

Information on sexuality

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About this brochure

The purpose of this brochure is to inform participants in the Psycho-education group module about sexuality. The brochure covers not only the physical and psychological aspects of sexuality but also values and norms that apply in most Western countries. However, many offenders come from a culture in which, for example, women are considered docile, homosexuality is considered abnormal, and sexual contact with physically mature minors is permitted. However, a discussion in the form of an exchange of views that may lead to a less discriminatory attitude is often not possible. Therefore, participants will have to be explicitly and repeatedly reminded during group meetings that their views are contrary to the laws of the country in which they live. Some participants will not want to accept the brochure. Experience has shown that insistence does not help. Sometimes it makes sense to ensure that the brochure remains available to all participants in one way or another. Curiosity often wins. When discussing the topics, it is essential that trainers do not moralize, but limit themselves to factual information. Sensitive subjects must be tackled with the necessary tact. When drafting the text, care has been taken that sexually violent offenders cannot find a justification for a sexual crime they have committed or their deviant sexual interest.

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1 The art of making love

1.1 Making love without having intercourse

For people who met each other recently, it is an excellent choice not to have sexual intercourse sex right away. This is especially true for beginners: there is still a lot to discover, and it is fun to do that step by step. But for more experienced individuals, it is also a good idea to first get to know each other better. Having sex does not always have to start immediately with intercourse.

Step 1: Touching

Touching is usually the beginning of sexual excitement. If you are touched by someone for the first time, the sexual stimulation is extreme. It may concern holding, stroking the face, a hand on a leg, it is all so exciting that your heart speeds up and you become warm entirely.

Step 2: Kissing

Kissing can be fantastic unless it does not happen well. During kissing our hands hold the other caressingly. Start softly, careful, and playful, and open your eyes occasionally to say if you like it. Kissing is not learned at any school nor at home, so have you usually to rely on your intuition. Some people really do not know how to kiss and therefore have to learn.

Step 3: Stroking

Stroking the breasts and other body parts that are usually covered is the next step. Softness, prudence, and playfulness are essential. In a movie, it might seem thrilling as people lose their head in their excitement, but the reality is different. Such scenes only show how little those filmmakers know from having sex! Always be aware of what you do and enjoy it.

Step 4: Bringing each other off

After a few kisses and making love, you are usually ready to bring each other off by touching and stimulating the sexual organs. If you both agree that sexual intercourse is not necessary yet, then that is the ideal way to have beautiful sex without worrying about pregnancy or infections.

A woman gives a man an orgasm

The first time that a woman holds a penis is exciting and maybe a bit frightening too. Remember that the penis is very sensitive and fragile and do so carefully. Do not start

immediately with withdrawing the foreskin, but just hold the penis gently, move a little with your fingers and look at what you do. Probably the penis is already hard and big because the man got excited by kissing and making love. Is the man very excited, it will only take a while before he gets an orgasm. The sperm comes out in a few strokes. It is useful to have some tissues or a handkerchief on hand with which you can wipe away the sperm. The sperm seems a bit on egg white and can easily be washed away with warm water.

A woman can masturbate a man by using her hand to move up and down over the penis. First, she has to do it gently, until it turns out that it can be a little harder, after which he finally comes. Usually, a lot of training is needed before she can do what he likes. Does a woman have more experience, then she might want to kiss the penis and take it into her mouth. Then you can they let the man cum by licking or with her mouth make a pumping movement. She can also gently massage the balls because they are sometimes sensitive.

A man gives a woman an orgasm

A man can masturbate a woman by moving his fingers very carefully over her vagina (actually this is her "vulva," but that word is hardly used: colloquial we talk about pussy or slit). By the excitement of kissing and making love, she is probably already moist, if not, then he must first wet his fingers with some spit. The most sensitive spot of a woman is the clitoris. At first, he must be careful and entirely not rubbing too hard or too fast. If he feels that she is getting excited, he can gradually step the rhythm up until she comes. It is not easy for many women to reach an orgasm in this way. They often follow in masturbating their own technique, and without asking her, a man cannot really know what works for her. Some women like it while masturbating with one finger in their vagina or a finger tickling their anus. Or they can only come with their legs tight against each other or on their stomach. You can talk to each other about all these things.

A man can also bring the woman off by kissing and licking her vagina. Even then it is essential to do it carefully in the beginning. She can let him know if she likes it. Oral sex is safer than having intercourse. Oral sex excludes pregnancy, and the chance of infections is smaller. Without having intercourse, you can have very nice sex.

When you have intercourse, you can increase the intimacy if you take the time for it and regularly discusses what you like. It often happens that a woman cannot

come by just having intercourse. In that case, a hand must also be used. You do not need to come at the same time. Everything is possible, and the only thing that matters is that you both feel right about it. A "quickie" can also be fine, but then more experience is needed. You can do well with lovemaking without having intercourse.

1.2 Having intercourse

We speak of "f....." as the penis goes into the vagina or anus. The medical term is having intercourse or coitus, meaning "coming together." Other usual names are "making love" (friendlier, but less clear) and "going to bed with each other." One of the most common complaints among young people is that the man comes much too quickly, while the woman is not yet excited enough and therefore cannot get an orgasm. Especially among women, quite common having intercourse is painful. That is why it is advisable to start by making love without having sex. Then, the woman can come by stroking her (fingering) or kissing French.

Foreplay

Even if there is going to have intercourse, first there must be making love so that the woman can take sufficient time to get excited. We call this the "foreplay." She must be sufficiently moist and really like to feel his penis inside. And he must be adequately relaxed and excited to bring his penis into her vagina without the fear that he will come too soon.

Position

In the beginning, the excellent location is when she lays on her back with raised legs, and he beside her. The insertion of the penis can occur with his or her hand. Maybe she should be keeping the inner labia apart. Is the penis inside, then the man should not immediately start bumping. The trick is to enjoy quietly and not to move too much. The man can caress and finger her. The less he is focused on himself, the more pleasure he can give her, and he can leave his penis longer in her vagina without the urge to go bumping and to come.

Coming

In this way, the woman can reach an orgasm while she has the penis inside. Maybe she should stretch her legs and squeeze them. He can postpone his orgasm until she has reached orgasm. When it does not work the first time, then there is nothing to worry about. The next time, you just try again.

The most important principle is that you mainly enjoy being together and

getting excited. Coming is not a must. That will occur when you get excited, just like when you do it with yourself. Some experienced lovers can postpone their orgasm until the other comes. Then they come at the same time. But one after another can just as well, and sometimes the one reaches an orgasm and the other not. And you can also have intercourse while both don't get an orgasm. Many people make "their performance" to a problem because of ignorance or doubt.

When you use a condom, after the cumshot and when the penis slackened you have to remove the condom with two fingers around the edge so that it does not slide off the penis. Then you redraw the penis from the vagina. Then you can take off the condom (some lay a knot in it and put it next to the bed), or you can let sit during the "after the play" during which you are enjoying.

Experience

Once you have gained some experience, you can receive each other's signals better and unexpectedly do a "quickie." Unusual places are extra exciting. If it is good, she will come ready. That can be through the intercourse itself or by fingering while the penis is inside. This will automatically lead you to other positions. If the man is heavy built, she may find it most comfortable to sit on top of him. On the other hand, he can sometimes be intensely craving to lie between her legs. Then he must lean on his elbows and knees so that she can breathe and move freely.

1.3 Masturbation

Masturbation means that you get sexually excited and reach an orgasm or satisfaction by your own actions. In the case of men, one sometimes speaks of "jerking off, and in the case of women of "fingering." Most people masturbate from time to time, and men usually masturbate more often than women. People used to think that men do it more than women, but that is not true. Most people start masturbating before their twelfth. But if you started later, you will not have to think that you are abnormal.

Sexologists agree that masturbation is harmless. Stories that your sex organs are deformed or worn out, or that you would later become impotent or frigid are myths. For men, it may even significantly decrease the risk of prostate cancer when they come regularly. Therefore, masturbating is healthy!

Most people also continue with masturbation when they are married or have a relationship. That is very normal and no reason to feel guilty. Men usually masturbate

through stroking or rubbing their penis with a few fingers or with the whole hand, or just moving through the foreskin rhythmically over the glans until they come. In some cases, the foreskin is too narrow.

Women often masturbate with one or more fingers to rub around their clitoris. They can also suffice with tightening their muscles and pressing them against their crotch. Some work quickly during masturbation, others prefer slow movements. As a rule, it is true that the closer you approach an orgasm, the faster and more powerful the actions will become. Women can sometimes have an orgasm several times in a row, during which their sexual excitement hardly decreases. Men are usually unable to come multiple times in quick succession.

You have to be well aware that the masturbation technique of the opposite sex varies from person to person. Therefore, it is not right to always stick to a particular method, that, for example, you learned from a book. It's better to give yourself the time to find out how your partner would like it.

Variations and fantasies when masturbating

It is not uncommon to use aids when masturbating to increase your pleasure. For example, men can invent everything that serves as a replacement for the sheath. Also, it sometimes happens that they look in the mirror while doing it with themselves. Both sexes can also use tools such as massage devices, vibrators or the warm water jet of the shower head.

Masturbation is usually accompanied by sexual fantasies, a common and in most people harmless phenomenon. Images can vary from person to person. Violent fantasies or fantasies about sexual contact with minors or animals are undesirable because they can incite sexual offense behavior. People who find it difficult to separate fantasy and reality should be careful with what they fantasize about.

Some people have difficulty reaching an orgasm. They do their utmost best but only get hurt in their hand and otherwise not much happens. Or they finally give it up out of boredom. Sometimes masturbation can be painful, for example, because of a too-tight foreskin or an inflammation. In that case, the physical cause must first be taken away. If coming is essential for you to, for example, because it does not work when you go with someone to bed, then practicing with a massage device may be a good idea.

It is not unusual for children, especially boys, to gain sexual experience with other boys. We see that this happens mainly in the puberty. About half of all boys

sometimes jerk themselves off together with one or more friends. They masturbate themselves or each other. Joint masturbation is less frequent among girls, but they do, for example, like being close to each other by sleeping in the same bed. Many people preserve pleasant memories from such early sexual experiences to which they remain desiring. Some of them discovered through those experiences that they have a sexual preference for their own sex.

1.4 Anal sex

Anal sex as a variation can be very satisfying. About anal sex, there are many questions. The most essential condition is that both partners want to have anal sex. With experienced lovers, this usually appears automatically. After all, they have tried all kinds of variations, and as a result, they are of the same mind.

It is good to know that although the anal sphincter muscle is tighter than the vagina, it can stretch sufficient to enclose the penis. Of course, it does matter how big the penis is and how small the anus. Therefore, it regularly occurs that anal sex does not work or is too painful. If it succeeds, there are usually no adverse effects associated with it. The anal sphincter recovers after the penis retreat. Also, anal sex is not related to hemorrhoids or other disorders. However, the rectum contains significant amounts of bacteria that can cause infections in the vagina. That is why it is not advisable to have anal contact followed by vaginal contact.

It is almost never pleasant to have unprepared sex and specifically anal sex in a flurry of horniness. You have to be cautious. For instance, the man can put his finger while making love close to her anus. Sometimes that can increase her excitement. A very light crab movement on her anal muscle can give a nice explosive effect. Also, she can do the same with him. The next time he can put his finger a little longer on her anus, and then carefully insert something. Make sure that your finger does not have a long nail and that the anus is sufficient moist (preferably due to its natural lust fluid and otherwise saliva or lubricant can be used). Especially if she initially has hesitations for the preparation of anal sex, the necessary time is needed. You have to think concerning months rather than weeks. In that period, she can also prepare herself by inserting a finger or object. In the first instance, take a small object and pay attention that it is not sharp.

General tips for anal sex

- You can start by just making love and having intercourse, but once you have anal

sex, then you must avoid vaginal contact afterward.

- Good hygiene is vital in anal sex. Provide a clean penis, a clean hole, and an emptied rectum.
- Use a lot of lubricant for anal sex. Besides the natural moisture, saliva or lubricant from a tube can prove good services.

1.5 Use of condoms

It is essential to know how to use a condom. The condom not only serves to prevent pregnancy but also avoids infections (STD's). In fact, applying a condom is very easy. Some people hate condoms. The reason is that they do not know precisely how to use them or because they do not dare to buy them. There are also people who find that "the feeling" is very different, or who do not see the use of condoms romantic.

Condoms are a typical male contraceptive, and the first responsibility for safe use is with the man. The best thing is that he first tries the condom on himself, for example during masturbation. He will then soon discover that the feeling is the same as without a condom.

Putting condoms on

It is useful to put the condom on when the penis is still weak. Then he can make the penis stiff and notice that the condom makes no difference. Also, he can do this before he is making love with a woman and it is not necessary to interrupt the lovemaking by putting on the condom. Moreover, it is for a woman sweet to note that a man immediately takes such a precaution. While putting the condom on, squeeze the tip between your thumb and finger. This space serves to catch the sperm. Then you roll the condom as far as possible over the penis.

The condom can of course also be used during sex. It needs only a small break and can be introduced as part of the love game. Also, it is useful for the woman as well when she learns how to put a condom on. It is not difficult, but you have to handle it with caution. Make sure that the condom is moist on the outside before you enter the vagina, otherwise, irritations may occur. Most condoms are provided with a lubricant, but with spit or a lubricant that is available at the drug store, you can make it extra moist. If the penis by for whatever reason becomes weak in the meantime, it can give a problem to regain an erection with the same condom. That is a nasty experience, which makes people dislike the use of condoms.

Sometimes after the orgasm the penis slacks. If the man notices it, he must hold the condom at the top and gently pull his penis out of the vagina. As a result, it can be filled condom does not slide off the penis and end up in the vagina. You can drop the full condom on the ground and clean it up later. Never throw it in the toilet, which causes blockages.

2 Difficulty in making love

2.1 No desire to make love

From a very young age, it appears that women are looking for sex less than men. Men have a much larger dose of the hormone testosterone. On the other hand, we find in women especially the hormones estrogen and progesterone that have to do with becoming pregnant. To get pregnant, women do not necessarily need a lot of sex. The lack of the male hormone testosterone is a natural cause for the more moderate sexual desires of women.

Health status also plays an essential role in sexual desire. Diseases, disabilities, pain, depression or feelings of inferiority, anger, or resentment can all be common reasons for diminishing lust. But medicine use can also reduce the desire to have sex. This even applies to the contraceptive pill.

Because of bad experiences, someone can get a dislike of sex. Something as simple as an unreliable contraceptive may already play a role. Also shame about your own body, dislike of the partner or fear of STD or pain during sex, are known as lust restrains.

Magazines and articles are full of advice to get more desire to get sex. For example, people need to try something new, dress sexy or improve mutual communication. Some people call in the help of a sexologist, who work to improvement through conversations or psychotherapy.

There are also people who are not willing to talk about her lack of lust, they just want a remedy to get rid of the problem. But unfortunately, such solutions do not exist. Therefore, you will have to do something about it yourself. Often it already helps if you both do your best to improve the mutual atmosphere in bed. You make sure you're smooth-shaven, smells beautiful, clothes well, you behave sympathetically, there is music on, and so on.

2.2 Pain during sex

Pain during sex is much more common than people think, and indeed not only among women. Pain almost always diminishes the pleasure of sex and can lead to avoidance of sexual contact. It concerns disorders of the sexual organ or its surroundings. Pain can be acute or chronic, light or severe, and can occur in different places in the beginning, during or after having intercourse.

Different causes can exist for pain in women

- In the case of pain in the vagina, there can be a bladder infection or an inflammation in the urethra or the vaginal wall.
- During and after menopause, the vaginal wall becomes thinner, drier and more sensitive, increasing the risk of pain.
- If the pain occurs deep in the vagina, then the cause may lie in inflammations or other abnormalities in the pelvis, the uterus, or the colon.
- With a particular position ("doggie"), too deep penetration may be painful to the woman.
- Most common is a pain in the vulva (the opening of the vagina). Possible causes are the presence of a hymen or a remainder of it, irritation due to lack of hygiene or too much washing with soap, fungal infection (candida) or an STD (herpes, trichomonas), or hypersensitivity to rubber condoms.
- Burning pain can also occur at the front of the vagina with tight clothing, cycling or in all sorts of other situations. The vulva is then red and sensitive. This is called "focal vulvitis" or "VVS" (vulvar vestibulitis syndrome). If none of this can be seen, one can think of the so-called "kamsymfyse problem." The penis cannot enter because preventing it by the (comb-shaped and very broad) pubic bone. Making love with raised legs is the solution.
- Finally, a common cause of pain during sex, especially in the beginning, due to "vaginistic reaction."

Pain complaints are less common in men than in women

- The foreskin has adhered. Sometimes the man has, for example out shame, never even pulled the foreskin over the glans, even not during masturbation. In that case, the first attempt at sexual intercourse is a painful experience. Below the foreskin has then collected smegma. The man can solve this problem by sliding the foreskin every day a little further and then clean the glans. There may also be a too short frenulum (that's the nub that connects the foreskin to the penis).

- During intercourse, acute pain may occur, and the frenulum can rupture and bleed. After recovery, it is going better. A too short frenulum can be remedied by a small operation
- The man suffers from foreskin stenosis. This is a too tight and stiff foreskin with insufficient stretch. The condition must be resolved operatively.
- There may be paraphimosis. Then, the foreskin behind the glans is rolled up causing painful swelling. In this case, too, medical intervention is necessary.
- The man is sensitive to the high acidity in the vagina. The acidity can be reduced with tablets or rinses. Use of condoms may also offer a solution.
- The ejaculation is painful. This pain is caused by stasis in the prostate if the ejaculation is suppressed or stopped for too long. In older men, a low level of the male hormone testosterone may be the cause.
- Pain during intercourse and pain during and after coming may also be caused by tension in the pelvic floor muscles. Targeted relaxation exercises may provide relief.

2.3 Premature ejaculation

Premature ejaculation often occurs during the first intercourse. Once you are experienced, you are usually better enjoying each other sufficiently before you ejaculate. However, about 5% of men still have the problem that they come very quickly, sometimes almost immediately after the penis is in the vagina. When the man has suffered from this since his youth, then we are speaking of "primary ejaculatio praecox." This may indicate a too low concentration of neurotransmitters in the nerves, such as serotonin. Antidepressants such as Prozac and Seroxat can facilitate the transfer of information between nerves by increasing serotonin levels. For that reason, antidepressants are used for ejaculation delay. Prescription by a physician is necessary because the exact dose has to be ascertained. There are also condoms that contain a slightly narcotic substance on the inside that reduces the sensitivity of the glans. That is how a cumshot is postponed. Finally, there are ointments which should be used in combination with a condom.

Usually, men come faster than women

Of course, that does not need to be a problem, but a man usually likes to stop his orgasm for a longer time. The partners prefer to come at the same time, or at least it's nice when she is satisfied before he arrives. An ideal lover is a man who satisfies

his partner fully and let her enjoy being together without a sense of haste. The penis must then remain in the vagina for some time. Sometimes the woman needs more time, in that case, the man might have the feeling that he was too fast. But still, there can suddenly be a moment that he can no longer stop his orgasm while she is excited but not yet able to come. Therefore, both can get the feeling that they are failing, which is frustrating.

The essence of the problem is that it is the man's natural inclination to come faster than the woman. In many cases, the right information is sufficient to go to a solution. For example, you can make love excellent without having intercourse, or that coming at the same time is a wish but not a necessity. You should find ways that are satisfactory to both. Premature ejaculation can be prevented by using the "squeeze technique."

2.4 The squeeze technique

Coming too quickly is a relative concept. Of course, it depends on the time that your partner needs to reach orgasm. The problem is therefore not tied to a specified period. Do you suffer from it, then you can build up a kind of endurance with the help of medication or when you don't want to use medicine, the squeeze technique. In this way, you can gradually stretch the time to a cumshot. It does not work at anyone, but it's worth a try. You can do it together with your partner, but also only during jerking off.

The squeeze technique is as follows. Go together to a comfortable position sitting naked on the bed. Your partner caresses your penis until it becomes hard, and then grabs the penis with the thumb just under the tuft, and the index and middle fingers on the other side. By squeezing firmly for three or four seconds, the urge to come disappears, and the penis weakens slightly. After about a half a minute, she starts again: first stroking and then squeezing. As long as you feel that things are going well, you do this sometimes in succession, but no longer than ten minutes. Afterward, you can do something else or go to sleep. Repeat this recipe four or five times, every time with longer intervals. You let your partner squeeze when you indicate that you are getting excited, and that can always be a little later.

2.5 Not being able to have an orgasm (Anorgasmia)

A large number of women never come with a partner while they can quickly bring themselves to an orgasm, but what is the essential difference if you do it with somebody? In any case, you should only start when really feel like having sex. Sometimes the problem is that you are less free than when you are alone, and that makes you less easily getting excited. But often it is insufficient effective stimulation. The other does not do it as you are used to, and at a particular moment, you start to doubt yourself. As a result, you get very fixated on the thought that you must come, and gradually you become a kind of spectator of yourself. Over time, that develops to a fixed pattern. For breaking that pattern, you would have to start all over again. For that, we have some tips:

- Tasty and satisfying sex does not have to lead to an orgasm. What matters is that you are both active, let your lustful feelings the free play course, and enjoy it both. Therefore, the lovemaking itself must be central, not the orgasm.
- Of course, it is also great to come with someone. But an orgasm is not a must, it does not necessarily have to be at the same time, and it does not have to be the result of intercourse. If you can satisfy yourself in your own way, please do so with your partner, while you are making love.
- Remember that this way of making love is no less than when your partner would come. It can be beautiful when someone pampers you and are having an orgasm. You will feel freer when you learn to satisfy your partner. Then it can happen that at a given moment you are coming by a different stimulus than you are used to and ever thought possible.

2.6 Erection problems

Erectile dysfunction may sometimes be complicated, and then its cause has to be clarified by further investigation. In general, we distinguish two types of erectile dysfunction. The first type always occurs regardless of the circumstances, the second is limited to specific situations. In the first case, for example, someone may have had an accident with the result that the nerve impulses no longer reach the penis. The erectile cells of the penis will be insufficiently filled with blood, and the penis does not become erected. With the second type, when the disorder occurs only occasionally, the situation is entirely different. In that case, the man cannot get an erection with specific (or all) partners, or under particular circumstances. On the other

hand, he does have for example a morning erection, or he gets a stiff penis smoothly during masturbation. Physically there is nothing wrong, but sometimes he fails to get an erection because of certain feelings and thoughts. Sexologists call it then “psychic” or “situational.” This kind of erectile dysfunction happens most of the times.

There is also a difference in the degree of erectile dysfunction. The erection can be a little bit disturbed or very poorly, the problem can occur sometimes or almost always. Most cases are between these two extremes. In that case, there is a small organic cause for slight erectile dysfunction, that by concern or an awkward response from the partner is being inflated. This worsens the problems.

Old age and erectile dysfunction

Old age is generally associated with erection problems. The general deterioration of physical and mental functions can be blamed, but only to some extent. There is, of course, a gradual decrease in the production of testosterone, an increase in prostate size, higher blood pressure and sugar levels. Lifestyle probably also plays a part, such as excessive drinking and smoking, obesity, depression, or the use of drugs (against depression, obesity or blood pressure). Men who live healthy and balanced lives can retain good erectile function until death.

Erectile dysfunction at a younger age

As a relatively young man under certain circumstances has problems with erection while he does have a morning erection and can usually masturbate, then the cause is mostly located in how he experiences the situation. He feels somehow to fall short during sex. He becomes so insecure that the next time, he keeps an extra eye on himself with as a consequence that everything goes wrong again. Usually, the behavior of the partner plays a role. Improvement is only possible when the partners communicate openly with each other and are able to make love with pleasure and lust without having sexual intercourse. If that does not work without help, then it is advisable to have a consult of a sexologist, who will also emphasize that erection and penetration are not the most important thing when making love. You can regain pleasure and trust by being less fixated on having intercourse. With a few consultations and exercises in sexual communication, you can already be helped. In any case, you know what to do to overcome problems. Illness almost always hurts your sexual desire. Also, certain medicines may have an impact.

The desire to have sex

An erection is very important to a man. There is sometimes mocking talk about it, but

sexologists know from experience how great the feelings of impotence can be if an erection is not succeeded. A frequently heard complaint is that it makes life less significant or that self-esteem is affected. Dietary rules have existed for a long time and general recommendations to improve. There are also particular types of food, drinks, and pills based on plant extracts and animal organs or finely ground parts of animals. These are called "aphrodisiacs," because they are thought to increase the lust and desire and also are expected to result in a firmer erection. Unconsciously many people use aphrodisiacs, for example, by drinking alcohol. Many find benefit with such means, even though nothing is known about a scientific effect. That it still can help is because the user believes in it firmly. In men with purely physical causes of erectile dysfunction aphrodisiacs never help.

Medications for erectile dysfunction

The effect of some plant extracts is scientifically demonstrated. These include substances such as ginseng, yohimbine, and papaverine. Yohimbine is prescribed in tablet form and can be taken daily or just for making love. It does not always work, nor does it work for everyone. Papaverine is just as prostaglandin injected into the penis. The doctor prescribes the correct dosage, and the man is instructed to inject himself. That scares off, but it is less scary than it seems.

At present, three approved erection pills are available: Viagra (sildenafil), Cialis (tadalafil), and Levitra (vardenafil). These pills contain a substance that causes to relax the smooth muscles around the penile arteries. This allows those arteries to open and sufficient blood can be pumped into the erectile tissues of the penis. The penis becomes stiff, and the veins that drain the blood are compressed so that the erection does not disappear too quickly. Viagra has been on the market since 1998, the other remedies from 2003 onwards. These medicines are successful, but they also have shortcomings, side effects, and contraindications. Doctor's prescription is necessary, and in most cases, the costs are not covered by insurance.

Erection pills do not work as an aphrodisiac, so when the problem is that there is no desire to have sex, these remedies offer no solution. Research into new medicines is underway. It certainly belongs to the possibilities that better treatments will be available in about ten years and at a lower cost. But even then, these pills are especially useful for a limited group. For most people, erection problems are related to their sexual feelings and relationships. For such issues, the use of medicines will then not lead to a solution.

Mechanical remedies

There are still mechanical means for erectile dysfunction such as the special penis pressure ring, the vacuum pump prosthesis, the artificial penis, and the implant.

- The penis pressure ring prevents a stiff penis from slacking too quickly. The discharge of the blood passes through the veins that lie close below the surface of the penis. Those veins become closed by the ring. The penis ring may not be used longer than a half hour.
- The vacuum pump is a tube that is placed over the penis, after which air is extracted at the top. As a result of the under-pressure, the erectile bodies of the penis will fill with blood, causing an erection. Then the ring, which is located at the bottom of the tube, will be sleeved around the penis, and the tube will be removed. Within half an hour the ring has to be dismissed again.
- If an erection is no longer possible and the couple still wants to have intercourse, a hollow artificial penis or an extension condom may be applied.
- If all drugs fail, an implant is still possible. Most commonly used is the so-called Scott prosthesis. The surgery consists of plastic trunks which are inserted on both sides of the penis, and which can be pumped up with liquid. To this end, a reservoir is provided at the prostate, that is controlled with the aid of a balloon which is placed between the balls. The penis becomes rigid and firm from the inside out, which turned out to be a problem when using the vacuum pump. There is also no limit, unlike most other remedies, in the duration of its use. The erection can be lifted using a valve, which is also included in the scrotum. Initially, many problems occurred with the implant, but now they function in such a way that users are mostly satisfied. The implant must be placed in a hospital. Often the intervention is reimbursed by the insurance.
- Some physiotherapists give exercises for the pelvic floor muscles that have a positive influence on the erection. The exercises must be sustained for several months.

2.7 Vaginism

In women, pain during or after sex can have many causes, such as the presence of a hymen, infection, scar tissue, or chapped skin. The most common reason, especially for beginners, is a vaginistic reaction, also called vaginism. Vaginism is the involuntary contraction of the anterior vaginal muscles when approached by an

object, such as a finger, a penis or a research instrument. Is the object still brought inside, then it causes pain and irritation that can last for several days.

A vaginistic reaction is based on the fear of pain. That fear can be found on previous experiences. If the penetration has been painful the first times, then the woman anticipates on the pain in advance. Because of that expectation the vaginal muscles contract, with the result that it indeed hurts, and so on. Women who react with vaginism have consciously or unconsciously an intense fear of penetration. Women who have had intercourse for the first time might have a bit of vaginism. With some, that fear persists. The result is that they avoid sexual intercourse as much as possible. They can maintain a satisfying sexual relationship without penetration.

Many men usually have a problem when their partner reacts with vaginism. They often long for penetration. Sometimes the man thinks he can help the woman with her vaginism. At the same time, she wants him "For the sake of it," but that hurts her again and again and gives him feelings of guilt and irritation. Then, he may also have problems with his erection. All in all, vaginism can become a pretty sexual problem. A couple often decides only to go to the doctor if there is a child wish.

3 Sexual variants

3.1 Exhibitionism

Showing yourself to others in a sexual way is a widespread wish that is kept within bounds by fear of legal punishment. In most cultures, women can afford more than men. Traditionally their attractiveness is supported as an object of sexual desire through clothing and makeup. Often the secondary sex characteristics (breasts, buttocks) but also a long neck, long legs, a smooth skin, big eyes or long hair are emphasized as a source of lust.

Men are also exhibitionistic, but in public they can afford much less. The desire for exhibitionism is good to see in male models, some pop stars or other public artists. Because they are more limited in their options, you often see an obsession to show others their sex organ or buttocks. They do experience fear when being exposed in public, but because of the excitement, they do it anyway. The combination of fear and lust makes it just extra exciting. These "flashers" risk that people are scaring and getting angry, warning the police or even act against them. Showing naked in public is in most countries still punishable, but this rule has been

lifted for some stretches of a beach.

3.2 Frotteurism

By frotteurism, we mean secretly touching strangers in public. In general, it concerns men who, for example, in a full tram press of an unknown woman because of excitement. This behavior is usually considered as an unpleasant experience, and sometimes the woman responds very strongly. She may call for the police, and then the man can be accused of sexual assault.

Touching, pressing against someone, groping and caressing are regular parts of a sexual approach. The sexual feeling that is generated by this behavior is equal for men and women. Men and women usually first acquainted with each other before they start having sex. For a short or long time, signals will be exchanged through movements of the body, language, words, and so on. Sometimes that process runs in perfect harmony so that on a given moment the sexual approach takes place as it were automatically. That rapprochement then ends in stroking, kissing and making love.

The man usually takes the initiative for rapprochement, relying on the signals they perceive. But those signals can be ambiguous and therefore become wrong interpreted, especially if the man likes to have sex. This often results in problems. Frotteurism can be seen as an extreme example of a sexual approach without clear signals that the woman is up to it.

3.3 Heterosexuality

Hetero literally means "other," which in this case means the opposite sex. This is unlike homo that means "same." Therefore, heterosexuality implies that feel attracted to the opposite sex, and homosexuality that you prefer the same sex. Heterosexuality is the most common. Most of the people have heterosexual desires and feelings and exhibits heterosexual behavior. That is not only related to a genetic predisposition, but the environment also stimulates a heterosexual orientation.

That heterosexuality is very normal does not mean that it is easy to put into practice. Usually watching (voyeurism), show themselves (exhibitionism) and masturbation are variants that have been developed much earlier and remain active throughout their lives. Between the upgrowing sexes, there is a great social distance. Men are used to playing with men and women with women. And later on, people stay

on with their own sex to feel comfortable.

In puberty, young people actively search for the opposite sex, triggered by their sexual maturation. This behavior is supported by the environment, but at the same time, the lust is under social control. The degree to which young people are allowed to experiment is culturally bound. In the strictest cultures, a marriage is arranged from two virgins at a relatively young age, soon followed by pregnancy. In that case, the adolescence period is short, and one is forced to mature quickly. In the modern Western world, there is nowadays there is room for extended adolescence with free choice of partner and for experiments with various forms of cohabitation. Yet most people ultimately choose for a wedding, mainly because when they want to have a child.

Within certain limits, heterosexuality is generally accepted. These limits are mainly determined by age. In many countries, sexual contact is seen as undesirable for sixteen years, above sixty years as a little weird, and also, the age difference between the partners has to be preferably modest. Heterosexuality is seen as something that belongs to young and fertile people. The partners are supposed to be sexually loyal to each other. Being attracted to others and cheating, often cause guilt and penance laden problems, which sometimes lead to violence.

3.4 Homosexuality

Homosexuality is being attracted to or loving someone of the same sex. In the past, homosexual contacts were severely punished, they were secret, and they were accompanied by feelings of guilt. Until the first half of the twentieth-century homosexuality is regarded as a crime, then gradually more as a disorder and finally as a more or less acceptable sexual orientation. Increasingly, in Western countries, there was more room for acceptance. That someone has a specific sexual orientation assumes that he or she cannot do anything about it, but he or she does not necessarily have to practice it. That last argument was often used by ecclesiastical authorities.

Homosexuality came in the second half of the twentieth century increasingly in the open, including through literature, by interest groups and emancipation movements. From 1970, in several Western countries, an action for equal rights for homosexuals arose. That struggle resulted in a legal ban on discrimination and the right for gays to marry and adopt children. In these countries, homosexuals are now

officially full-fledged citizens.

With the word "gay or homo" people think in the first place of men. For women, the term "lesbian" is more common. This word is derived from Lesbos, a Greek island where in ancient times stayed a women's community

Our society is primarily focused on heterosexuality. Which is evident from, among other things, the usual films, songs, advertising texts, educational texts, and from daily conversations. For young people with homosexual feelings life not always easy. They can have doubts about their sexual orientation, even in countries where homosexuality is fully accepted. For their help and support, there are specific organizations.

3.5 Bisexuality

There are also people who consider themselves bisexual. They do not find the dichotomy between gay and straight satisfactory and want both male and female partners to love. Bisexuality is not common.

3.6 Transvestism and transsexualism

Transvestism mainly relates to the wearing of clothing, while transsexualism means that one really wants to change gender. In puberty and afterward, touch, caress and attract mainly women's clothing may arouse strong lust. Also getting hold of underwear from an unattainable mistress and wearing it during masturbation is a widespread form of transvestism.

The desire to wear women's clothing can develop into a sexual preference, often accompanied by negative feelings about your own sex. In the extreme case, dissatisfaction with one's own gender may result in the desire to change gender.

3.7 Voyeurism

The word voyeur comes from French and literally means "someone who watches." Some people get sexually excited by looking at specific objects, people or activities. We call that voyeurism. To a certain extent, everyone is voyeuristic. When we fall in love, that is based mainly on what we see of the other. Already at a very young age, we are very interested in people who kiss or make love with each other, and we look at that attentively. Children never forget the experience that they unexpectedly enter the bedroom while their parents are making love. Usually, this experience evokes

both lust and shame. And watching without being seen remains a fascination throughout life. It often concerns explicit sexual acts of others, for example, when you can spy from behind a curtain or a dune edge. The fear of getting caught or being watched makes it more exciting. To a slightly lesser extent, this also applies to look at revealing films, pictures or reading descriptions of sexual behavior. By making pornography in word and image, commerce responds to our desire for voyeurism. The most characteristic of voyeurism is its private character. Already when we are young, we are used to keeping our sexual feelings secret.

As we get older, we increasingly realize that there is a big difference between private and public and that everyone in that way leads to a certain extent a double life. Some people don't approve sexual behavior in public or even contribute to the punishment of it while carrying out these actions in the private sphere themselves. The separation between private and public is the basis of morality. Whoever does not behave properly can count on rejection, conviction or punishment. This judgment is enclosed in the word "voyeur."

4 Sexually transmitted diseases (STD's)

4.1 What are STD's

Sexually transmitted diseases can only be passed on from one person to another by intimate sexual contact. This means that you cannot be infected by shaking someone's hand, by coughing or spitting, by sitting on a toilet seat or traveling in a tram or bus. The bacteria, viruses are other micro-organisms that may result in an STD can only survive in an environment which is moist and warm and has the right composition. Sperm and blood are the most suitable liquids. Also, to move from one person to another, they must penetrate the skin, which is only possible through the thin mucous membrane on the inside of the penis, vagina, anus or mouth. Outside an intimate sexual contact, STDs can just be one transmitted by injections or blood transfusion. When you think that you may have an STD, you have to consult a doctor. Most large hospitals offer free and anonymous consultation.

4.2 Chlamydia

The cause of chlamydia is a bacterium that settles in the mucous membrane on the inside of the vagina or the penis, and there multiplies. With the woman, the symptoms are redness of the mucous membrane and a little thin secretion. In the case of anal or oral sex can also become inflamed with anus or throat. The

symptoms occur several days to a week after infection but are not always clear. Men experience pain when urinating and have a drop of watery secretion from the penis, especially when they are rising. The symptoms are more apparent in men than in women, because the inside of the vagina is wider, and the vagina almost always produces some secretion.

After unsafe sex, it is wise to have an examination. This can be done in several locations. The examination consists of a smear from the surface of the penis or vagina that is placed under the microscope. If a chlamydia infection is established, then you must warn the ones with whom you have had sex so that they also can be tested.

Treatment of Chlamydia is done with antibiotics. Doing nothing is unwise. Over time, the bacteria will enter the internal sex organ. With men, they end up in the epididymis and seed leaders, in women in the fallopian tubes. They can become painfully inflamed and then blocked.

4.3 Genital warts

Warts can also develop on the genitals. They are caused by various viruses transferred by sexual contact. Warts settle near damp and warm spots, such as around the vagina, the anus, the glans, and the foreskin. The chance of infection is greatest if visible warts are present. If contamination has occurred warts appear within a few weeks to a year. The warts are not painful but cause itching. It is wise to have warts treated as quickly as possible.

Treatment consists of freezing, or cutting away or burning, sometimes under local anesthesia. Applying, for instance, the ointment Aldara, works best. However, it is expensive and often has to be paid by yourself. Even after treatment, the virus remains in your body and chances are real warts will ever come back. Whether this happens, differs from person to person.

4.4 Gonorrhea

Gonorrhea is caused by a bacterium that settles and multiplies in the mucous membrane on the inside of the vagina, the urethra or the penis. The disease is transmitted by unsafe sex. Gonorrhea is also passed on to the baby during pregnancy. The disease is visible by redness of the mucous membrane and a little yellow or green secretion. In the case of anal or oral sex, the anus or throat become

inflamed. The symptoms occur within a few days up to a week. Signs are more evident in men than in women, because in women the vagina is wider and there is always some secretion. Men get a burning sensation when urinating and a little yellowish green flow from the penis. After unsafe sex, it is wise to do an examination. To this end, a smear of the surface of the mucous membrane of the penis or vagina, that is placed under a microscope. If there is indeed of gonorrhea infection, you need those to warn with whom you had sexual contact, so that they also can be examined.

Gonorrhea can be treated well with antibiotics. Without treatment, the bacteria can spread in the internal sex organ over time. They will then end up in the epididymis and the seed leaders (men) or in the fallopian tubes (women). They can become painfully inflamed and then block.

4.5 Herpes

Herpes is known as cold sores because it is mainly found around the lips. An estimated 80% of the population is traditionally carrier of this virus. With some individuals, herpes comes from time to time expressed in the form of sores next to one of the lips. Then it is recommended to avoid oral contact with other mucosal skin such as mouth, penis, vagina or anus.

Another herpes virus is mainly transmitted by sexual contact. It is known by the name "herpes genitalis" to distinguish between "herpes labialis," the variant that causes cold sores. The symptoms are similar to those of cold sores. If the virus becomes active, a tingling feeling is starting at that location. If you do nothing, you will get painful sores a few days later. They can be treated with ointment. Does that happen, then the sores break a few days later. You do not feel well, your glands can be swollen, or you even have a fever. Some more days later the skin recovers and the virus withdraws, but another week later it returns. Then the virus stays in your body. When your natural resistance is low, the symptoms may return, initially possible after only a few months, later less often. Someone can then be free of complaints for years.

Herpes is a viral disease that cannot be cured at the moment. There are only so-called antiviral drugs that reduce the severity of the symptoms (ointment, tablets). Get started as soon as possible with the medication to prevent further development of the virus. You can use cold sore cream regularly that comes with chemist and pharmacy without a prescription. The package leaflet usually states that the cream

should not be applied to mucous membranes, but use on the genitals does not cause problems.

4.6 Aids

The disease AIDS affects the immune system of our body. The function of the immune system is to stop infections. The name of the disease is an abbreviation for Acquired Immune Deficiency Syndrome, a term that indicates that the disease is undermining the natural immune system and that the disease does not become inherited and sustained during life.

AIDS is caused by a virus that has been known since 1980 as HIV. This virus also occurs in monkeys. By attacking the immune system, it can quickly generate all kinds of infections and disorders. About half of the carriers of the virus never suffer complaints. Those who get sick get different ailments such as fatigue, night sweats, fever, slimming, persistent diarrhea, swollen glands, and skin cancer. Available medicines slow down the decline and become more and more effective, but a cure for the disease is not yet possible. In poor countries, the medications are insufficiently available. It is precise there were AIDS happens mostly by combining unsafe sex and a poor general health condition. Worldwide an estimated 25 million people are suffering from AIDS. The virus is transferred via intimate sexual contact and in cases involving blood or semen which comes into contact with the mucous membrane of the partner. Contamination can also occur through blood transfusion, injection with uncleaned syringes, or surrendered from mother during pregnancy on the child. The virus is only viable in warm fluids such as blood or semen: it has no chances of survival outside the body. Therefore, it is out of the question that you can catch AIDS by kissing, shaking hands, eating from the same plate, coughing or spitting or via tears or sweat. Infection with HIV does not necessarily lead to AIDS.

5 Contraception

5.1 Condoms

A condom is a thin rubber cover that is pushed around the penis and is used before or during intercourse. Through that, the seed (sperm) does not end up in the vagina, and fertilization (pregnancy) cannot occur. Condoms also protect against STD's (Sexually Transmitted Diseases). Most condoms are made of latex (thin rubber).

Some people are allergic to latex and must use condoms of polyurethane or sheep intestine. These are very thin and slightly more expensive. Condoms can only be used once. The benefits of condoms are:

- You only use it during intercourse;
- It offers protection against STD's;
- There are no side effects;
- They are easily available.

The disadvantages are:

- You must learn to apply and remove a condom;
- The condom can tear or slip, especially in the case of wild or awkward sex;
- Some people find that they feel less with a condom.

Putting the condom on

As a man, you can practice putting on a condom on your own. Slide the condom around the flaccid penis and keep the tip free to catch the sperm. You do that by pressing the tip between thumb and forefinger. Unroll the condom entirely to the base of the penis. Watch how your penis becomes stiff. You can jerk off until you have got an orgasm.

If you want to have intercourse, you can already wear a condom when your penis is still weak. You can immediately have safe sex without interruption, but you can also wait until your penis is stiff, like the information usually indicates. Your partner can also learn to put the condom on as part of the love game. Having intercourse with a condom requires some skill, control, and cooperation. Use of condoms is less suitable for wild and uncontrolled sex, or when there is a constant change of position.

After the orgasm, you can still enjoy it. Once the penis becomes weak, you need to pull the condom back gently till the base of the penis. Then you can take it off and throw it away later. Do not flush it through the toilet.

Types of condoms

There are many different types of condoms:

- With and without lubricant. The lubricant can be spermicidal. The information of the lubricant is mentioned on the packaging.
- With and without a seed container. The reservoir is an extra nozzle at the top of the condom and serves to catch the seed.
- Pre-formed or not pre-formed. Preformed condoms are somewhat tighter behind

the glans and always have a seed reservoir. Both types are equally reliable.

5.2 Female condoms

The best-known brand of female condom (e.g., Femidom) is made of very thin polyurethane. The condom is placed in the vagina and contains an opening for the penis. An advantage is that the woman is in control, and can prevent well pregnancy or STD. The female condom is especially suitable for women who don't often have sex, do not use other contraception and who sleeps with someone who does not want to use a condom. Check always whether the expiration date has not been passed and the condom has an official quality mark.

The insertion is done as follows. The woman gets the woman condom carefully out of the package, paying attention to not damaging it with sharp nails. When she is inserting the condom, she can lay down, sit, squat or stand with one leg on a chair. After that, she squeezes the ring on the closed side of the condom with thumb and middle or index finger together. Now she opens with the other hand her inner labia and brings the ring of the condom right at the back of the vagina. The ring on the open side she slides over the outer labia. She must be alert that the penis does not enter the vagina outside the condom. After having an orgasm, the man takes his penis out, while she tries to hold the condom with her fingers on the outer ring. Then she can gently pull it out of the vagina and discard later. Do not throw it in the toilet.

5.3 The Pill

There are many types of contraceptive pills. All contain substances (hormones) that prevent pregnancy. Those substances are the hormones estrogen and/or progestin. The amount of these hormones varies per pill. Their working is as follows:

- the pill prevents ovulation (ovulation);
- the pill ensures that the mucus of the cervix is less accessible to sperm cells;
- the pill makes the mucosal lining of the uterus unsuitable for implantation of the egg.

There are already four "generations" of pills on the market. The earlier pills contain much more hormones, and over time, there are also appeared more species. We distinguish two groups:

- The so-called combination pills contain both progestin (to prevent pregnancy) as

estrogen (a hormone that keeps the cycle going so that regular menstruation takes place).

- The so-called minipill contains just progestogen. When using it stops menstruation. The minipill knows no break week and must be made every day at the same time.

The pill has been around for almost fifty years and has become better with time. At the same time, the supply has been broadened so that there is now a pill available that is tolerated for almost everyone. However, at first use, minor symptoms can occur, such as headaches or bloating feeling. Changing pill brands too quickly is not advisable. Benefits of using the pill are:

- the pill is very reliable;
- the pill is easy to use;
- you are continuously protected against pregnancy;
- menstruation becomes more regular and lighter.

Disadvantages of the use of the pill are:

- side effects may occur during the first few months such as headaches, weight gain, and mood swings;
- taking is daily and should not be forgotten;
- especially in older women, the pill can increase blood pressure.

Forgetting or taking the pill too late is a widespread problem. With the combination pill, there may be expiring 54 up to 36 hours between two tablets. That means that the woman can take the pill not more than 12 hours later. The minipill she needs to take every day at the same time. As a general rule, the woman forgetting one or two pills can merely continue with the strip, but for security, the first seven days safe sex must be practiced.

5.4 Withdrawal

Retraction is also called "coitus interruptus." The man then pulls the penis back when he is ready to come. In this way, he sprays his seed outside the vagina. The ejaculation always takes place a few seconds after the orgasm, which means that in principle there is enough time to retreat at the moment the man feels he is. A proper application of this method requires experience. It is also useful when the man does not come quickly, while the woman has no trouble to reach an orgasm. The chance of pregnancy is low, especially if the method is applied during safe days.

Is retraction unsafe?

Many advisers believe that retraction is an insecure form of contraception and are vehemently opposed to this method. That is exaggerated. In reality, retraction is indeed quite risky. Sometimes the man is coming before he's aware of it, or holds the woman him so tightly that he is unable to withdraw in time. Withdrawal is therefore not suitable for everyone, but that actually applies to every contraceptive.

Nowadays retraction is regarded as old-fashioned by some people. However, in certain situations, it remains a way to prevent fertilization. The method is applied successfully by millions of people throughout the world. The main objection that is raised against retraction is that live sperm cells can occur in the pre-mucus. This is definitely wrong. It is said that it would be risky just to take the penis inside, or to do so with fingers that contain pre-moisture in the vagina. That is not the case. Pre-cum is brought into the penis by Cowper's glands during sexual excitement. It lowers the acidity in the urethra and also acts as a lubricant. Pre-cum is colorless but contains fragrances that increase the arousal.

Pre-cum does not contain sperm cells and therefore cannot cause pregnancy. Seed cells come from the epididymis. When the orgasm of the man raises, the seed leader stowed the seed through the penis up, after which it mixes with moisture from the seminal vesicles and the prostate. This mixture that comes from the penis with shocks after the orgasm, we call semen. After a seminal discharge (ejaculation), sperm cells remain in the urethra. When the penis is again inserted in the vagina a short time later, then this may cause pregnancy. It is therefore advisable, in the meantime to pi so that any remaining sperm cells are washed away.

Safe and unsafe days

For fertile women, an egg cell is released once a month, the so-called ovulation. If this egg is not fertilized within a day, it is no longer viable. About 14 days later, the inner layer of the uterus breaks, which is accompanied with bleeding (menstruation). Sperm cells stay alive for up to five days in the body of the woman. Is the time of ovulation known, then the unsafe period can be determined precisely, namely from five days before ovulation until one day afterward. All other days of the month are safe. Fertilization is excluded from that period. The problem is that the time of ovulation is not precisely known. The length (cycle) and regularity of the menstruation vary per woman. If the woman knows approximately how long her longest and shortest cycles have lasted during the last year, then it can be determined when the

unsafe period begins and ends. How this works is based on the following two examples.

- If the cycle lasted 21 days in the past year (your menstruation is very regular), then the unsafe period begins on the fourth day after the start of menstruation and lasts up to and including the eleventh day.
- If the shortest cycle lasts 24 days and the longest 31 days (your menstruation is therefore irregular), then the unsafe period begins on the seventh day after the start of menstruation and lasts until the twenty-first day.

With the help of a thermometer, the moment of ovulation can be determined afterward. The body temperature rises after ovulation about half a degree. By daily measurement of the morning temperature (after waking up, but before getting out of bed), the time of ovulation can be determined.

5.5 Morning-after pill (emergency pill)

The morning-after pill is also called the "emergency pill." The pill can be considered as an emergency measure to avoid pregnancy when the woman has had sex in her unsafe moment cycle without using contraceptives. The morning-after pill is therefore not a standard contraceptive. The application is possible within three days after intercourse but intake on the next morning is preferable. Even after four or five days, it is still active. The pill contains a high dose of progestogen. The working is also comparable with a regular contraceptive pill. The pill prevents ovulation or puts it off, and prevents a fertilized egg from settling in the uterine wall. Known side effects of the morning-after pill are sensitive breasts, abdominal pain, and nausea. If the woman must vomit within three hours after intake, it is necessary to take a new pill. It is then advisable to make something against nausea to prevent vomiting. Sometimes there can be some irregular bleeding between intake of the morning-after pill and the next menstruation. The moment of that menstruation may be different than usual. The morning-after pill is available at the pharmacy or chemist, via the general practitioner, and now also on the internet.

6 Pornography

6.1 Definition

Pornography is the depiction, in word or image, of sexual activity. It is generally

viewed as naughty, or worse, disgusting and sometimes criminal. Strictly speaking, pornography only exists in people's minds and in social opinion, practice, habits, and rules. In other words, pornography is a value judgment, not an objective reality. Some consider a naked female face as pornography, which means that they experience lust or repulsion when they see it. Modern Western culture shows a wealth of images of sex, for instance in women's magazines, and in advertisements for make-up, lingerie, perfumes, and fashion. These are traditionally private matters because they have to do with sexual attraction, temptation, and seduction. Perfumes and lingerie are, after all, aphrodisiacs (agents that arouses or is held to stimulate sexual desire). Like other cultural expressions of intimate life, notably films, these public displays of sex have enormously heightened the tension between traditional morality and the demands of the flesh. A revulsion against Western culture from fundamentalists inside and outside feeds itself on the images of beauty, health, pleasure and soft porn it perceives everywhere.

Explicit pornography

More explicit pornography is shown on "adult" films, videos, magazines and the internet.

The porno movie shows lust as an uninhibited activity striving for orgasm. It confines life momentarily to what happens for a short period in many bedrooms and other rooms when people are involved in sex, either alone or together, including those who may say in public that porn is repulsive. What pornography shows are the outside of sex, the mechanics of motions, the facial expression and the sounds, the sighing, and the moaning in ecstasy. In hard porn, the sex organs are fully visible, and ejaculation is shown, with semen visibly coming out of the penis and squirting onto skin, mouth, or hair. All positions are shown, and all forms of touching, grabbing, rubbing and penetration. Pornography is literally popular, vulgar and shared because it shows what everybody can do. The spectator is, in principle, able to do the same as the actor. The reason we have pornography is that we cannot have what is being shown, in other words, pornography feeds our fantasy and satisfies it momentarily, but also serves to illuminate our lack of sexual and romantic opportunity.

Pornography and society

Various groups within society have considered depictions of a sexual nature immoral, addictive, and harmful, labeling them pornographic, and attempting to have them suppressed under obscenity and other laws, with varying degrees of success. Such

works have also often been subject to censorship and other legal restraints to publication, display, or possession, leading in many cases to their loss. Such grounds and even the definition of pornography have differed in various historical, cultural, and national contexts. Social attitudes towards the discussion and presentation of sexuality have become more tolerant in Western countries, and legal definitions of obscenity have become more limited.

Child pornography

At the same time, lust is still tightly bound up with reproduction. Consequently, the primary form of sexual activity that is shown in pornography resembles daily life in that it depicts sexual activity between male and female or masturbation of women. The women are mostly young and attractive. There is nowadays, also a lot of material for gays and lesbians. On the other hand, in most countries, the participation of people under 16 or 18 in what is called child pornography is prohibited. The possession and distribution of child pornography are in most countries severely punished.

6.2 Problematic aspects

In January 2018, Rolling Stone reported on the recent deaths of five female adult performers. These deaths have prompted some performers to call for change in an industry with a low barrier to entry, minimal oversight, and nearly non-existent job security despite extreme working conditions. Performers today face the added pressures of social media interactions, increased competition without increased pay and a demand for more physically taxing sex scenes, all of which can exacerbate existing mental health or substance abuse issues. Jewels Jade, a retired porn star based in San Diego, recalls getting hired for a so-called “light bondage” scene in which she was restrained in the back of a dump truck with suction cups, clothespins and rope. The experience made her suicidal, and on the way home she was crying her eyes out. Porn performers believe that porn production companies, producers, and directors are complicit in the deaths of young women: “They don’t care about the girls. They care about the fans.”

Until now, the industry lacks any kind of established support system for mental health. Performers say that attitudes about women in porn have to change before the industry can start to evolve. “People have to start caring. The problem is that nobody cares about these girls. They’re dehumanized. They’re humans.”

7 Internet addiction to pornography

7.1 Pornography and rape

Pornography addiction is a purported behavioral addiction characterized by compulsive, repeated use of pornographic material until it causes serious adverse consequences to one's physical, mental, social, and/or financial well-being. However, at the moment there is insufficient evidence to establish the diagnostic criteria and course descriptions needed to identify these behaviors as mental disorders. Instead, some psychologists suggest that maladaptive sexual symptoms represent a manifestation of an underlying disorder, such as depression or anxiety which is merely manifesting itself sexually, or, alternatively, there is no underlying disorder, and the behavior is just not maladaptive. These psychologists do not recognize the concept of addiction and believe the concept and diagnosis to be stigmatizing and unhelpful.

The link between pornography and sexual aggression has been the subject of multiple scientific studies with various results. However, recent research showed that pornography consumption is associated with sexual aggression among males and females.

7.2 Signs, symptoms, and treatment

Although many mental health professionals do not treat the compulsion to view or use a pornographic material as an addiction, the signs and symptoms of porn addiction are often very similar to those that signify an addiction to drugs or alcohol. Symptoms or signs of a porn addiction will vary depending on the person, especially in the availability of pornographic material, the length of time pornography has been a compulsion, and the severity of the addiction. Symptoms are:

- Being unable to stop using porn or stop engaging in the behaviors associated with porn, despite repeated attempts to do so.
- Experiencing cravings to view porn.
- Becoming angry, hostile, or irritable when asked to stop using porn.
- Keeping all or part of one's porn use secret from loved ones.
- Feeling as though one is living a double or secret life because of porn use.
- Continuing to view porn despite adverse consequences, such as broken relationships or a job loss.

- Losing track of large chunks of time due to being absorbed in porn use.
- Requiring increasing amounts or more explicit porn to gain the same satisfaction or thrill, similar to the development of tolerance.

If left untreated, porn addiction can lead to broken or troubled intimate relationships, feelings of shame and guilt, problems with work or school, job loss, financial troubles, and divorce. Many porn addicts also suffer from other mental health issues, such as alcohol or substance use disorders, and mood disorders, such as depression. Porn addiction treatment and recovery must address the addiction, but it must also work toward changing patterns of behavior and thoughts that contribute to porn addiction and developing relapse prevention skills.