Dr. Melanie Dav: Hello everybody, and welcome to our webinar for Our Whole Lives Sexuality Education for Older Adults, for facilitators who are already young adult and adult facilitators, and want to be grand-parented in to being approved to facilitate for this new curriculum. I'm your presenter tonight. I'm Dr. Melanie Davis. I am the Our Whole Lives program manager for the Unitarian Universalist Association. With me is Susan Lawrence offering technical support. She is the managing editor of the UUA's Lifespan Faith Engagement Office. You might know us formerly as The Faith Development Office. Please mute your microphone. There's instructions there on the screen. You've all stopped your camera, which is great. Then I would ask you to get a pencil or a pen and a piece of paper handy, and I'll explain why in a moment.

Dr. Melanie D.: If you have an audio problem, just log out of the meeting and you can call in. That call in number is 646-558-8656, 646-558-8656. The meeting number is 781 910 2883. Again, the Zoom meeting number is 781 910 2883. We will be posting the webinar and slides, the archived recording of the webinar and our slides. Give us about a week. It will be posted on the UUA website the repage, teachers/webinars. I think most of you found the meeting chat box already. We have a lot to go through in a short amount of time, so we ask that you don't use the meeting chat box for side conversations. Susan will be monitoring the chat box and if there are questions that are pertinent to exactly what I'm saying at the moment, she will let me know. Otherwise, we will go over general questions at the end. Okay, so here's why you need a pencil or a pen. To track attendance at tonight's workshop or webinar, we're going to be giving clues.

Dr. Melanie D.: There'll be five clues throughout this webinar, and we need you to write them down. It's going to form a sentence, and the last clue is the author's name. So as you see these clues, write them down and keep them all together. Then you're going to email them to me at owl@uua.org and to my peer, Amy Johnson at the UCC. Her address owl@ucc.org. These email addresses will be repeated at the end. So here's your first clue. Please write this down. I finally know the difference. I finally know the difference. The reason these clues are important is so that when you send them in, we can update your status in our database so that you have a confirmation that you attended this webinar. Okay, so here's tonight's agenda. I'm going to overview the curriculum so you know what's in it. This is the capstone in what was always called a lifespan series, but truly is a lifespan now as well as the sexuality in our faith companion.

Dr. Melanie D.: So I'll be talking about what the workshops are, going into some detail about what's in each workshop, explaining some of the activities that might be new to you in terms of how to facilitate them. Then of course, answering your questions. I'll be putting it into giving you some information on the theoretical framework that I used when I wrote this, so that you have some background about why decisions were made the way they were made. Then we'll be including some facilitation tips. Some of them from my own work in sexuality and aging, and many of them from the field test that we conducted nationwide. This is what it's going to look like. The Our Whole Lives book will be in the warehouse by December 13th, so it will start shipping that day, and *Sexuality and Our Faith* will begin shipping out on December 20th.

Dr. Melanie D.: Okay, so why did we need this curriculum? Why didn't we just use something for why didn't we just update the adult curriculum, which indeed we will be doing at some point? For now we have a growing population of people who are over 50, and there are very few resources available to them. In fact, I'm only familiar with one book of lesson plans specifically for older adults, but we know that older adults are having sex. Most of them who have partners are having sex at least two or three times a month into their early 70s. University of Indiana found that about 4% of older adults are having at least oral sex into their 90s, and so the rate of people having sex about two or three times a month is pretty similar to that of people who are ages 18 to 59. We also know that adults in this age range consider sexuality to be an important part of their lives, regardless of whether they have a partner.

Dr. Melanie D.: So what happens if sexuality is important to them, but there are no resources and we know that their health care providers are very rarely talking to them about sexuality is that there can be public health ramifications. There can be STIs that go undetected and untreated. There can be LGBTQ folks who have to go back into the closet, because their caregivers have not been trained to be inclusive. They may have family members who don't support their behavior choices, or their relationships, or even their sexual identities. So this is a very important resource for that purpose. We also know that most media messages that you see on TV are about sexual dysfunction. Therefore, drugs that create erections, or lubrication, the assumption that... I mean I'm pro lubrication, but the assumption is that people cannot produce their own under any circumstances. Then there are drugs that are being developed to increase desire when it's not taking into account the natural ebb and flow of desire in older age.

Dr. Melanie D.: One of the things that's important for people to know is that many sexual changes in sexual function and arousal can signal health problems, and so we talk about that in this curriculum so that people know what to look for. Mainly what this curriculum does is it focuses on pleasure, and educates about healthy relationships and healthy choices. It normalizes age related changes. It normalizes wanting to have sex, it normalizes not wanting to have sex. It normalizes being partnered, and being single. The point is to be affirming about sexuality in older age. It also does a great job of helping older adults consider their attitudes about their own sexuality, and the sexuality of others in their lives. Their adult children, their grandchildren and their community at large. Let's talk a little bit about the basis for this curriculum. So one of the things that we need to know as facilitators is what's going on for older adults.

Dr. Melanie D.: Even if you yourself are older, it doesn't hurt to have this formal knowledge. So people who are from middle adulthood is considered 40 to 65, and they're starting to have physiological changes around the ages of 45, although perimenopause can start as early as age 35 in people with uteruses. Then mature adulthood are 65 until death, there are additional changes that happen then. So during this period of time, sometimes people are wondering if what they're going through is normal. They may be used to the physical changes that are happening, but not necessarily to the emotional changes and they might be struck by the social changes that happen. They're often reflecting on their life and their experiences, and considering what kind of legacy they're going to leave. That can be not only a financial legacy or a Scholastic or job legacy, but the legacy that they leave in the hearts and minds of people they love.

Dr. Melanie D.: They may be taking risks because there are changing social norms that they might not know how to assess. So for example, people who haven't been dating for a long time are having to navigate the dating scene, online dating, and the am I really supposed to have sex on the third date? How do I have that conversation about safer sex? So they might take risks they don't necessarily need to take. They're often protective of their privacy, and so this is something that as facilitators you'll be working on bringing out through not helping them disclose anything they don't want to disclose, but helping them explore their attitudes about why certain things have to be private and certain things don't. They tend to be pretty comfortable having pretty strong feelings about right and wrong, and this can depend on the generation that they're born into, but that can get in the way of family dynamics especially with grandchildren. So this curriculum will help them understand that.

Dr. Melanie D.: One of the learning theories that we use is androgogy, which is the process of educating adults. It recognizes that adults enjoy being self-directed, and taking a responsibility for their own decisions. So generally, older adults appreciate process rather than content. So there are a lot of opportunities within this curriculum for people to have discussions, to brainstorm, to create resources that they'll be working with in each lesson. Androgogy assumes that what we're teaching people, what we're helping them learn will be applicable to their daily lives. So when we're talking about things like anatomy and physical changes, and role-plays that they can have with their partners or with their physicians or with their family members, that's all directly applicable to their lives. As with our other levels of the curriculum, this is experiential. So it's filled with activities even though there is a bit more discussion time than in the younger age level curriculum.

Dr. Melanie D.: There's a lot of problem-solving because adults like to do that. So there are quite a few situational what would you do in this situation kind of activities, and they get to find creative solutions to problems that older adults often experience. The last one is self-efficacy. We help dispel misinformation that they may have gathered over the years, and help them become more confident in their own ability to avoid risky behaviors, to practice safer sex, to advocate for just treatment for themselves and for others, and to build equitable and loving relationships. Another of the learning theories that I employed in this was the Allosteric Learning Model. What this is, is that in order to change behavior, people need to really examine their attitudes and their established ideas, and have a little cognitive dissonance. So they know what they think, you introduced something that's maybe a new idea and then they get a little bit uncomfortable with that dissonance, and then they move on.

Dr. Melanie D.: So you're going to be playing an important role in helping them put information into context, and as you choose alternate activities for them to go through as you set up the meeting space that you're using, as you express your own confidence and comfort with the material, you're going to help them settle into a more comfortable place as they move through this, and sometimes challenging information. Okay, so let's talk for a minute about the organization of this curriculum. It's 14, two hour workshops and each of those two hours is broken up with a 10 minute break in between. It's 60 minutes, then a 10 minute break, then 40 minutes. It's very important to maintain that break time in the middle, because it not only is a physical break, but also an emotional and cognitive break. As with our other curricula, the depth and sensitivity of the topics increases as you go along, and as bonding builds in the group.

Dr. Melanie D.: I did write four workshops specifically so they don't mention other content in the curriculum. So most of their workshops build on other, but these four are more independent so that if you wanted to use one of these to test the waters, to assess interest in a longer program, you could offer any of these programs. I would say all of these, the sexuality and the last one is the most sensitive. So I would say start with the other ones first, and then I wouldn't just dive in with sexuality and loss necessarily as the first one, but if you did two in a row, you could include this one. Okay, so let's go over the table of contents, and I'll go into these things in more detail in a minute. So we have four units. The first is exploring ideas of sexuality, and we talk about values, attitudes, and examining sexual scripts.

Dr. Melanie D.: Sexual scripts are the ways we think things ought to be, whether it's the way your body should or shouldn't match the sex assigned at birth, or the way sexual activity happens. The script that you're used to, or the people that you're attracted to. So we look at those things. The second unit is you as a sexual being, and an includes the sexual body, which is the anatomy and physical changes and managing some of those, and sexual orientation and gender identity. Unit three is all about relationships. So we have intimacy, sexual consent and boundaries, family matters, sexuality and loss, reframing sexuality, disability and chronic illness. In unit four, we have changes and challenges to be a body image dating is an older adult, safer sex and sex play beyond basics. Okay, here's our second clue, be sure to write this down. This is continuing the sentence that you started before. Between pleasing and loving, obeying and respecting. Between pleasing and loving, obeying and respecting.

Dr. Melanie D.: Okay, so workshop one, sexuality and values. This is the generally your introduction to the program. This would also be a nice one to start out with to assess interest in going further with the program. First you'll start out by giving them an overview of the entire program, and then you'll create a group covenant which is an agreement of how you'll be together as a group. Again, this all has instructions for you so that you don't have to research how to do this. It's all laid out in the curriculum. There's a warm-up activity and then we talk about the circles of sexuality, which if you haven't taught for a while, it's been modified from what's in the adult curriculum and the young adult curriculum so that you have the five circles of sensuality, intimacy, sexual identity, sexual health and reproduction and sexualization. We have added a circle in the center for values, because all of what we do and think, and the decisions that we make and the relationships that we enter into are effected by our values. So we added that circle in the center.

Dr. Melanie D.: We also added to the intimacy circle reciprocity, meaning that you don't want one person in a relationship to constantly give and give and give. You want there to be equity in that relationship. That was important to us. There is a participant survey, and it's important to hand this out and use the information that you gather. There are questions about why people are in the program. Are they in it to learn something about themselves, or to address some concerns that they have? Are they concerned about someone else, and they want to learn how to deal with perhaps an older partner, or someone that they're a caregiver for? Or maybe they want to learn more about their grandchildren's or their adult child's sexuality, and this is a way to learn about that. There's also a question that asks how they feel entering in the program. Are they nervous, enthusiastic, curious, or some combination of all three? There's also a question about accessibility, and what they need to make the class a success for them.

Dr. Melanie D.: Of course, you'll want to have your space as accessible as possible and there are guidelines for doing that in the curriculum itself, but this question on the survey, you might have people who have special needs that you can attend to with that knowledge. Okay, attitudes about aging is workshop two. All of our workshops have the same layout. You start with a re-entry and a reading, and these readings are wonderful. They're from diverse adults, racially diverse, age diverse, gender diverse. So that's always a good way to start your lesson. Somebody has a microphone on. If you could turn that off, that would be great. Then we have an activity called sexuality timelines, and what they're doing here is they're looking back at moments in their lives when they got messages about sexuality or made decisions. It's not so much about when they went through puberty, or when they first had sex or what age they got married, but more like where their attitudes came from and how they learned about sexuality.

Dr. Melanie D.: The workshop is designed to help people explore the cultural attitudes and personal attitudes that they have about aging. It also introduces the concept of age-related sexual privilege, which is a cultural assumption for many people that sexual expression and activity and attraction are pretty much the domain of younger people. So we want to rattle that assumption a little bit. It does talk about reframing the discourse, and if those messages are negative, how can we change them to make them more possible? It starts out by explaining that about 20% of the U.S. population will be 65 or older by the year 2030. Adults are living longer and healthier, and they generally want to express themselves sexually in a way that appeals to them, and they don't want somebody else telling them how to do that. What we know is that people who are satisfied with their sex lives before they're 50, tend to continue having satisfying sex later on. They just sometimes need help adapting to some of the changes they're going through, and this curriculum does that.

Dr. Melanie D.: When you do something like the timeline activity, we don't ask people to share that with the group. They are going to talk about the process and some of the feelings that came up, and memories that came up as they created that timeline, but the timeline itself will be kept private. The illustration that you see there is from an optional video, where I think it's about six minutes long or so. It is the voices of real older adults talking about sexuality. It's a lovely little video, but that's optional if you have access to the internet. Workshop three is examining sexual scripts, and scripts as I mentioned are, they're self-imposed guidelines about how we see ourselves as sexual beings, and how we see other people. They address our sexual orientation, our gender identity and expression, our desire and arousal patterns, who we find attractive or not. The ways that we're going to be in relationship, and even the logistics of sexuality. Do you start intimate behaviors by one person always having to initiate or not.

Dr. Melanie D.: We develop these all through our lives, they're effected by our faith beliefs, our cultural beliefs, our family values and our own personal experiences. So what you'll be helping people do with this is exploring the scripts that they have, and figuring out well, okay that worked for you when you were 20 and you were first partnered with somebody, but maybe that's not working for you now. Maybe you don't want to be partnered anymore, or maybe you're single and you want to be re-partnered but don't know how, because the new people you're meeting aren't matching the script that you had with other partners in your life. So this is a way to explore all of those things, and then they get to explore what they want to happen now.

Dr. Melanie D.: Workshop four is the sexual body, and field testers really appreciated this workshop because there's lots of information about just basic anatomy, which people haven't necessarily studied for a long time. Also some of age related changes, many of which can be addressed with medical help or sexuality education or sometimes therapy. What we did find in the field test is some people didn't want to hear anything negative involved. They got really uptight about what they perceived as being negative. So when you're facilitating this, you'll want to assure them that not everybody has all of these things, all of these changes. Many people do, many people have these changes, but not those changes. Some people sail through menopause, and some people don't. Some people never have erectile issues, and some people do. So it's important to be mindful that you're presenting all the information that might happen, and then they can use it how they will.

Dr. Melanie D.: The wagon wheel that you see here is an activity, you'll be handing this out to people to fill out. Again, it's one of those things that they don't have to share, but with so much of sexual success if you will, being based on performance. Somebody has to have an erection and somebody has to have lubrication, and somebody has to have an orgasm, or maybe both people or all three people, or however many people are involved. It's very performance focused and the older people get, the harder it is to get their bodies to respond reliably. So we want to help create a way of people experiencing the focus on sexual pleasure, rather than on the goal of orgasm or the goal of performance. So with this wagon wheel, they'll be filling in activities that are pleasurable in and of themselves, regardless of whether they lead to orgasm. So for somebody that might be telling an erotic story, or getting a massage, or having a romantic meal or holding hands, it doesn't matter. They're not goal oriented.

Dr. Melanie D.: The crunched up bowl that you see represents another activity that talks about fantasy, because fantasy is one way that people can enjoy thinking of themselves as any age that they wanted to be partnered with anybody with that they want to be. It's perfectly safer sex and we want to normalize fantasy as a fun, safe activity. So what they're going to be doing is either drawing a picture, or writing some words down to indicate a fantasy that somebody might have, and you'll want to reiterate to people anybody could have this fantasy. It's not necessarily the people writing it down. Then they'll ball up the paper, put it in a bag. You'll shake up the bag, redistribute the papers. They'll unfold them and try to interpret the fantasy that the other person tried to communicate. It's just a fun informative activity. Okay, now we have a workshop on sexual orientation and gender identity, and this is for anybody who's wanting to learn about themselves, wanting to learn about their friends, their family members, their grandchildren, if they have them or just society at large.

Dr. Melanie D.: This features the work of Dr. Jane Fleishman who did her PhD dissertation with interviews with older LGBT adults. So it starts by defining terminology, which of course is always changing. So you want to make sure to talk to your participants about any words that they might be using, and pronouns they might be using. In their own voices is actually quotations that Dr. Fleishman collected during her research. So you'll be incorporating the voices of LGBT folks. Remember that you most likely will have people who are lesbian, gay, bisexual, and transgender in your space so you don't want other anybody. This takes a little bit more time to prepare than other workshops, because you're going to be building a timeline across the wall. You can use newsprint. She has provided a timeline issues for popular culture, what was going on in history on a timeline, and then what was going on in gay history. There are diverse voices, people who are white, people who are of black and of color.

Dr. Melanie D.: As you select items to include on the timeline, be sure to reflect that diversity of the historical things that happen. So you'll be adding things, your participants will be adding things and it becomes alive, this history that goes on. This workshop on intimacy is about the different ways that people can be intimate. So they're looking at not only whether they're partnered, but whether they have friends in their life, whether they have people that they can count on, whether they have people that they can share their heart with and their concerns with. It fosters thinking about healthy relationships and what that means, and you need to be mindful when you're facilitating this that not everybody in the room is going to be in a healthy relationship. They might be partner, but that's not necessarily healthy, and they might not have any interest in being partnered. Some people who have lost partners have just decided that's enough, they don't want to partner anymore. So we don't to use language that makes any assumptions that everybody wants to be in a relationship.

Dr. Melanie D.: The main thing is to help them find intimacy of some sort, because that's just a life affirming thing that can be helpful if they have challenges later on. Okay, so here's your third clue. It is, it's taken me so many years to be okay with being different. It has taken me so many years to be okay with being different. All right, workshop seven is on sexual consent and boundaries. This workshop defines sexual boundaries as personal limits and rules that people use to decide whether, when, how and with whom to engage in sexual activity. It defines sexual consent as an agreement between participants to engage in some form of sexual activity, and it states that sexual violation occurs when sexual boundaries are crossed by a relationship partner, a peer, a stranger, an acquaintance, and that acquaintance could include a professional or paraprofessional caregiver. We know that older adults who have caregivers, whether they're family caregivers or hired help are at high risk for abuse. So it pays to educate people for their own safety, and so they can look out for their friends and their peers.

Dr. Melanie D.: The workshop is based on the premise that any sexual encounter that lacks mutual informed consent is a sexual violation. One of the activities addresses the capacity to give consent when somebody has dementia. That's the activity called consent under challenging circumstances. Consent requires partners to be able to make informed choices freely, without pressure or coercion. It requires open communication that enables partners to honor each other's boundaries through mutual understanding of, and respect for each person's limitations and desires. This also includes resources if people need them for themselves or for partners, and you might consider posting these resources somewhere and just keeping them up for the length of the program, or putting them if you have information for intimate partner violence resources in your area. Sometimes putting those in the restroom is a good idea, because then people can gather those resources in private.

Dr. Melanie D.: Okay, family matters. Family matters is a workshop that is designed to explore some of the challenges that can come up among generations, where sexuality is concerned. It offers ways to improve communication, establish boundaries, understand expectations, and work as an intergenerational team to promote healthy sexuality and family dynamics. For example, what happens if a grandparent moves in with an adult child who has a family? Can you bring a partner home if you're dating? How do you keep your mouth shut if your adult child is dating someone that you don't want to? How do you have a conversation about hey, I'm 60. I can date who I want to date. I don't want your opinion about who I'm dating? There are some scenarios that help them have those difficult conversations. This idea of the loving will, you probably are familiar with a living will. What a loving will is it's not a legal document and the curriculum states that.

Dr. Melanie D.: The idea is to start thinking about just as a living will talks about who you want to make medical decisions for you, a loving will talks about who would you want to make sexual decisions for you in the event that you're necessarily, that you might have some dementia or a head injury, or something that prevents you from having full faculties. So it might not be an adult child, it might be a friend of yours. It might be your physician, it might be your minister, but who do you want to be able to say like, "Okay, you're in longterm care and you have dementia, and can you have a visitor? Can you have a snuggle buddy? Can you have a sex partner?" Very often the adult children are not the best people to make these decisions. So this starts, they take this home, you give them this assignment to do at home. They're not going to share their loving will with anyone in their class, but it's to give them something to think about and to start a conversation with the people in their lives.

Dr. Melanie D.: There's also a section about talking about the role of older adults as sexuality educators for younger people, possibly grandchildren, possibly other children in their lives, but how can you model healthy relationships? How can you talk about that without being judgmental? How can you be open to hearing what's going on with younger people, and with their lives? Sexuality and loss is one of the workshops that we got tremendous feedback on in terms of how deep it goes, in terms of the types of loss and grief that people can experience. It helps people accept the feelings that they have, and to focus on the remaining joys and pleasures that they have in their life. It starts by helping them build a list of the types of losses that might happen in the later years. Of course, we all think about partner loss, but it can be things like losing your driver's license and then that limits your mobility. It might be losing some of your sexual function.

Dr. Melanie D.: It might be losing your teeth or losing your ability to use a computer, because you just can't focus anymore on what's going on. So lots of different types of losses. So they explore those losses, and then they have an opportunity in small groups to use these blocks, and you'll have to make these blocks. You can buy them at Michael's arts and crafts and probably other arts and craft stores, or you could make them if you had a one by one piece of wood and cut them equally. The point is that you'll use the words that we have provided and possibly some that you create so that each side, each block has words on opposing sides, antonyms on opposing sides. So for example, one side might say lonely, the other might say engaged. One might say busy, the other might say unbusy. So they'll pick one of these, and they'll each have three sets of antonyms on each block, and the people can pick which words to use as a speaking prompt.

Dr. Melanie D.: They'll have three minutes to speak uninterrupted to their group of three people, and then they'll have some time just quiet time to process that with a guided meditation. Then they will take a break and start back, and focus on what's ahead and how to have a pleasurable life filled with joy in the future, while still honoring the losses that they have had. So there's an activity in the envisioning your future that is called The Rule of Three, and we go back and we'll use that again later on in the dating workshop. One of the things you'll get mindful of is that this workshop brings up a lot of deep feelings, and while it's designed to help people process through them, having a co-facilitator can help because if you have somebody that gets mired in sad feelings, your co-facilitator can take that person aside and maybe help them out of it while the other person is moving forward with the lesson plan.

Dr. Melanie D.: This is a wonderful workshop, reframing sexuality, disability and chronic illness. It educates and empowers participants who seek to foster or maintain sexual enjoyment, and to embrace their own and their partner's bodies. We're all temporarily abled in one way or another, and as we're older, we might fall in love with a partner who has disabilities. We might have disabilities. Anybody can become disabled at any point, and this has a lot of joy in this workshop in terms of thinking creatively about how to be sexual, regardless of what your body's capabilities are. Be mindful in your group that some people will have disabilities and some won't. Some will have a lifetime of experience of managing disability, and some won't. Some will be sexually active and some will not be. Some will have had trauma, and some will not have been. So you need to manage and keep an eye on what's going on. The workshop is written to help you do that, but use language that doesn't make any assumptions about anybody's capabilities or interests.

Dr. Melanie D.: So this is just a wonderful... It ends with honoring your sexual self, which is a little ceremony to be grateful for the capabilities that one's body does have at any given moment. The body image workshop is a lovely workshop. This is one of the ones that you could use on its own if you wanted. It explores the concept of body image and sexual self esteem, and sexual efficacy. At the core of that discussion is the idea that the more positive we are about our own body image, the more confidence we have, the more empowered we feel to make choices that protect our sexual health. If someone has low self esteem and they just feel well, I'm lucky if anybody wants to have sex with me, they're less likely to ask that partner to use protection, or to get an STI test. If they feel like hey, this is me, I deserve to have healthy sex and I deserve to be healthy, then they're more likely to say, "Let's make sure that we can do that safely."

Dr. Melanie D.: There are assorted reflective activities and drawing activities that helps people be honest and compassionate with their bodies, and honor the way that their bodies have been sculptured through age and experience. So this is just a lovely, lovely workshop and there is a body affirming ritual that the line down there that says my body is a container for love and pleasure, I am a container for wonder and joy. That is a refrain that you will keep reading in between other statements about acknowledging the changes the aging body has gone through. Dating as an older adult, now people might say, "I don't need that workshop, because I'm not dating." This can help finding a friend also. So say what are you looking for? What kind of people do you want in your lives? Are you looking for romance, friendship? Are you looking for just casual sex? It helps people reflect on what they're looking for. They have a little fun practicing creating an online profile, and even if they're not going to go on Match.com or one of those services, they can still be fun and empowering to create a who I am statement.

Dr. Melanie D.: There's some role-playing about awkward first date or first meeting conversation. So there are scenarios that are scripted, and then there's a speed dating activity that can be used to foster skills for both finding romance or just finding friendship. Workshop 13 is about safer sex, and it's your basic safer sex lesson. There are some fun stuff in it, like tips for putting on a condom with your mouth if you're, these older adults do a lot of oral sex. There's an acknowledgement that external condoms or condoms that go on a penis are not always as easy for older adults to use, because penises can get hard and soft in the same sexual interlude. So internal condoms can be useful for that, because they don't require a firm penis to be used. Please try to bring in different types of condoms, so that people can feel the difference. They're not the old thick latex of [inaudible 00:42:30], there's lots of new materials that are thinner that transfer heat a lot better.

Dr. Melanie D.: This workshop includes activities and scenarios for people of all sexual orientations, and all types of bodies. So it's inclusive. The images that you see here are from a little video, that's a 30 seconds long commercial for safer sex. It's just nice if you have internet to use it to just show the impact of STIs on older adults. Then our final workshop is sex play beyond basics. What it does is it explores creative ways to promote and enhance sexual satisfaction through the use of sex toys, also called adult products or adult intimate products, and creative sexual expression which may include Kink. Increasing numbers of older adults are participating in Kink, or BDSM. BDSM has a lot of different definitions that are all addressed in the curriculum, but basically it's role playing with who's in charge, and who's got more power and who has less power and it's all consensual. The focus on this workshop is that it builds comfort. Sorry, my dog's going crazy.

Dr. Melanie D.: It builds comfort with the idea of using adult aids, and some creative ways of talking about sexuality. One nice thing that includes is the safety and informed consent concepts of the Kink community, where nothing happens without thorough conversation about the limits and the boundaries, and what somebody wants and expects and safe words. You can bring in guest speakers for this. You don't have to buy a lot of products, although we do recommend having at least one vibrator on hand to pass around. You can get those for under $20 at most pharmacies today, but you could take pictures or if you have access to the internet, there are recommendations for safe internet shopping sites that don't have a lot of naked people on them. We have vetted a list of resources, [inaudible 00:44:45] sites that people can go and shop without being embarrassed. Okay.

Dr. Melanie D.: We do have a Sexuality and Our Faith companion to this edition. I would love it if everybody incorporated Sexuality and Our Faith throughout the whole thing. What it does is it puts the secular OWL content in the context of our UU faith. That's part of our faith formation. Of course there's half of the book is UU, and half of it is UCC and you're welcome to borrow from both halves. Especially if you have people from outside the congregation coming into you, whether you're UCC and you have UUs coming in, or Muslims coming in, or Baha'i, whomever. You can incorporate their belief systems into your centering circle by having them bring in something that represents their faith. Any discussions that would be Christian from the UCC side or UU, you can ask your visitors to bring their own faith traditions into the discussion as well. It's a way of reaching out, and broadening the base that you have in your program.

Dr. Melanie D.: Implementation options. Of course, you have the four standalone workshops that I mentioned. The attitudes about aging, family matters, sexuality and loss and body image. You can do this weekly or twice monthly. You could do two workshops in one day, but you'd want to have a pretty long break in between if people need to get up and walk around, and clear their mind before they do another one. You could also use it for a conference or a retreat planning. So there are lots of options there. Here we have the fourth clue. Add this to your last sentence, and with being this alive, this intense. And with being this alive, this intense.

Dr. Melanie D.: Okay, now we're going to talk about some facilitation. The biggest comment we got from the field test was that older adults like to talk a lot, and sometimes especially if facilitators are younger than the participants, they were hesitant to cut off conversation. So part of it is just to acknowledge that there's a lot of stories in the room, lot of wisdom that can be shared. Post an agenda so people know what's going to happen in that workshop, so they know what's coming up and that you want to continue to flow through it. You can encourage people to maybe meet for coffee or tea after the workshop, or you could actually intentionally set up some kind of a coffee cloche for people to participate in so they can continue these discussions. It's important not to feel intimidated when people want to talk and talk and talk. One of the things that I did do is I cut back on the number of processing questions, so that people can go deeper into the ones that remain there.

Dr. Melanie D.: Try to avoid assumptions about who's in the room or who's able or who's not, or who's gay or who's not. Who's whatever culture or race. Just in general, let people tell their own stories. Make sure that everything is accessible. You might want to have some people walk through the space beforehand. Maintain those breaks, it's really important to maintain those breaks. Modify your speaking pace. You might want to talk a little bit more slowly than you normally do. I've been talking fast during this webinar, but when you're working with your workshop, you might want to take an even slower pace. You want to modify your volume. You don't have to shout. People who have hearing aids, that's really worse if you intentionally speak really loud. Just check in once in a while to make sure that people can hear you. If they have trouble, consider getting a wireless mic for the space that you're in, or moving to a space that might have better acoustics.

Dr. Melanie D.: Well there are preparation instructions to make posters, or use dry erase boards. Also, use the handouts that are provided. What we found in the field test is for people who either had short term memory loss or who had vision issues or hearing issues, it was really helpful to have those handouts. Okay, how can you use Our Whole Lives in your community? Well, one of the things we can say is that OWL is gift that we can offer to the larger community while introducing nonmembers to our faith, our values, and our inclusive welcome. This goes for UCC and UU congregations and churches. So one of the things that you can think about is that Our Whole Lives is providing something that no one else is providing. It's positive. It's life affirming. It's life saving education in a faith context. Of course, if you're teaching this just for the community, you wouldn't be using the faith materials. It can help you begin a program if you've never offered Our Whole Lives before.

Dr. Melanie D.: Look at the congregation, look at the organization that you're with. What's the age demographic? Odds are good that it's 50 and above is a large number of people in your organization, and it's not a bad idea to appeal to them and their friends. Invite them to bring their friends. You can also consider local organizations that serve older adults like senior centers, older adult communities that might be in your area. Other faith communities. Sometimes Social Service Agencies. If you want to reach out to the community, start having conversations. You might want to create an OWL for older adults vision team that can go into the community, and see who you might affiliate for this. I'm going down to Florida in March to do an Our Whole Lives training for three congregations that have a lot of people in the villages in Florida, because most of their congregation are people who live in those communities. So you never know where people are who might want this.

Dr. Melanie D.: After you submit your clues, and you get in our databases being approved for OWL for older adults, well you already qualify if you're a young adult or an adult participant, but you'll really want to subscribe to the facilitator lists because there will be a lot of people starting the program in the spring, and you can get how-to information, what worked in your area, how are you reaching out into your community? Where did you find these supplies? So it's a great opportunity if you're on this email list. If you are UU, or Canadian UU, or UCC, you can participate in the email list that I monitor for the UUA. If you are from the UCC, UU Canadians or anybody else in that community, then you can join the Yahoo group that Amy Johnson hosts for the UCC. You can reach her at owl@ucc.org for an invitation to that group.

Dr. Melanie D.: Here's some context for you, for all things OWL. There's my email address is mjdavis@uua.org, you can also reach me at owl@uua.org. Amy Johnson, who is my peer at the United Church of Christ, JohnsonA@ucc.org or owl@ucc.org, and then you have uccresources.com to buy OWL for older adults, or the UUA bookstore. Here is your last clue and I'm going to leave this up while... We'll see if there's any questions in the chat box. The author of the quote that you collected was Eve Ensler. Eve Ensler. Eve is the person who wrote The Vagina Monologues, and so you can email your complete quote to owl@uua.org and owl@ucc.org. Susan [inaudible 00:53:45] chat that I need to be aware of?

Susan Lawrence: Yes Melanie, we have two questions. Lincoln asked, "Will you be creating a separate list, an E-list for older adults or will you continue the adult OWL list?"

Dr. Melanie D.: It'll all be combined, and the reason that we're combining it is that all of our trainings since late last year have included young adult and older adult together. So they're all going to be the same people.

Susan Lawrence: Elizabeth asks, "You mentioned creating a loving will. I've seen that term used for so-called pro-life advanced directives. People who want all life saving measures."

Dr. Melanie D.: Well that's not how we defined it in older adults when we were writing this. This is actually a term I was introduced to by Amanda Barusch, who has a book out on love stories in older age. It's not a copyrighted term, so you don't have to worry if you're using it in our context. You just clarify the context that we are using it for.

Susan Lawrence: I don't see another public question. This is time for people to write them in the chat. If you've got something, we would appreciate it. We have a question. What is the ideal class size for the older adults?

Dr. Melanie D.: Right. 10 to 15 would be great. When you get fewer than 10, it's hard to do some of the activities. It's hard to break up into small groups. As with OWL, the other age levels we are having anonymous question box. If you only have four people in your group, it's hard for anybody to be anonymous, but yeah 10 to 15 is a nice size. I would say if you get many more than 15, like if you're heading toward 20, you might want to offer two sections of it. I know that can be hard in terms of finding facilitators for that, but you might want to offer one in the winter and one in the spring, or one in the spring and one in the fall so that you don't have too large a class. You want everyone to have an opportunity to really participate fully.

Susan Lawrence: Thank you, Melanie. We have a question, any recommendations on partners wanting to be in class together?

Dr. Melanie D.: Sure, why not? What I would do if you have partners though is when there are small groups, encourage them to split up so they're not always in each other's group, because they might... Sometimes I used to teach ballroom dance and I would find that they would nitpick each other and correct each other, and it was really better to mingle people so that they didn't always answer each other's questions and tell each other stories.

Susan Lawrence: We have a question. Will you be having any activities or meetings at GA this summer?

Dr. Melanie D.: Well, that's up to the GA planning committee. I have actually proposed a workshop on how to use Our Whole Lives for older adults in the community. So it would be a 60 or 90 minute workshop on how to do that. So we'll see. Fingers crossed.

Susan Lawrence: Does the class need two facilitators?

Dr. Melanie D.: Yes. Yes. The reason being is first of all, it's a lot of work, a lot of energy to keep up pace for two hours. There's prep work and it can be helpful to have two people working on prepping different parts of the lesson. Also, it gives different perspectives. It's not that you have to have a man and a woman. We try to have people who have some kind of difference, so maybe somebody's black and somebody's white, or somebody is a little bit older and somebody a little bit younger, or there could be gender differences. Borrowing that, you want to have two people so that if somebody needs some special attention, one person can attend to that person while the other one is facilitating. One person can hand out handouts, while the other person is facilitating. It just works a lot easier with co-facilitators.

Susan Lawrence: Next question. Should we invite folks to self identify as older adults, or guide them to a course?

Dr. Melanie D.: Well I would let them, anybody who wants to take the class take the class. We know in past history, there have been congregations that have successfully offered OWL adult to multiple generations, and it has worked just fine. You might have somebody who is 45, but has a 60-year-old partner and why couldn't they be interested in the topic? They might be a caregiver or a helping human services professional who wants to learn. So I would promote it as the curriculum as directed to the needs and interests of people 50 and above, but it's open to whoever wants to take it.

Susan Lawrence: I answered a question in the chat that it's December 13th that the books will be starting to be shipped out, is that correct?

Dr. Melanie D.: Yeah, and December 20th for Sexuality and Our Faith.

Susan Lawrence: Okay, great. Some folks want a link to order books, and some folks want the link to where to find the slides and the webinar once we've recorded and posted this webinar, and the slides that go with it. So I'm going to have to stop talking, and monitor in the chat in order to type those things in.

Dr. Melanie D.: Okay, well you don't have to do UCC resources and UUA bookstores on the screen right now. So it's just if you go to the UUA bookstore, you want to look under church resources, and under that look under Our Whole Lives. I'm not quite sure how they order them, but you'll have to scroll through to find OWL for older adults. It's not going to be at the top, because it's usually the seven to nine curriculum at the top. So scroll through and you'll find OWL for older adults, and keep scrolling and you'll see Sexuality and Our Faith for older adults.

Susan Lawrence: Okay. I think I missed a question. All right, this was posted to me privately. It doesn't look that private of a question and it's from a group. So I'm going to go out on a limb here and share it publicly. The question is, how have you handled class attrition due to busy lives competing priorities of adults?

Dr. Melanie D.: Yeah. Well, this is certainly a question that we deal with all the time with the seven to nine, because it's 25 to 26 weeks long. What I would suggest you do is when you're doing your group covenant in the first session, if you're doing more than one session, have that discussion about the benefits of sticking with it with the impact on the group if people just stop coming, but understand that older adults, it's not just a matter of busyness. They might have partners who get sick or they themselves might need to take some time off for health reasons or other reasons, but discuss that upfront about that this is a wonderful opportunity they won't get anywhere else. Then if they can commit to coming, it's only 14 classes. So it's not too onerous a commitment.

Susan Lawrence: That looks like all of the questions for you.

Dr. Melanie D.: Great. Well, if you have other questions, you have my email up there, mjdavis@uua.org or owl@uua.org, and you're welcome to contact me. Please do with that three [inaudible 01:02:32], I'll go back to the slide that has the way that you find the email. You can also go just to uua.org and type in email lists, and you'll be wanting OWL-adult and you can self subscribe. Give it about a a week or so, because we need to get your clues and then have time to enter you into the database as... Actually as long as you're approved for young adult and adult, you can get onto this list regardless of whether we have your clues, but send your clues in and self subscribe and you'll be on the list.

Susan Lawrence: Actually that's typed in earlier in the chat. If you want to scroll up, you'll find that link to the UUA lists.

Dr. Melanie D.: Just remember it's OWL-adult is the email list that you want to subscribe to.

Susan Lawrence: There is not a separate one for older.

Dr. Melanie D.: Right. Thanks so much for participating everybody. I'm really excited to kick off this program. The field testers loved it. In fact one of the things that we learned is we require field testers to sign up for at least half of the workshops to test, to give us feedback on. Quite a few sites not only finish the seven that they agreed to test, but asked for more because they wanted to complete the whole program. I can't tell you how positive and affirming the feedback was, and I know that your groups will love this program.

Susan Lawrence: Thank you everyone.