/Sexual &

Physical Abuse

Neglect

Poverty

Illness

THE LIFE EVENTS PETAL - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

A person's experience of life events will impact on their mental health both positively and negatively - as will environmental factors. Some of these are listed on the Life Events petal. The links between social and paternal/maternal deprivation, abusive family environments, life changing experiences and poor mental health have been well researched and documented.

WORKING IN THE LIFE EVENTS PETAL

Addressing Past and Present Experiences of Stress and Trauma

We will need to be realistic about the fact that many people who experience mental health difficulties may have suffered from abuse, rape, sexual assault or violent and abusive relationships, in the family, in care settings or with partners – or in all of these. It will therefore be important that we have resources in place to offer therapeutic interventions to people who may have traumas to heal. This might, for example, take the form of in-depth person-centred therapy or of a programme of cognitive behavioural therapy. We may want to call on specialist input from Psychologists with a particular understanding of sexual health, or of people specialising in rape and childhood abuse. But if we are taking a truly holistic approach, we cannot overlook these old – or present - stressors and traumas which are likely to result in poor mental health.

Self-Esteem Building and Assertiveness Work

Many of the methodologies which can be found described in Section Four on the Self-Esteem Flower address the issue of building self-esteem, as do ones in the Self-Image petal of this Section. Assertiveness work can be crucial in helping people to break free of old, unhealthy patterns – even if they have been habituated through negative, abusive relationships to believe that they are not worthy of better treatment. So learning to say “no” without feeling guilty, the ability to manage anger and other difficult feelings and developing a strong sense of rights can all be key processes in dealing with traumatic and destructive past life events and moving into a more positive future.

Building a Sense of Rights

In order to be effective in introducing people to a sense of assertiveness, they first of all have to believe that they have some rights and are not in this world simply to meet other people's needs or to provide a punch-bag or doormat. Given how marginalised and disempowered so many people with mental health problems are, it will be especially vital to enable them to start to claim some rights and to feel able to protest when these are not acknowledged – or even are trampled down – by others. See page 61 in Section Four for more on this.

Protective Behaviours

One behaviour modification programme which has been particularly helpful in use with abused children and adults is called “Protective Behaviours”. See Resources Section for contact details. This takes as its basic tenet that every one of us has the right to feel safe and secure in our lives. It goes on to help people equip themselves with a set of practical strategies for ensuring their safety and well-being. See the “Personal Safety” exercise in the Relationship with Self petal of the Self-Esteem Flower in Section Four page 71 for more on safety.

Physical Vulnerability

Birth Trauma

Head Injury/

Brain Damage

Viral infection

Substance Misuse

Hereditary Factors

THE PHYSICAL VULNERABILITY PETAL - DESCRIPTION – OR WHAT IT IS AND WHY IT'S THERE....

It is important to recognise that there are many physical factors that can lead to mental health problems as well as other life and social experiences. These are often referred to as organic in origin and include brain damage due to injury, birth trauma, brain degeneration (e.g. Alzheimer's) and viral infection (e.g. HIV related dementia and CJD). Also included are mental ill health as a result of dietary deficiency and the toxic effects of drugs and alcohol. In addition there are thought to be hereditary or genetic factors for some mental health problems such as schizophrenia that can give some people a predisposition to developing these conditions.

WORKING IN THE PHYSICAL VULNERABILITY PETAL

Prevention Programmes in Relation to Drug and Alcohol Use

Understanding that some mental health problems may be caused by the toxic effects of drugs and alcohol means that we should devote some of our energies to preventive programmes. These might, for example include drugs and alcohol education and skills development work to resist peer pressure. Or they might take the form of personal development programmes which will enhance people's ability to manage difficult emotions or happenings in their lives without recourse to the use of drugs and alcohol to deaden their feelings and cope with things which feel otherwise impossible to deal with.

The Best Possible Care

People with the sorts of conditions described above will need especially good care in dealing with them – and this will mean services being alert and sensitive to these and having good treatment programmes in place to help people manage such conditions. It may also be useful to think about additional services which might be appropriate – such as treatment 'buddies' to support people whose lives may at best be not well-regulated and at worst quite chaotic in remembering to take their medication.

Keep Making The Links

Throughout this section, we have been recognising the links between mental health and sexual health. We need to ensure that staff who are working on the physical aspect of a person's condition (for example someone with brain injury) are also trained and encouraged to recognise and address the mental health outcomes from that – and then to take the further bold step of addressing the sexual health rights and needs of their service users too. These are a lot of steps to take, away from what the worker might perhaps see as their core role. But with training, supervision and support they can radically enhance their effect on the health and well-being of their patients or service users. And in doing this, they can have a really significant impact not just at one level – of physical health – but at all three - physical, mental and sexual health. And that is a beautiful example of a holistic model in action with which to finish this part of the pack.

WORKING WITH THE MENTAL HEALTH FLOWER - WORKSHEET

Taking at least one suggestion from each petal in this Section – consider;

- Which are most relevant to your work?
- How could you take a first step to putting into practice those you identify as most appropriate to your role, your situation, your service or your client or service-user group?
- Try to identify at least one activity in each petal. By doing this you will ensure that you are maintaining a balance between work at the 'roots', 'stems' and 'flowers' levels.

1. Choose at least one activity from the 'Political Identity petal' (page 91). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

2. Choose at least one activity from the 'Social Relationships' petal (page 94). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

3. Choose at least one activity from the 'Self-Image' petal (page 97). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

4. Choose at least one activity from the 'Life Events' petal (page 101). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

5. Choose at least one activity from the 'Physical Vulnerability' petal (page 103). What would be the benefits to our work from doing this?

What are the first steps we can take?

i) _____

ii) _____

Is there anything else we could do to work with the Mental Health flower?

SECTION SIX

TENDING OUR OWN GARDEN

Coming to the end of the Pack, pleased with its broad sweep encompassing so many aspects of sexual health, sexuality, self-esteem, mental health and emotional well-being – it strikes me that just one major element is missing. And that is us. Ourselves. The people who take on the work, who put our hearts and minds and energy and time into making the world as good a place as possible for others. But if they – our clients and service-users, our students and pupils, our staff and colleagues - deserve it, then surely we do too? And if we do not nurture and tend our own self-esteem, our own sexual health, our own mental health and emotional well-being – then who will do it for us? And if we don't do it, if we burn out, or our enthusiasm wanes or our passion for the work dries up in response to stress and over-work, or we leave these roles feeling demoralised and disillusioned - then who will be there to do the work in our place?

If we care about our work, and our service-users, clients, patients, students and groups – then we owe it to them and to ourselves to treat ourselves gently, to nurture ourselves, to rest, to reflect on what we have done wonderfully and to forgive ourselves when we make mistakes.

In our culture, which is not always great at encouraging people's self-love and self-care – although it could be said to glorify narcissism, which is a very different thing – we do not receive much encouragement to do this and are usually not rewarded or even approved of for putting ourselves on the agenda. And those of us who entered the 'caring professions' informed by a sense of altruism, of obligations to our fellow humans, of trying to bring about a better world may find it especially hard to prioritise our own needs, to believe we ourselves are of any importance.

It is with that in mind I offer a few suggestions in this final section – taken from two earlier packs “Doing It Toolkit – Practical Strategies for Sexual Health Promotion” and “Go Girls – Supporting Girls' Emotional Development and Building Self-Esteem”. **To be candid, my advice is - don't concentrate all your efforts on Sections One to Five of this Flower Pack and leave this last Section out or dismiss it as self-indulgent. Because in any truly holistic approach, we should try to acknowledge and make room for all the key elements, and draw them together in as meaningful way as possible. And we are essential in that picture, we are a key part of the whole.**

So why not give some of the ideas below a try? Who knows, you might even like them – and they will certainly play their part in making you a more confident and relaxed and self-affirming worker. So put your practice where your theory is – and put yourself in the picture alongside the work and the people whose needs you are constantly championing and responding to.

Because you – we – are the final petal in the flowers of all of this work. And because we're worth it!

The following are from 'Doing It Toolkit – Practical Strategies for Sexual Health Promotion' :

“We Can't Hand on What We Haven't Got” – Thinking About Our Own Self-Esteem

Maya Angelou, the Black American poet and writer once said “To love others, first we must love ourselves – because we can't hand on what we haven't got”. In terms of self-esteem building as a key methodology for Sexual Health

Promotion (as well as for the promotion of mental health and emotional well-being) those of us involved in the work must address issues of our own self-esteem too, if we are to be excellent role models for others. So any or all of the exercises in this Pack may be relevant for us as well as for our clients, students or service-users. But it may be helpful, too, to think about how we can enhance the self-esteem of the teams in which we work, in the workplace. Nancy Kline's excellent and inspirational book "Time To Think" gives us very positive and practical guidelines on how to create what she terms a "Thinking Environment" in which the best innovative ideas and most effective practice can be generated. (See the Resources and Reading list for details).

One of the most effective ways to increase self-esteem in colleagues, teams and workplaces is by building mechanisms through which people can both give and receive positive feedback – about their work, their contribution, their personal and professional gifts and their qualities. Some teams do this, for example, by adding in such a process (it should always be two-way) to supervision sessions or to staff meetings. If we are not told what we have done well, all too often we will dwell on what we have done badly. The mechanisms described here are simply a way of redressing an unhelpful and artificial imbalance. Also of course – if we develop and nurture our own self-esteem we will not only be great role models for others, but more importantly we will also promote and enhance our own sexual, mental and emotional health and well-being too!

Looking After Our Own Sexual Health.

We do some of our most effective work almost unconsciously – by how we model to our clients, service users, the communities and young people we are in touch with. So it is vital that we take good care of our own sexual and emotional health and well-being. That covers a great range of activities:

- It may mean talking to people about our emotions if we are having a difficult time, and seeking support rather than bottling things up and feeling we have always have to be strong. Looking after others is something which may be almost second nature to those of us in the 'caring professions' and it is important we extend this same care to ourselves, too. As Nancy Kline and Christopher Spence say in their book "At Least 100 Principles of Love":

"Be gentle with yourself. Treat yourself at least as well as you have ever treated your dearest love and as you should always have been treated; with compassion, high expectations, forgiveness and delight. Only then can you treat others and the world well enough."

- Or it may mean gaining training, assertiveness skills and confidence in saying "No" - perhaps to a sexual partner or to a manager asking us to add yet one more piece of work to an already over-stretched work-load.
- It may mean getting regular check-ups and doing self-examination for breast or testicular lumps.
- It should also include giving ourselves treats, pampering our sensuality and saying "Yes" to pleasure!
- Most of all, it will involve reminding ourselves we are precious, special and worth taking good care of – and that our task doesn't end with looking after the sexual, mental and emotional health of others. Our self-esteem is just as important.

The following sections are from "Go Girls – Supporting Girls' Emotional Development and Building Self-esteem"

You're a Star

Our self-image is often completely un-related to any reality about how we truly are, and our self-esteem, if it is not

well-nourished, can undermine and sabotage our sense of our selves. The chatterbox, that inner self-critic, often starts attacking us. When it is in good form it gives us grief over even the most inconsequential things so that we only focus on where we are flawed and where we have fallen short. Those words “could do better” on a school report all too often sum up our estimation of ourselves. Or for those of us originally brought up in the Church of England, those horrendous and doom-laden phrases from the creed probably never cease to haunt us and continue to echo down our lives, even long after we may have disclaimed any religious beliefs. “We have left undone those things which we ought to have done and we have done those things which we ought not to have done, and there is no health in us”. With a start like that, no wonder our self-esteem is lacking!

So we need an antidote to all of this. When our self-esteem is on skid row and our self-love sunk without trace in the doldrums, we need to be reminded that we matter, that we count, that we are after all of some value. One way of doing this is by starting to keep a collection of those little objects or words or phrases which put us back in touch with our competent, OK, positive selves. This could be done by starting an album or scrap-book in which you can stick things as they occur to you. A thank you card from someone leaving the group you run, a note from a colleague recognising an achievement, particularly touching birthday cards or Christmas (or Hanukkah or Eid) cards with messages from friends about how they value you or what they enjoy about your company. A ticket or programme from an evening out where you felt good and were in touch with your most positive self-image. A note of something someone may have said about your contribution or talents which made you glow – your boss in supervision, maybe, or a team-mate about some help you gave them, or a client taking a piece of advice you had offered and finding it useful.

Each of these things may not seem significant on their own, but when brought together as a mosaic of affirmations they begin to paint a new and different picture of ourselves. They create a portrait which is very different from that offered by the self-critic which only ever seems to comment on laziness, failures and shortcomings – it simply doesn't do praise. Apparently the Masai communities of East Africa have a culture of composing 'boasting song' about their great achievements and triumphs. And I firmly believe we could do with some of these boasting songs today, in our schools and youth work, in our health services and social services, in our projects and clinics. Although we may be heroines and heroes in our work, too often this goes quite unacknowledged and it is only the glitches and hiccups in our performance which are commented on. By keeping a “You're a Star” album or scrapbook, we can claim about ourselves those qualities which others appreciate in us, we can take credit for our actions and successes which others have valued. And in that way, just perhaps, we can also actually begin to value them ourselves.

Watch Out – It's Everywhere....

When we begin to address issues of self-esteem we can often assume either that all of this is 'an inside job' or that it all stems from how we are dealt with, the behaviour and attitudes of others. Of course both things are absolutely relevant and have key roles to play. But if you think back to the Flower of Self-Esteem described in Section Four, one of the petals there relates to politics and one factor mentioned on the list in that petal is the environment. What does our environment say about us, how worthy or not we are to be surrounded by good things?

I was involved in the early days of the Rape Crisis Centre, as it then was, in Sheffield. And, for my sins, I look back on the environment and milieu we created with a degree of embarrassment and shame. Because we were so intent on righting the wrongs of the world in relation to rape (and an absolutely laudable and necessary aim that was) that we overlooked the niceties. We were too busy challenging institutions and the ways in which rape was constructed and

reported, we were so hell-bent on advocating the rights of women and girls who had been raped and assaulted that we took no notice of the minutiae. So the details were neglected. In fact perhaps we even saw the sofas losing their stuffing, the scarred and chipped cups, the faded and peeling walls as some kind of badge of honour, testifying to our intense seriousness. Not for us trips to IKEA (had it existed then), we were too busy overthrowing the patriarchy. I don't mean to be dismissive – it was vital work we were engaged in and those women in that early Rape Crisis movement did indeed transform the way rape was perceived in our society, moving attitudes from victim-blaming to outrage. But would it have hurt so much to have made the building and offices pleasant to be in, too? What messages were we inadvertently sending about the importance of the women we worked on behalf of – and of our own importance? One that we didn't matter very much, I'm afraid.

Once we understand the intimate relationship between our environment and our self-image, we can see that if we are to feel good about ourselves then we need to create an environment which tells us we are worth something. It should reflect back to us that we are important and that we have care and concern for these details. This does not have to cost a fortune or devour half our annual budget, we can make small but deeply significant changes at no or low cost. See "Our environment affects how we think about ourselves" in the Section Four on the Self-Esteem flower (Page 67) for more ideas on this.

Affirmations Make the World Go Round

One of the most effective ways we grow in self-esteem is by receiving – and indeed giving – affirmations, those small phrases, observations and 'thank-you's' that make the day and the world go round. The paradox here of course is that, although we know this to be true at a rational and conscious level, it often proves incredibly difficult actually to put this awareness into practice. Usually this is because the social constraints on giving positive feedback and on paying compliments are so strong that people fear being thought insincere or smarmy, on the one hand or gushing if they do this. There is an equally effective taboo on accepting compliments. The standard reply is meant to be a rebuttal or a throwaway "What this old thing? I've had it for years..." rather than genuine pleasure at being appreciated.

This whole issue is covered in some depth in the 'Girlpower' pack and on the accompanying training. It has been fascinating to notice that everywhere we go, people believe their culture is the single one most ill-at-ease with giving and receiving positive feedback. People in Belfast and Dublin think their community is particularly resistant to this, whereas those in Aberdeen and Stirling and Edinburgh know for certain that they are the most inhibited. People in London think that being up-tight comes with the territory and Americans believe that to risk giving a compliment will brand them Californian new-age tree-huggers whereas those in Leeds and Sheffield know that it is the Yorkshire culture which has the overall monopoly on suspicion of southern silver-tongued charmers who come here with their poncey ways and their affirmations... And so it goes on! The truth seems to be that every English-speaking culture has a morbid fear of expressing and accepting compliments. Doubtless this syndrome is endemic in many non-English speaking cultures, too.

Yet our fear of being branded insincere for giving positive feedback – or conceited and big-headed for receiving it with delight – seems to be able to co-exist alongside our actual knowledge that affirmations make a huge difference to our levels of self-esteem. For in truth we do know that even if we reject and 'pooh-pooh' any praise we are given, we will no doubt revisit it later in the privacy of our own heads or our own homes, and draw comfort and pleasure from it.

- Think about the last few times you were paid a compliment. How did you react?
- Then consider the last few times you can remember giving someone else positive feedback. How did they react?
- Do you sometimes suppress the desire to give people positive affirmations? What is it that stops you? And what would make it easier?
- Try to make a point of saying something positive to a peer, a friend, a partner or a colleague at least once a day. Make sure you do this with the clients or service-users you work with as well.
- When someone gives you positive feedback, try to hear it for what it is and not see a sinister motive behind it. Accept it gracefully, all that you need say is “thank you”. You are being offered a gift, so disclaiming it or rejecting it is as ungracious as trashing a present in front of the giver. And none of us, of course, would do that.

What is true for us individually is also true in our working lives. Some years ago General Electric asked their staff what they wanted most to transform their workplace. And the answer overwhelmingly given was not more free time or more financial rewards. It was recognition for their efforts and success.

- In your team, workplace or organisation, start to build in systems by which you offer each other positive feedback as a matter of course. In the team at the Centre where I work, for example, we always end our staff meetings with a round of appreciations of each other or of the team as a whole. Although this felt awkward and embarrassing the first few times – after all we were overturning the habits of a lifetime, it is now routine and comes easily to everyone. Its effect, however, spreads out much more widely than just this ten minutes a week. Because it means everyone in the team becomes accomplished at giving and receiving positive feedback, so they do this regularly in all sorts of ways. It makes for an immensely supportive and pleasant working environment. It also means criticism and constructive challenging can be offered easily too, because people are not watching their back or feeling generally un-appreciated or attacked.

Make no mistake, hearing good things about ourselves and telling other people what we like and appreciate about them, too, gets easier and easier with practice. This happens until eventually it becomes a way of life which daily supports and contributes to our positive self-esteem. When I was first developing this self-esteem work, I was also clearing out my father's things after his death and found among them a poem in my grandfather's writing which beautifully sums up the role affirmations can play for us all.

**More than fame and more than money is the comment kind and sunny
And the hearty warm approval of a friend
For it adds to life a savour, and it makes you stronger, braver
And it gives you hope and courage to the end**

Start a New Love Affair.....

Now that I have your attention, let me complete the sentence “...with yourself”! Some critic once said of Margot Asquith the Liberal political hostess – “the romance between Margot Asquith and Margot Asquith is one of the greatest love stories of all time”. It was, I am sure, meant unkindly, amply demonstrating the penalties for having high self-esteem discussed earlier here. But let us take her as our role model and replicate that great love story for ourselves.

So often we lavish time and care, gifts and energy, thoughtfulness and kindness on others – our families and partners, the clients and service-users we work with, our friends, children and colleagues. Then we take the dregs of our own energy for ourselves. How can our self-esteem possibly flourish and thrive, when we are emptying our well daily into

the lives of others? So we need to put time into our own lives and this will take some planning and thought, because it may well be breaking the patterns of a life-time and interrupting our long-established habit of putting everyone else's needs and well-being first. If we are to become wonderful role models, one of the things we have to model is treating ourselves well.

Start to practice. Plan in at least one positive treat a week – something that you wouldn't normally do, that is extra and special. Try and work up to one a day. If you find it hard to think of what to do – because making good new habits from bad old ones take practice, start keeping a list of ideas. Here are some for starters :

- A magazine you would not usually buy
- Some expensive out-of-season fruit like raspberries in December
- Half an hour all to yourself when you get home from work and before cooking the tea
- Chocolate, chocolate, chocolate!
- Get in touch with a friend you haven't seen for ages
- An evening off when you promise yourself not to talk about or even think about work
- A ticket to a play, or film or concert, plus one for a friend if that will make it even more enjoyable
- A massage, pedicure, facial or manicure
- Do some life-laundry – throw out old papers and unwanted things for that fresh, de-cluttered feeling
- Ask someone else to do the washing up and have a glass of wine and some time with a book instead
- Rent a DVD or video of a favourite film – and complete the treat with a tub of pop-corn
- Pay someone else to baby-sit and spending an evening out
- Go charity shop shopping and buy yourself a chic or outrageous outfit for a few pounds
- Arrange an uninterrupted evening reading, writing, playing music, painting or sewing – with the answer-phone on to field calls
- Treat yourself to the very best seat at a football match or the theatre or ballet
- Have an early night with a good book – and alone
- Go a travel agent, get an armful of brochures and start planning your next holiday
- Have your car valeted rather than washing it yourself
- Get a really good take-away or experiment with food you've never tried before
- Set your alarm for half an hour later and have a lie-in
- Or for a bigger treat plan something special from time to time – like a day at a health spa, a balloon trip, a gliding lesson or a day on a racing-car track

Give yourself permission and give yourself presents. Bravely say 'no' to things you don't want to do. Most of all, give yourself the time and attention you so generously share with others on a daily basis. Because you're worth it.

And remember

Our deepest fear is not that we are inadequate. Our deepest fear is that we are powerful beyond measure. It is our light, not our darkness that most frightens us.
We ask ourselves, who am I to be brilliant, gorgeous and fabulous?
Actually, who are you not to be.

Your playing small doesn't serve the world. There is nothing enlightened about shrinking so that other people will not feel insecure around you...
And as we let our own light shine,
we unconsciously give other people permission to do the same.
As we are liberated from our own fear, our presence automatically liberates others

Marianne Williamson – "A Return to Love"

Quoted by Nelson Mandela in his inaugural speech as President of South Africa.

WORKING WITH SECTION SIX - TENDING OUR OWN GARDEN WORKSHEET

Choose at least one suggestion from those in this Section. These are

- Looking after our own sexual health.
- You're a star
- Watch out – it's everywhere
- Affirmations make the world go round
- Start a new love affair.....treats and goodies

Now consider

Which are most relevant to your situation – either personally or professionally?

How could you take a first step to putting into practice those you identify as most appropriate to your life, your home, your role, your situation, your service or your client or service-user group?

Try to identify at least one activity from this Section. By doing this you will ensure that you are maintaining a balance between giving out to others and feeding and nourishing yourself and your own needs too.

1. Choose at least one activity from the list of five above. What would be the benefits to me from doing this?

What are the first steps I can take in doing this?

i)

ii)

What else can I do to support and nourish my own self-esteem and well-being?

SECTION SEVEN

FURTHER HELP

PART ONE : RESOURCES FOR THE WORK

Resources From The Centre For HIV and Sexual Health :

Oh No! Its Really Scary – A mock-horror “B-movie” leaflet for young people on Chlamydia and STIs.

Boys Talk – A leaflet for boys and young men on safer sex, sexuality and looking after themselves.

Sex Talk - A set of 35 booklets and guidance notes which encourages young people to get the facts about sexual health in an interesting and humorous style.

Getting Better With Practice - A Resource and Training pack for Primary Care Teams providing practical strategies for offering young people sexual health support and services.

Girlpower-How Far Does It Go? – A Resource and Training Pack aimed building self-esteem in young women.

Taking Back Control - A leaflet on sexual health issues for people who have been raped or experienced sexual violence.

More Than Just Friends - This booklet offers information, advice and help for lesbians and bisexual women on sexual health, HIV & AIDS and other STI'S.

Hardwear - The 'Hardwear' materials to promote condom use among heterosexual young men consist of 2 postcard designs, 2 credit card designs and one pocket sized information leaflet.

Hepatitis C-The Sharp End – A Booklet Providing basic information on Hep C. Answers to frequently asked questions about transmission, testing and protecting yourself and others.

Doing it! Toolkit - A Toolkit of Practical Strategies for Sexual Health Promotion.

Primary Healthcare And Gay & Bisexual Men – A pack for Primary Care teams addressing the health needs and concerns of Gay and Bisexual men.

Nobody's Choice But Mine - A 16-page booklet looks at the sex and relationship choices for young women and decisions about whether to have sex, contraception, pregnancy and abortion. Warm and personal in tone, this helpful resource is suitable for use in a wide range of settings.

Go Girls - A Hand-book of practical approaches for supporting girls' emotional development and building their self-esteem by Jo Adams. Packed with new ideas for activities, exercises, group-work, games and helpful hints on supporting girls' and young women's personal development. Illustrated with a fund of stories, anecdotes, personal experiences, quotations, examples and insights from relevant research.

Ageing, Loving & Sex Pack – Comprises of 15 x Ageing, Loving & Sex booklets – advice on sex, sexuality and relationships for older adults; and one copy of the booklet for staff of 10 Practical Tips for sexual health promotion with older adults

Rollercoaster - A compendium of easy to run classroom activities exploring the ups and downs and the emotional and physical changes of puberty. Rollercoaster offers a fun, engaging and interactive series of exercises for Years 5-8 (age 9-13).

'All Change Boys!', 'All Change Girls!' - These colourful and engaging booklets are aimed at boys and girls in years 5-8 (age 9-13) looking at some of the issues around puberty. These colourful and engaging booklets can be used in conjunction with the 'Rollercoaster' game and as part of an ongoing programme or Sex and Relationships Education to stimulate discussion and present factual information in an accessible form for them to take away and share at home.

Internet Liaisons - A leaflet offering a practical and comprehensive guide for Gay and Bisexual men (and other men who have sex with men), with tips and guidance on using the internet safely.

Girltalk - A 12 page magazine aimed at young women. The content and design for the magazine has been developed through a consultation with a young women's group in Sheffield.

Talking About HIV & AIDS - Written for African people living in the UK, an 8 page dual language (French & English) leaflet discussing issues around HIV & AIDS.

Talking About HIV & AIDS Audio Tape Pack A & B – Produced for work with African communities in the UK, pack 1 consist of two audio tapes and a translation booklet talking about HIV & AIDS in English, French, Somali and Shona. Pack 2 is two audio tapes and a translation booklet talking about HIV & AIDS in English, Portuguese, Swahili and Arabic

'Golden Rules Of Condom Use' Credit Card - To encourage and promote condom use.

Lets Talk... about sex and relationships! - A booklet for parents on talking with and listening to your children about sex and relationships.

Red Ribbon Aware HIV & AIDS Education Video - This video, produced by the Centre in partnership with the Sheena Amos Youth Trust, is for young people in school, youth and community settings, to give clear, age-appropriate, factual information about HIV & AIDS.

Boys Own Supporting Self-Esteem & Emotional Resourcefulness - A Training Pack For Those Working With Boys and Young Men by Simon Blake and Rob Brown

OTHER RESOURCES :

General Sexual Health – and Related Issues

- Sexual Health, Assertiveness & HIV
Carol Painter; Daniels Publishing, 1996
- Sexual Health - Foundations for Practice
H Wilson, S McAndrew, Bailliere Tindall, 2000
- Time To Think
Nancy Kline; Ward Lock, 1999
- Doing It A Practical Toolkit for Sexual Health Promotion
Centre for HIV & Sexual Health
- Effective sexual health promotion: a toolkit for Primary Care Trusts and others working in the field of promoting good sexual health and HIV prevention
Department of Health 2003

Gay and Bisexual Men

- The Sexual Health Needs of HIV+ Gay & Bisexual Men
P Keogh, S Beardsall; Sigma Research, 1995
- Directory of Lesbian, Gay and Bisexual Organisations
Consortium of Lesbian, Gay and Bisexual Voluntary and Community Organisations; 2000
- Assert Yourself - Research into Gay Men's Health Related Needs
Ford Hickson; Sigma Research, 1999
- Beyond A Phase Teachers Pack - a practical guide to challenging homophobia in schools
Avon Health Promotion, 1999
- Talking to Young Gay Men
Simon Blake 2004
- Something to Tell You
Greater Glasgow Health Board

Young People

- Say Yes? Say No? Say Maybe?
Brook Publications
- Moving the Goalposts
Max Biddulph, Simon Blake; FPA, 2001
- Pathways to Sexual Health – a resource pack for use with young people
Lothian Health
- 'You're Welcome Developing Young People Friendly Services
Jo Adams, Centre for HIV & Sexual Health Autumn 2004

Videos

- Whose Daughter Next? A Video package on children abused through prostitution
Barnado's, 1999
- The Whole Monty – Myths and Realities of using Sexual Health Services

Centre for HIV & Sexual Health, Sheffield, 1999

- Abortion – Whose Choice?
Education for Choice
- Safe – A Video Resource for Sexual Health work with Young Men The Young Men's Video Project
The B Team
- Beyond My Backyard
Centre for HIV & Sexual Health

Women and Girls

- The Mirror Within - a new look at Sexuality
Anne Dickson; Quartet Books, 1997
- A Woman in Your Own Right - Assertiveness and You
Anne Dickson; Quartet Books, 1999
- Women's Sexual Health
Gilly Andrews; Bailliere Tindall, 1997
- The Body Electric – a unique account of Sex Therapy for women
Anne Hooper; Unwin, 1984
- Pressured Pleasure – Young Women and the Negotiation of Sexual Boundaries
J Holland, C Ramazanoglu Tufnell Press, 1992
- Lifesize - teaching materials exploring body image
Liz Swinden, Lesley de Meza; Forbes Publications, 1999
- Lesbian Health Matters
London Lesbians in Healthcare, 1995
- For Women Only
Jennifer Berman and Laura Berman Virago 2001
- It's A Girl Thing
YWCA 2001 A manifesto for girls and young women 2001
- Reviving Ophelia Saving the Selves of Adolescent Girls
Mary Pipher Ballantine 1994

Black And Minority Ethnic Communities

- Religion, Ethnicity Sex Education: Exploring the Issues
Rachel Thompson; Sex Education Forum
- Learning From African Families: HIV Infection & AIDs
Local Government Management Board; 1995
- Current Treatments for HIV: a guide for African communities in the UK
Health First and National AIDS Manual; 1998
- HIV & Black Communities 2: Primary & Secondary HIV Prevention Issues for African Communities
C Bhatt The HIV Project, 1995
- Religion Faith and Values
Zarine Katrak and Simon Blake Sex Education Forum

Videos :

- Thinking Positive With Batanai
Sheffield Zimbabwe HIV Action; 1999
- Our People : HIV/AIDS and the Black Communities – (available in Bengali, Urdu and Cantonese)
Black HIV and AIDS Network

Older Adults

- The Existence of older Lesbian, Gay and Bisexual Patients in General Practice Raising awareness of their lifestyles and health care need
C E Hall; Dept of Healthcare for Elderly people - University of Sheffield 1995
- Living, Loving & Ageing - Sexual and personal relationships in later life
Wendy and Sally Greengross, S Greengross; Age Concern, 1989
- Ageing, Loving and Sex – a leaflet of advice on sex, sexuality and relationships for older adults
Centre for HIV and Sexual Health, Sheffield

Mental Health

- Mental Health Handbook
Draw & King (1995)
- Self-Esteem – research, theory and practice
Christopher J Mruk (1999) Free Association Books
- The Bird and The Worm – Mind Education Pack Young People and Mental Health
MIND (2001)

Disabled People

- No Worries Ahead - sex education & contraception AIDS Ahead
British Deaf Association
- Sex Education for Young People with a Physical Disability
M Davies; SPOD
- What About Us? Sex Education for Children with Disabilities
A Craft, D Stewart; Home & School Council, 1993
- Exploring Sexuality and Disability - a resource for trainers
M Shelvin, G McCormick
- Personal & Social Education for Children and Young People Who Are Visually Impaired
North West Support Services for Visually Impaired, 1995

Video

- The Lyric - Sex and Relationships Education
SPOD; 1999

People with Learning Difficulties

- Sex and the 3R's - a sex education package for working with people with learning difficulties
M McCarthy, D Thompson; AIDE, 1992
- Sex In Context: Setting up a personal and social development programme for children and adults with profound,

multiple impairments

C Downs, A Craft; Joseph Rowntree Foundation 1998

- Sexual Health Education - children & young people with learning disabilities, a practical way of working
K Adcock, G Stanley; British Institute of Learning Disabilities and Barnado's, 1996
- Sex & Staff Training - a training manual for staff working with people with learning difficulties
M McCarthy, D Thompson; Pavillion Publishing, 1997
- Talking Together about growing up - a workbook for parents of children with learning disabilities
Lorna Scott, Lesley Kerr-Edwards; Family Planning Association, 1999
- Picture Yourself - a flexible teaching resource for use with people with learning disabilities
Hilary Dixon, Anne Craft; Joseph Rowntree Foundation
- Breaking In... Breaking Out (social & sex education for men with learning difficulties)
Martin Hazelhurst; The B Team, 1993

Parents

- Family Outing - A Guide for Parents of gays, lesbians and bisexuals
Peter Owen; Dickens, 1995
- Sex Education for Parents - a resource pack for professionals to support parents in sex education
Health Promotion Wales and Family Planning Association, 1996
- Sex, Storks & Gooseberry Bushes: talking to children about sex 2
Family Planning Association ; 2000
- Let's Talk - leaflet for parents on talking with their children about sensitive issues
Liz Wilson Centre for HIV & Sexual Health. 2003
- Partnerships with Parents in Sex Education
Lorna Scott; Sex Education Forum, 1996
- Talking about Sex and relationships – A Factsheet for Foster Carers
Hansa Patel-Kanwal; Sex Education Forum and National Foster Carers Association, 2001

Primary Care

- Getting Better With Practice – Practical Strategies for Primary Care Teams offering Sexual health Services and Support to young people
Jo Adams; Centre for HIV and Sexual Health, Sheffield, 2001
- Sexual Health History Taking in General Practice
Carey Jewitt; The HIV Project, 1995
- Confidentiality and Young People - improving teenagers uptake of sexual and other health advice
Royal College of General Practitioners and Brook Advisory Services, 2000
- Sexual Health Promotion in General Practice Hilary Curtis
Radcliffe Medical Press, 1996
- Care for people with HIV in General Practice
D Mottram; George House Trust, 1999
- Handbook of Sexual Health in Primary Care
Y Carter, C Moss, A Weyman ; Royal College of General Practitioners, 1998

Video

- Clueless - a Video Resource Pack for teaching communication skills to Medical Students
Royal College of General Practitioners , 1998

Self-Esteem

- GirlPower, How Far Does It Go? – Practical Strategies for Building Self-Esteem in Girls and Young Women
Jo Adams; Centre for HIV and Sexual Health, Sheffield 1997
- A Resource Bank on Self-Esteem M Harvey
Youth Clubs UK , 2000
- Working With Eating Disorders and Self-Esteem
Alex Yellowlees; Daniels, 1997
- Feel the Fear and Do It Anyway
Susan Jeffers; Rider , 2000
- The Lesbian and Gay Self-Esteem Handbook - A guide to loving ourselves
Kimeron P Hardin; New Harbinger Publications, 1999
- Go Girls – Practical Strategies for Building Self-Esteem and emotional development
Jo Adams. Centre for HIV and Sexual Health 2002
- Revolution from Within -A Book of Self-Esteem
Gloria Steinem, Bloomsbury 1992
- Boys Own – Supporting Self Esteem and Emotional Resourcefulness
Rob Brown and Simon Blake – Centre for HIV & Sexual Health 2004

PART TWO: KEY ORGANISATIONS AND AGENCIES WHICH CAN OFFER MORE SUPPORT

CENTRE FOR HIV & SEXUAL HEALTH

22 Collegiate Crescent

Sheffield S10 2BA

Tel: 0114 226 1900

Fax: 0114 226 1901

admin@chiv.nhs.uk

www.sexualhealthsheffield.co.uk

fpa

2-12 Pentonville Road

LONDON N1 9FD

Tel: 0207 923 5222/5232

Fax: 0207 928 373042

margaretm@fpa.org.uk

www.fpa.org.uk

SEX EDUCATION FORUM

c/o National Children's Bureau

8 Wakley Street

London EC1V 7QE

Tel: 020 7843 6052

sexedforum@ncb.org.uk

www.ncb.org.uk/sef

NATIONAL AIDS TRUST

New City Cloisters

188/196 Old Street

London EC1V 9FR

Tel: 070 814 6767

Fax: 070 216 0111

info@nat.org.uk

www.nat.org.uk

BROOK ADVISORY SERVICE

421 Highgate Studios

53-79 Highgate Road

London NW5 1TL

Tel: 020 7284 6040

Fax: 020 7284 6050

admin@brookcentres.org.uk

www.brook.org.uk

HEALTH PROMOTION ENGLAND

50 Eastbourne Terrace

London W2 3QR

Tel: 020 7413 2627

Fax: 020 7725 9031

kim.grant@hpe.org.uk

www.hpe.org.uk

NATIONAL HIV PREVENTION

INFORMATION SERVICE

30 Great Peter Street

London SW1P 2HW

Tel: 020 7413 2001

Fax: 020 7413 8929

nhpis@hda-online.org.uk

www.hda-online.org.uk/nhpis

GAY MEN FIGHTING AIDS (GMFA)

Unit 43, Eurolink Centre

49 Effra Road

London SW2 1BZ

Tel: 020 7738 6872

Fax: 020 7738 7140

gmfa@gmfa.org.uk

www.metromate.org.uk

PROTECTIVE BEHAVIOURS

The Children's Society

The Coffee Hall Family Centre

135 Jonathan's Coffee Hall

Milton Keynes

Tel: 01908 604113

FORWARD

Unit 4, 765-767 Harrow Road

London NW10 5NY

Tel: 0208 960 4000

Fax: 0208 960 4041

Forward@forwarduk.org.uk

www.forwarduk.org.uk

FFLAG

(Families and Friends of Lesbians and Gays)

P.O. Box No. 84

Exeter EX4 4AN

Tel: 01392 279546

info@fflag.org.uk

www.fflag.org.uk

BRITISH INSTITUTE OF LEARNING

DISABILITIES

Wolverhampton Road

Kidderminster

Worcestershire DY10 3PP

Tel: 01562 723010

Fax: 01562 723029

Enquiries@bild.org.uk

www.bild.org.uk

NATIONAL YOUTH AGENCY

Eastgate House
19-23 Humberstone Road
Leicester LE5 3GJ
Tel: 0116 285 7350
Fax: 0116 285 7444
nya@nya.org.uk
www.nya.org.uk

TERRENCE HIGGINS

TRUST/LIGHTHOUSE

52-54 Grays Inn Road
London WC1X 8JU
Tel: 020 7831 0330
Fax: 020 7242 0121
Info@tht.org.uk
www.tht.org.uk

WORKING WITH MEN

320 Commercial Way
London SE15 1QN
Tel: 020 7732 9409
Fax: 020 7732 9409
Info@workingwithmen.org
www.workingwithmen.org

MIND

15-19 Broadway
London E15 4BQ
Tel: 020 8519 2122
Fax: 020 8522 1725
contact@mind.org.uk
www.mind.org.uk

PARENTING EDUCATION & SUPPORT

FORUM

Unit 431 Highgate Studios
53-79 Highgate Road
London NW5 1TL
Tel: 020 7284 8370
Fax: 020 7485 3587
pesf@dial.pipex.com
www.parenting-forum.org.uk

MENCAP

123 Golden Lane
London EC1Y 0RT
Tel: 020 7454 0454
Fax: 020 7696 5540
information@mencap.org.uk
www.mencap.org.uk

THE NAZ PROJECT

Palingswick House
241 King Street
London W6 9LP
Tel: 020 8741 1879
Fax: 020 8741 9609
naz@naz.org.uk
www.naz.org.uk

BLACK HEALTH AGENCY

Zion Community Resource Centre
339 Stretford Road
Manchester M15 4ZY
Tel: 0161 226 9145
Fax: 0161 226 9380
info@blackhealthagency.org.uk
www.blackhealthagency.org.uk

IMAGE IN ACTION

Chinnor Road
Bledlow Ridge
High Wycombe
Bucks, HP14 4AJ
Tel: 0149 4 481632
Fax: 0149 4 481632
iia@nascr.net

CHILDLINE

Studd Street
London N1 0QW
Tel: 020-72391000
Fax: 020-7239 1001
www.childline.org.uk

RELATE

Herbert Gray College
Little Church Street
Rugby
Warwickshire CV21 3AP
Tel: 0845 456 1310
enquiries@relate.org.uk
www.relate.org.uk

SUZY LAMPLUGH TRUST

PO Box 17818
London SW14 8WW
Tel: 020 8876 0305
Fax: 020 8876 0891
Info@suzylamplugh.org
www.suzylamplugh.org

Centre for HIV & Sexual Health
22 Collegiate Crescent
Sheffield S10 2BA

Tel: 0114 226 1900

Fax: 0114 226 1901

Email: sheffield.chiv@nhs.net

www.sexualhealthsheffield.co.uk

ISBN: 0-9531898-2-1

