PART 1

Introduction to Sexuality Education

Chapter 1  
Sexuality, You, and the Learner

Chapter 2  
Foundations for Sexuality Education

Chapter 3  
The Controversy

Chapter 4  
Understanding Yourself

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Insight 1-1

What do you think of first when you hear or read the word sex? List the words or phrases that come to mind.

- Sex
- Reproduction
- Fun
- Moral feelings
- Sin
- Dirty
- Unspeakable
- No-no

The common thoughts people have when they hear or read this three-letter word usually relate to intercourse, reproduction, fun, and moral feelings. Some people associate the word with something “dirty”; some think the subject should not be discussed at all. Whatever thoughts, feelings, images, and impressions we have in regard to sexuality are the result of many different kinds of experiences we have had throughout our lives. We have learned from our parents, our relatives, our friends; from entertainment media and advertisements; from our churches and schools.

We have learned to consider sexuality in certain ways, most of them quite narrow and traditional. Think again about the list you just made. How many of the words you came up with relate mainly to a sexual act? How often do you hear people talking of “having sex” or “looking for sex”? Traditionally, human sexuality, if thought about at all, has been thought to have to do with participating in intercourse or some other sexual act, and references to sexuality have been cloaked in negative terminology. Traditional concepts imply that people participate in sexual behavior only on occasion and at other times are fundamentally asexual beings. This amounts to the view that although individuals participate in sexual acts, sexuality does not otherwise exist as part of individuals’ personalities.

In the past, the word sex was often used interchangeably with words like sin, dirty, unspeakable, and no-no. There are some historical reasons for this negative attitude, and the influences of history and learning have affected contemporary concepts of human sexuality as well.

What do you feel people today think of when the word sex is mentioned? You have already identified what goes on in your own mind, but how about your friends—what do they think? And your parents? Relatives? Because you are probably not about to run out and conduct a neighborhood survey at this point (although you may find it interesting to survey a few people if you get the chance), consider what you think one or two friends and one or two relatives would answer if you asked them to define the word sex for you. You will probably quickly realize that there are similarities between their attitudes and the narrow, negative concepts...
already discussed. Despite the passage of time, many people today still think about sexuality only in terms of sexual acts or other small pieces of the larger picture.

We found many examples of this narrowmindedness about sexuality when we started doing research for this book. It seemed appropriate to review the many books and articles on human sexuality available today to get a feeling for how they were treating the subject. It is sad to say that many contemporary books still treat the subject in a limited fashion. It is common to find books that focus on the biology of sexuality, or on the psychological aspects, or even on the decision-making components. Although some authors have written about more complete ways of viewing sexuality, it is still uncommon to find many books that deal with sexuality as something that involves the total personality and is basic to human health.

We would like to be able to tell you that contemporary concepts of human sexuality are radically different from the narrow and negative ones of the past, but unfortunately they are not. You may have already demonstrated this fact with your own list and your imagined lists for friends and relatives.

It is true that there is a trend toward a more comprehensive view of human sexuality. People today appear more willing to talk about the subject in the home as well as in educational settings. This trend toward more open interest in the subject is shown by sales of books, treatment of sexual topics in the media, and increased sexuality education programs.

The continuing impact of the AIDS epidemic on people around the world has forced a more open consideration of numerous sexual topics. Sexual practices, use of contraception, advertisement of condoms, and many moral considerations are just a few of the topics that now come up more frequently. Many people are realizing that human sexuality involves a great deal more than physical acts; however, there are still probably more similarities between traditional and contemporary concepts of human sexuality than there are differences.

**Insight 1-2**

**Defining Sexuality**

Stop for a minute. Take a piece of scrap paper and, without looking at this book, write a two- or three-sentence definition of total human sexuality. After completing your definition, check it against Figure 1-1.

**sexuality** A natural and healthy part of who we are. It is not only about taking part in sexual behaviors. It is an integral part of everyone’s personality and includes cultural, psychological, ethical, and biological dimensions.
orientation, roles, and personality; and thoughts, feelings, and relationships. Sexuality is influenced by ethical, spiritual, cultural, and moral concerns. All persons are sexual beings in the broadest sense of the word. (Available at www.siecus.org/index.cfm?fuseaction=Page.viewPage &pageld=494&parentID=472.)

Given the fact that many people still do have a limited view of sexuality, however, it is appropriate to take a look at what a comprehensive view of human sexuality might include. We say might because there is no one best or exact definition of total human sexuality. The main thing to realize is that a total view includes many components and interrelationships.

Figure 1-1 shows one view of human sexuality that attempts to encompass the main aspects that need to be considered. It is easy to see that sexuality consists of at least cultural, psychological, ethical, and biological dimensions.

All of the dimensions of human sexuality are separate from each other. At the same time, however, they also overlap and influence each other. The interrelationship of all of these dimensions results in an individual’s total sexuality.

The cultural dimension of sexuality is the sum of the cultural influences that affect our thoughts and actions, both historical and contemporary. Historical influences become evident when one considers roles of males and females as well as certain customs.

For example, many women whose beliefs and experiences reflect traditional norms limiting gender equality may be at increased risk of being subjected to intimate partner violence. Several factors associated with adherence to traditional gender roles are associated with more partner violence. Women who had turned down a job because of their partner, women who thought that wife-beating was sometimes justified, and women who believed that a wife had a duty to have intercourse with her husband were more likely to be abused.
In some countries, hysterectomy (surgical removal of the uterus) is often used as treatment for abnormalities of the woman’s cervix. This is an example of inadequate knowledge within a culture. There are better remedies available, and appropriate people need to be educated about them to influence cultural practices.

Among the sources of current influences are the radio, television, film, Internet, and print media; social institutions, such as family, church, and school; and interpersonal relationships. Each impresses on us the culturally defined ways in which we “ought” to think as women and men and the roles our sexuality “ought” to lead us to play.

The American Psychological Association published the Report of the Task Force on the Sexualization of Girls (2010). It indicated that every media form provides evidence of the sexualization of women, including television, music videos, music lyrics, movies, magazines, sports media, video games, and the Internet. Women more often than men are portrayed in a sexual manner (e.g., dressed in revealing clothing, with bodily postures or facial expressions that imply sexual readiness) and are objectified (e.g., used as a decorative object, or as body parts rather than a whole person). In addition, a narrow (and unrealistic) standard of physical beauty is heavily emphasized.

In addition to influencing sexualization and sexual roles, some people believe that the media influences sexuality in other ways as well. For example, Escobar-Chaves et al. (2006) investigated mass media consumption and its influence on sexual risk-taking behavior. Among high school males, exposure to television increased their risk of engaging in early sexual intercourse. Females who reported a preference for watching television programs with sexual content were more likely to have sexual intercourse than their counterparts, more likely to have had more than one partner during the past three months, and more likely to use condoms.

Escobar-Chaves and Anderson (2008) presented and evaluated research findings on the influence of electronic media. Based on their review, they concluded that media exposure can increase early sexual behavior.

Polacek et al. (2006) reported that a group of 14- to 18-year-old Hispanic students received an inordinate amount of sexual information from television, music, and magazines. The teens admitted that sexual themes in the media desensitized them to risks of and increased their perception of sexual topics. The teens admitted that sexual themes in the media desensitized them to risks of and increased their per-

The influence of the media can be very powerful. Sexuality educators need to consider its influence when planning and implementing sexuality education programs.

The psychological dimension of sexuality is probably the clearest example of learned aspects of sexuality. Our attitudes and feelings toward ourselves and other people begin to develop very early in life. From the time we are born we get signals from all around us telling us how to think and act. We learn that some words are “wrong” or “dirty” and that certain parts of our body are “untouchable” and “unmentionable.” We even learn to be careful about what conversational topics we enter into with certain people. If we feel one way about ourselves but think others find these feelings unacceptable, we learn to hide our true feelings and to pretend. After all, thinking or talking about sexual topics is not a good idea anyway (or so we have learned). Some of us are lucky enough to grow up with a more positive set of experiences, but regardless of whether our experiences are positive or negative, our learned responses to them become integral to our sexuality.

The ethical dimension might be included as part of the psychological dimension by some people, but for the sake of clarity we mention it separately here. Basically, this dimension includes questions of right-and-wrong, should-I-or-shouldn’t-I, yes-or-no related to decisions about sexuality. Ethical aspects might be based on a particular religious philosophy, or they might have a more humanistic or pragmatic origin. Whatever the source of our ethical attitudes, each of us faces daily decisions that affect and in turn are affected by our concepts of sexuality.

The final dimension of sexuality we will mention is the one that most people usually think of first—the biological dimension. Just to emphasize the point that biological aspects are only one part of sexuality, we are considering them last. However, no hierarchy of sexuality dimensions can be established; it would be a mistake to assume that any one part is more important than any other.

The biological dimension of sexuality involves our physical appearance, especially the development of physical sexual characteristics; our responses to sexual stimulation; our reproductive health and options; and our growth and development in general. Although human reproductive functioning does not begin until puberty, human sexual-erotic functioning begins immediately after birth and lasts a lifetime. It is important to realize that biological functioning, as it relates to sexuality, is a part of the natural functioning of human beings. The biological aspects also relate to the sexuality dimensions, and
the four dimensions constantly work together to produce an individual’s total sexuality.

Even though it is often necessary to treat aspects of sexuality as isolated entities for purposes of clarity in discussion, it is important to remember that these aspects all combine to make up our sexuality and that our sexuality is but one part of our total personality. Our hope is that each of you will be able to consider these separate topics without losing sight of human sexuality in its totality. Schroeder (2009) summarized important thoughts about sexuality this way:

What, therefore, does sexuality mean? What do those six letters following the word sex do for the definition of the word? The answer is: Everything. Adding those six letters makes a three-letter word that, although rife with various meanings and connotations, is limited in scope and far greater meaning. Sexuality is an expansive term that pertains to far more than our biology or sexual behaviors, although these two elements are certainly integral parts.

Dr. Mary Calderone, cofounder of the Sex (now Sexuality) Information and Education Council of the United States (SIECUS), said it best when she stated, “sex is what you do; sexuality is who you are.”

Sexuality, Personal Well-Being, and Interpersonal Relationships

There has been a lot of emphasis on health education and health services by the media and by federal and state governments, but few discussions point out the importance of a total view of human sexuality to human health. Consider how much time you have spent in the past week thinking about topics related to human sexuality. How often, in the years that you were growing up, did you have questions related to human sexuality? Perhaps you have seen surveys indicating that, at any given time in a high school or college classroom, a great number of students are thinking about sexuality. This concern is natural, but if not dealt with can produce negative influences on mental health.

Recognizing that sexuality is a basic part of human personality and that people have numerous questions and thoughts about this topic, it makes sense to help students of all ages develop a healthy concept of human sexuality and to relieve anxieties and fears about many sexuality issues. This is an important reason for implementing sexuality education programs; health and well-being are promoted by an understanding of total human sexuality.

Of course, our personal health and our self-concept relate to our dealings with other people. Did you ever stop to think how much growing up would be facilitated if people had positive self-images and better social skills? We cannot claim that a total view of sexuality would eliminate all problems associated with interpersonal relationships, but let us consider an example or two.

As young people grow and develop, they have countless questions about their changing feelings as well as about their physical changes. A simple understanding of how these feelings and changes are common to all people, and of the biological facts, coupled with an opportunity to discuss concerns with understanding peers and adults, is definitely helpful. But how many young people do you know who experience such help?

A recognition that we are all sexual beings also contributes to positive interpersonal relationships. As we grow up, we do not realize that our parents, teachers, relatives, and everyone else around us are sexual beings. This of course does not mean they are performing sexual acts at every opportunity, but it does mean they all have sexual feelings and characteristics.

The AIDS crisis has forced increased attention on people as sexual beings. All dimensions of human sexuality come into play when dealing with the topic of AIDS. How well people can cope with the many issues and dilemmas related to AIDS can also influence their well-being.

In 2007, it was interesting to see how the human papillomavirus (HPV) crisis and the development of a vaccination to prevent HPV and its potential dangers (including cervical cancer) had an impact on sexuality. We heard arguments about who should pay for the vaccine, whether laws should be passed to require the vaccine, and whether it was a good idea for parents to promote the idea that their young daughters should be vaccinated against HPV. As this was the first vaccination against any sexually transmitted infection, issues raised were related to knowledge, feelings, values, relationships, and many other aspects of human sexuality.

Being comfortable with sexuality has many applications to human well-being. For example, it includes feeling satisfaction and even pride with one’s own sexuality. It means communicating effectively about sexuality and feeling secure about one’s sexual nature. It means showing respect and tolerance for the sexual values of others and encouraging others to explore sexual issues. It means recognizing that sexuality is an important topic to most people and a legitimate topic for intellectual inquiry.

Being comfortable with regard to sexuality in general can also contribute to healthier sexual activity. For example, Maltz (2011) outlined the CERTS model for healthy sexual activity. The letters stand for Consent, Equality, Respect, Trust, and Safety:

- Consent – You can freely and comfortably choose whether to engage in sexual activity. You are able to stop the activity at any time during the sexual contact.
• **Equality** – Your sense of personal power is on an equal level with that of your partner. Neither of you dominates the other.

• **Respect** – You have positive regard for yourself and for your partner. You feel respected by your partner.

• **Trust** – You trust your partner on both a physical and emotional level. You have mutual acceptance of vulnerability and an ability to respond to it with sensitivity.

• **Safety** – You feel secure and safe with the sexual setting. You are comfortable and assertive about where, when, and how the sexual activity takes place. You feel safe from the possibility of harm, such as unwanted pregnancy, sexually transmitted infection, or physical injury.

Schael (2011) pointed out that creating conditions for more positive sexual experiences and outcomes among adolescents requires both political will and cultural innovation. She suggested an ABC-and-D model. The A refers to autonomy of the sexual self. Gaining sexual autonomy involves knowing about sexual desire and pleasure, recognizing and articulating sexual wishes and boundaries, and learning to anticipate and prepare for sexual acts. Building (B) good romantic relationships is the second critical component of healthy sexual development. Good romantic relationships build positive sexual health, and sexual activities are more likely to be safe, wanted, and gratifying when relationships are equal. Sexual health also requires connectedness (C) with parents and other caregivers. Communication about sexuality can have positive health effects when it is frequent and parents are seen as open, skilled, and comfortable. The final component concerns two Ds: recognizing diversities and removing disparities in access to vital socioeconomic resources. Youth need to respect their own distinctiveness and that of others. Implementation of the ABC-and-D framework requires guaranteed access to sexual education and health services.

Many 15- to 18-year-old adolescents identify the family as a sexual health information source (Rosengard et al., 2012). Primary messages recalled were risks of sexual activity, the importance of protection, and relationship advice. Many adolescents portrayed learning experiences as negative, cautious, lacking detail, and not always balanced with positive messages. Negative, cautionary messages from the family require teens to seek additional sexual information elsewhere. Males, in particular, appear to often lack familial guidance/education related to sexuality.

Removing some of the mystique that currently surrounds the topic of sexuality would certainly facilitate interpersonal communication. Cat-and-mouse games would become less prevalent, and more honesty and openness could occur. With some communication barriers lifted, the potential for more positive interpersonal relationships would be greatly enhanced.

### Sexuality and the Life Cycle

Before reading further, take a minute to fill in Insight 1-3. Perhaps you already know that all people are sexual beings at all ages. In this case, you probably filled in the columns of Insight 1-3 with “birth” and “death” rather than with specific numbers. If not, why did you put down any numbers at all? Are any of the columns different from the others?

Insight 1-3 examines your feelings about sexuality as it relates to the life cycle. The idea of an absence of sexuality is similar to the idea that a person has an absence of personality. You may feel that a given person has a poor personality, but that individual still has a personality of some kind. Just as people have personalities from the time of birth, they are sexual beings at all ages and stages of development.

Dr. William Masters pointed out some facts related to sexual functioning that add an additional perspective to our picture (Masters, 1975). Dr. Masters emphasized that sexual functioning is a part of the natural functions of the body, and that it begins at birth. He told the story, for example, that as an obstetrician delivering many babies, he decided to play a little game to make things more interesting. This game consisted of seeing how often he could deliver male babies and cut and tie the cord before they had an erection. Dr. Masters reported that he won about half the time. Newborn male babies often get partial or complete erections right after birth. Dr. Masters pointed out that female babies experience vaginal lubrication early, too. Obviously, penile erections and vaginal lubrication are natural functions that occur prior to any learning about sexuality.

As further support for the idea that sexual functioning is natural, Dr. Masters pointed out that all natural functions have their own rhythm. For example, most males experience an erection and females have vaginal lubrication about every 80 to 90 minutes at night while they sleep. Again, the absence of conscious control indicates that these are natural functions.

Given such information about natural functions, combined with the total sexuality concept of which it is a part, we readily see that people are sexual beings throughout life. This idea comes as a shock to some individuals, because it includes little brothers and sisters as well as older parents and grandparents, but it is simple fact that all people are sexual beings.

In spite of this fact, certain groups of people are usually seen as asexual beings: the young, the old, those individuals with disabilities, and all parents. You can readily see that this leaves us with only a select few individuals who supposedly are sexual people, expected to participate in intercourse and other physical sexual acts. In light of our total concept of human sexuality, this type of thinking simply does not make sense. Psychological, cultural, ethical, and biological forces...
have made their mark on all individuals. It is becoming more and more apparent that it is far healthier and more logical to consider sexuality as encompassing not only specific acts but attitudes, emotions, interpersonal relationships, and self-concepts as well.

Human Development and Issues of Sexuality

You may have already completed courses or parts of courses in human growth and development. In any case, you are aware of at least some of the many physical and emotional changes that take place as people grow and develop. We will cover most of these topics in greater detail later in the book, but we want to introduce their relationship to total human sexuality as part of this introductory discussion.

Many people can influence sexual health. Among them are parents, educators, religious leaders, and healthcare providers. All of these people can help by discussing with young people the aspects of human development that may impede optimal sexual health. For example, providing quality reproductive health care is complex and involves an open dialogue between providers and clients about issues that traditionally may not have been discussed. The same is true for parents, educators, and religious leaders in their dialogue and relationships with young people.

It is essential to realize that many aspects of development have implications for human sexuality that are usually overlooked. Let us look at some of these aspects from a more discerning point of view.

Developmental Rates and Sequences

One of the first things you learn when studying growth and development is that the sequence of development for most people is about the same. That is, we all tend to do certain things before other things—to walk before we run, for example. However, we do not all pass through this sequence at the same rate. In terms of peer acceptance and personal feelings, it might be nice if all young people grew...
and developed at precisely the same rate. How handy it would be not to have to explain constantly why people are different from one another.

The fact that the rates of development for different people do vary is a simple idea that leads to numerous possible issues related to sexuality. These issues can range from concerns about physical differences to difficulties understanding emotional changes and variances in oneself and in others. Too often, educators have handled developmental topics with a degree of exactness that does not exist. Students have been told that the average girl begins menstruation at 12 years of age, that the average boy’s voice changes at a certain time, and that the average young person’s feelings have certain characteristics at a certain time. What many young people do not understand is that averages refer to ranges (sometimes pretty wide), not exact places on a scale. Those dealing with young people need to emphasize the fact that while we generally all go through the same types of changes in the same order, the timing of these changes can vary widely. All we need to do is look at classrooms full of students in the upper elementary and early secondary grades to see the evidence of this variation.

It would be naive to think that an understanding of differences in rates of growth and development would solve all concerns related to human sexuality, but it would also be a mistake not to emphasize this point more than we have. Better knowledge about rate differences can only help young people to be more at ease with themselves and with their peers.

**Masturbation**

Before reading further, take a minute to fill out Insight 1-4. At this point we are not discussing **masturbation** as part of a range of sexual behaviors, but as another area that relates to growth and development. Masturbation is a topic of concern to young people because they may have heard so much about it; they have either tried it or are interested in doing so, and they seldom have anyone to talk with who is very knowledgeable on the subject or open to talking about it.

What are the facts about masturbation as it relates to growth and development? We are not making a case for or against masturbation, but we do want to put the topic into perspective within a developmental context. Here are some of the facts; perhaps you can add to the list:

1. Masturbation does not cause hair to grow on the palms of the hands.
2. Masturbation does not cause people to go insane.
3. Masturbation does not stunt a person’s growth.

**Insight 1-4**

**What About Masturbation?**

Stop for a minute and make a list of all of the negative things you heard about masturbation as you were growing up. Then make a list of all the positive things you heard. After each item on each list, indicate where you heard the negative or positive statement (such as from peers, parents, other relatives, media, school, religious organization, etc.). Compare the two lists. What do you see?
4. Masturbation does not cause a penis to fall off or a vagina to slam shut.

5. It is impossible to masturbate to excess unless friction causes skin abrasions and discomfort.

6. It is not necessary to masturbate in order to be healthy.

7. It is impossible to injure yourself through masturbation (unless you use an instrument that can be harmful).

8. Almost all people masturbate at some time in their lives.

9. Some people believe it is morally wrong to masturbate.

So, what has all the fuss been about? With all due respect for the fact that some people believe masturbation is morally wrong, it would be completely honest to explain those moral feelings to young people as long as all the facts were also provided. Look back at your list of negatives and positives about masturbation from Insight 1-4 and you probably see a grim picture. Most people have been exposed to a similar view. Our point here is quite basic: masturbation is usually a normal part of growth and development. Previously, the topic was either blown out of proportion by telling young people that nasty things would happen if they masturbated, or it was made mysterious by refusing to discuss it at all. To put young people’s minds at ease, masturbation should be discussed as an aspect of growth and development. Facts can only be helpful. There is no defensible reason for scare tactics or censorship of something so important to both human sexuality and development.

**Sexual Orientation, Behaviors, and Identity**

It is very common for young people to have feelings of attraction for people of different genders, particularly as they go through puberty and their teen years. These feelings of attraction may also result in engaging in sexual behaviors with people of one’s own or a different gender. Generally speaking, adults tend to be more uncomfortable with same-gender behaviors, although less so when it is two girls or women. The teen years are all about identity exploration—and while some young people are 100% sure of their sexual orientation at this time, some are not, and they may explore with partners of different genders. The most important message young people can receive about sexual orientation and identity is that they shouldn’t feel pressured to attach a label to themselves that may not feel like a good fit; in fact, they may not need a label at all. The development of our sexuality overall is a process of discovery, and things tend to become clear to us when the time is right. That will often look different for different people.

Anyone exposed to print or electronic media is aware that they are receiving far more attention than ever before—partly due to the increased availability of online porn, and partly due to legal battles in states throughout the country relating to marriage and adoption rights, employment nondiscrimination acts, and more. These current events provide great opportunities for educators to support learners in exploring and clarifying their understandings and beliefs (e.g., “Why are these rights afforded to some people and not others?”) as well as in reinforcing that feelings of attraction may be understood differently at different times in people’s lives.

Kosciw et al. (2010) provided disturbing information related to the experiences of lesbian, gay, bisexual, and transgender (LGBT) students in schools. They found that nearly 9 out of 10 LGBT students experienced harassment at school in the past year, nearly two-thirds felt unsafe because of their sexual orientation, and almost a third missed at least one day of school in the past month because of safety concerns. In comparing data over a 10-year period, they found a decreasing trend in the frequency of hearing homophobic remarks; however, LGBT students’ experiences with more severe forms of bullying and harassment have remained relatively constant.

Why is the topic of sexual orientation important to a sexuality education professional? Because we are often the people to whom young people will come with questions about orientation, whether their own or others’. How we react to their questions, joys, and concerns will impact how they see themselves and others.

Educators need to be aware of young people’s questions, issues, and concerns about sexual orientation as they are maturing. Educators also need to be prepared to provide learners with information and responses that will be helpful, factual, and supportive rather than inaccurate or threatening.

**Latency**

For many years it was assumed that young people go through a period of latency, when sexual development and interest in sexuality are nonexistent. This period, roughly from age 5 through age 11, was supposedly a time when these “asexual” beings should be busy learning about reading, writing, and

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**Insight 1-5**

**Questions About Sexual Orientation**

Do a quick role-play with a friend. Pretend that you are a teacher and that your friend is a student who has come to you after school with questions about sexual orientation. What would you say to the student? What possibilities do you have? What effects might different types of responses have?
Aging
As we get older, we tend to view life differently. Sexual feelings and desires are present at all stages of life, but they may have different meanings and modes of fulfillment at each stage. We know that many forms of sexual behavior are common among people of all ages. Furthermore, concerns for self and others are constantly present, including concern about body appearance, overall health, and possible change in marital status. We all need to deal with aspects of sexuality as we age; in this way, too, sexuality is a growth and development issue.

Our Sexual Uniqueness
We want to point out that many personal possibilities exist when it comes to sexuality. Individual choice is important. What really matters is what you want to matter. Sexuality educators need to help learners arrive at a developmental level at which they can realize that it is OK to have sexual thoughts, that it might be OK to participate in sexual behavior, and that it might be just as acceptable to abstain.

Relatedly, there is a considerable time lag in the development of many young people’s thinking, resulting in low-level thinking and problem solving. Many are capable of understanding quite complex sexuality concepts much earlier than most adults think. However, adults who refrain from communicating with young people due to inhibitions about using correct sexual terminology and descriptions actually inhibit the young people’s development. Therefore, many young people are well behind in their thinking and problem-solving abilities compared to where they could be if adults were more at ease with sexual concepts. In other words, young people can handle appropriate sexuality education—it is often the adults who cannot. There are numerous implications here for educators as well as parents.

Morals, ethics, and values influence personal decisions, as well they should; but individuals need to be comfortable with personal decisions. We cannot tell you what is right for you, and you cannot tell us what is right for us.

Some people are very interested in the topic of sexuality. Others are not terribly concerned about it. What matters is the realization that personal decisions about sexuality are both needed and welcomed. Because we are all unique sexual beings, it should not be surprising that our vast ranges of thoughts, decisions, and behaviors are also unique. And that is OK.

A Note About This Text
When it comes to sexuality education, the question is not whether it will occur, but rather what kind of sexuality education do we want? Not providing sexuality education gives a
message about sexuality education. We say this because adults transmit their attitudes about sexuality to young people. From the moment of birth, children observe and learn from adults’ behavior in everyday life. The way adults answer questions about sexuality, the way they express affection, and the degree of comfort they demonstrate related to sexuality issues are examples of sexuality education through important informal means. The message received by young people might be positive or negative, but it is educational either way.

One of the tricky aspects of a sexuality education text is blending the content to be taught with information needed by the educator to do the teaching. Obviously, a sexuality educator must be knowledgeable about sexuality in order to be effective. However, possessing all the information in the world will not help if the educator does not know how to impart it to others. That is the secret of all types of education at all levels.

Note that in this chapter we have presented an overview of certain human developmental subject matter, offered not in isolation, but because of its relevance to accomplishing the task of sexuality education. The sexuality educator must understand latency and other aspects of growth and development in order to be an effective educator.

The language of sexuality can sometimes be tricky for a number of reasons; suffice it to say that some people are more comfortable with others talking about sexuality. Obviously, this can sometimes relate to positive or negative communication, depending on the situation.

Also, people may become accustomed to assuming that words have certain meanings. But, others may think that the same words have different meanings. The point is, there is a lot of different language used to describe the quantity of information and myriad experiences that come under the huge umbrella that covers human sexuality.

There are certainly cases where language that was historically used to describe a person or behavior is no longer used because that language has been determined to be offensive. Several examples of this include no longer using the word “hermaphrodite” in favor of “intersex”; or no longer using the phrase “sexual preference” but rather “sexual orientation,” and so on. These are some of the terms that should not be used because they risk offending people.

In some cases, however, the language of human sexuality is not so cut and dry. Even seasoned professionals who have worked the same length of time in sexual health education will use different language because of how they were trained, or how they have come to understand these terms. In this text, for example, you will see the terms, “sex” and “gender” used interchangeably. This reflects our different takes on the terms. Similarly, there will be times when you will read “male” or “female” rather than “man” or “woman.” Again, in the end we are expressing the same thing, using different—though related—language.

Ideally, a basic course in human sexuality would be a prerequisite for a course in sexuality education. Perhaps some of you have had such a course; however, our guess is that most of you have not. That is another reason we provide as much specific sexuality content as we do. Without such background, many of you would lose sight of the educational context.

So, keep in mind that this is a sexuality education text and not a sexuality text. There is some sexuality content for the reasons mentioned, but the emphasis is on planning, implementing, teaching, and evaluating sexuality education. We wish you the best as you prepare to undertake these important tasks.

Summary

In this chapter we have set the stage for the study of sexuality. We have seen that most people tend to think about human sexuality in very narrow terms. While traditional definitions have tended to relate only to sexual acts or to the biology of sexuality, newer approaches stress a much broader concept. Despite the development of this broader picture, the older, narrower concepts have been learned so well that they are still with us.

A comprehensive definition of sexuality could take many forms. Our definition contains cultural, psychological, ethical, and biological dimensions. Each dimension includes many aspects, but all are intertwined in a complex picture involving feelings, self-concepts, interpersonal relationships, and decision making. Although it is often necessary, for purposes of clarity, to discuss only one part of sexuality or another, it must be kept in mind that each element is part of the total picture of sexuality.

Understanding this total view of human sexuality contributes to personal well-being and enhances personal relationships. Sexuality has been an area of interest and concern for most people. Being able to place sexuality in its appropriate perspective as a part of total personality can put people’s minds at ease, and it can help reduce tensions and facilitate interpersonal relationships.

People have tended to think of others and themselves as sexual beings only during certain stages of life. That is, sexual beings have been seen as those individuals between their late teens and their 30s or 40s. In fact, people are sexual beings at all ages and stages of development. Given our total concept of human sexuality, it is easy to see that people of all ages are sexual beings, just as people of all ages have personalities.

Educators, parents, counselors, and administrators need to recognize that certain topics related to both human development and human sexuality have been neglected for the most part. These topics include similarities in developmental sequences, differences in developmental rates, masturbation, sexual experimentation, latency, nocturnal emissions and orgasms, decisions about single versus partnered lifestyles, and aging related to sexuality. In each of these areas, people
often have developed more anxiety than needed. If people are provided with the facts and with an opportunity to discuss and understand each of these topics as it relates to their sexuality and their growth and development, their personal well-being will be enhanced.

Many personal possibilities exist when it comes to sexuality. Each of us makes unique choices based on individual morals, ethics, and values. Sexuality educators need to help learners realize that personal decisions about sexuality are needed and welcomed. Those decisions will be facilitated by an understanding of the pervasive role sexuality plays in our lives.

References


Web Resources

Advocates for Youth
www.advocatesforyouth.org
Advocates for Youth champions efforts to help young people make informed and responsible decisions about their reproductive and sexual health. They advocate for a more positive and realistic approach to adolescent sexual health.

Answer
http://answer.rutgers.edu
A national organization dedicated to providing and promoting access to comprehensive sexuality education to young people and the adults who teach them. It provides in-person and online professional development to health and sexuality educators around the country and features Sex, Etc., a print and online sexuality education resource written by teens, for teens.

Future of Sex Ed (FoSE) Initiative
www.futureofsexed.org
A joint project of Advocates for Youth, Answer, and SIECUS to address the future of sexuality education in America’s public schools.

Guttmacher Institute
www.guttmacher.org
Offers extensive research, data, and statistics relating to a wide range of sexual and reproductive health topics, including sexuality education.

Sexuality Information and Education Council of the United States
www.siecus.org
Source for a Consensus Statement on Adolescent Sexual Health and other information related to healthy sexuality and sexuality education.

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