



# **REAL** (CHEMISTRY)

connection, wellbeing and chemsex recovery

A workshop manual supporting people moving on from problems with chemsex

# REAL CHEMISTRY



**LONDON**  
**friend**  
londonfriend.org.uk



## ACKNOWLEDGEMENTS

Real Chemistry has been developed by Antidote, London Friend's LGBT drug and alcohol service, with the input of men attending our Sunday Sessions, a workshop and social space for men moving on from chemsex.

Real Chemistry has been developed thanks to funding from the HIV, Sexual and Reproductive Health Innovation Fund from Public Health England and developed with the support of our partners SASH.

London Friend would like to thank the men who attended Sunday Sessions and helped pilot these workshops, and the Antidote and SASH staff and volunteers who supported delivery of the pilot during 2020/21. Particular thanks go to Mike Meleady who led the project and the development of the workshops and materials.

The workshops and materials in this manual can be used free of charge by services and groups providing support to people moving on from problems with chemsex. Please credit London Friend's Antidote service.

**London Friend is a charity working to improve the health and wellbeing of LGBT people. Antidote is our LGBT drug and alcohol service.**

**[www.londonfriend.org.uk](http://www.londonfriend.org.uk)**

**Published:** March 2021

# CONTENTS

Introduction .....	04
Real Chemistry .....	04
Using This Manual .....	05
Impact of COVID 19 .....	05
<b>Workshop 1</b> Identifying the Impact of Chemsex on our Lives .....	06
<b>Workshop 2</b> Understanding Change .....	10
<b>Workshop 3</b> Relapse Prevention .....	14
<b>Workshop 4</b> Being A Man .....	18
<b>Workshop 5</b> Exploring Self Esteem .....	22
<b>Workshop 6</b> Navigating Apps and Social Media .....	26
<b>Workshop 7</b> How Proud Are We? .....	29
<b>Workshop 8</b> Living With Labels .....	32
<b>Workshop 9</b> Developing Healthy Boundaries .....	34
<b>Workshops 10</b> Building Healthy Boundaries .....	38
<b>Workshop 11 &amp; 12</b> Taking the First Steps to Healthy Sexual Relationships .....	41
<b>Workshop 13</b> Repairing Friendships & Relationships .....	47
<b>Workshop 14</b> Community & Belonging .....	49



# introduction



## Welcome to Real Chemistry, support for men moving on from problems with chemsex.

When problems occur relating to chemsex the impact can be felt on our mental and physical health, as well as on our relationships with those around us. Whilst engaged in chemsex participants may have felt disconnected from friends and loved ones and stopped doing other leisure activities they enjoy.

Real Chemistry is about helping people take the next steps, building new relationships with themselves and others that are not centred around chems. It is about finding more rewarding connections – with friends, family and sexual partners – and reengaging with activities that help them feel the real-world chemistry they bring.

### **REAL CHEMISTRY – CONNECTION, WELLBEING, AND CHEMSEX RECOVERY**

Real Chemistry is aimed at men taking the next steps in chemsex recovery. Typically, they will have already undertaken some psycho-social work to help them achieve their chemsex goals. It is a resource to help people work through some of the common questions

and issues to help them connect with others in their communities away from the chemsex environment.

London Friend's website contains a series of self-guided themes and exercises for individuals to work through on their own. These themes have been arranged into corresponding workshops which have been provided as our Sunday Sessions programme. Sunday Sessions offer a workshop and social space on a theme supporting chemsex recovery. Visit [londonfriend.org.uk/realchemistry](https://londonfriend.org.uk/realchemistry)

This manual collates a set of these workshop plans that can be used by other drug and alcohol, sexual health, LGBT community organisations or similar services supporting chemsex recovery.

The workshops do not offer training for professionals unexperienced in chemsex. They should be delivered by facilitators working under supervision, with suitable experience of delivering group programmes and with existing underpinning knowledge of chemsex and the social, sexual health and mental health needs of gay, bisexual, and other men who have sex with men. The wellbeing and clinical governance for workshop attendees is the responsibility of the facilitators and the organisations they are working on behalf of.



## USING THIS MANUAL

Each theme/workshop provides information about an issue relating to chemsex recovery, and facilitators can use these to plan and deliver workshops within their own services. For each workshop there is:

- **A session plan**
- **A content script to accompany each session plan**
- **Additional worksheets for some session plans**

A key aspect of Real Chemistry is encouraging new, chem-free connections so we recommend workshops are centred within a longer group, which encourages participants to form supportive peer-to-peer recovery relationships and promotes engagement in new leisure activities.

The workshops and materials in this manual can be used free of charge by services and groups providing support to people moving on from problems with chemsex. Please credit London Friend's Antidote service.

## IMPACT OF COVID 19

Real Chemistry was conceived and funded prior to the Covid 19 pandemic. The pilot ran from April 2020 to March 2021. We had already provided some Sunday Session workshops prior to this, although delivery of these moved online following the start of the United Kingdom's first national lockdown in March 2020 and remained only online for the duration of the pilot.

A key aspect of Real Chemistry is the promotion of engagement in new leisure activities, or the resumption of leisure that ceased whilst experiencing problems with chemsex. Inevitably this was a considerable challenge as the pilot of our Sunday Sessions workshops took place under national lockdown or significant social restrictions which offered few opportunities for in-person leisure activities.

We strongly encourage facilitators delivering these workshops to include promotion of engagement in leisure activities as part of their programmes.

Although these workshops have been piloted as online groups, and can be delivered in this way, they are intended to be delivered as in-person workshops which offer additional social opportunities for participants.

## WORKSHOP 1: Identifying the Impact of Chemsex on Our Lives

### Learning Objectives:

To have awareness of what harms arose from chemsex engagement.  
To understand the impact of chemsex on emotional, psychological & physical health.  
To explore sexual health risks that may have arisen from chemsex engagement.

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
Participants to show understanding by identifying the impact of chemsex in their emotional, psychological & physical health.  
Participants to complete the 'identifying the impact of chemsex on our lives' worksheet.

### Preparation for Workshop:

Flip chart, pens, clipboards, 'Identifying the impact of chemsex on our lives' worksheet.

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and how it feels to be part of the real chemistry workshops. Group Codes of Conduct to be referred to and agreed upon.
Intro - Content script - paired task & group discussion	15	Refer to the content script covering: Chems + Sex = Chemsex Ask participants to discuss in pairs: How do you relate to the definition of chemsex, and the themes of 'enhance' and 'facilitate'? Do you identify with either term? In terms of the frequency of your chemsex engagement, how much space does/did chemsex take up in your life? What sexual experiences are you having without the use of chems and what positives can you identify during these experiences? Take feedback as a larger group.
Content script - individual task & group task	20	Refer to the content script covering: Chemsex Harms Ask participants to take some time to reflect on the reason for seeking support around the issues that have come up for them personally while engaging in chemsex. Next, ask participants to reflect and write down what they hope to achieve in terms of minimising the harms to their general wellbeing and mental health. Refer to the content script covering: Chemsex Drugs As a larger group, ask participants to discuss: What do you know about the drugs you have been using, as well as the related harms on your general wellbeing & mental health? How have you been taking these chems i.e Slamming, smoking etc and what do you know about the harms that may arise from administering chems in this way? What support or advice may you need to engage in to ensure that you do this with limited physical & mental health risks? What do you know about the effects/after effects of the chems you have been using? What (if anything) do you know about the term 'harm reduction' and how might the risks you face be minimised by implementing some harm reduction advice?
Content script - small group task	20	Refer to the content script covering: Harm Reduction The 3 areas of our lives that chemsex can impact upon Sexual Health Risks Minimising Sexual Health Risks In groups of three, ask participants to focus on the following: Take some time to reflect & think about how your emotional, psychological & physical health has been impacted by chemsex. Are there any similarities in your experiences? What small steps you could possibly take to work towards making improvements in these different three areas. Are there any additional support to help you process some of the more negative experiences that may have come up for you? Take feedback as a larger group.
Individual task/group task	20	Introduce the 'Identifying the impact of chemsex on our lives' worksheet, and ask participants to complete on their own, and then share their answers with a partner. Take feedback as a larger group.
Weekly Goals	10	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?



## WORKSHOP 1

# identifying the impact of chemsex on our lives

## CHEMS + SEX = CHEMSEX

---

A simple definition of chemsex is:

***'The intentional use of drugs to help enhance and/or facilitate sex'.***

If we examine this definition more closely, we see that there are two distinct terms that are used:

**Enhance:** To heighten the experience of sex.

**Facilitate:** To make the experience of sex easier.

## CHEMSEX HARMS

---

Let's acknowledge that the harms that have arisen for you due to your chem use and chemsex engagement are going to be unique to you as an individual, and will be dependent on what, how much, and how often you are using.

For some the harms may be minimal, although significant enough to motivate you in seeking support to minimise the impact on your wellbeing. For others though the harms may have been much greater and have now in fact exceeded any positive previous experience you may have had, and this has now resulted in an impact on all aspects of your life and mental health.

## CHEMSEX DRUGS

---

Knowing as much as you can about the chems you have been using, as well as the harms that may arise, can support you in taking steps to either reduce the impact on your lives, or to make the decision to take a break so that your wellbeing and mental health can stabilise and improve.

## HARM REDUCTION

---

For some of you, you may have already identified that the only way to minimise the harms you experience from chemsex is for you to stop altogether. However, if this is not an option for you, then it is important to learn about, and implement some harm reduction advice so you work towards reducing the various 'harms' of any chem use on your wellbeing.

## THE 3 AREAS OF OUR LIVES THAT CHEMSEX CAN IMPACT UPON

---

The impact of chemsex can be felt in various parts of your life e.g., finances, relationships, work etc, however the more personal impact of chemsex will probably be on:

### **Emotional Health**

Whereby you start to experience different feelings, mostly negative.

### **Psychological Health**

Whereby your mental health is impacted and starts to deteriorate over time.

### **Physical Health**

Whereby your chem use starts to create problems for your body, or you leave yourself open to physical risks such as overdose, sexual health issues or issues around consent & sexual assault.

## SEXUAL HEALTH RISKS

---

Take some time to reflect & think about how your sexual health has been impacted by chemsex engagement. What risks are you currently facing? How might you reduce these risks? What information or support services might you need to approach for further support with managing your sexual health?

## MINIMISING SEXUAL HEALTH RISKS

Of course, we all know that condoms offer a reliable way of limiting sexual health risks and is probably the simplest piece of sexual health advice you can follow. However, if this is not an option for you then it's probably a good idea to get regular sexual health screening, and perhaps it is important to remember that there are other ways to limit the sexual health harms that may arise from chemsex:

### PEP (Post Exposure Prophylaxis)

For HIV Prevention for those who have had unprotected sex, or believe they have been exposed to HIV. This medication needs to be taken within 72 hours of exposure, and makes infection with HIV less likely, but does not work in all cases. Medication needs to be taken for 28 days. PEP can be obtained from Sexual Health Clinics, HIV Clinics, and A&E Departments.

### PrEP (Pre-Exposure Prophylaxis)

HIV Prevention for people who are HIV negative but may be exposed to HIV through injecting drugs to engage in chemsex, or having condomless sex with a HIV+ partner, or multiple partners whose HIV status is unknown. Medication is taken to reduce their risk of getting HIV if they are exposed to the virus. PrEP can

stop HIV from taking hold and spreading throughout your body.

If you know your HIV status and are currently taking medication, then think about how your chemsex engagement may affect your adherence to taking your medication daily. A simple way to support yourself would be to set a reminder in your phone, and if you go to meet someone for a chemsex session, then take some medication with you just in case the session spills over to the next day.





## WORKSHEET

# identifying the impact of chemsex on our lives

- What is the impact of chemsex on yourself, and how does this also impact those around you?

- Which harms would you like to minimise, so you improve your general wellbeing and mental health?

- What small steps can you take to immediately reduce any harms to your emotional, psychological & physical wellbeing? E.g., follow sexual health, harm reduction advice etc.

- What percentage of their sex life/free time involves chemsex?

- What might you need to implement into your free time to ensure you live a balanced and connected life?

- What physical risks are you currently facing due to chemsex engagement?

- What steps can you take to minimise any risks to your physical wellbeing?

- What ideas do you have about any future chem use?

- What support may you need to support you in making these changes?

## WORKSHOP 2: Understanding Change

### Learning Objectives:

Raise awareness of the processes of change.  
Identify positive change already in place.  
Develop tools to support future change and understanding of what may be necessary to reflect on

### Evidence:

Participants will demonstrate knowledge through discussion and feedback.  
All participants to identify past change, what they would like to change moving forward to support their physical and psychological well-being, as well as what support they may need to implement change.

### Preparation for Workshop:

Flip Chart, paper, pens, slides or script to support content, 'If I had a magic wand' worksheet, 5 steps to make one change worksheet.

ACTIVITY	TIMING	DETAIL
Check In	15	Facilitators to introduce themselves. Group members to introduce themselves and say how they are doing today/feeling about being part of the group. Group Codes of Conduct to be referred to and agreed upon.
Intro - group discussion	20	What does change mean to you? What kind of changes have you made in the past? How did you make these changes? What was the impact on your physical, and psychological well-being? What past changes have you made around your chem use? What was the positive outcome of these changes?
Individual task/group discussion	15	If I had a magic wand worksheet: Participants to complete, and share with a partner, with a focus on moving forward from chem use. Feedback to be taken, with the questions 'What positive impact on well -being might this change support?' Take back feedback as a larger group.
Content script - group discussion	30	Refer to the content script covering: To Change... Is change difficult? Four obstacles to change. Impact of these obstacles. Moving through these obstacles. Ask participants at each point, how they relate to the content.
Individual task/group task	15	Introduce the 5 steps to making one change worksheet, ask participants to complete on their own, and then share their content in small groups of 3. Take feedback as a larger group.
Weekly Goals/ Homework	10	Introduce the 'Thinking about change' worksheet for participants to complete at home. All participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening?

## TO CHANGE...

...we have to learn how to be our own best buddies and focus on our own self-care rather than listening to our internal critic, who doesn't always have our best interests at heart. We need to learn to nurture ourselves by changing the words we use to motivate ourselves. An example of this is to say, 'Going for a walk will benefit our wellbeing!', rather than using terminology that is unhelpful to your wellbeing.

Feeling bullied to change (by anyone, and especially ourselves by listening to our internal critic) is a recipe for feeling unmotivated, and experiences of low mood, both of which will probably lead to feelings of failure. All in all, these feelings will not help anyone change for the better.

## IS CHANGE NECESSARY?

Change is **essential** for your growth and development, which as human beings is a very natural part of life. Without change, we just stay the way we are (even if we are desperately unhappy).

For some people, no change is a good thing since they are happy and fulfilled in their lives. But for many people, the current path they are on lacks meaning and satisfaction and they feel stuck, and even though change is desirable, it may feel impossible to figure out how to start the process of change.

## IS CHANGE DIFFICULT?

**Answer: Yes and no.**

**NO:** No: In simple terms, change does not seem like it should be difficult to implement and if there is something that you are unhappy with in your life,

or you do not like something about yourself or your habits, then you can just take some simple steps to change it.

**YES:** However, the reality is that change may be a slow process, can feel frustrating, and sometimes even painful, and can often be the most difficult, yet rewarding thing you will ever do.

## FOUR OBSTACLES TO CHANGE

An unfortunate part of life is that we often create obstacles or barriers that stop us from living our best selves. Generally, we can view these obstacles as an unconscious process, that may arise from feelings of uncertainty of taking risks, and fear of the unknown.

Some obstacles to change that may resonate with you are:

**BAGGAGE:** We bring positive ways of being into adulthood from our childhood, but we may also bring other ways which are less positive and that sometimes act contrary to our own wellbeing and mental health. These can be deemed as unhealthy baggage.

Some examples of baggage may include low self-esteem, the need to appear perfect, a need for control, and the more negative emotions such as fear and anger. These experiences may cause us to think, feel, as well as behave based on who we were as young people rather than who we are as adults, and can often result in self sabotaging our own efforts to implement positive life change.

*The challenge then is to identify what we carry from the past, as well as what small steps can be taken to change them.*

**HABITS:** When we experience thoughts, emotions, and behaviour that are driven by our past experiences, they can become habits that we turn to when reacting to what we experience in the world. These habits can then cause us to respond to life events in an unhealthy, passive, or adaptive way.

*The challenge then is to identify what habits you may have, as well as what small steps can be taken to change them.*

**EMOTIONS:** We tend to view fear, anger, sadness, frustration, and hopelessness as the more negative emotional states, and it's probably safe to say that we have all experienced these feelings as being a huge barrier in moving towards the life that we want.

The impact of these negative emotions become barriers to change since they can trigger uncomfortable feelings that can make us want to retreat and stop the process of change in its track.

*The challenge then is to identify what feelings come up for you when you think about change, as well as what small steps can be taken to change them.*

**ENVIRONMENT:** Unfortunately, we can often create an environment where our baggage, habits, and emotions are played out. However, the 'safety' of our environment is a huge obstacle to change, and sometimes it is necessary to consider stepping out of our comfort zone so that we can set the stage for change.

*The challenge then is to identify how your environment stops you feeling that you need to change or that staying the same is okay, as well as what small steps can be taken to change them.*

In all cases, when you allow these obstacles to control your life, they have the effect of sabotaging your efforts at changing your life in a positive way. Even worse, you may feel stuck, frustrated, and helpless to change your lot in life.

## IMPACT OF THESE OBSTACLES

In all four cases, when you allow these obstacles to control your life, they have the effect of sabotaging your efforts at changing in a positive way.

Even worse, you feel stuck, frustrated, and helpless.

## MOVING THROUGH THESE OBSTACLES

Some questions for you to reflect on, and which that may support you moving through any obstacles in your way, are:

- **Do I really want to make the change I say I want to?**
- **What are my fears if I make this change?**
- **What will I lose or open myself up to?**
- **Do I really want to make the effort required to make this change? If so then what impact do I want this change to have?**

Being honest about your capabilities and limitations will help you set goals that are reachable, and achievable.

**1. If I had a magic wand...**

What would be the changes you would make in your life?

**2. Five steps to change.**

Thinking of one change you would like to make, think of 5 steps you could take to achieve this.

1.

2.

3.

4.

5.

## WORKSHOP 3: Relapse Prevention

### Learning Objectives:

To explore Triggers & Cravings and understand the differences between the two concepts.  
To understand the Cycle of Use  
To explore techniques to combat a lapse or relapse.  
To explore Irrational Thoughts, and work towards changing them to something more rational & healthier

### Evidence:

Participants will demonstrate knowledge through discussion & feedback.  
Participants to show understanding of the difficulties that may arise when experiencing triggers & cravings.  
Participants to identify techniques that may support Relapse Prevention.  
Participants to think about how making simple changes to thinking may support them with sticking to the goals they have around their chem use.

### Preparation for Workshop:

Flip chart, pens, clipboards, 'Dealing with Irrational Thoughts' worksheet.

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - group Discussion	15	Ask participants the following questions about Relapse Prevention: What do we mean by relapse prevention? How do you relate to this term? Is there a difference between a lapse and a relapse? If so, then what is this difference? Can you identify a time when you had a lapse or relapse from your goals around chem use? What led up to this event? What support did you access to help you through this experience? What was helpful? What was unhelpful?
Content script - group discussion	15	Ask participants: What is the difference between a trigger and a craving? Tell participants: A trigger is an object or emotion that prompts an individual to think about using substances. A craving is defined as an urge to use or continue using substances. Refer to the content script covering:: Triggers are... The cycle of use OR addiction Some simple techniques to deal with cravings. Ask participants: Are there any other techniques that have been helpful to you in the past? Take feedback as a larger group.
Content script - smaller group task	15	Introduce the concept of the ABC's and take participants through the example on the content script. Introduce the small group task: In small groups of three, can you create your own ABC's? Try for a least two or three on flip chart paper. Ask participants to present what they have come up with.
Content script - individual task/group discussion	15	Refer to the content script covering:: Unrealistic thinking Irrational thoughts Introduce the 'Dealing with Irrational Thoughts' worksheet and ask participants to complete on their own. Once finished, share with a partner, and then take feedback as a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?

## WHAT IS RELAPSE PREVENTION?

Relapse Prevention focuses on the steps that you can take, or tools that you can implement to stop a relapse event from occurring. If you have already made changes to your chem use, and chemsex engagement and have experienced times when it has been difficult for you to stick to your goals but overcome these times, then you have probably already initiated some form of relapse prevention.

When we think of a lapse, we generally see this as a one-off time of not sticking to our goals. A using event may happen, but you quickly recover and return to focusing on getting back on track. A relapse, however, is when you return to full time chem use, and it may be more difficult to return to the goals that you had previously decided on.

## TRIGGERS AND CRAVINGS

What is the difference between a trigger and a craving?

A **trigger** is an object or emotion that prompts an individual to think about using substances.

A **craving** is defined as an urge to use or continue using substances.

*Generally, a craving will start the process of a using event, and if you experience cravings you may start to take steps to using chems by going online or contacting a dealer.*

## TRIGGERS ARE...

People that may have been part of your substance use experience.

*Therefore, it can be a healthy choice to leave old using friends behind.*

Places where you may have used substances.

*Therefore, staying away from places that you used can limit this.*

The experience of difficult feelings & emotions.

*Therefore, noticing how you are feeling when you think about using chems will support you in knowing when you are unsafe.*

Often substances may have been used to regulate feelings & emotions, therefore you may need to engage in practices that can support regulation such as mindfulness, meditation etc. Talking about how you feel to friends or engaging in counselling/therapy to explore feelings & emotions can also support how you regulate.

## THE CYCLE OF USE

The different phases of the Cycle of Use are:

- **An event that occurs whereby you become triggered to use chems or engage in chemsex.**
- **Feeling triggered may lead to experiences of cravings.**
- **Cravings may lead to the engagement of rituals, for example watching porn, contacting a dealer etc.**
- **Rituals may lead to a using event, whereby you use chems, or engage in chemsex.**
- **A using event may lead to a negative mood state, or difficult emotions.**
- **A negative mood state, or difficult emotions may lead to feeling triggered, and the cycle may in fact start all over again.**

The main aim of relapse prevention is concerned with triggers & craving, and therefore important to intervene BEFORE the ritual stage is initiated.

## SOME SIMPLE TECHNIQUES TO DEAL WITH CRAVINGS

- Connect with others - talk about what is going on for you.
- Do some form of physical activity - go for a walk, or a run.
- Avoid your thoughts - get up, jump up and down, listen to music etc.
- Decision delay - put any actions off until a later time.
- Urge surf - ride the thoughts out.
- Write down the pros & cons before you make a decision.
- Engage in positive self-talk i.e. "I can cope with this; I have in the past and I can in the future".

## ABC'S

ABC's is a SMART tool that you can implement when times get tough, when you feel triggered, or are experiencing cravings.

The **A** stands for - The **Actualising** thoughts (of using chems)

The **B** stands for - The **Behaviour** that may follow the thinking.

The **C** stands for - The **Consequence** to the behaviour.

The last part of the ABC's contains The Reframe which may support you in making a choice that supports your general wellbeing and mental health.

### ABC's example

**A** - "I want to use"

**B** - Go online, call a dealer, get some drugs.

**C** - Spend money, no sleep, feel like shit tomorrow, feel like a failure.

**D (reframe)** - I can go online and get some drugs and use them, but I will spend money, I won't sleep, I'll feel like crap tomorrow, and I'll feel like a failure.

## UNREALISTIC THINKING

Exploring your thinking when times get difficult for you, can support you in making the right choice, and help you stick to any goals you have in place around your chem use and chemsex engagement.

### EXAMPLES:

**Unrealistic:** Urges are excruciating or unbearable

**Reality:** Though truly uncomfortable, urges are never really unbearable.

**Unrealistic:** Urges make me use.

**Reality:** Using always represents a choice.

**Unrealistic:** Urges will just keep getting worse until I give in.

**Reality:** Urges peak and then die down

## DEALING WITH IRRATIONAL THOUGHTS

...means changing the irrational into something more rational.

### EXAMPLES:

**Irrational:** My thoughts are making me want to use.

**Rational:** Even though I am having strong urges to use, I have resisted before and I can resist again by...

**Irrational:** If I use some chems, I will feel better.

**Rational:** Even though using helps me to escape my feelings, I will probably feel worse afterwards because of the comedown and the fact I have lapsed with the goals I have set myself.





# WORKSHEET

## relapse prevention

Think of some Irrational Thoughts you have experienced in the past. Then try and turn them into something more rational, accepting and healthy.

**Irrational**

**Rational**

**Irrational**

**Rational**

**Irrational**

**Rational**

**Irrational**

**Rational**

## WORKSHOP 4: Being a Man

### Learning Objectives:

To explore what it is to be a man, and to be gay/bisexual/MSM  
 To understand what support may be beneficial moving forward  
 To identify role models participants have, and to explore how this may support personal development

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
 Participants to show understanding of the difficulties that present with being different.  
 Participants to identify additional support that may benefit them  
 Participants to think about how they may want to change & develop

### Preparation for Workshop:

Flip chart, pens, clipboards, 'My Hero or Role Model' worksheet, 'Becoming the person I want to be' worksheet.

ACTIVITY	TIMING	DETAIL
<b>Check-in</b>	<b>15</b>	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
<b>Intro - Content script - paired task - group discussion</b>	<b>20</b>	Refer to the content script covering: Being a man today Ask participants to discuss in pairs: What is it like to be a man? What 'Cultural Script' are we expected to follow? How does this work for or work against us? What pressures do we face as 'Modern Men'? What about being a man who identifies as gay, bi, or MSM? How does this conflict with society's expectation of who we should be as men? How do we manage 'being different'? What opportunities do we have to share how we feel in general or about being different? Take feedback in a larger group
<b>Content Script - paired task/group discussion</b>	<b>15</b>	Refer to the content script covering: Being a Gay/Bi/MSM man today As a larger group, discuss the following questions: How do you experience your difference as a Gay/Bi/MSM man? Is this a positive experience or not? How do you manage any negative experiences of 'being different', and what support have you engaged in to minimise any negative impact? How has your past chem use, or chemsex engagement eased any negative feelings about your any difference you hold? Ask participants to find a partner, and introduce the paired task: 'We'd like you to discuss what opportunities you have in life to talk about how you feel, with other men, and how do these /or lack of these opportunities and the impact this may have on our wellbeing'. Take feedback as a larger group.
<b>Individual task</b>	<b>15</b>	Ask participants to write two lists, the first detailing what support they already have in place, and the second focusing on what support may be beneficial to put in place in the future. Take feedback as a larger group.
<b>Content script - group discussion -</b>	<b>15</b>	Refer to the content script covering: Heroes & Role Models Ask participants: Do you have a Hero or Role Model? If not, then maybe there is someone else who you look up to? Who are they? What do you like about them? How do you relate to them and the things they do? How do they inspire you?
<b>Individual task/group task</b>	<b>15</b>	Introduce the 'My Hero or Role Model' worksheet, ask participants to complete on their own, and then share their content in small groups of 3. Take feedback as a larger group.
<b>Individual task</b>	<b>15</b>	Read out the quote 'If you can't find a good role model, be one'. How do participants relate to this? Introduce the 'Becoming the person I want to be' worksheet, ask participants to complete on their own and then take feedback as a larger group.
<b>Weekly Goals</b>	<b>10</b>	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
<b>Check out</b>	<b>15</b>	How are participants doing, what are they taking away from today's session, what are their plans for the evening?

# 4

## WORKSHOP 4 being a man



### BEING A MAN TODAY

---

If we think about the role that our early caregivers had in teaching us how to be first little boys, and then adult men, it's fair to say that we in fact learn how to be men, and our internal ideas about how men should act and be in the world will be based on the men that were around us during this early period of our lives.

### BEING A GAY/BI/MSM MAN TODAY

---

Being a 'different' kind of man because of our difference of sexuality, may mean that we face additional challenges of finding a place in the world, with limited impact on our general wellbeing and mental health.

### HEROES AND ROLE MODELS

---

Even though there is now more tolerance in society for who we are as men who hold difference, there is still a lack of positive Gay/Bisexual/MSM male heroes and role models for us to look up to and identify with. It's an unfortunate fact that the AIDS crisis in the 80's, 90's, and early 2000's also meant that we lost a lot those who may have provided a sense of 'modelling' (particularly older members of our community) and this may mean that we have few examples of how we could potentially be in the world, and how to go through the various stages of life in a healthy way.

**1. Becoming the person, I want to be....**

The qualities I'd like to develop in myself are...

- 1.
- 2.
- 3.
- 4.

The impact of developing these qualities could be...

- 1.
- 2.
- 3.
- 4.

The support I may need to put in place to achieve this is...

- 1.
- 2.
- 3.
- 4.

**2. My Hero, Role Model, or Person I look up to.**

My Hero/role model or the person I look up to is:

I look up to this person because....

I relate to this person in the following ways....

This person inspires me to....

### 3. Identifying what support we need

Make a list of all the support networks you have in your life. Can you identify the positive impact of this support?

Now make a separate list of what additional support may be beneficial to you. Focus on your experience of being a man? Are there any social, support or activity groups that may support you with building healthy relationships with other men?

Can you identify any positives in taking some steps to put this support in place?

## WORKSHOP 5: Exploring Self-Esteem

### Learning Objectives:

To understand & explore the theme of self-esteem.

To reflect on the internal voice, and its impact on self-esteem.

To think about how the internal critical voice can be changed to something more nurturing.

### Evidence:

Participants will demonstrate knowledge through discussion & feedback

Participants to show understanding of the internal voice through engagement with tasks.

Participants to identify the messages they hold about themselves and how this can impact on self-esteem, as well as be aware of how they can change these messages to improve wellbeing.

### Preparation for Workshop:

Flip chart, pens, clipboards, 'Do you have positive self-esteem?' worksheet, 'Changing the Critical into something Nurturing' worksheet.

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - group discussion	20	What do we mean when we use the term 'self-esteem'? Introduce the definition of self-esteem - 'Confidence in one's' own worth or abilities. How was your self-esteem impacted when using chems and engaging in chemsex? What issues around self-confidence & self-worth arose at this time? How were feelings of low self-esteem managed during this time? Has your self-esteem improved since you have made changes around your chem use? If so, then how?
Individual task/group discussion	15	Introduce the 'Do you have positive self-esteem' worksheet: Participants spend a few minutes reading through the questions, and then share their feelings with a partner. Feedback in a larger group to be taken, with the question 'What may be stopping us from answering 'yes' to the statements?'
Content script - group discussion	30	Refer to the content script covering: Our internal voice The Critical & Nurturing voices Critical & Nurturing examples Our Critical voice and unhelpful thinking Developing your Nurturing voice Changing the critical voice Ask participants how they relate to each point.
Individual task/group task	20	Introduce the 'Changing the Critical into something Nurturing' worksheet, ask participants to complete on their own, and then share their content in small groups of 3. Take feedback as a larger group.
Weekly Goals	10	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening?



## WORKSHOP 5

# exploring self-esteem

### OUR INTERNAL VOICE

---

The Internal voice can often 'contaminate' our more rational, adult thinking, and our thinking can become unhelpful to the way we think and feel about ourselves.

This Internal voice holds all the positive/negative messages we have internalised about ourselves, some from our own parents, and some from society about who we are. The way we feel about our sexuality and gender identity may also be impacted by these messages. Other messages may have been internalised from situations where we may have been judged/or faced judgment from others about our choices or reactions to external events.

### THE CRITICAL & NURTURING INTERNAL VOICES

---

The Internal voice has two sides to it that you may recognise.

**The Critical voice** is the voice that impacts negatively on our self-esteem, reduces our confidence, and can sometimes lead to an impact on our mental health. Sometimes we may hear this voice as someone we know such as an ex-partner, or a figure of perceived authority.

In contrast, **the Nurturing voice** is the voice that impacts positively on our self-esteem, builds our confidence, and helps to improve our mental health. This can sometimes be by someone who showed care for us and had our best interests at heart such as an actual parent, or some other parental figure.

### CRITICAL & NURTURING EXAMPLES

---

Here are some examples of the difference between the Critical & Nurturing voices that may help you identify them in your own thinking:

**Critical voice message:** You're a failure, you can't do it, people don't like you, you always make bad choices.

**Nurturing voice message:** You can be successful, you can do it, people really like you, you always make the best choice for you.

### OUR CRITICAL VOICE & UNHELPFUL THINKING

---

Our Critical voice relies on lots of different forms of unhelpful thinking. Some examples are:

- Black or white thinking - when there are only two options, and we are unable to see the many other choices that are available to us.
- Disqualifying the Positive - whereby we are unable to hold the positive as being true.
- Catastrophizing - When our thinking ONLY leads us to worst case scenarios.
- Mind Reading - When we believe we know what others are thinking without any real evidence.
- Should Statements - When we 'should' all over ourselves, rather than thinking about what we may want to do to take steps on improving our wellbeing and mental health.

### CHANGING THE CRITICAL VOICE

---

Changing the Critical voice means changing the voice into something more rational, and Nurturing.

Some examples of this process are:

**Critical Voice:** You're a failure.

**Nurturing voice:** Even though I sometimes feel like a failure, I know that I have succeeded many times in the past, such as the time when....

**Critical voice:** You can't do it.

**Nurturing Voice:** I won't know if I can't do it until I try. In the past I have done things, even though I thought I wouldn't be able to do them at the time.



# WORKSHEET exploring self-esteem

## Do you have positive self-esteem?

Read through each statement. Reflect on what comes up for you internally, and if you are able to answer 'yes' to any of them.



I generally have positive thoughts about myself.



I know what sort of person I am and what my strengths and weaknesses are.



I can cope with life's difficulties without them having a long-term negative impact on me.



I do not worry about lots of small details of my day.



I think I can generally succeed in life.



I do not compare myself unfavourably to others.



I can make friends easily and adapt to new situations.



I am assertive and able to ask to get my needs met.



I can admit to my mistakes and learn from them.



I believe I am doing the best I can in life.





### Changing the Critical into something Nurturing

Write down some of the critical messages you hold about yourself, or tell yourself about yourself, and see if you can change them into something more nurturing.

**Critical voice**

**Nurturing voice**

**Critical voice**

**Nurturing voice**

**Critical voice**

**Nurturing voice**

**Critical voice**

**Nurturing voice**

## WORKSHOP 6: Navigating Apps and Social Media

### Learning Objectives:

To explore App & Social Media use  
To identify any mental health concerns that may arise.  
To identify any issues around sexual health and consent.  
To think about how implementing some small changes in relation to App and Social Media use, may impact positively on mental health and general wellbeing.

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
Participants to show understanding of the difficulties that present within App & Social Media engagement.  
Participants to identify the harms they experienced while engaging in this context  
Participants to think about how making simple changes may enable a healthy relationship with Apps & Social Media use

### Preparation for Workshop:

Flip chart, pens, clipboards, 'Thinking about change to support App & Social Media use.

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - paired task/group discussion	15	Ask participants to find a partner, and introduce the paired task: What is your experience of Apps and Social Media? How did this impact on your lives i.e. Did our engagement make us feel connected to others? Or did this make us feel isolated? How did using Apps and Social Media impact on our wellbeing and Self Esteem? Take feedback in a larger group, and then ask: Did you find that you had similar experiences? Or did you hear different experiences? Take feedback as a larger group.
Smaller group task/group discussion	30	Refer to the content script covering: The positive aspects of engaging in Apps & Social Media The negative aspects of engaging in Apps & Social Media Ask participants: Are there any Apps or Social Media that you particularly enjoyed using? If so which ones and why? - Write answers on flipchart. Ask participants to get into groups of 3: 'In groups of three, we want you to write down the experiences you had when using Apps to meet other guys for sex...we want to hear the good, the bad, and the ugly!' Take feedback as a larger group. Tell Participants that we are now going to focus on our past sexual experiences: In your smaller groups of 3, we want you to think about the following questions...What sexual health issues arose from your engagement with apps? How did you navigate these issues? Did you face any concerns with consent through your use of using Apps? If so, how did you deal with these concerns? Take feedback as a larger group.
Group discussion	15	Ask participants: Is there still a place in our lives for Apps & Social Media? If not, then why not? If yes, then what do you hope to gain from engagement? Who has made a change recently to support a healthy approach to using Apps and Social Media? Who can identify a change that they would like to make to support a healthier approach to using Apps and Social Media?
Individual task/group discussion	15	Ask participants to complete the 'Thinking about change to support App and Social Media use' worksheet identifying two or three changes you could make in the future to ensure that your App and Social Media engagement is a positive experience and impacts well on your general wellbeing. When completed, ask participants to share their answers in pairs. Take feedback in a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?



## THE POSITIVE ASPECTS OF ENGAGING WITH APPS & SOCIAL MEDIA

---

Engaging in app use and all of the various types of social media available to us can decrease any feelings of loneliness and isolation we may experience and support us in feeling connected to others in a virtual sense.

This feeling of connection is not only limited to our local areas (which some apps give us access to) but can also make us feel part of a more global community where we are able to both share parts of our lives to others, and experience the day to day gripes & joys of those we are connect with.

## THE NEGATIVE ASPECTS OF ENGAGING WITH APPS & SOCIAL MEDIA

---

Hostility, Rejection, and Trolls, Oh My!

Unfortunately, app & social media use can also have a darker aspect, whereby some experiences can impact negatively on our self-esteem and how we feel about ourselves, our general wellbeing and our mental health.

In terms of chemsex, apps & social media platforms generally go hand in hand with chem experiences since they can provide a virtual 'doorway' to access the chemsex scene, to look for, and hook up with others for chemsex experiences,

They may also provide opportunities to purchase chems.



**What changes would you like to make about your use of apps and social media?**

One change I would like to make in the future is...

By making this change it may mean that...

The support I may need to help me make this change is...

## WORKSHOP 7: How Proud Are We?

### Learning Objectives:

To explore the impact of identifying from a different sexual identity  
 To understand the impact of difference on Self-Esteem & feelings of Shame about who we are  
 To explore the stages of being 'okay' with our sexual identity, and techniques to support this process  
 To explore how 'proud' we are of ourselves despite the difficulties of living with unhelpful Labels

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
 Participants to show understanding of the difficulties that may arise from belonging to a 'different' group  
 Participants to identify techniques that can reduce feelings of shame  
 Participants to think about how sharing experiences can relieve the negative experiences of being 'different'

### Preparation for Workshop:

Flip chart, pens, clipboards

ACTIVITY	TIMING	DETAIL
<b>Check-in</b>	<b>15</b>	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
<b>Intro - paired task/group discussion</b>	<b>20</b>	Refer to the content script covering: Being different - Labels Ask participants to discuss the following questions in pairs: Think about the messages you may have internalised from society about being LGBTQ+. Were these messages mainly positive or negative? Did you ever feel rejected by others because of your sexuality? Have you ever hidden your sexuality from others because you were fearful of the consequences? Take feedback as a larger group.
<b>Content script - paired task/group discussion</b>	<b>20</b>	Ask participants to discuss in pairs: How do you relate to the word 'Shame'? What does it mean to you? What things are you shameful about? How about in relations to your sexual & gender identity? What shame have you (or do you) experience with this aspect of yourselves? When are these feelings of shame heightened, and when are they reduced or more manageable? Take feedback as a larger group. Take participants through the content script covering: Shame Chem use to support feelings of shame Sexuality - 4 stages Ask participants to discuss in pairs: Where would you place yourself in these stages? What may you need to reach the Celebration stage? Take feedback as a larger group.
<b>Content script - paired work/group discussion</b>	<b>15</b>	Take participants through the content script covering: Moving forward Ask participants to discuss in pairs: Are there further techniques that you have employed to support yourself with living with Labels, and any shame that arises because of these Labels? Take feedback in a larger group.
<b>Small group task/group discussion</b>	<b>15</b>	In small groups of three, we want you to discuss the following: How Proud are you about who you are? How do you Celebrate yourself? How do you deal with any negative labels associated with your sexual & gender identity? Take feedback in a larger group.
<b>Weekly Goals</b>	<b>15</b>	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
<b>Check out</b>	<b>15</b>	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?

## BEING DIFFERENT - LABELS

When we think about labels, we are thinking about the characteristics that come with the association of being part of a group, as well as the views of others who hold opinions and judgment about what it is to be part of 'that' group. This can often result in harmful 'labels' because of a group association, and if negative that they can impact our self-esteem.

To continue to build our self-esteem then, it is important to take steps to negate any negative labels we may hold about being different, so we continue to accept ourselves, develop a positive view of oneself, and celebrate who we are.

## SHAME

Often, the negative messages we pick up on, about being LGBTQ+ become SO internalised that they do not sit in the conscious mind. Instead, they stay outside of our awareness until we become 'triggered' by a look, a word, or an event which can result in feelings of shame about who we are.

Shame is such an overwhelming, disturbing, physical experience that often we will go to great lengths to avoid it.

## CHEM USE & CHEMSEX TO SUPPORT FEELINGS OF SHAME

Using chems may dissolve any feelings of shame about our sexuality and our view of who we are, and

it becomes clear why the use of chems to facilitate sex may have become problematic.

- To engage in MSM sexual experiences.
- To deal with toxic masculinity.
- To ease the shame of asking for the sex we want.
- To ease any negative feelings we carry about our bodies or how we perform sexually.

## SEXUAL ORIENTATION

If we consider how we feel about ourselves as Gay/Bi/MSM four stages, then it's important to reflect on the following frame or stages to support awareness.

- Denial of who we are - When we are unable to hold our difference with any feelings of being at ease with it.
- Tolerant of who we are - When we acknowledge our difference but have difficulty in having a positive view of it.
- Accepting of who we are - When we are able to hold our difference in a positive manner internally, with limited feelings of shame, but may have difficulty expressing it in the world.
- Celebration of who we are - When we are able to hold our difference positively both internally & externally.

## MOVING FORWARD

---

It is important to be mindful of how we feel about ourselves and to take steps to talk about any shame we may carry about who we are. Some find engaging in counselling/therapy can support in redefining any negative feelings about 'self' into something more positive and accepting.

It is also important to draw a line under past chem use along with any experiences that impacted on your general wellbeing & mental health.

What happened in the past is done, and what is important is now, and today.

Some simple techniques that may help you improve feelings of self-worth are:

Interrupt your inner critic - Try and turn some of the negative things you tell yourself about yourself, into something more nurturing.

- Develop positive mantras - An example of this would be 'You are good enough' and it can be repeated each day or written down and put up somewhere to remind you that this is in fact a true statement about who you are.
- Don't aim for perfection - Good enough is good enough and being Okay rather than amazing all the time helps set a realistic expectation of how you can achieve what you want to in life and be in the world.

- Set reasonable expectations for yourself in terms of how you look after yourself - Eating well, some daily exercise, and being connected to others who support you in feeling good about yourself and who you are can be much more beneficial than those who do not.
- Question any behaviours you engage in that cause you emotional pain, or physical harm.

## WORKSHOP 8: Living with Labels

### Learning Objectives:

To explore the impact of the Labels we carry  
To understand the impact of Labels on how we feel about ourselves  
To explore why Labels are assigned to people & groups  
To explore what Labels we personally carry

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
Participants to show understanding of the difficulties Labels cause for individuals  
Participants to identify individuals Label others  
Participants to think about how sharing experiences can relieve the negative experiences of being 'different'

### Preparation for Workshop:

Flip chart, pens, clipboards.

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - group discussion/ smaller group work	20	Refer to the content script covering: What is a 'label'? Ask participants what they think of the definition. Refer to the content script covering: Quotes about Labels Ask participants: How do we relate to these quotes? Take back feedback in a larger group. Ask participants the following questions and ask them to discuss them in small groups of 3: If we use a label that we can all relate to, then let's use the example of being part of the LGBT+ community. How does society view us, or the sex that we have? What stereotypes come with the labels of 'gay', 'bisexual' of 'MSM'? Well let's not stop there, what about other labels we may all be able to relate to, what about being a man? Having a different cultural background? Living with HIV? Being a bottom or a top? What do we own about these labels, and what do we not? Take feedback as a larger group.
Content script - paired work/group discussion	15	Refer to the content script covering: Why we give people labels Some things to reflect on regarding labels Ask participants to discuss what they have heard in pairs, and how they relate to the content. Take feedback in a larger group.
Content Script - Individual task - Small group task	20	Introduce the task by taking participant through the content script covering: Who I am -Who I am not Show participants an example for support, and guide participants through the task asking participants to focus on all of the characteristics they hold. Once completed, ask participants to share their answers in small groups of three. Ask participants to focus on what is similar, and what is different. Take feedback as a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?



## WHAT IS A 'LABEL'?

We touched on labels on the 'How Proud are we' workshop, but put simply, a label is:

A phrase or a name applied to a person, which is generally uncomfortable to relate to, can often be inaccurate, and can feel restrictive.

Labels can also be based on 'what we do' rather than 'who we really are', they can feel judgmental, and may impact on our self-worth, and self-esteem, and can result in feelings of being different or being 'othered' from the norms of society.

## QUOTES ABOUT LABELS

*"Putting labels on people is a way of making sense of someone you do not understand".*

*"The problem with labels is that they lead to stereotypes, and stereotypes lead to assumptions, and assumptions lead back to stereotypes".*

## THE PERSONAL IMPACT OF LIVING WITH A LABEL

Well, unfortunately the first hurdle of living with a label will be navigating how society views that label.

If we use a label that we can all relate to, then let us use the example of being part of the LGBT+ community. How does society view us, or the sex that we have? What stereotypes come with the labels of 'gay', 'bisexual' or 'MSM'?

What about other labels we may all be able to relate to, what about being a man? Having a different cultural background? Living with HIV? Being a bottom or a top?

It raises the question of what we own about these labels, and what we do not. It is also wise to remember that no one is free from labels, no matter

how flawed, or functional we are, there will always be someone trying to make sense of us based on a trait or a behaviour.

## WHY DO WE LABEL EACH OTHER?

It's probably safe to say that we learn how to label others from a young age, by our caregivers/family, and they can be useful in early development in order to make sense of the world, for example, that person is good because of this and that, or that person is bad because of this or that.

But this is also a time when we may internalise what we hear from others, and probably an example of this would be what we pick up about being LGBTQ+, for good or for bad, leading to these generalisations impacting on how we feel about being different.

As we grow up and mix with others who we ourselves may have labelled, we start to see that what we think of others (based on certain characteristics) are more often than not untrue.

## SOME POINTS TO REFLECT ON REGARDING LABELS

We do in fact label people all the time, and they support us in making sense of a diverse chaotic world.

Labels can simply support us to think of a particular person as being a 'something' such as nice, not nice, funny, or serious.

**However:** Though a label may be a reasonable reflection of who they are at a particular moment, it also carries a belief that the behaviour reflects a person's essence, and our view of someone can be limited, 2 dimensional, and this view can be difficult to navigate, or to adapt or change.

## WORKSHOP 9: Developing Healthy Relationships

### Learning Objectives:

- To explore past relationship experiences and their impact on the present
- To understand the impact of early historic relationships and how they may set unhealthy relationship patterns
- To explore the impact of being gay/bi/MSM on relationships
- To explore what is deemed healthy in relationships, and to explore what participants may need to think about moving forward

### Evidence:

- Participants will demonstrate knowledge through discussion & feedback
- Participants to show understanding of past experiences and their impact on the present
- Participants to show awareness of how their sexuality and chem use may impact relationships
- Participants to think about healthy elements of relationships, and how they might want to implement these elements moving forward, as well as how to navigate communication issues that may arise

### Preparation for Workshop:

Flip chart, pens, clipboards

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - content script - group discussion/ paired work	20	Acknowledge with participants: This workshop, is intended to create some awareness of what may hinder the development of a chem free experience of Intimacy & Relationship, and what we may need to think about/work on to feel able to achieve this. Refer to the content script covering: Quote Ask participants: What do you think and feel about this quote and take feedback in a larger group. Ask participants to discuss in pairs: What is your experience of relationships? Do you feel that your relationships were healthy, or not? If yes, then how? If not, then why? What worked for you, and what did not work for you? How have these past experiences impacted on how you feel about relationships in the present? Take feedback in a larger group.
Smaller group work	15	Introduce the topic 'The impact of chem use on relationships', and ask participants to discuss in groups of three: How did your past chem use impact your relationships? Did they make it easy to engage with others or did they create a barrier to having relationships? Maybe for some of you chem use was a shared experience with your partner/friends. If so then what was your experience of this? Did it feel healthy? Did it cause any issues? Take feedback as a larger group.
Content script - group discussion	20	Refer to the content script covering: The first relationship The first relationship cont Instructions & Permission in early development The influence of being gay/bi/MSM A recipe for disaster? What might be needed? How can we do this? Introduce the topic of Unhealthy & Healthy Relationships and ask participants: What could be seen as Unhealthy/Healthy relationships? Refer to the content script covering: Unhealthy Relationship examples Healthy Relationship examples Moving forward Ask participants how they relate to each theme and take feedback as a larger group.
Small group task	20	In small groups of three, ask participants to discuss: What would be an idea relationship for you? What steps could you take to ensure it feels healthy, balanced, and supports wellbeing for both parties? What things would be easy to communicate to ensure that your needs were met? What might be more difficult for you to communicate, and how might you navigate this? Take feedback as a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?



## WORKSHOP 9

# developing healthy relationships

*"A Healthy Relationship, whether it's romantic, brotherly, or friendly, is when each person is allowed room to grow unjudged, and still loved".*

## THE FIRST RELATIONSHIP

The first relationship we experience can be seen as the relationship we had with our first primary caregiver e.g., our mother, father, other caregiver. It is probable that this relationship sets the scene for being close to another, and for being intimate, and sowed the seeds of how we could get our needs met, or not, and would not have had to be perfect, just a 'good enough' experience.

During this relationship we would have received instructions from our primary caregiver(s) of how to behave to get our needs met, to be loved and to have attention. Generally, for little boys as we were back then, we would have received instructions about how to behave, such as:

- Don't cry,
- Be Strong,
- Be Supportive For Others,
- Don't Have Feelings

All of these can be counteractive for close Intimate relationships, but which may have led to early instructions & permissions.

**Instructions of how to be with others:** We should do this or that, act like this or that, which may have been verbal, but we may have also picked these instructions up through face expressions or body language.

**Permission of how to be with others:** You can be 'this close' to me, or you can only be close to me if you follow my instructions. Permissions are often verbal but can be picked up through face expressions or body language.

Think about the instructions you may have received as a child, and what permissions you were given

in order to be close to another. Then have a think about how these may have been played out in your adult relationships, and how sometimes these early experiences can be projected, or interrupt our adult relationships.

## THE INFLUENCE OF GAY/BI/MSM

As men we may have received messages of not being close to others since it is not 'manly' to do so. We are then thrown into an adult life being attracted to other men who have also received the same messages and face the same difficulties.

Due to the lack of modelling of Gay/Bi/MSM relationships in the media & society, it's possible to think that we are part of a marginalised group who do not have much experience of how to be together, or of how to be in a loving relationship with each other which is acceptable in society, and a society who view Gay/Bi/MSM men only in terms of the sex they have.

## IS THIS A RECIPE FOR DISASTER?

Two answers, yes and no.

**YES:** You have a group of men who engage in sometimes fulfilling sexual experiences, but for some without the presence of closeness or intimacy, since this goes against what is acceptable and not acceptable, leaving some feeling rejected, unfulfilled and empty.

**NO:** There is an opportunity to become aware of the barriers to being close to another man and 'Transgress' the norm by going against any internalised messages we may hold from the past.

## WHAT MIGHT BE NEEDED?

Let us go back to some of those messages we may have picked up in early life:

- Don't cry,
- Be Strong,
- Be Supportive For Others,
- Don't Have Feelings

And now let's think about how we may need to counteract these message by acknowledging:

- We are human, there are times when we cry,
- Though sometimes strong, we are also less strong at times,
- While supportive of others, we can also ask for support when needed,
- Recognise that we have feelings and needs, and learn how to ask others to meet them.

## HOW MIGHT WE DO THIS?

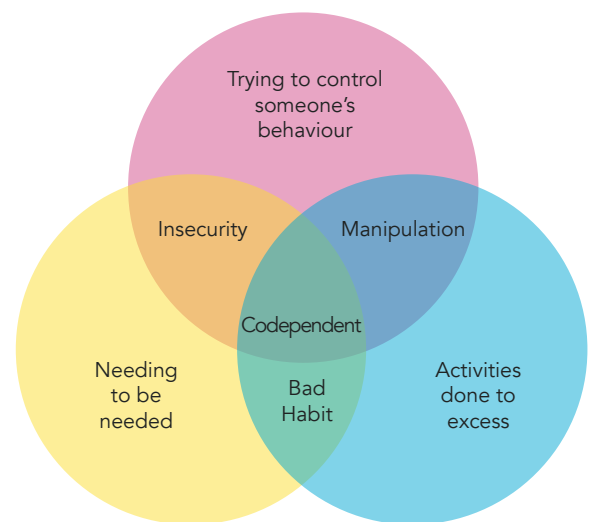
Good question! And though we might not have all the answers, here are some themes that may be supportive in some way.

As unique individuals there is no 'one size fits all' and the reality is that we will all struggle with some element of difficulty, that impacts our ability to be intimate with another.

It is important then to recognise what our needs are i.e., to be cared for, to be able to share how we feel etc. in a safe manner, and take risks with being vulnerable, and to share that with another/others. This way, we will begin to test the waters and to get feedback on what is acceptable to ask for and what is not.

## UNHEALTHY & HEALTHY RELATIONSHIPS

**An Unhealthy Relationship** is one where only one person gets their needs met, can often involve the use of drugs & alcohol by one partner, like a parent child relationship, can often be co-dependent i.e., one partner needs the other to make them feel 'OK', while the other needs to be needed.



A Healthy Relationship would focus on equality, care, and respect and can be viewed as adult-to-adult.



Reflecting on these two types of relationships, can you identify times in the past where you would deem a relationship as being healthy or unhealthy? What were the pros & cons for each?

## MOVING FORWARD

It is important to remember that there is no one out there who can 'fix' you, nor are people able to make everything in your life feel better all the time. Instead, it may be helpful in thinking about how you could take on this responsibility yourself.

There is no perfect time to be in a relationship, and we will often always have parts of ourselves that may need working on. It may be important though to share any issues you are facing with a partner, but do not expect them to take on responsibility for 'fixing' them for you, since there are external services out there to support you with this.

Some tips though of how to be with others:

**As always, communication is key:** Be honest about who you are, if someone does not like what they hear, then take steps to move on, or to let them move on.

**Remember that no one is perfect:** Unfortunately, not all potential partners will live up to any idolisation you have of a 'perfect partner'.

**Nothing lasts forever:** be realistic about the relationship you are entering.

**People Change & Grow:** We all change over time. As we do, what we may need in a relationship may change too, and it is important to communicate any changes you experience as well as any restrictions in a relationship that may impede your ability to grow.



## WORKSHOP 10: Building Healthy Boundaries

### Learning Objectives:

To explore boundaries participants may already have in place, and their impact on an individuals' experience  
To understand why boundaries are important to have with others, especially in terms of other peoples chem use  
To explore the various types of boundaries and understand their difference in terms of healthy/unhealthy  
To explore what boundaries may be necessary to implement to develop and maintain healthy relationships

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
Participants to show understanding of the boundaries they already have in place, and their impact  
Participants to show awareness of the different types of boundaries, and which type they identify with  
Participants to think about what changes they may want/need to make in terms of pre-existing/future relationships, especially in terms of others' who use chems

### Preparation for Workshop:

Flip chart, pens, clipboards, 'The boundaries I have in place' worksheet

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - content script - paired work/group discussion	15	Refer to the content script covering: What is a boundary? Quotes Refer to the quotes on the content script, and ask participants: How do you relate to these quotes? Ask participants to discuss in pairs: What do boundaries mean to you? How does the term resonate with you? Can you identify any boundaries you have in your life? If so, how do they work for you? What is the positive impact of having these boundaries? Are boundaries easy for you to implement or do you find it difficult to put boundaries in place? Take feedback in a larger group.
Individual task/group discussion	15	Introduce the 'The Boundaries I have in place' worksheet and ask participants to complete. Take feedback in a larger group.
Content script - group discussion	20	Refer to the content script covering: Some points about boundaries Different types of boundaries When going through the 3 different types of boundaries, ask participants: Does anyone relate to this type of boundary? If so, then how? Refer to the content script covering: Imagine a boundary like a garden wall If there is no garden wall So the right garden wall is one that... Ask participants how they relate to each of the themes.
Smaller group task/group discussion	20	In small groups of three, ask participants to discuss: In small groups of three we would like you to explore what you have heard, and to think about the people you engage with in life. Are you happy with the boundaries you already have in place? Or is there a need to change and develop them? What about in terms of those around you who are still engaging in chem use? Do you need to adapt any boundaries you have to ensure you keep yourself safe? Take feedback as a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening?

## WHAT IS A BOUNDARY?

Put simply, a boundary is:

**A dividing line, between you and another person, or group of people.**

Boundaries can often refer to relationships, or to your work, and they may need to be implemented to ensure you can focus on your wellbeing & mental health.

For some of us, engaging in chem use and chemsex has probably meant that boundaries you may have had in place may have been crossed or dissolved in some way. For others, the concept of boundaries may be a new theme and topic to focus on, and an exploration into the necessity of boundaries will help to ensure you can keep yourself safe in the future.

## QUOTES

*"It's necessary and even vital to set standards and boundaries for your interactions in life, especially with the people you allow in".*

*"If someone throws a fit because you set boundaries, then it's more evidence the boundary is in fact needed".*

## SOME POINTS ON BOUNDARIES

**1:** We learn about boundaries in our early experiences of relationships e.g., family, first partner etc, and this sets our expectations about what we are willing and not willing to experience from others.

**2:** Boundaries are not something that you can physically see, so they need to be communicated in an explicit way. For example, 'I've been working really hard, and need some downtime so we won't speak to today, I'll call you tomorrow'.

**3:** Having boundaries keeps us safe from emotional, and physical harm.

**4:** To have boundaries means that we know what we are willing to experience from others, and how we feel comfortable interacting either socially or one to one.

**5:** Implementing boundaries can sometimes be uncomfortable to begin with, especially introducing them into a pre-existing relationship.

Take some time to think about these points then reflect on what steps you might want to take to implement some of the themes.

## DIFFERENT TYPES OF BOUNDARIES

**RIGID:** You may have rigid boundaries if you avoid intimacy and close relationships. You tend to not ask for help, you sometimes seem detached, and you may distance yourself to avoid rejection.

*Do you relate to this type of boundary? If so, then how? Is having these types of boundaries helpful, or unhelpful?*

**POROUS OR 'SOFT':** You may have soft boundaries if you over-share personal information that may leave you feeling worried and unsafe. You may have difficulty saying 'no' to others, or you may get over-involved with other people's problems.

*Do you relate to this type of boundary? If so, then how? Is having these types of boundaries helpful, or unhelpful?*

**HEALTHY:** You may have healthy boundaries if you value your own opinion and do not compromise your values for other people. You do not overshare personal information, and you can accept the boundaries of others, as well as having the ability to say what you are willing to experience, and what you are not.

*Do you relate to this type of boundary? If so, then how? Is having these types of boundaries helpful, or unhelpful?*

## VISUAL EXERCISE

*Imagine a boundary like a garden wall*

If the wall is too high, then there is no place for sharing, intimacy or developing healthy connection.

*If there is no garden wall*

..someone can step into your space, trample on your flowers, impact on your feelings, and make changes to your peace of mind.

*So the right garden wall is one that...*

..allows for mutual sharing, and healthy connection, while also protecting your peace of mind, and creating a space for communicating what you are willing to experience in a safe manner.

Reflecting on the 3 different types of Boundaries, can you identify which garden wall relates to the Rigid, Soft & Healthy definitions?



# WORKSHEET

## building healthy boundaries

**Think about your close relationships and answer the following questions.**

What boundaries do you have in place with those who are close to you?

What about other individuals you interact with either socially or professionally?

How do these boundaries work for you? What is the positive impact on your wellbeing?



## WORKSHOP 11: Taking the First Steps to Healthy Sexual Experiences

### Learning Objectives:

To explore participants past & current relationship with sex  
 To understand the importance of thinking about self and how participants feel about their sexual needs  
 To explore what chem use 'solved' for them  
 To explore how masturbation is a first step in engaging in healthy sexual experiences

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
 Participants to show understanding of how they personally feel about sex with men  
 Participants to show awareness of their own feeling about themselves & their sexual desires  
 Participants to think about how masturbation can support them in engaging in a healthy sexual experience

### Preparation for Workshop:

Flip chart, pens, clipboards

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - paired work/group discussion	20	Ask participants to discuss in pairs: How do you feel about your sexual experiences? Have you always been able to engage in sex with men with ease? Or have there been times when it has been difficult? If difficult then why? In terms of chemsex, what was your experience of this? What were the pros, and what were the cons? Refer to the content script covering: First step is to acknowledge Touch & Belonging Ask participants to discuss in pairs: What is your current experience of masturbation? Does masturbation create any issues for you, for example, feeling triggered to use chems? If so, then what steps can you take to overcome this? How do you celebrate this healthy sexual experience? Do you make time to indulge yourself? If not, then why not? Take feedback as a larger group.
Content script - paired task/group discussion	30	Refer to the content script covering: The importance of having clarity over who you are as a sexual being Ask participants to discuss in pairs: How do you feel about your past sexual experiences? Have you always been able to engage in sex with ease? Or have there been times when it has been difficult? If difficult then why? In terms of chemsex, what was your experience of this? What were the pros, and what were the cons in terms of fulfilling your need to connect & belong? For some chemsex may have been as part of a group experience, and if so then what group rules did you have to follow to be part of that group, and how have you transitioned into other non-chem groups to support your need for connection? Take feedback as a larger group. Refer to the content script covering: General fears around chem free sex Inhibitions=sexual constraints What does chemsex facilitate for individuals Ask participants to discuss in pairs: How do you feel about your body? Are you comfortable naked? Do you accept all your imperfections? How 'okay' are you with your sexual needs? Are you able to communicate them to another, or is this a difficult experience? How is it to talk about these themes with your partner? Is it easy? If difficult then why? Take feedback as a larger group. In smaller groups of three ask participants to:
Smaller group task/group discussion	30	In light of the issues that we may have with being okay with ourselves, and our sexual needs - what did the use of chems 'solve' for us? Create a list with some of your thoughts and experiences. Once you have created a list, swap with another group. With your new list, come up with some strategies and suggestions that may be supportive. Once participants have finished, ask each group to come up to the front and present. Take feedback as a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening?

## WORKSHOP 12: Taking the First Steps to Healthy Sexual Experiences

### Learning Objectives:

- To explore participants ideas about what constitutes a healthy sexual experience
- To understand & explore how getting know ourselves again in a sexual context may be necessary
- To explore participants fears about sexual engagement with another/others
- To explore what themes may support a reduction of participants fears about future sexual experiences

### Evidence:

- Participants will demonstrate knowledge through discussion & feedback
- Participants to show understanding of what may hinder future sexual experiences
- Participants to show awareness of any fears participants personally hold about future sexual experiences
- Participants to think some themes that may support taking the next steps towards healthy sexual experiences

### Preparation for Workshop:

Flip chart, pens, clipboards

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Paired work/group discussion	20	Ask participants to discuss in pairs: How did you feel after the last session where we focused on the first steps to healthy sexual experiences? What did you reflect on the most? What ideas do you have regarding some of the themes we covered? Was there anything else that the content provoked for you that you would like to share? Take feedback as a larger group. Refer to the content script covering: Sex & Identity Ask participants to discuss in pairs: What fears do we carry with us into our sexual experiences? Or what fears may arise for you for future sexual experiences? In terms of support, what may you need to reduce the fears that you may experience?
Group discussion	15	Ask participants to discuss as a large group: Has this been anyone's experience? Or is it a fear? If an experience, then how did you navigate this? If a fear, then what are you fearful about and how might you navigate this fear moving forward? Refer to the content script covering: Chem Sex Vs Sober Sex
Content script - smaller group task/group discussion	30	Refer to the content script covering: Moving forward - getting to know yourself again Moving forward - experiencing sex again with a partner(s) In small groups of three introduce the following task: So you've taken the first few steps to get to know yourself again. Now what might be the next steps towards healthy sexual experiences? Work in small groups of three and write your answers on flipchart paper. Take feedback as a larger group
Individual task/group discussion	20	Introduce the individual task to participants: Complete the 'My sexual needs & wants I am comfortable in sharing, and what I am not' worksheet on your own. Once completed, is there anything you are comfortable sharing with a partner, or with the rest of the group? Take feedback as a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?

# taking the first steps to healthy sexual experiences

## FIRST STEP IS TO ACKNOWLEDGE THAT...

As unique individuals, with varying experiences, it's fair to say that we are all on different journeys and may be at different stages in terms of re-engaging with ourselves and others in a sexual sense.

There is no 'one size fits all' when it comes to what may be needed to support re-engagement with sex, however there are some themes that may resonate with you, and that you may want to explore further to support yourself in starting the process or engaging in healthy sexual experiences.

## TOUCH & BELONGING

If we refer to early development, it is important to remember that 'touch' is part of the process of feeling that we belong and feel connected to others. Think about how our early caregivers provide this to us, and how we internalise this experience, and form a blueprint of what we need to belong to another (or others').

As we grow and develop, we move away from our families or caregivers, and transition into belonging to ourselves and fulfilling our touch desires through touching our own bodies and learning about what makes us feel good. We also start to engage in different groups & relationships whereby touch (be that hugs and kisses from friends, or sexual experiences with sexual partners) continues to be part of how we connect and feel that we belong.

## RETURN TO SELF - ENGAGING IN MASTURBATION

In a way, once we have grieved the loss of our chem experiences, an important part of moving towards re-engagement with healthy sexual experiences is to return to a sense of belonging to ourselves. One way of doing this is to re-engage in masturbation.

## IMPORTANCE OF HAVING CLARITY ON WHO YOU ARE AS A SEXUAL BEING

Moving forward can sometimes require us to reflect on the past. In terms of re-engaging with your sexual self, the following questions may help you have more clarity on who you are as a sexual being, as well as explore any issues that were pre-existing before any engagement in chemsex.

How do you feel about your past sexual experiences? Have you always been able to engage in sex with ease? Or have there been times when it has been difficult? If difficult then why?

In terms of chemsex, what was your experience of this? What were the pros, and what were the cons in terms of fulfilling your need to connect & belong?

For some, chemsex may have been as part of a group experience, and if so then what group rules did you have to follow to be part of that group, and how have you transitioned into other non-chem groups to support your need for connection?

## GENERAL FEARS AROUND SUBSTANCE FREE SEX

Some common narratives of those who start to think about sex without chems are:

- Thoughts of 'I'm not good enough'
- Anxiety around sexual performance
- Issues around body image
- Shame around sexual desires
- Pain, or other uncomfortable physical experiences
- Being seen for who you are
- Being judged for who you are
- Being rejected for who you are
- Feeling inhibited about sex and the experiences that may arise in a sexual context

If you relate to any of these fears, or have different fears around substance free sex, and are at a loss of how to overcome them, our Self-Esteem workshop could be revisited, since taking some steps in improving your self-esteem may support you with any fears you hold.

## INHIBITIONS = SEXUAL CONSTRAINTS

Though sex between men is much more acceptable in 2021, society still holds (and expresses) opinions and judgments about MSM sexual practices and this for many can often lead to inhibitions about engaging in sex freely & confidently, without any guilt or shame.

Generally, sexual inhibitions arise from cultural & social influences, regarding what is permissible or 'normal' and acceptable. In light of this it may be important to explore your own up-bringing and what you may have 'heard' about sex growing up, what opinions your families held, and what your religion (if any) says about MSM sex. Perhaps also our How Proud Are You information can support you with gaining further clarity around these themes.

## WHAT DOES CHEMSEX FACILITATE FOR INDIVIDUALS?

If we think about the term facilitation, we are focusing on what chemsex may 'solve' for an individual. Some examples that you may relate to are:

- Decreases anxiety about sex and sexual orientation.
- Supports a sense of belonging especially in a chemsex group context.
- Enables instant connection & sexual attraction.
- Is a fast route to intimacy.
- Facilitates sexual experimentation.
- Releases any inhibitions an individual may hold.
- Increases sexual confidence.
- Supports in reliving poor self-esteem, or poor self-worth.

- Relief of shame around asking for sexual needs to be met.
- A relief of any physical pain that may be present during more extreme sexual experiences.

Considering these points then, before we think about engaging in sex with another or others, it may be important to bring the focus back on ourselves, who we are, what our sexual needs are, and how comfortable we are with these themes.

Remember the information we have provided around Being a Man, How Proud Are You, and Self-Esteem, and how this may be helpful to review, and implement at this stage.

## SEX AND IDENTITY

In terms of Identity, sex is a very important aspect of this since it is one of the ways in which we are viewed as different, and this difference can sometimes lead to various states of otherness within a hetero-normative society.

In light of this, to have fulfilling sexual experiences without the presence of anxiety or shame about who we are, is the main way in which we can celebrate who we are.

## CHEM SEX vs SOBER SEX

The journey towards a Chems free life can often be scary, hugely challenging and emotionally distressing. For those making the decision to reduce Chemsex or to stop altogether, the initial struggle is often to find ways of managing triggers for use, coping with cravings and finding alternative activities to fill time previously dominated by Chems.



## MOVING FORWARD - GETTING TO KNOW YOURSELF AGAIN

Essentially this involves getting to know what turns you on without the use of chems. Generally, it will be important for you to think about your use of pornography, since this can often be a trigger for some, but is also doesn't have much longevity in fulfilling your sexual needs. You may wish to consider taking a break from pornography to see what this brings up for you and start to rediscover what turns you on by noticing your thoughts & fantasies and using this content to support your enjoyment of getting to know your body again and masturbation.

It is also important to acknowledge that without the increased levels of dopamine that some chems provide, your first sexual experiences might seem a bit flat, and you may even experience some awkwardness or some uneasy feelings about performance to begin with. You may experience a decrease in libido, or problems with getting and sustaining an erection and if so then remember that this is just part of the process of recovering sexually from the use of chems and should be viewed as short term. It might be worthwhile to work through these feelings and experiences on your own or with the support of professionals, before involving a sexual partner(s).

Some general themes that may be important to think about when exploring your sexual self are:

- Sensations in the body: these are an important part of any sexual experience. Can you focus on what **physical sensations** feel good, what type of touching you enjoy (hard/soft/fast/slow) as well as where you enjoy being touched the most?
- Which **environments** feel sexy and turn you on. Is it just in the bedroom, or do your fantasies take you to other situations?
- Consider **intimacy**; and it may be important for you to think about how you can feel more comfortable in a sexual situation with another person, and what you may need to experience with them to ensure you trust them and feel safe.

## MOVING FORWARD - EXPERIENCING SEX AGAIN WITH A PARTNER(S)

### Fact or Myth?

*If your partner has no idea of what you enjoy, and want to experience during sex, then it's likely that you will not get your needs met.*

Generally, sex with another requires communication, and once you have taken some steps to rediscover your sexual needs and what turns you on again, sharing this with sexual partners (either before or during sex) will support the experience of sex as being enjoyable & fulfilling.



WORKSHEET

# taking the first steps to healthy sexual experiences

**My sexual needs & wants I am comfortable in sharing are...**

**My sexual needs & wants I am not comfortable in sharing are...**

## WORKSHOP 13: Repairing Friendships & Relationships

### Learning Objectives:

To explore how past chem use may have impacted on Friendships & Relationships  
To understand why boundaries are important to have with others, especially in terms of other peoples chem use  
To explore the various types of boundaries and understand their difference in terms of healthy/unhealthy  
To explore what boundaries may be necessary to implement to develop and maintain healthy relationships

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
Participants to show understanding of the boundaries they already have in place, and their impact  
Participants to show awareness of the different types of boundaries, and which type they identify with  
Participants to think about what changes they may want/need to make in terms of pre-existing/future relationships, especially in terms of others' who use chems

### Preparation for Workshop:

Flip chart, pens, clipboards

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - Paired task/group discussion	15	Introduce the quote on the content script, and ask participants: How do you relate to this quote? Ask participants to discuss in pairs: How did your chem use impact those around you? What issues arose? What did you personally experience in your friendships & relationships? Do you have any residual shame or guilt about these experiences? If so, then what steps may you need to take to resolve these negative feelings? Take feedback as a larger group. Refer to the content script covering: Impact of chem use on Friendships & Relationships Ask participants to discuss in pairs: How did your chem use impact those around you? What issues arose? What did you personally experience in your friendships & relationships? Do you have any residual shame or guilt about these experiences? If so, then what steps may you need to take to resolve these negative feelings? Take feedback in a larger group.
Small group task/group discussion	20	Refer to the content script covering: Myth-Busting Irrational Thoughts that may arise when using chems. In small groups of three, ask participants to write down some of their own irrational thoughts they had in the past on flipchart paper, and as a team to turn them into something more rational. Ask each group to present their irrational/rational thoughts to the rest of the group. Take feedback as a larger group.
Content script -group discussion	20	Refer to the content script and take participants through: Dual emotions that arise from chem use Chem use = Loss of relationship Behaviours created by chem use (or abuse) Changes in relationship dynamics Emotional issues and grief How do these relationships repair themselves? Ask participants how they relate to each theme.
Small group task	20	In small groups of three, ask participants to discuss: What steps did you take to heal your relationships with friends & family? What relationships needed more, or little work? Are there some relationships that still feel damaged by your past use? If so, then what small steps or actions could you take in an attempt to repair them? Take feedback in a larger group.
Weekly Goals	15	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening.?



# repairing friendships & relationships

## QUOTE

*"Problematic substance use is to healthy relationships what cancer is to the body, since it's something that can spread, weaken and destroy the relationship — and if it's not caught and treated, it will eventually kill the relationship".*

## IMPACT OF CHEM USE OF FRIENDSHIPS & RELATIONSHIPS

Friends and family can often feel helpless, and powerless to support the ones they love when chems have caused problems in relationships. You may have been unaware of the extent of the impact on your relationships with those around you whilst you were using. If your chem use has resulted in feelings of rejection or abandonment for you, it may be useful to reflect on who really left the relationship first, as difficult as this reflection may be.

## MYTHBUSTING IRRATIONAL THOUGHTS THAT MAY ARISE WITH CHEM USE

Often during chem use, our thinking can become irrational, and we can often hold on to narratives that are not in fact true and rational. Some examples that may be helpful to think about are:

**Irrational:** "It's only me I'm hurting when I use".

**Reality:** The use of chems impacts and causes hurt to all of those who care for us, leading to changes and strains in relationship dynamics with friends & family.

**Irrational:** "Other people are to blame for my use of chems".

**Reality:** Sometimes it is easier to blame others for our use since it can be too painful to accept personal responsibility for our choices and actions.

Take a moment to reflect on these examples, or maybe you can think of some of your own irrational thoughts you had about your relationships with friends & family, write them down, and then change them into something more rational and accepting.

## DOES CHEM USE = LOSS OF RELATIONSHIP?

Even when someone loves you and wants to support you with the issues you face from problematic chem use, unfortunately continuing to engage in chemsex can bring up lots of concerns for your safety and mental health for those around you. Friends and family can often feel helpless, and some may need to distance themselves in order to support their own mental health & wellbeing. Some of the behaviours that you may have engaged in during problematic chem use may have resulted in those around you feeling abandoned and rejected.

Think about the following behaviours, and ask yourself: Was that part of my chem use experience? Engaging in isolating behaviours, and not returning calls or responding to messages. Avoiding family and friends who have tried to support you because you have not taken steps to support yourself. Lying about your chem use or hiding it from friends & family. Not 'showing up' for social events & dates, and constantly letting others down.

## CHANGES TO RELATIONSHIP DYNAMICS

Chem use can change the entire dynamics of a relationship, putting family members or friends in the role of caregiver, or even in the role of 'rescuer' for someone they care about. And hey, while this type of support and love is commendable, it's not always healthy and can impact on the mental health and wellbeing of everyone involved.

## HOW DO THESE RELATIONSHIPS REPAIR THEMSELVES?

When you start to make changes to your life, and cease problematic chem use, your relationships with friends & family will also start to change & heal.

Generally, those closest to you will just want you to be well & safe and will want to do what they can in order to support you in supporting yourself, therefore any co-dependency should end and more healthy dynamics will return to your relationships.

There may be some difficult conversations to be had, as well as listening to some home truths about the impact of your past use that may be difficult to hear - but although these conversations are well needed for relationships to move forward, it's probably wise to wait until you feel robust enough to engage in them.



## WORKSHOP 14: Community & Belonging

### Learning Objectives:

To explore experiences associated with community & belonging.  
To reflect on chemsex and its impact on community & belonging.  
To understand what communities or groups may potentially support feelings of connection & belonging.

### Evidence:

Participants will demonstrate knowledge through discussion & feedback  
Participants to show understanding identifying the impact of chemsex on community & belonging  
Participants to complete the 'Finding community & belonging' worksheet

### Preparation for Workshop:

Flip chart, pens, clipboards, 'Finding community & belonging' worksheet.

ACTIVITY	TIMING	DETAIL
Check-in	15	Group members & Facilitators to check in with how they are doing today, and the goals they set in the previous session to support physical & psychological wellbeing. Group Codes of Conduct to be referred to and agreed upon.
Intro - Content script - paired task & group discussion	20	Refer to the content script covering: Early Community & Belonging Ask participants to discuss in pairs: What were your experiences of community & belonging growing up? What were the positives for you to belong to these communities, and what were the negatives? What has been the impact of the difference you hold in terms of your sexual identity on your sense of belonging to these early communities? Do you still belong to these early communities, or did you have to leave them behind to live an authentic life? Take feedback as a larger group.
Content script - Paired task, smaller group task, and group discussion	30	Refer to the content script covering: The impact of being Gay/Bi/MSM on Community & Belonging Ask participants to discuss in pairs: What have been your experiences of the LGBT+ scene or community? Have you found a 'good enough' group of friends, or general social group that supports you in feeling safe and connected? If so, then what are the positives of this on your wellbeing and mental health? If not then what has been the experience of this on your wellbeing and mental health? Refer to the content script covering: Chemsex & Belonging In small groups of three, ask participants to discuss: What was required of you to 'belong' to a chemsex experience or group experience? Can you identify any similarities in your experiences? What was the negative impact of this on you and the other people involved? What additional support may you need to process some of these experiences? Take feedback as a larger group
Content script - Individual task, paired task & group discussion	30	Refer to the content script covering: Moving Forward Introduce the 'Finding community & Belonging' worksheet and ask participants to complete on their own, and then share with a partner. Take feedback as a larger group.
Weekly Goals	10	Participants to write down 2-3 goals for the week to focus on physical & psychological well-being.
Check out	15	How are participants doing, what are they taking away from today's session, what are their plans for the evening?



## EARLY COMMUNITY & BELONGING

---

Our early experiences of community will have come from our families or other caregivers, and this would have led to feelings of belonging to a group (or groups) which we could identify with, and which would have provided a sense of safety and connection.

## THE IMPACT OF BEING GAY/BISEXUAL/MSM ON COMMUNITY & BELONGING

---

For some of you, you may still have these early connections to communities as part of your lives but have also reached out to find a community that mirrors the difference that you hold. For others, you may have experienced judgment and rejection based on your difference and have been left with no other choice but to find a place where you belong, with others who you identify with.

## CHEMSEX & BELONGING

---

Generally, chemsex can be thought of as providing a place for some individuals to experience a sense of community, belonging, and connection. However, to 'belong' to a group can sometimes mean following group norms and rules that may be contrary to your morals and values.

## MOVING FORWARD...

---

...it might be important for you to 'belong' to a healthy community or group whereby you are able to be who you are without any negative consequences, and where the other members of that community will have your best interests at heart, all of which will benefit your sense of self, wellbeing, and mental health.

What community groups, social groups or activity groups interest you?

What community groups, social groups or activity groups interest you?

What community groups, social groups or activity groups interest you?

What community groups, social groups or activity groups interest you?

What community groups, social groups or activity groups interest you?

What community groups, social groups or activity groups interest you?



# **REAL** (CHEMISTRY)

connection, wellbeing and chemsex recovery

