ACING AFFIRMATIVE CARE
WITH ASEXUAL CLIENTS

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(she/her)

LEARNING OBJECTIVES

01

List 1 - 3 ways asexuality can be defined

02

Identify 1 - 2 identities that fall under the asexual “umbrella”

03

Describe 2 - 4 steps in asexual identity exploration work with clients

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DEFINING ASEXUALITY

01

Behaviors

02

Subjective Attraction

03

Self-Identification

04

Modes of Relating

THE "ACE" UMBRELLA

Split Attraction Model

- Heteroromantic
- Homoromantic
- Biromantic
- Panromantic

Openness to sexual behaviors

- Sex-favorable
- Sex-neutral
- Sex-repulsed

Other identity "prefixes"

- Gray ("Grace")
- Demi-
- http://www.asexuals.net/asexual-spectrum

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ASEXUALITY IS **NOT**

Allosexuality / Allonormativity / Compulsory Sexuality

Aromanticism / Amatonormativity

Female Sexual Interest / Arousal Disorder
Male Hypoactive Sexual Desire Disorder

COMMON CONCERNS

Discrimination, including within the LGBTQ+ community, ace erasure

Intersections with gender and/or race

Coming out process

Internalized aphobia and overreliance on relationship scripts

Navigating romantic relationships and dating

ACE JOY

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4 STEPS OF ACE IDENTITY EXPLORATION

1. Joining
    a. Normalizing asexuality

2. Clarifying definitions
    a. Be clear on what labels mean to your client
    b. Narrative sexual identity therapy (Yarhouse, 2008)

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4 STEPS OF ACE IDENTITY EXPLORATION

3. Challenging beliefs and assumptions of socially-sanctioned behavior
    a. Is sex a necessary component of a healthy relationship?
    b. How are allonormative expectations shaping client behavior?

4. Developing common or agreed-upon expressions of affection
    a. Expanding the idea of what intimacy can look like, sexual or otherwise

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QUESTIONS TO CONSIDER AS CLINICIANS:

1. If a couple came to your office with a relationship problem and reported that they weren't having sex, would you assume the lack of sex was related to their presenting concern?

2. Do you think that an ace client is "missing out" on some important part of the human experience?

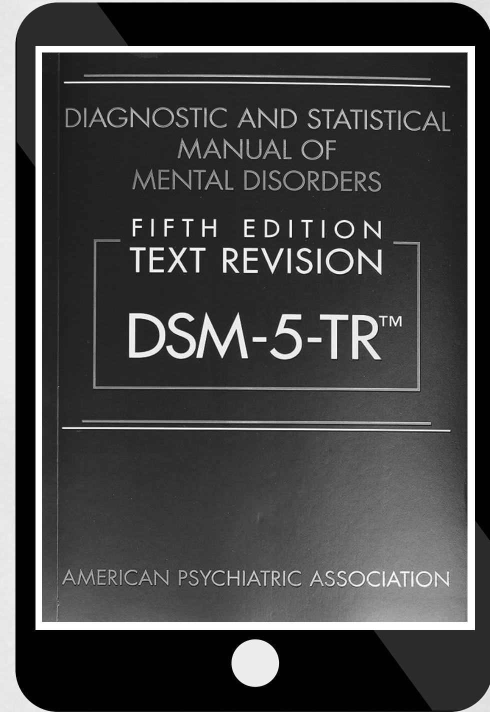
3. If your asexual client does have sex, do you have assumptions about what "good" sex is? Do orgasms need to be important and/or meaningful? Does sexual consent have to be "enthusiastic"? What does "enthusiasm" mean in this context?

PERSPECTIVES ON DIAGNOSIS

Female Sexual Interest/Arousal Disorder

Lack of, or significantly reduced, sexual interest/arousal, as manifested by at least 3 of the following:

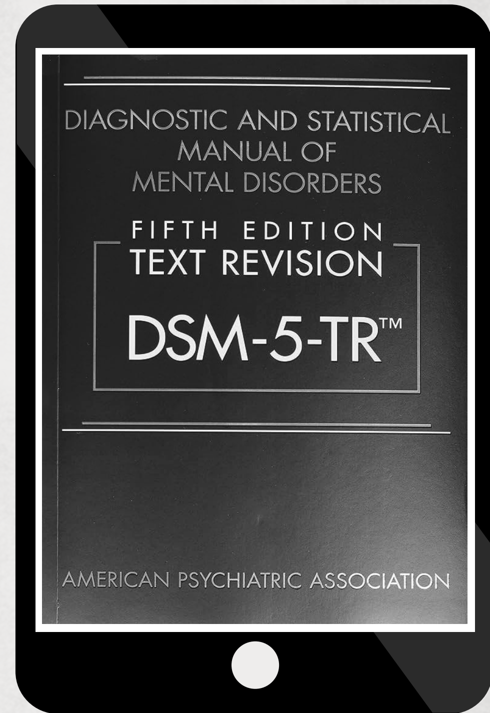
1. Absent/reduced interest in sexual activity
2. Absent/reduced sexual/erotic thoughts or fantasies
3. No/reduced initiation of sexual activity, and typically unreceptive to a partner’s attempts to initiate
4. Absent/reduced sexual excitement/pleasure during sexual activity in almost all or all sexual encounters
5. Absent/reduced sexual interest/arousal in response to any internal or external sexual/erotic cues (e.g., written, verbal, visual)
6. Absent/reduced genital or nongenital sensations during sexual activity in almost all or all sexual encounters



PERSPECTIVES ON DIAGNOSIS

Male Hypoactive Sexual Desire Disorder

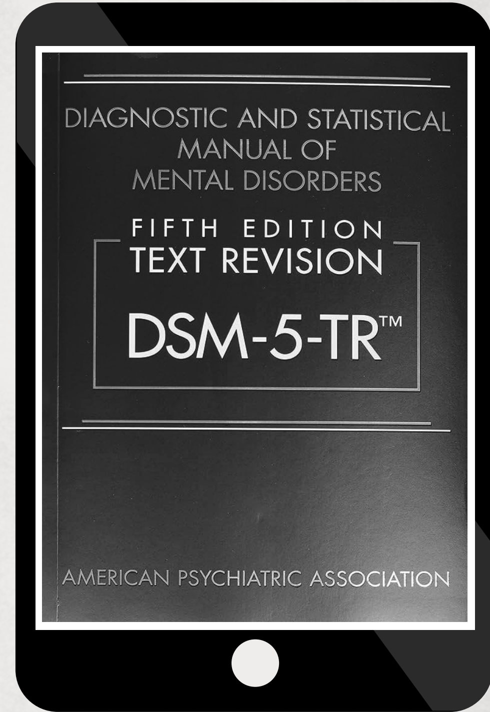
Persistently or recurrently deficient (or absent) sexual/erotic thoughts or fantasies and desire for sexual activity. The judgment of deficiency is made by the clinician, taking into account factors that affect sexual functioning, such as age and general and socio-cultural contexts of the individual's life.



PERSPECTIVES ON DIAGNOSIS

Considerations for eliminating these disorders from future editions of the DSM:

- Reliance on gender binary
- Ambiguity around what constitutes “deficient” desire
- Asexual exception is not included in diagnostic criteria and is easy to miss
- “Clinically significant distress” argument
    - Living in an allonormative society causes distress in asexual people
    - “Perceived social disapproval” and “Personally derived distress” are too intertwined to disentangle
    - The inclusion of homosexuality in the DSM was defended using very similar arguments
    - Subtly reinforces a “normal” amount of sexual desire



RESOURCES

Articles

- Steelman, S. M., & Hertlein, K. M. (2016). Underexplored identities: Attending to asexuality in therapeutic contexts. *Journal of Family Psychotherapy, 27*(2), 85-98. DOI: 10.1080/08975353.2016.1169014

- Yarhouse, M. A. (2008). Narrative sexual identity therapy. *The American Journal of Family Therapy, 36*, 196-210. DOI: 10.1080/01926180701236498

- Sloan, L. J. (2015). Ace of (BDSM) clubs: Building asexual relationships through BDSM practice. *Sexualities, 18*, 548-563. DOI: 10.1177/1363460714550907

Books

- *Ace: What Asexuality Reveals About Desire, Society, and the Meaning of Sex* - Angela Chen

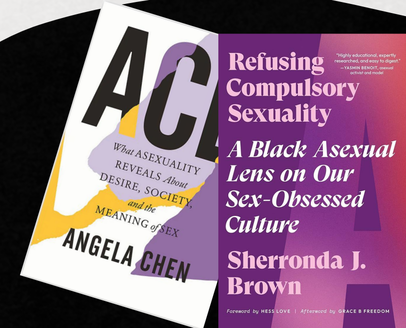
- *Refusing Compulsory Sexuality: A Black Asexual Lens on Our Sex-Obsessed Culture* - Sherronda J. Brown

Videos

YouTube Channel: Ace Dad Advice

- ASEXUALITY 101: Am I asexual or just disinterested in sex? https://www.youtube.com/watch?v=I1DBpeMQOiA

- Does asexuality ruin relationships? https://www.youtube.com/watch?v=ohtmAfGjaKA



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References available upon request:
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