PROFESSIONAL
TRAINING

COURSE OBJECTIVES

PASSION & PRESENCE®

Mindful Relationship Sex Therapy

Certificate Program

16-Month Online Training Certificate Program For Helping Professionals

Mindful Relationship Sex Therapy

Certificate Program

COURSE OBJECTIVES Key

Capital letters beside objectives indicate AASECT Core Knowledge Areas of Sexuality

Please note that the Passion and Presence® Certificate Training does not cover Core Knowledge Areas "K" and "L." Because requirements can vary depending on your credentials and professional path, we strongly recommend contacting **AASECT** *directly to determine exactly what you'll need for certification.*

A
Ethics and ethical behavior

B
Developmental sexuality from a bio-psycho-social perspective across the life course

C
Socio-cultural, familial factors (e.g., ethnicity, culture, religion, spirituality, socioeconomic status, family values) in relation to sexual values and behaviors

D
Issues related to sexual orientation and/or gender identity: heterosexuality; issues and themes impacting lesbian, gay, bisexual, pansexual, and asexual people; gender identity and expression

E
Intimacy skills (e.g., social, emotional, sexual), intimate relationships, interpersonal relationships, and family dynamics

F
Diversities in sexual expression and lifestyles, including, but not limited to, polyamory, swinging, BDSM, and tantra

G.
Sexual and reproductive anatomy/physiology

H
Health/medical factors that may influence sexuality, including, but not limited to, illness, disability, drugs, mental health, conception, pregnancy, childbirth & pregnancy termination, contraception, fertility, HIV/AIDS, sexually transmitted infection, other infections, sexual trauma, injury, and safer sex practices

I
Range of sexual functioning and behavior, from optimal to problematic, including, but not limited to, common issues such as desire discrepancy, lack of desire, difficulty achieving or maintaining arousal, sexual pain, penetration problems, and difficulty with orgasm

J
Sexual exploitation, including sexual abuse, sexual harassment, and sexual assault

M
Pleasure enhancement skills

N
Learning theory and its application

O
Professional communication and personal reflection skills

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Sex Therapy Training Areas

Lowercase letters indicate Sex Therapy Training.

Please be aware that while AASECT requires 60 hours of sex therapy training focused on diagnosis and treatment, the Passion and Presence® Certificate is not based on a medical model. Therefore, participants will need to complete additional coursework to fully meet AASECT certification requirements.

a
Theory and methods of sex-related psychotherapy, including several different models.

b
Techniques of sex-related assessment and diagnosis of the "Psychosexual Disorders" described in the current edition of the DSM.

c
Theory and methods of approach to intervention in relationship systems experiencing sex and intimacy problems. Therapists with no documented graduate or post graduate training in couples counseling must acquire sixteen (16) hours of couples counseling training as part of the sixty (60) hours of Sex Therapy Training. **

d
Theory and method of approach to medical intervention in the evaluation and treatment of psychosexual disorders. **

e
Principles of consultation, collaboration, and referral.

f
Ethical decision-making and best practice.

SEGMENT ONE

1. Learn how to ethically and inclusively initiate conversations about sex with clients. **A/O, f**
2. Establish a relaxed, authentic therapeutic presence when addressing sexual topics. **O**
3. Recognize and explore therapist countertransference related to sexuality that emerges in the session. **A/O**
4. Understand how the principles of Hakomi Mindful Somatic Psychotherapy can support a sex-positive, non-pathologizing therapeutic stance. **A, f**
5. Identify the impact of normative sexual models on clients' sexual self-concept and relational dynamics. **C/I/N**
6. Evaluate the limitations of the traditional Sexual Response Cycle model and its influence on DSM-based diagnoses of sexual dysfunction. **I, b**
7. Recognize how the over-medicalization of sexuality can blur the line between emotional disappointment and clinical dysfunction. **H/I, d**
8. Use the "Seven Barriers to Pure Erotic Potential" as a framework for non-pathologizing sexual concerns. **I, d**
9. Use bottom-up approaches to track and process aversive responses to sexuality and intimacy as they arise in the body. **E/I, a**
10. Utilize the "Explore and Inform" model to help clients engage with sexual concerns with greater awareness and compassion. **E/I, a**
11. Practice the four steps of Deepening with Mindfulness—Noticing, Naming, Asking Permission, and Studying—and adjust voice tone and pacing to support self-inquiry. **E/O, a**
12. Formulate and use "Accessing Questions" that promote mindful self-observation and deepen emotional and relational awareness. **E, a**
13. Teach clients the skill of dis-identification to observe their inner experience with curiosity, rather than becoming fused with their thoughts and emotions. **E, a**
14. Learn how to craft and apply "Contact Statements" to acknowledge and track real-time emotional and behavioral patterns in both partners. **E/O, a, c**
15. Teach partners to report from the "Internal Observer" to stay curious, regulated, and embodied during sexual exploration. **E, c**
16. Apply experiential and somatic techniques to explore couples' sexual dynamics in session, rather than reflecting on what occurred in the past. **E, a, c**

SEGMENT TWO

1. Describe the three stages of conscious erotic coupling (i.e., Enchantment, Disenchantment, Re-enchantment) and why most long-term partners get stuck at stage two. **B/E**
2. Explain the effect of sexual familiarity on desire in long-term relationships. **E/I, c**
3. Assess how the "Familiarity Trance" is dampening erotic creativity during partnered sexual encounters. **E/I, b**
4. Demonstrate how automaticity can lead to erotic absence. **I**
5. Explore the behaviors partners engage in sexually to identify negative relational or sexual expectations. **E/I, c**
6. Help clients recognize how negative expectations affect sexual motivation, spontaneity, receptivity, and enjoyment well before they begin to relate physically. **I, a**
7. Explain the difference between the "novelty solution" and the "novelty state." **I/M**
8. Differentiate between the "wide" and "deep" approaches to sexual novelty. **I/M**
9. Demonstrate the power of erotic priming on desire, spontaneity, and self-expression. **I, a, d**
10. Use mindfulness to create a state for creative, pleasurable, and pressure-free encounters. **I/M, a, d**
11. Describe nine benefits of mindfulness on sexuality, including sexual concordance, enhancing pleasure, letting go, accessing implicit learning, tolerating sensations, eliminating goals, reducing performance anxiety, accepting disappointing sexual experiences, and becoming aware of eros-inhibiting mindsets and beliefs. **E/I/M**
12. Teach partners the practice of "Mindful Touch" to become more present and exploratory. **E/I/M, a, d**
13. Utilize the technique of "Seeing Fresh" to counter sexual familiarity. **I, c**
14. Use the practice of Erotic Mapping to help partners discover new erogenous zones and recover a sense of exploration and play together. **E/I/M, a, d**
15. Teach partners the "Catch & Release" technique to stay open and curious when limiting beliefs diminish presence and enjoyment. **I/M, a, d**
16. Teach partners how to establish an "Anything is Possible" mindset before sexual activity to antidote negative expectations. **I/M, a, d**

SEGMENT THREE

1. Explain the developmental journey from erotic fusion to differentiation in adult relationships. **B**
2. Understand how early attachment wounds wire into the brain and surface in adult intimate relationships. **B/E/N**
3. Define "neuroception" and its role in survival. **E**
4. Clarify the meaning of the neurological "high road" and "low road" and the concept of "neural hijacking." **E**
5. Explain three features of the "Sexual Impasse" in long-term relationships (i.e., circularity, polarization, and entrenchment). **E**
6. Use the Reciprocal Interaction Loop (RIL) diagramming process to illustrate the self-reinforcing circularity of the impasse. **E, a, c**
7. Explain the "Defend" and "Befriend" cycles as contrasting ways to work with triggers and pain points. **E**
8. Recognize emotion contagion and understand how "Protectors ignite Protectors." **E, a, c**
9. Explain the difference between the "Protector" and "Protected" parts in multiple selves theory. **E/N, a, c**
10. Use "Mindful Co-Investigation" to identify the hidden vulnerability or "legacy state" at the core of partner conflicts. **E, a, c**
11. Implement the Mindful Dialogue activity to reduce reactivity when exploring sexual themes. **E, c**
12. Teach the "Self-Dialogue" technique to help partners tend their hurt and reactive states and internal parts. **E, c**
13. List four ways self-compassion contributes to relationship satisfaction and acceptance of sexual variability. **E/N**
14. Use the PREP (i.e., Pause, Regulate, Explore, Peaceful Presence) process to diffuse conflict, regulate, and research legacy states. **E, a, c**
15. Use the Three Rs of the Care Cycle (i.e., Reveal, Reach, and Repair) to build a caring and collaborative alliance. **E, c**
16. Apply a 6-step repair process to heal relational ruptures and restore trust. **E, c**

SEGMENT FOUR

1. Explore the dynamics of "emotional learning" and how internal models of self and others shape lifelong sexual behaviors. **B/C/N, a**
2. Explore how sex-negative messages from family and culture become embedded at a subcortical level, shaping lifelong sexual attitudes, emotional responses, and behavioral patterns. **B/C/N**
3. Explain how state-dependent memory and the "Hidden Factors" can inhibit desire and generate unpleasant feelings before, during, or after sex. **B/C/J, a, b**
4. Access and transform eros-inhibiting imprints by generating a new, empowering message and integrating it somatically for lasting embodiment. **I, a**
5. Teach a 4-step practice (i.e., stop-study-share-adjust) to work with erotic triggers and cultivate greater presence, pleasure, safety, and ease in sexual experiences. **I, a, c**
6. Gain awareness of the neurophysiology of sexual trauma. **H/I/J**
7. Understand how formerly adaptive survival strategies—such as distraction, dissociation, numbing, and tolerating discomfort—can increase the risk of re-injury for survivors of sexual abuse or assault. **J**
8. Use a Memory Reconsolidation technique to repair early erotic wounds. (i.e., "Planting a Heart"). **I/J/N, a, d**
9. Apply therapeutic techniques that help clients distinguish past traumatic experiences from present-day realities to support safety, self-regulation, and healing from sexual trauma. **I/J/N, a, d**
10. Learn how to create a 'prediction failure' response when the body is bracing for harm, to interrupt fear-based expectations and support new, safe experiences. **I/J/N, a, d**
11. Utilize the "Mindful Self-Study" skill to identify and explore emotions, body sensations, and habitual patterns related to sex from the bottom up. **I, a, b**
12. Teach mindfulness and somatic awareness practices to help reduce sexual anxiety and enhance regulation before and during partnered sexual experiences. **I/J, a, d**
13. Utilize the Resource Scales and Somatic Self-Attunement practices prior to sexual encounters to assess individual capacity, establish boundaries, and co-create experiences that align with each partner's physiological and emotional state. **I/J, a, d**
14. Understand different types of sexual trauma, including abuse, assault, rape, and harassment. **J**
15. Teach clients how to reorient from performance to pleasure in response to erotic recovery, regardless of "functionality." **J/M, a**
16. Provide ways to help clients move beyond healing and reclaim pleasure and erotic sovereignty. **I/J, a**

SEGMENT FIVE

1. Use a bio-psycho-social model to understand diminished desire. **B/I, a, b, d**
2. Explain why desire discrepancies are hidden at the start of a relationship. **B/E/I**
3. Recognize how medical factors and stress can affect sexual functioning. **G/H, b**
4. Explain the relationship between safety and desire according to Polyvagal Theory. **I/J, d**
5. Recognize how body-mind states influence sexual desire and apply strategies to shift from eros-inhibiting to pleasure-receptive states. **I/M, b, d**
6. Recognize and explore the socio-cultural causes of diminished desire among women, especially those partnered with men. **C/D/I, b, c**
7. Explain how gender scripting and societal performance pressures—such as unrealistic beauty standards, fat shaming, and ageism—constrain sexual desire and impact sexual well-being. **C/D/I, b**
8. Explain the causes and remedies of the Pleasure Gap in heterosexual relationships. **C/D/I/M, a, b, c**
9. Describe and study the effect of unpaired ruptures and resentment on desire. **E/I, c**
10. Identify female pleasure anatomy, both internal and external, and the function of these structures. **G/H/I/M, b, d**
11. Apply elements of Lori Brotto's model for enhancing female desire. **I, a**
12. Utilize the Dual Control model for sexual inhibition and excitation to enhance desire in long-term relationships. **I/M, d**
13. Teach six ways to increase oxytocin before sex to generate a state of relaxed surrender. **I/M, b, d**
14. Use positive sexual priming to enhance desire in partners with Responsive Desire. **I, d**
15. Facilitate the 'Discovering Your Why' exercise to foster willingness and enhance sexual engagement in partners experiencing Responsive desire. **I, a, d**
16. Use the technique of "Re-perceiving" to overcome genital aversion. **I, a, d**

SEGMENT SIX

1. Utilize a three-phase affair recovery model (crisis–insight–vision) to guide partners through healing, growth, and erotic reconnection from the outset. **E, a, c**
2. Facilitate an affair recovery process that avoids a victim–perpetrator dynamic, emphasizing shared responsibility and relational context. **E, a, c**
3. Explore the potential adaptive functions of the affair within the relationship system, without pathologizing either partner. **E, a, c**
4. Distinguish between forgiveness and empathy and understand why the latter may be a more transformative approach in relational healing. **E, a, c**

SEGMENT SEVEN

1. Understand the emotional, relational, and logistical complexities of exploring Consensual Non-Monogamy, and learn strategies to help couples manage these challenges effectively. **C/D/E/F, a, c**
2. Develop skills to support couples in initiating and navigating open, respectful conversations about transitioning to consensual non-monogamy. **E/F, c**
3. Help partners create clear, flexible, consent-based agreements that reflect their evolving needs and boundaries. **F, c**
4. Recognize common therapeutic pitfalls when working with non-monogamous clients and gain practical tools to avoid reinforcing mononormative bias. **F/O, f**

SEGMENT EIGHT

1. Explain the physical, emotional, psychological, and spiritual dimensions of sex using the Passion Pyramid. **F**
2. Understand the notion of "queer space" regarding sexual expression. **D/F**
3. Discuss the five levels of "safe sex" in committed relationships and how they can paradoxically imperil a committed relationship. **E/I, c**
4. Illustrate the concept of sexual "leftovers" coined by the sexologist David Schnarch. **E**
5. Transform sexual shame through a 3-pillar framework of Caring, Sharing, and Daring. **E/F, a, c**
6. Help partners identify and revise implicit contracts that stifle growth and sexual expression in long-term relationships. **D/E/F, c**
7. Practice the skills of "Mindful Co-Investigation" to cooperatively explore sexual aversions and the experience of being “seen” erotically. **E, a, c, d**
8. Teach the practice of "embodied consent" to help intimate partners recognize the somatic indicators of "yes" and "no" and set boundaries accordingly. **J/M, a**
9. Help intimate partners work with differences in erotic preferences to support cooperation, erotic expansion, and renewed creativity. **E/F, a, c**
10. Explore sexual fantasies to uncover underlying psychological themes rooted in childhood to reduce shame and identify elements of each partner’s arousal template. **D/F/I, a**
11. Teach the four levels of "Parts Play” to support integration and expression of hidden internal erotic parts. **F/I/M, a**
12. Help partners create a sexual menu to promote erotic expansion using the skill of Somatic Self-Attunement. **F/I/M, a**
13. Implement a Whole-Person, Multimodal Sex (WPMS) protocol to help partners become more sexually integrated and expressed. **F/I, a**
14. Recognize the critical role of consent mechanisms in BDSM, including safe words and clear methods to withdraw consent, and how these practices differentiate BDSM from abuse. **E/F, f**
15. Explain the role of aftercare in BDSM scenes and its importance in supporting physical and emotional regulation post-play. **E/F**
16. Recognize common therapeutic missteps, including the pathologization of consensual kink practices, and learn how to approach such topics with clinical neutrality and respect. **O, f**

SEGMENT NINE

1. Identify common concerns and barriers faced by sexually marginalized clients in mental health settings. **D, f**
2. Recognize how creating sex-positive and affirming therapeutic spaces for marginalized populations is an ethical responsibility. **A/D, f**
3. Reflect on personal biases, including kink- and poly-phobia, and evaluate their potential impact on therapeutic relationships and client care. **A/D/F/O, f**
4. Recognize why providing factual, honest, non-misleading, and evidence-based information is an ethical responsibility and how media literacy can support it. **A, f**
5. Apply best practices for discussing and addressing consent-related issues with sexually marginalized clients. **A/D/F, f**

SEGMENT TEN

1. Demonstrate how performance goals, models, and reference points can limit expression and contribute to performance anxiety. **I, a, b**
2. Help partners employ the "Naked Pause" technique when defaulting to an automatic routine. **E, a**
3. Distinguish between "inside-out" and "outside-in" pathways to expression, pleasure, and arousal. **I/M**
4. Teach a mindful movement practice to cultivate “inside-out" pleasure pathways. **I/M, a**
5. Use body-scan exercises to promote embodied self-attunement. **I/M, a**
6. Understand the mechanism of erotic "emergence" and why uncertainty, anxiety, and creativity can lead to better sex. **I/M**
7. Teach the practice of "Erotic Attunement" to follow the flow of energy that is unfolding within and between partners rather than taking familiar pathways to arousal. **I/M, a, c**
8. Apply a seven-phase approach to addressing and overcoming the "Performance Trance." **E/I/M, a**
9. Teach the "Eros Cycle" as a tool to shift from performance to presence, and from perfection to attunement. **I/M, a**
10. Help partners create rituals and use imagery to relinquish goals and reference points before engaging sexually. **E/I/M, a**
11. Use the “working the edge” technique to help partners overcome sexual inhibition. **I/M, a, d**
12. Explain the Plane of Possibility Map (created by Dan Siegel, M.D.) and its relation to Pure Erotic Potential. **I/M**
13. Assess partners’ ability to “Embody” (phase 1 of the EROS cycle) and offer tools such as body scans, “Re-igniting the Inner Flame,” and “Fantasy and the Felt Sense” to overcome related barriers. **I/M, a, b**
14. Assess partners’ ability to “Relate” (phase 2 of the EROS cycle) and provide tools like “Back-to-Back Attunement” and the “Partner Attunement Activity” to help overcome barriers. **I/M, a, b, c**
15. Assess partners’ ability to “open to impulses” (phase 3 of the EROS cycle) and introduce tools like the “What’s Your Impulse” game and “Embracing Connection without Expectations” to help overcome related barriers. **I/M, a, b**
16. Assess clients’ capacity to savor pleasure (phase 4 of the EROS cycle) and provide tools like “Sensation Play” and “The Art of Savoring” to help overcome barriers to fully experiencing pleasure. **I/M, a, b**

SEGMENT ELEVEN

1. Describe the physiological changes that accompany aging and their impact on sexual function and expression. **G/H, d**
2. Understand how erectile instability can contribute to sexual avoidance and help partners expand the definition of "real sex" beyond genital-focused, orgasmic, or penetrative acts. **E/H/I, d**
3. Differentiate between "genital prime" and "sexual prime," and explore how maturity can enhance erotic connection in later life. **B/G**
4. Support aging partners in cultivating a playful, pleasure-centered approach to intimacy that allows eros to evolve alongside physical and genital changes. **B/E/H/I/M, a, d**
5. Guide partners in using mindfulness and compassionate self-awareness ("befriending") to open to the next chapter of their erotic journey with curiosity and care. **E/I, a**
6. Introduce and apply the concept of three types of intimate "dates" (Fun & Romance, Tending, and Erotic) to create a sustainable, long-term erotic plan. **E/I, a**
7. Identify and apply eight key features of "Optimal Sexuality" that promote fulfilling erotic connection in aging couples. **E/I/M, a**
8. Use the Sexual Journey Timeline to identify recurring cycles or patterns and explore how significant life events have influenced changes in sexual engagement. **B/H, a**

SEGMENT TWELVE

1. Recognize how erotic challenges serve as catalysts for psychological and relational growth throughout the lifespan. **B/N**
2. Explain how avoidance of erotic challenges can inhibit individual development and prevent partners from evolving into their fullest relational potential. **B/N, a**
3. Use the Pain Point diagram to illustrate how erotic perturbations are natural and necessary components of the relational growth cycle. **B/N, a**
4. Describe the transformative benefits of Awakened Intimacy and articulate the defining qualities of Stage 3 relationships, including mutual growth, emotional risk-taking, and erotic authenticity. **E/N, a**