



Exploring the
Dimensions of
**Human
Sexuality**
Sixth Edition

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Dedication

Images courtesy of Jerrold Greenberg



This book is dedicated to three of the cutest grandchildren possible: Jonah, Zoe, and Garrett.
The joy they bring is unsurpassed.

—*Jerrold S. Greenberg*

To Susan J. Laing, with appreciation for her part in a wonderful relationship.

—*Clint E. Bruess*

To M . . . for everything.

—*Sara B. Oswalt*

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Preface

■ A Message from the Authors

Human sexuality is an important component of a healthy lifestyle. It is not a topic to be hidden or avoided, as this can lead to serious consequences for one's health and overall life satisfaction. When human sexuality is understood, the result is a healthier lifestyle and an increased ability to achieve consistency between one's actions and moral principles. The authors of this text have seen the effects of both approaches to human sexuality in their own families.

The benefit of perceiving sexuality as a topic of discussion and understanding can be seen in one example of a telephone call from one of the author's daughters. She said that her 14-year-old daughter asked about noises she sometimes heard coming from her parents' bedroom. Her mother explained that the noises were her mom and dad enjoying physical contact as part of showing love for each other. Fortunately, she had previously talked with her daughter about sexuality and reproduction, so she was able to refer back to that conversation. She asked her father for advice regarding how she handled the situation and what she should do further. He responded that she should be pleased that her daughter felt comfortable enough to talk with her about the noises, and that it was good that she had explained sexuality and reproduction to her daughter so she had accurate information that was appropriate for her age. Beyond that, the author simply said that his daughter was on the right track related to the sexuality education of her daughter, and the best thing to do moving forward was to continue to keep the lines of communication open.

In contrast, an example of how human sexuality is inappropriately conceptualized occurred when the son of a different author was entering fifth grade. School personnel organized a committee of parents to review instructional materials for the sexuality education course. As luck would have it, the author was selected to serve on this committee. At the first committee meeting, he was surprised to learn that the program focused exclusively on reproductive anatomy and physiology. He asked, "How will you help students process their feelings pertaining to sexuality?" The answer was that the reproductive system would be taught just as any other body system would, with no plans to include a discussion of feelings associated with sexuality. At that point the author volunteered to

resign from the parent review committee and asked to join the "Digestive System Parent Review Committee." Of course, there was none. That allowed the author to point out that there really is a distinction between education regarding sexuality and education pertaining to other health issues, and that this distinction needed to be addressed with students. We do that in this text by exploring the varied dimensions of human sexuality.

In fact, we have known students who would have liked to enroll in our human sexuality courses but did not due to their discomfort regarding sexuality. Some were embarrassed to have their friends or relatives find out that they did not know *everything* about sexuality. Others felt uncomfortable discussing sexuality in a class with their peers. And still others believed they knew more than they actually did, although in reality they did not know enough to live a sexually healthy life. Consequently, in *Exploring the Dimensions of Human Sexuality, Sixth Edition* we make a special effort to engage students in a nonjudgmental manner and make the content interesting, resulting in enhanced learning.

■ The Dimensions of Human Sexuality

In many regards, human sexuality today does not differ from that of our ancestors' times. Biologically, human reproduction occurs in the same way. As in the past, religion and culture have a significant impact on our sexuality, as does public policy. As long-time sexuality educators, we know that no single aspect of sexuality can be separated from the others, and no single aspect is more important than the others. Therefore, we have chosen to write a text that presents all aspects of sexuality as interconnected and significant. Throughout this text you will find an emphasis on health and well-being based on the assumption that we are all sexual beings from birth until death and that sexuality should be viewed in its totality—with biological, psychological, and sociocultural dimensions.

■ The Organization of the Book

The dimensions discussed in the text can be broken down into biological, psychological, and sociocultural categories. Some examples are described here.

Biological Dimensions

Physiology

The basis of understanding sexuality is knowledge about the physiology of our bodies. Factual information lays the foundation for critical thinking—without the facts, you cannot begin to think critically about your sexuality. The greater your knowledge, the more likely you are to take responsibility for your sexual health.

Gender

The physiological differences between the sexes create the foundation for the development of psychological and social wellness and strongly influence our perceptions of sexual wellness. Gender dimensions receive a chapter of their own as well as a boxed treatment in every chapter.

Psychological Dimensions

Psychology

Developing a positive image of self and sexuality is critical to developing sexual wellness. A positive body image lends itself to overall wellness; a negative self-image can lead to drug abuse (steroids or diet pills) or psychological disorders (anorexia, bulimia, binge eating disorder, or muscle dysmorphia). Body image is so important that we devote a chapter to the topic—the most comprehensive coverage in the market!

Spirituality

Religious and spiritual beliefs influence feelings about sexual behavior, premarital sexual activity, adultery, divorce, contraception, abortion, and masturbation. Spiritual issues are discussed in Multicultural Dimensions boxes and in the opening chapter.

Sociocultural Dimensions

Multicultural

Cultures within the United States and around the world differ in their views of sexuality. From semi-nude beaches in the south of France to Middle Eastern Muslim communities where women are covered from head to toe, ours is a world of diversity. Sometimes these diverse behaviors are a part of the culture, and other times they are given legal sanction. A good example of this is the many ways in which abortion is viewed. Views on abortion range from strict prohibition, including strong laws, to simply as a method of birth control, such that it is common for women to have as many as four or five abortions in her lifetime. Your ability to respect your sexual partner's cultural beliefs and

feelings will result in a higher level of satisfaction for both of you. To help students better understand sexual diversity, each chapter contains boxed examples of sexual beliefs or practices pertaining to a culture within the United States or a culture elsewhere in the world.

Ethics

Ethical considerations are the basis of legal and moral decision making concerning sexuality. The law and courts regulate such sexual issues as access to abortion clinics, workplace sexual harassment, and ownership of frozen embryos. Moral implications of ethical decisions include sexual coercion and underscore the importance of taking responsibility for your sexual wellness. Ethical Dimensions boxes appear in every chapter, and the *Sexual Ethics, Morality, and the Law* chapter covers these issues in depth.

Public Policy

Public policy also affects our sexual behavior. For example, national health objectives promote sexual health awareness pertaining to acquired immune deficiency syndrome (AIDS) and sexually transmitted infections (STIs), unwanted teenage pregnancies, and prenatal care. Furthermore, public policy on free speech continues to allow the uncontrolled distribution of sexually explicit material on the Internet. Unfortunately, as a result of public policy, access to proper health care, birth control, and sexually related choices is often unavailable to some people.

Integration of Dimensions

Given the many factors influencing our sexual behavior, we have created a striking full-page feature that recognizes their interwoven nature: *Exploring the Dimensions of Human Sexuality*. It serves as an integrated approach that ties all these strands together. This feature, found at the end of each chapter, assists students in understanding how many different aspects of sexuality affect their sexual health and influence their sexual behavior. Our intent is to help students envision the convergence of the many aspects of sexuality and help them make sexual decisions that lead to a lifetime of positive sexual health and wellness.

■ Pedagogy

Because we realize that learning best occurs when students are actively involved, we have created a text that goes beyond merely presenting factual knowledge about the varied dimensions of human sexuality.

We provide numerous ways for students to explore the dimensions of human sexuality and determine how each affects their *personal* sexuality. This exploration is facilitated through the pedagogical features described next.

Body Image Chapter

We offer a comprehensive look at the concept of body image. It is rare to find so much detail on this subject together in one place. The *Body Image* chapter discusses how body image affects self-esteem and sexuality, how the quest for a perfect body creates problems ranging from eating disorders to cosmetic surgery and steroid abuse, and how body image affects both sexes.

Dimensions of Human Sexuality Boxed Features

A carefully designed program reinforces the dimensions theme of the text with five distinct types of boxes: Multicultural Dimensions, Global Dimensions, Gender Dimensions, Communication Dimensions, and Ethical Dimensions. *Please refer to page xxi of the Visual Walkthrough for detailed descriptions of these features.*

Critical Thinking

Exploring the Dimensions of Human Sexuality, Sixth Edition requires students to think critically about how the multifaceted dimensions of human sexuality relate to them. To that end, we have embedded critical thinking questions within the text to help students reflect on the subject matter and understand its implications for their sexual health. Critical thinking questions are found in boxes, in photo captions, and in the end-of-chapter section—including application questions related to the chapter-opening story, critical thinking questions about material, and a critical thinking mini-case. Critical thinking questions help students recall information and synthesize new material with existing knowledge and stimulate students to make informed judgments about the information provided.

“Myth vs Fact” and “Did You Know...” Boxes

Students’ sexual health and wellness are also influenced by sexual myths and folklore. Many of our

brief sidebars are designed to set students straight on such myths. “Did You Know. . .” boxes add whimsical and high-interest information to engage the student further.

Chapter-Opening Story

Each chapter opens with an engaging story that explores the concepts to be discussed in the chapter. Students are drawn into the chapter material with a high-interest case and introduced to the topics that will be discussed. At the end of the chapter, students are asked to relate the chapter’s information to application questions about the opening story.

Reviewing the Dimensions of Human Sexuality

Each chapter ends with an interactive feature designed to help students take responsibility for their sexual health and wellness. This section includes an interactive self-assessment designed to help students understand and clarify their own feelings about sexuality issues presented in that chapter. It also includes discussion questions, application questions pertaining to the opening story, critical thinking questions, a critical thinking mini-case, and a self-assessment.

■ New to this Edition!

Throughout this new edition, extensive updates have been made to focus on information and statistics about recent developments. Information from hundreds of new references has been added—almost all of these references were published in the last few years. Suggested readings at the end of each chapter have been updated, as have the Web Resources sections at the end of each chapter. Some sections within chapters have been moved to improve organization, others have been deleted, and new sections have been added to reflect changes related to human sexuality. New and more appropriate photos and illustrations have replaced older ones as needed.

In addition, the sixth edition includes 22 chapters, as compared to the 18 chapters found in previous editions. The new chapters were created through the expansion of earlier editions’ “In Focus” features on unexpected pregnancy outcomes, body image, alternative sexual behavior, and HIV and AIDS.

Chapter-Specific Changes and Updates

- **Chapter 1** offers a summary of selected research from the UCLA Higher Education Research Institute related to college freshmen and their opinions about issues related to sexuality. In addition, updated research findings from the Youth Risk Behavior Surveillance are included.
- **Chapter 2** includes the latest research related to sexuality. There are 26 new references in the chapter.
- **Chapter 3** examines newer electronic modes of communication related to sexuality. It also includes a new Multicultural Dimensions box about female and male subcultures, a revised Ethical Dimensions box about ethics, communication, and date rape, and a new list of possible barriers to good sexual communication.
- **Chapter 4** contains a new Global Dimensions box on female mutilation in various parts of the world, a new figure on temperature and mucus changes during the menstrual cycle, the latest recommendations regarding cervical cancer screening, and the latest research on both female ejaculation and the safety of silicone breast implants.
- **Chapter 5** provides the latest American Academy of Pediatricians' policy statement on circumcision, additional discussion of prostate cancer incidence and screening for African American males, and the latest recommendations for preventing pressure on the perineum when bicycling.
- **Chapter 6** includes an updated table detailing the percentage of people having unprotected sexual intercourse without knowing their partners' history. In addition, there are added recommendations related to tantric sex techniques.
- **Chapter 7** includes updated information on the availability of emergency contraception and other contraceptive methods, such as Skyla and Liletta, two new IUDs. The public health emphasis on *long-acting reversible contraception (LARC)* is also discussed.
- **Chapter 8** includes a revised story introducing the chapter and an expanded section that covers the work of midwives and doulas. The chapter coverage also includes expanded discussion of home births, a revised section on nutrition during pregnancy, and an updated section on drugs' effects on the fetus during pregnancy, including a new section on methamphetamine.
- **Chapter 9** provides updated rates and procedures for abortions. It also includes a revised summary of state laws regarding abortion availability and restrictions, along with a revised section on domestic and international adoption practices and challenges. A new Ethical Dimensions box on crisis pregnancy centers is also included.
- In **Chapter 10**, a new Gender Dimensions box on terminology covers 11 important terms. There is also a new "Did You Know..." box on gender relations and the prospects for more fairness and equity. Recent gender issues and potential controversies are included as well. Information about transgender has been updated and greatly expanded.
- **Chapter 11**, on body image, includes updated information about the relationship between sexuality and body image, including discussion of self-image, partner preference, and beliefs and behaviors. A new "Did You Know..." box on the pros and cons of Barbie dolls has been added, as well a new Gender Dimensions box on self-esteem and body image. In addition, the role of the Internet in influencing concepts of body image is discussed. An update on developments and issues related to cosmetic surgery and body image is included.
- **Chapter 12** is now titled *Sexual Orientation, Identity, and Expression* to better reflect the content and issues covered. Terms in the chapter are defined even though some of their meanings are very fluid—that is, they have changed over time and continue to change. The chapter content includes a new Multicultural Dimensions box focusing on race and ethnicity identities among LGBT adults, a section on disparities that bisexual people often experience, a new "Did You Know . . ." box on Native Americans' concepts of gender and sexual orientation, and current statistics about LGBT people. In addition, the chapter provides new

information on the topic of intersex, a new “Did You Know . . .” box on animals and homosexuality, a new Global Dimensions box on attitudes toward LGBT rights in various countries, and abundant information from experts on LGBT information and issues.

- **Chapter 13** includes updated information about the effectiveness of comprehensive sexuality education programs. A new Ethical Dimensions box focuses on vaccination of children against HPV, and the content includes updated statistics about sexual behaviors of teens, recent information about teen pregnancies and births, and a summary of new information about child sexual abuse and sexual harassment.
- **Chapter 14** explores information and opinions about the “hookup culture.” The influence of technology on the behavior of college students is described, and recent research on the sexual behavior of young adults is discussed. Information about cohabitation is also provided. A new Communication Dimensions box entitled “How to Make Someone Fall in Love with You” is included, along with information about how to promote healthy relationships and marriages. A “Did You Know . . .” box related to chances of divorce has been added as well.
- **Chapter 15** contains the latest research related to the existence of the G spot and the controversy surrounding its existence. Research on sexual fantasies and the differences in sexual fantasies between males and females is included as well. A table was added that delineates the time spent (in minutes) during sexual intercourse, on a state-by-state basis. Updated data are also included on the prevalence and frequency of various sexual behaviors, the sexual behavior of LGBT people, and sexual activity of the elderly.
- **Chapter 16** has a new “Did You Know . . .” box focusing on theories about paraphilias. Updated information is also included about many alternative sexual behaviors, such as exhibitionism, voyeurism, sexual masochism, and sexual sadism, among others. New information about treatments for sexual offenders is included.
- **Chapter 17** includes a number of new photos. This chapter now offers increased emphasis on preventing and dealing with sexual violence on campus, including important elements of a campus sexual violence policy. A new “Did You Know . . .” box deals with the controversy over “gray rape,” and a new Global Dimensions box gives examples of attitudes toward child sexual abuse outside the United States. The various types of relationship abuse are also explained, and updated information on domestic violence is included.
- **Chapter 18** covers self-testing for STIs in more depth. Social determinants of health are covered more extensively than in previous editions, including how they relate to STI rates. More discussion of HPV and oral sexual activity is included as well.
- **Chapter 19** includes a refreshed introductory story. Multicultural, Gender, and Ethical Dimensions boxes were added on three topics: HIV and American Indians/Alaskan Natives, transgender people and HIV, and the roles of recovering drug addicts in peer education for HIV prevention. The discussion of treatment for HIV and AIDS, including the importance of linkage when caring for HIV-infected individuals, has been expanded as was the discussion on pre-exposure prophylaxis related to HIV. Information is now included on post-exposure prophylaxis as well, and the discussion on prevention of HIV infection has been extensively revised.
- **Chapter 20** is updated to be consistent with *DSM-5* terminology and criteria for sexual disorders (including deletion of sexual aversion disorder). While not listed in the *DSM-5*, persistent genital arousal disorder (PGAD) is now covered in this chapter as well. The Multicultural Dimensions box on Latino culture and sexual dysfunction has been updated, as has the Ethical Dimensions box on sexual surrogacy. A new box has been included detailing the world’s first FDA approved drug designed to treat Hypoactive Sexual Desire Disorder (HSDD) for women.
- **Chapter 21** contains a great deal of updated information about sexuality and advertising. A new table on the top 25 dating and relationship reality TV shows was added.

Discussions related to the media and sexuality were extensively updated, along with information on technology and sexuality. A new Gender Dimensions box on male and female use of pornography has been added, as was extensive new information related to pornography in general. Information about sex work and sex workers has been significantly updated as well.

- **Chapter 22** updated the information about differences in the sexual language used in different cultures and countries. A new discussion focuses on sexting, its implications, and relevant precautions. Data on the prevalence of extramarital affairs were also added.
- In the Epilogue, the scenario has been updated to reflect changes since the last edition.

When appropriate, boxed material has been changed and updated throughout the sixth edition. Statistics have also been updated throughout the text—for example, the most current statistics

regarding STIs, adoptions, abortions, birth rates, marriage and divorce rates, and prevalence of sexual behaviors are presented. There is also a significant increase in the number of references cited to reflect the latest research and recommendations by experts. All boxed material has been updated as appropriate, and photos have been added or deleted to make them more appropriate to current issues.

Writing this text has been a service-learning activity for us. We did abundant and thorough research to identify state-of-the-art knowledge and attitudes pertaining to sexuality, and learned a great deal in doing so. That was the “learning” part of the service-learning equation. The “service” part relates to our interest in helping to enhance the sexual health and wellness of our readers. As such, we hope you find the information we included, the issues we raised and discussed, and the myths we debunked useful as you live, express your sexuality, and make decisions related to your sexuality. If you do, the time, effort, and energy we have devoted to writing this text will have been well worth that investment.

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Dr. Greenberg is Professor Emeritus in the School of Public Health at the University of Maryland. He earned his baccalaureate and master's degrees from the City College of New York and then continued his education at Syracuse University, where he earned his doctorate. Dr. Greenberg taught at Syracuse University, Boston University, and the State University of New York at Buffalo before accepting a professorship at the University of Maryland in 1979.

Dr. Greenberg has written more than 50 books on such topics as elder care, health, stress management, physical fitness, sexuality, and methods of health education. In addition, he has published more than 80 articles in professional journals and lay magazines.

Among Dr. Greenberg's honors are the University of Maryland Service-Learning Advocate of the Year award for 2003–2004; the American School Health Association's Distinguished Service Award; selection as Alliance Scholar by the American Alliance for Health, Physical Education, Recreation, and Dance; the Presidential Citation, the Certificate of Appreciation, and the Scholar Award of the American Association for Health Education; selection for inclusion in *Who's Who in America*, *Outstanding Young Men of America*, and *Who's Who in World Jewry*. Dr. Greenberg has also served on the editorial boards of the professional journals *Health Education* and *The Journal of School Health*, and as a reviewer for other professional journals. In addition, Dr. Greenberg has conducted stress management workshops for professional, business, and lay organizations throughout the United States.

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Dr. Bruess has coauthored more than 15 textbooks in the areas of human sexuality, sexuality education, personal health, and school health programs. In addition, he has published numerous articles in professional journals and served in elected and appointed positions for the American School Health Association (also a Fellow), American Association for Health Education (also a Fellow), and Society of Public Health Educators. Dr. Bruess continues to review professional articles for *Health Education*, *The Journal of School Health*, *The International Journal of Health Education*, *The American Journal of Health Behavior*, and *The American Journal of Sexuality Education*. He currently teaches a Human Sexuality Course at Samford University and a graduate-level Sexuality Education course at the University of Alabama.

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A Visual Walkthrough

Exploring the Dimensions of Human Sexuality, Sixth Edition is designed around the central theme that our feelings, attitudes, and beliefs regarding sexuality are continually influenced by our internal and external environments. All aspects of sexuality—biological, spiritual, psychological, and sociocultural—are interconnected and significant. The boxed feature program, additional pedagogy, and ancillaries of this new text have been designed around these core concepts.

Boxed Features



Communication Dimensions

These boxes discuss communication issues that arise around sexuality between the genders, partners from different ethnic groups, and others.



Multicultural Dimensions

To better appreciate how various people view sexuality, we offer a multicultural boxed feature. These boxes deal exclusively with diversity issues within the United States.



Global Dimensions

Sexuality is viewed very differently outside of the United States. Issues such as divorce in China and international differences in discussing sexuality are discussed in the Global Dimensions boxes.



Gender Dimensions

Issues arising from gender are integrated throughout the text, discussed in detail in the *Gender Dimensions* chapter, and featured in the Gender Dimensions boxes found in each chapter. Topics covered in these boxes include communication breakdown between genders, responsibility for contraception, and many others.



Ethical Dimensions

The importance of ethics in sexuality is underscored in the Ethical Dimensions boxes. This is where topics such as abstinence-only education and the ethics surrounding technological advances are discussed.

Pedagogical Design

Chapter-Opening Pedagogy

Each chapter-opening page gives the reader a glimpse of the content with chapter objectives and a list of the Dimensions of Human Sexuality boxed features that will follow. In addition, a high-interest and engaging real-life story draws students into the chapter material and introduces them to the topics that will be discussed. This opening story is revisited at the end of the chapter in the application questions.

CHAPTER 20 Sexual Dysfunction and Therapy		
FEATURES <ul style="list-style-type: none"> Gender Dimensions: Sexual Issues for Older Men and Women Communication Dimensions: Discussing Sexual Dysfunction Multicultural Dimensions: Sexual Dysfunction and Latino Populations Global Dimensions: Sexual Disorders Around the World Ethical Dimensions: Should Surrogates Be Used in Sex Therapy? 	CHAPTER OBJECTIVES <ol style="list-style-type: none"> Describe the major male and female sexual dysfunctions. Evaluate what makes the inability to perform sexually a clinical dysfunction. Identify the multidimensional causes of sexual dysfunction, including the physical, psychological, and sociocultural aspects. Compare and contrast the varied approaches to treating sexual dysfunctions. Explain why many different models of therapy exist. 	INTRODUCTION <p>After he was diagnosed with prostate cancer in 1991, Senator Bob Dole underwent treatment, including surgery. He has since avidly promoted the importance of early detection and encouraging men to speak frankly with their doctors about prostate-related problems.</p> <p>But it was in May 1998 that Dole made his biggest disclosure: He said on Larry King's talk show that he had been among the men who took part in the trials for the drug Viagra (sildenafil). Viagra is a drug to treat men who have difficulty achieving an erection (erectile dysfunction). In effect, Bob Dole was admitting that he, as do millions of other men, had a sexual dysfunction—specifically, erectile disorder. The next day, Elizabeth Dole, his wife, was asked about the drug during a public appearance. She laughed and said with a beaming smile, "It's a great drug!"</p> <p>Such public disclosures by celebrities and politicians make taboo topics—such as sexual dysfunctions—the subject of discussion among friends, colleagues, classmates, and even couples. Dole's 1998 public announcement, followed by commercials in March 1999, offered frank and genuine advice: If you have a problem, see a doctor. In the case of erectile disorder, some problems are physical and can be solved with a prescription or a medical procedure. Other disorders, though, have psychological or sociocultural dimensions at their root.</p> <p>The Viagra story also touches on the socioeconomic and political dimensions of sexuality. In the 1970s, insurers would not have covered treatments for erectile disorder, because the condition was believed to be psychological. Insurers began coverage as research proved there were physical causes as well. Coverage for Viagra is limited generally to 12 pills per month—the recommended dosage.</p>

Exploring the Dimensions of Human Sexuality

This feature organizes the multifaceted issues in each chapter into biological, psychological, and sociocultural factors.

Reviewing the Dimensions of Human Sexuality

This end-of-chapter activity gives students the opportunity to review and apply key chapter concepts. Items in this section include discussion questions, critical thinking questions, and application questions that relate to the chapter-opening story. The Exploring Personal Dimensions section directs students to focus on personal choices and take responsibility for their sexual health and well-being.



26 CHAPTER 1 Introducing the Dimensions of Human Sexuality

Summary

- Sexuality is part of our personality, and it involves the interrelationship of biological, psychological, and sociocultural dimensions.
- Sociocultural influences include religious influences, multicultural influences, ethical influences, and political influences.
- The sexual revolution had many influences on present thinking about human sexuality.
- Throughout history there have been many attempts to control sexual behavior. Most of these efforts can be seen in the moral and legal codes of the time.
- Throughout recorded history, many theories and myths about conception have existed. It was not until 1875 that it was demonstrated that the sperm penetrates and combines with the egg.
- Methods employed to prevent pregnancy have been used for thousands of years. The condom first appeared in the mid-16th century.
- Abortion in early pregnancy was legal in ancient China and Europe. In 1973 the U.S. Supreme Court legalized a woman's right to decide to terminate her pregnancy.
- There have been changes in sex roles throughout the centuries. In recent years many issues related to women's roles continue to be raised.
- It is important to use sound critical thinking skills when making decisions related to human sexuality.
- Studying human sexuality is important to obtain accurate sexual knowledge, clarify personal values, improve sexual decision making, understand the relationship between human sexuality and personal well-being, and explore how the varied dimensions of human sexuality influence one's sexuality.

Discussion Questions

- List the three main dimensions of sexuality and their subdivisions, and give examples of each.
- Trace the historical aspects of human sexuality, including the sexual revolution and the changing roles of sex and culture.

Critical Thinking Questions

- Consider your own sexuality. Write about how each of the three dimensions affects you. Which has the greatest effect on you? The least? Explain your answers.
- Use the decision-making model to decide whether to engage in a sexual activity that you have not yet done. Having thought the issue through, would you proceed? Which precautions might you take to promote safer sexual behavior?

Critical Thinking Case

Should an Artificial Womb Be Used?

People often need to focus on ethical questions related to conception. For example, an article in the *New York Times Magazine* by Perri Klass (September 29, 1996, 117-119) reports that Japanese researchers developed a technique called *extracorporeal fetal incubation* (EUFI). They took goat fetuses, supplied them with oxygenated blood, and suspended them in incubators that contained artificial amniotic fluid (the fluid that surrounds a fetus in a pregnant woman's uterus) heated to body temperature. So far, the researchers have been able to keep

goat fetuses alive for 3 weeks, but they are confident they can extend the length of time and ultimately be able to apply this technique to humans. When they do, we will have an artificial womb. This will allow us to have more control over conception and birth than ever before.

If it were ever possible, should an artificial womb be used for human pregnancies? Which circumstances would warrant the use of an artificial womb for human births? Consider the case in which a woman had fertile eggs but had had her uterus removed as a result of cancer. Should she be able to use EUFI to have a baby? What about the female executive who wants a family but worries that a pregnancy (and postpartum leave) will sideline her career? What about the couple who would otherwise use a human surrogate womb? Consider further social consequences: Should the insurance companies pay for the cost of using the artificial womb? Should the government allot Medicaid money for the socioeconomically deprived who wish to use such a service? Or should such a service be available only to the wealthy?

Exploring Personal Dimensions

Sexuality and Human Relations

A number of internal and external forces in your life influence the decisions you make regarding sexual behavior. What you do may be in harmony with some of these forces and in conflict with others.

Directions

Give a value to the following forces in your life as they pertain to your sexual behavior (i.e., what makes you choose to be sexually active? If you are married, apply this tool to a specific sexual behavior or such as your degree of fidelity to your spouse or your degree of sexual activity with your spouse.)

a = a major force influencing my sexual behavior
 b = a moderate force influencing my sexual behavior
 c = an insignificant force influencing my sexual behavior

- Religious influence
- Family influence
- How it feels when we kiss and hug
- My own self-image (how I think I look to others)
- My sense of right or wrong
- Radio, television, Internet, or movies
- How it feels to touch someone
- How I learned to act
- The way I feel inside or music
- Literature (books, magazines)
- Pleasure
- My judgment
- My sense of what I should and should not do
- Friends' influence
- Physical stimulation
- Introversion or extroversion (how outgoing I am)
- My morals or values
- The expectations/relationship I have with boyfriend/girlfriend (for marrieds, consider friends other than spouse)
- Fear of, or anticipation of, pregnancy
- Desire to feel good about myself

Scoring

a = 3 b = 2 c = 1

Total values as follows from top to bottom of the four columns.

Column A	Column B	Column C	Column D
1. _____	2. _____	3. _____	4. _____
5. _____	6. _____	7. _____	8. _____
9. _____	10. _____	11. _____	12. _____
13. _____	14. _____	15. _____	16. _____
17. _____	18. _____	19. _____	20. _____
Totals _____			

Interpretation

Column A represents the degree to which your morals and values or beliefs influence your sexual behavior and decisions.
 Column B represents the degree to which social forces influence your sexual behavior.
 Column C represents the degree to which biological factors influence your sexual behavior and decisions.
 Column D represents the degree to which psychological forces influence your sexual behavior and decisions.

Why Study Sexuality? 27

■ Special Features

Myth vs Fact

Students' sexual health and wellness are influenced by sexual myths and folklore. "Myth vs Fact" boxes identify myths associated with the material presented in each chapter along with the fact to dispel each myth.

Myth vs Fact

Myth: Sexual dysfunctions occur because someone either has been sexually abused or raped or has masturbated too often.

Fact: It is true that sexual abuse, such as rape and child abuse, can contribute to the development of a sexual dysfunction. Yet, there are many people who experience those traumatic events and never develop a sexual dysfunction. Regarding masturbation, there is no evidence that the frequency of masturbation is in any way related to the subsequent development of a sexual dysfunction.

Myth: Guys who "can't get it up" are not real men.

Fact: Many cases of erectile dysfunction are caused by

physiological problems. To classify these men as less than real men is analogous to characterizing any man who has any physical illness as not a real man. The inability to achieve and maintain an erection is in no way related to manliness.

Myth: Women are not naturally interested in sex, so a woman who cannot be sexually aroused is quite normal.

Fact: Males and females have a natural interest in and capacity for sex, although the level of desire and arousal differs between people. When males or females are experiencing less desire or arousal than they would like and this experience distresses them, they should seek professional help.

Did You Know . . .

Brief "Did You Know . . ." sidebars add whimsical and high-interest information to further engage the student.



Did You Know . . .

Where to Find Help

The following numbers can be helpful if you want to find out more about reporting abuse or if you want more information about abuse:

Child abuse: (800) 4-A-CHILD (422-4453)

Elder abuse: (800) 677-1116

Sexual assault: (800) 656-4673

Domestic violence: (800) 799-7233

■ Teaching and Learning Aids

Instructor resources such as PowerPoint lecture presentations, a TestBank, and an instructor's manual assist in classroom preparation.

An Interactive Online Workbook allows students to review chapter topics and assess their own sexuality behaviors in relation to these topics. Exercises and activities include Chapter Summary, Fill in the Blanks, Review the Dimensions, Focus on the Facts, Quick Questions, and Test Your Knowledge.

