

Using Cannabis Before Sex: A Mindful Pleasure Guide

This mindful guide is designed for women exploring cannabis as a tool for sexual healing, connection, and enhanced orgasm. *Using Cannabis Before Sex: A Mindful Pleasure Guide* offers thoughtful, research-informed suggestions for using cannabis to support relaxation, intimacy, and pleasure—without referencing specific dosages.

For a deeper experience, pair this guide with the *Cannabis & Orgasm Exploration Journal: A 7-Day Guided Journal for Mindful Pleasure & Self-Discovery*, available as a free download at www.femaleorgasmtraining.com.



by **Dr. Suzanne Mulvehill**

Mindful Cannabis Use Guidelines

Start Low, Stay Aware

- Begin with a low dose. Less is often more when it comes to pleasure.
- The goal is to enhance sensation and presence—not to disconnect or overthink.

Timing: Let It Build

- Inhalation (smoking/vaping): wait 10–20 minutes before sexual activity.
- Edibles or tinctures: allow 45–90 minutes, depending on your body.
- Use that time to ground yourself, breathe, or begin sensual touch.

Mindset: Relaxed, Curious, Open

- Let go of performance goals—be in a space of curiosity and exploration.
- Approach the session with openness, breath, and an invitation to connect.
- Ask yourself: What would it feel like to explore without pressure or expectation?



Creating the Perfect Environment

Set & Setting: Safe, Soft, Sensual

- Create a physical space that is calming, cozy, and free of distractions.
- Emotional safety is key—cannabis can amplify feelings, so set a container of trust.
- Lighting, music, scents, and touch all contribute to the experience.

Solo or Partnered? Start With You

- Trying it solo first lets you understand how cannabis affects your arousal and pleasure.
- Once you're comfortable, share it with a trusted partner who is respectful and communicative.
- If using together, discuss intentions and consent beforehand.

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?

What to Expect from Cannabis and Intimacy

Positive Effects

You may feel:

- Increased tactile sensitivity and heightened sensations
- Slowed time and deeper immersion in touch
- Emotional or spiritual connection
- Reduced anxiety or self-judgment

Potential Challenges

You may also feel:

- Sleepy, emotionally vulnerable, or too "in your head" if the dose is too high
- Cannabis affects everyone differently—stay mindful of how it feels for you

Cannabis as a Tool for Exploration



Use Cannabis as a Tool, Not a Crutch

Let cannabis support exploration—not become the only way to access pleasure.



Learn from the Experience

Learn from the heightened experience, and bring that awareness into future sessions with or without it.

1. SENSATIONS & SHIFTS What changed as the cannabis took effect? Emotionally, physically, sexually, spiritually—what did you notice?

Cannabis & Orgasm Exploration Journal

A 7-Day Guided Journal for Mindful Pleasure & Self-Discovery

Day 1

Date: _____

Alone or with a partner? Alone With Partner

Cannabis method used: Inhaled Edible Tincture Other

Strain/type (if known): _____

Amount: (Just say "low dose" if unsure) _____

Time consumed: _____

Time activity began: _____

Day 1: Set & Setting

Describe your space:

What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Body Connection

Did you feel more connected to your body? Yes
No At times

If yes, describe how:

Day 1: Mindset and Intentions

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?



Day 1: Sensations and Discoveries

What felt good or surprising? Any enhanced sensations or new discoveries?



Day 1: Orgasm Experience

1. ORGASM EXPERIENCE (if applicable)

Did you experience orgasm? Yes No

If yes:

- Was it easier, different, deeper, more emotional, or more intense than usual?
- What do you think contributed to that?

Day 1: Orgasm Reflection

Orgasm Qualities

Was it easier, different, deeper, more emotional, or more intense than usual?

Contributing Factors

What do you think contributed to that?



Day 1: If No Orgasm Occurred

If no:

- What do you think blocked it?
- Was pleasure still present in other ways?

Day 1: Pleasure Without Orgasm

Potential Blocks

What do you think blocked it?

Other Forms of Pleasure

Was pleasure still present in other ways?

Day 1: Integration

1. INTEGRATION What do you want to try next time? (Mindset, dose, setting, solo/partnered, timing, touch, etc.)

Day 1: Future Explorations

Next Time

What do you want to try next time? (Mindset, dose, setting, solo/partnered, timing, touch, etc.)

Experience Summary

One sentence that captures the experience:

"-----"

Day 2: Journal Entry

Day 2

Date: _____

Alone or with a partner? Alone With Partner

Cannabis method used: Inhaled Edible Tincture Other

Strain/type (if known): _____

Amount: (Just say "low dose" if unsure) _____

Time consumed: _____

Time activity began: _____

1. SET & SETTING

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Day 2: Creating Your Space

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Day 2: Mindset and Intentions

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?

Day 2: Sensations and Shifts

1. SENSATIONS & SHIFTS

What changed as the cannabis took effect? Emotionally, physically, sexually, spiritually—what did you notice?

Day 2: Body Connection

Did you feel more connected to your body? Yes No At times

If yes, describe how:

Day 2: Discoveries and Sensations

What felt good or surprising? Any enhanced sensations or new discoveries?

Day 2: Orgasm Experience

1. ORGASM EXPERIENCE (if applicable)

Did you experience orgasm? Yes No

If yes:

- Was it easier, different, deeper, more emotional, or more intense than usual?
- What do you think contributed to that?

Day 2: If No Orgasm

If no:

- What do you think blocked it?
- Was pleasure still present in other ways?

Day 2: Integration

1. INTEGRATION

What do you want to try next time? (Mindset, dose, setting, solo/partnered, timing, touch, etc.)

Day 2: Experience Summary

One sentence that captures the experience: "_____"

Day 3

Date: _____

Alone or with a partner? Alone With Partner

Cannabis method used: Inhaled Edible Tincture Other

Strain/type (if known): _____

Amount: (Just say "low dose" if unsure) _____

Time consumed: _____

Time activity began: _____

1. SET & SETTING

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Day 3: Creating Your Space

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?



Day 3: Mindset and Intentions

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?

Day 3: Sensations and Shifts

1. SENSATIONS & SHIFTS

What changed as the cannabis took effect? Emotionally, physically, sexually, spiritually—what did you notice?



Day 3: Body Connection

Did you feel more connected to your body? Yes No At times

If yes, describe how:



Day 3: Discoveries and Sensations

What felt good or surprising? Any enhanced sensations or new discoveries?

Day 3: Orgasm Experience

1. ORGASM EXPERIENCE (if applicable)

Did you experience orgasm? Yes No

If yes:

- Was it easier, different, deeper, more emotional, or more intense than usual?
- What do you think contributed to that?

Day 3: If No Orgasm

If no:

- What do you think blocked it?
- Was pleasure still present in other ways?

Day 3: Integration

1. INTEGRATION

What do you want to try next time? (Mindset, dose, setting, solo/partnered, timing, touch, etc.)

One sentence that captures the experience:

"_____"



Day 4: Creating Your Space

Day 4

Date: _____

Alone or with a partner? Alone With Partner

Cannabis method used: Inhaled Edible Tincture Other

Strain/type (if known): _____

Amount: (Just say "low dose" if unsure) _____

Time consumed: _____

Time activity began: _____

1. SET & SETTING

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Day 4: Mindset and Intentions

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?

Day 4: Sensations and Shifts

1. SENSATIONS & SHIFTS

What changed as the cannabis took effect? Emotionally, physically, sexually, spiritually—what did you notice?

Day 4: Body Connection

Did you feel more connected to your body? Yes No At times

If yes, describe how:



Day 4: Discoveries and Sensations

What felt good or surprising? Any enhanced sensations or new discoveries?

Day 4: Orgasm Experience

1. ORGASM EXPERIENCE (if applicable)

Did you experience orgasm? Yes No

If yes:

- Was it easier, different, deeper, more emotional, or more intense than usual?
- What do you think contributed to that?



Day 4: If No Orgasm

If no:

- What do you think blocked it?
- Was pleasure still present in other ways?

Day 4: Integration

1. INTEGRATION

What do you want to try next time? (Mindset, dose, setting, solo/partnered, timing, touch, etc.)

One sentence that captures the experience: "_____"

Day 5

Date: _____

Alone or with a partner? Alone With Partner

Cannabis method used: Inhaled Edible Tincture Other

Strain/type (if known): _____

Amount: (Just say "low dose" if unsure) _____

Time consumed: _____

Time activity began: _____

1. SET & SETTING

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?



Day 5: Creating Your Space

Describe your space: What did the room look/feel/sound/smell like?

What details did you create to feel safe, sensual, or relaxed?

Day 5: Mindset and Intentions

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?

Day 5: Sensations and Shifts

1. SENSATIONS & SHIFTS

What changed as the cannabis took effect? Emotionally, physically, sexually, spiritually—what did you notice?

Day 5: Body Connection

Did you feel more connected to your body? Yes No At times

If yes, describe how:

Day 5: Discoveries and Sensations

What felt good or surprising? Any enhanced sensations or new discoveries?

Day 5: Orgasm Experience

1. ORGASM EXPERIENCE (if applicable)

Did you experience orgasm? Yes No

If yes:

- Was it easier, different, deeper, more emotional, or more intense than usual?
- What do you think contributed to that?

Day 5: If No Orgasm

If no:

- What do you think blocked it?
- Was pleasure still present in other ways?

Day 5: Integration

1. INTEGRATION

What do you want to try next time? (Mindset, dose, setting, solo/partnered, timing, touch, etc.)

One sentence that captures the experience: "_____"

Day 6

Date: _____

Alone or with a partner? Alone With Partner

Cannabis method used: Inhaled Edible Tincture Other

Strain/type (if known): _____

Amount: (Just say "low dose" if unsure) _____

Time consumed: _____

Time activity began: _____

1. SET & SETTING

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Day 6: Creating Your Space

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Day 6: Mindset and Intentions

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?

Day 6: Sensations and Shifts

1. SENSATIONS & SHIFTS

What changed as the cannabis took effect? Emotionally, physically, sexually, spiritually—what did you notice?

Day 6: Body Connection

Did you feel more connected to your body? Yes No At times

If yes, describe how:

Day 6: Discoveries and Sensations

What felt good or surprising? Any enhanced sensations or new discoveries?

Day 6: Orgasm Experience

1. ORGASM EXPERIENCE (if applicable)

Did you experience orgasm? Yes No

If yes:

- Was it easier, different, deeper, more emotional, or more intense than usual?
- What do you think contributed to that?

Day 6: If No Orgasm

If no:

- What do you think blocked it?
- Was pleasure still present in other ways?

Day 6: Integration

1. INTEGRATION

What do you want to try next time? (Mindset, dose, setting, solo/partnered, timing, touch, etc.)

One sentence that captures the experience: "_____"

Day 7

Date: _____

Alone or with a partner? Alone With Partner

Cannabis method used: Inhaled Edible Tincture Other

Strain/type (if known): _____

Amount: (Just say "low dose" if unsure) _____

Time consumed: _____

Time activity began: _____

1. SET & SETTING

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?

Day 7: Creating Your Space

Describe your space: What did the room look/feel/sound/smell like? What details did you create to feel safe, sensual, or relaxed?



Day 7: Mindset and Intentions

Describe your mindset going in: What were you feeling before? Any intentions or goals you set?

Day 7: Sensations and Shifts

1. SENSATIONS & SHIFTS

What changed as the cannabis took effect? Emotionally, physically, sexually, spiritually—what did you notice?

Did you feel more connected to your body? Yes No At times

If yes, describe how: