

## SEXUALITY EDUCATION IN THE PUBLIC SCHOOLS

### A Roundtable Discussion

*[The following is an edited transcript of a four-hour roundtable discussion held at the SIECUS Resource Center and Library in New York University on June 10, 1983. The idea for this discussion was originated at a meeting of the SIECUS Report Editorial Board members. They wanted to begin our new volume year—the year during which this organization celebrates its 20th anniversary—by focusing directly and indirectly on the aims and goals inherent in its title, the Sex Information and Education Council of the U.S. Thus they brought together a group of people, all of whom have in some way been touched by SIECUS's efforts to advocate the importance of sex education. As you will note, they represent a spectrum of the people involved in the provision and maintenance of such education.]*

SIECUS Report readers will find no startlingly new or revolutionary theories in this discussion. What they will find is a reassuring and upbeat proof that when dedicated and caring people work together to communicate their feelings and ideas to each other, sound ideas about sexuality education can effectively be formulated, no matter how many different perspectives may be represented. Unfortunately, the original 113-page transcript had to be drastically condensed. But in my editing I have tried to convey the essence of each person's thoughts and of the group's consensus—Ed.]

#### Roundtable Participants

**Moderator:** Robert Selverstone, teacher of sex education in Westport, Connecticut; psychologist in private practice; Chairperson, *SIECUS Report* Editorial Board; President, SIEC-CONN, a SIECUS affiliate.

**Students:** At Hunter College High School, New York City: Ebrahim Keshavarz and Renee Ramirez; Ming Fong and Kristen Graves, alternates who attended as guests.

**Parents:** Barbara Evans and Ellen Heydet, Mount Vernon, New York.

**Teacher:** Konstance McCaffree, teacher of human sexuality education in Pennsylvania; teacher trainer and curriculum consultant; teacher, parent education and training courses.

**Administrators:** Betty Schwartz, Supervisor, Family Living Instruction K-12, Livingston, New Jersey; Marcia Miller, Supervisor, Family Life Education, Mount Vernon, New York (guest).

**School Board Member:** Audrey Hansen, Chairperson, Board of Education, Westport, Connecticut.

**Social Worker:** Clarence Stewart, School Social Worker, Mount Vernon, New York.

**Teacher Trainer and Educator:** Michael Carrera, Professor, Hunter College School of Health Sciences; Past Chairperson, SIECUS Board of Directors.

#### Roundtable Discussion

**Selverstone:** The goal of this roundtable is to provide an opportunity for people who come from different perspectives to share information about what things look like in terms of sex education. To give us a chance to develop some sort of framework, let's begin by focusing on how the current sexual situation of our children's world differs from that of their parents.

**Hansen:** There are certainly differences in what was considered sexual at that time and what is sexual with teenagers today. In the 50s, as far as we were concerned, petting was sex. But not any more.

**Evans:** When we were growing up, we had an unknown type mystery about what sex is all about. Children today don't have that. They're exposed to the media—they see sex on television portrayed in a certain way, and I think they have more facts about it, even though some of these so-called facts may indeed be myths. It's more open.

**McCaffree:** When I was a teenager, I may not have gotten masses of facts, but the information I did get was consistent, and for me that consistency was very comfortable as I grew up. For example, I knew for sure what pregnancy could create in all areas of my life, because consistently I was taught that getting pregnant at that stage was a bad thing to do for our family situation as well as for the baby itself. As I look back, I may not approve of some of those messages now, but the consistency was helpful and today it no longer exists.

**Carrera:** I believe it's a mistake for professionals and parents to think that life today is so different. There are a lot of basic things that are the same. In my work, I've learned that young people are interested in their grades, competition, how their body looks, whether they're in keeping with what's usual or typical, in feeling "in" or "out." But this is no contemporary phenomenon. I remember being involved in the same things as a young person myself, and since I believe that sexuality is tied up with all of that, I see a lot of similarities. Of course, there are some differences—resulting from the enormous amount of choices available that didn't exist before. All around us things are now eroticized at very early ages, and that constitutes a way of affecting people that we need to be more aware of. But I think our programs should focus less on what seem to be "in" issues and adopt the attitude, "Yes, let's deal with what the issues are right now, but also keep in mind what has continually made up the fabric of being a person."

**Stewart:** On the whole, I agree with Michael. But I do think there have been some important basic changes taking place through the years. For example, children used to be part of a whole system of mutually reinforcing elements—the extended family, the church. Sometimes in small communities like the

one in which I grew up you had what we can call community mothers. You didn't have to be at home with your own parent. Everybody kind of looked out for children and helped in their rearing. This has changed, and also my perception now is that the church is far less influential in a young person's life than it used to be.

**Evans:** Also, today's young people are more aware than we were of the threat of nuclear war. There's a fear of "where will I be tomorrow? So let me enjoy today." I think that's one of the attitudes they have when they deal with sexual problems.

**Schwartz:** Tagging on to what Michael said, and unfortunately for school personnel, one of the "samenesses" that has been sustained through the years is the reluctance of parents to talk to their children about human sexuality—a reticence about developing this kind of communication. The family units now may be different, with single families, step families, etc., but we still have the parents who relinquish, abdicate, that responsibility for giving sex education to their children.

**Hansen:** When there are courses in sex education in the school system, the child who is involved often describes at home some of the issues discussed, and thus opens up the lines of communication. But I still wonder, even with the emphasis and change in the availability of information on sex and the freeness, if our children when they become parents will be able to discuss it any easier—or whether it is still going to be a difficult subject.

**Ramirez:** This brings up the issue of when sex education should be started in school, if that's when the child is going to come home and start discussing it with the parents. I learned about the facts of life from my father. I asked him when I was nine years old. It was your typical "where do babies come from" question, and I really don't remember exactly what he said or how he said it, but he gave it to me in a very straightforward way. It's the parents' job to try to instill their values in their children, but my father didn't say, "Well, this is what I think about it and this is the way you have to think about it." He left me a lot of room to form my own values. And at nine years old, I hadn't heard one word about all this yet in school; it was started in my household and I just picked it up from there.

**Keshavarz:** It seems like the teenagers are very open about sex, but it's not really true. With the parents, it's really hard to talk to them. So what you learn for most of your early years is basically what you hear or see on the media, and from your friends in the street. When you finally get to sex education, which we have in 10th grade, it provides a neutral party—you can talk to the sex education teacher, say whatever you want, and see what they think, and never have to talk to this person again.

**Carrera:** I want to underscore something Renee said—something really close to the heart of all this. And that is that although she remembers having a discussion with her dad, she doesn't remember what he said. So that what was communicated was less important than the fact that he was there for her,

and the climate was being set—something was triggered. "I'm here for you and this is okay to talk about, and if I don't know, I'll find out." For me, it's wonderful that a *man* was used as the principal example here, because that is so rare.

**McCaffree:** To me there's a big difference between inter-course education—which is going to be difficult for everybody because that's a *private* behavior—and sexuality education which involves the "person" kind of things, having relationships, sharing, being a person. Of course, the media have made some things we used to consider private much more public. And where sex used to be "in" for older people, it's now "out" for them. You've got to do it *now*. We have "go for it" messages all around us.

### What Is Sexuality Education?

**Selverstone:** One of the issues that has arisen here is focused on the word *sexuality*. What is sexuality education? What should it be?

**Evans:** When parents hear the word *sexuality*, usually the first thing they think is "they're going to be talking about intercourse." But there are more aspects to it than that which need to be brought up, and that's why I think the school bridges the gap for communication between parent and child. We tend to be set in our ways so when our child comes and asks about sex, unless we're very objective, we're going to tend not to speak of it because we were taught in a certain way, and changing causes anxiety, insecurity. And the children feel, "Well, I'll get it from my friend because Mom gets too uptight." But when we have the opportunity to meet with other parents in a group, we get a feeling of support. "Maybe what we're doing isn't all bad."

**Carrera:** We probably have to distinguish here between various terms and their meanings. I believe that one's philosophy of sexual learning forms the framework of one's sex education program. And sexual learning is both informal and formal, verbal and nonverbal, and relates to all of the components that constitute being a male or female, and has to do greatly with personality development and relationship issues. I believe it begins at birth and continues throughout the life cycle, and that it is conditioned by our religious and cultural beliefs, our emotions and intellect. Therefore, you can't just simply separate our genital sex from all of that. So if that is what sexual learning is about, then sex education is the formalization of *parts* of that, such as birth control, intercourse, etc.—or in some cases, all of that. In other words, sex education programs are derived from a meaning of sexual learning.

**Selverstone:** What would you like to see result from an ideal educational experience?

**Heydet:** I think the most important part of the program is teaching the children their sense of self—that they are individuals—and then going on into the kinds of feelings that children have that we haven't acknowledged are all right for them to experience. Granted, we also give them the education



Selverstone  
Moderator

Keshavarz  
Student

Ramirez  
Student



Graves and Fong  
Students

Evans  
Parent

Heydet  
Parent

about body function, but the feelings and self-esteem are, I feel, much more important.

**Ramirez:** I think it's important to let children and adolescents have nonjudgmental information about a lot of different styles and things that are open to them—and also not to push one thing on them and say this is right and other things are wrong, because there are such tremendous variations between different people and communities. You have to get an idea of what you're about before you start thinking about what other people are going to think about you.

**Hansen:** That's a very profound statement, certainly one I never could have made at your age. I think this is something that's really wonderful about young people today. The whole idea that you have to be happy with yourself is something I don't think was necessarily something we were taught before.

**McCaffree:** Expanding on being happy with yourself, there is also the issue of feeling good and strong about the decisions you make and not feeling victimized or exploited, which I think takes a sense of options. This needs to be part of the growth process. Sex education programs also have to interpret facts versus media myths or misinformation, and then specifically look at sexual intercourse, providing an understanding of the seriousness and responsibilities that the step into that specific behavior involves.

**Evans:** One of the things I as a parent was looking for and found in our Mount Vernon Family Life Program is the stress on interpersonal relationships, the responsibilities you have to another person. Peer pressure is strong in all age groups, and if young people have an opportunity to discuss things in a human sexuality program, it will rid them of that pressure. It gives them a feeling that "what I'm doing is okay."

**Schwartz:** I think it's the role of the school to impart the information and lead the students to all available resources so that they can study the options, clarify their decisions, and develop a good personal social behavior. It's one of the red lights in our program for instructors to do any moralizing whatsoever about what is right and what is wrong.

**Selverstone:** Is that a problem issue in terms of school systems accepting programs, the fact that there is no sense of right and wrong?

**Keshavarz:** I think sex education has two real roles: giving self-assurance to teenagers while they're learning about sex, and giving information about everything, so they're aware of all kinds of behavior and learn to understand more. You realize if you start saying "I'm right," then you're saying another person is wrong.

**Ramirez:** Decision making is something very difficult for teenagers that grows out of sexuality education, and you're inundated with all this information and all these various lifestyles, and what you can do. If the role of sex education classes is just to impart factual knowledge, then there should be something else to help you as an individual, like counseling where you can go and talk about whatever you like and get help in

deciding for yourself what's right and what's wrong.

**Stewart:** I think another way of accomplishing that same thing is the kind of two-way emphasis we've tried in Mount Vernon. Not just working with the students, but in a very real way tying that in with working with the parents. Parents in a family setting can talk about what's right and what's wrong in terms of that family's value system, and we can help them become more comfortable communicating these sexuality issues with their children.

### Parent/Community Involvement

**Carrera:** The scanty research on the subject indicates that the most successful programs are the ones that involve parents in an upfront way, not in an *ex post facto* way. And recent literature shows that when parents are involved, there is increased communication on the subject at home, which is beneficial for the whole family.

**McCaffree:** A new Mathtech study due out this summer definitely confirms that having parents involved with the programs did increase communication at home. But you realize that all of us here have just been moralizing—making a judgment that parent involvement is the best way. So we get caught between what are universal or even community values and individual philosophies that we may see *might* be helpful. But they're not going to be helpful to *all* people. Some people will always disagree. That's why teaching in this area is challenging. Therefore, I think what we have to do is find a philosophy that we can promote and stay consistent with it.

**Carrera:** It's doing ourselves a great injustice to believe we have to have standards about the way we teach sex education that are different from standards about the way anything else is taught. In any subject, be it social studies, math, science, there are basic standards which have to do with not hurting another person, not hurting yourself, respecting the rights of people's decisions about religion or culture that we believe are good and right and just—and that we go along with that. We have to stand up and say that that's what we believe in our sex education classes too.

**Evans:** To my mind, consistency is the key. In the home, if you're consistent, the child knows there are certain rules and regulations. In school, you should also be consistent without being moralistic, and I know that's hard to do, but there are basic common human things that everybody does. If we can identify those and stick to them, then I don't think we'll be too far from the mark.

**Stewart:** The community needs to be involved in the determination of the goals and values to be communicated. Where we kind of falter is that nobody wants to take the heat—you keep passing the buck around. Community, family, school. I think *all* these people have to communicate values to young people. Look, if I know something is good, and I'm counseling a young person, I'm not going to equivocate and say, "Well, you'll have to find out for yourself." Why should he



McCaffree  
Teacher

Schwartz  
Administrator

Miller  
Administrator



Hansen  
School Board Member

Stewart  
Social Worker

Carrera  
Educator/Trainer

find out for himself if I can tell him this is good and right? We all have to recognize that there are values that are worthwhile for all human beings, and not be afraid to communicate them.

**Keshavarz:** There's really no such thing as universality in what is right and what is wrong. So I would like to hear what my teacher thinks, maybe about what I do or what I feel—but I'm not going to think it's right just because she said so. Teenagers today don't really take everything at face value.

**Ramirez:** That's not true all the time. Like everybody else, teenagers have role models. There are people I look up to whose advice I'll take, that I'll listen to, and others that I won't. You're suggesting a certain kind of cynicism on teenagers' part, that, if you're older or not exactly like me, why should I listen to you. That's not really true. Who's to say that people who are older than you can't give you advice. [Pause] This is so different from what I'm usually like. In a public speaking class at school, when I defended teenagers' right to privacy, people got the idea that I thought that parents shouldn't have anything to do with anything in their kids' lives. Being here is just changing my mind so much. I think it's bringing things out that I really feel, and I'm realizing that if you turn yourself off to your parents and people who want to help you, you're doing yourself a great injustice because you need help, you need to listen to people who've seen it and done it, instead of trying it for yourself and maybe getting into trouble that you could have avoided.

**Carrera:** This is a very important issue. I think all of us who are parents, as well as those who are educators, struggle with what to say to *anybody*, and particularly what to say to young people when they ask what your opinion is. Through my experience, I've learned that teenagers tend to listen more to the reasoning process than to what the decision itself was. I don't think teachers should really over-value their impact on young people. Day in and day out, the single most important factor in the sexual development of young people is their interaction with their family.

**Hansen:** As a board of education person, I feel that the thing that intimidates parents most about a sex education program is the values part. They really want the values to be defined at home. They don't mind the biological part of it or the language involved or topics such as masturbation. I don't think parents are as intimidated by all that as they are by the fact that their children, through acquiring this knowledge, might be led to alter their values.

**McCaffree:** One of the things that probably splits communities in this regard has to do with the fact that they are so heterogeneous in their understanding of what sex education is—just like sexuality educators tend to be. There are so many, many different kinds of issues involved. For instance, they're going to be concerned about the people who are teaching. A lot of people believe that if you teach children about sex they're going to go out and do it. And there are people who don't trust in the ability of other people no matter what their academic training may be. And there are the morality issues. Some people actually believe that teaching contraceptive education means trying to keep minorities from populating.

**Hansen:** When sex education curricula are being voted on by school board members, special-interest groups seem to focus on specific issues, such as abortion and contraception. They feel these topics should only be discussed in the home, since they involve more than just biology. These objections were countered in Westport by giving parents an option—signing a permission slip. This procedure in itself became a controversy. Should you send the permission slip to all parents for all to sign, or send a slip that said just, "No, I don't want my

child in the course." We decided on the former, even though all children would be put in the course unless a "no" answer was received. For the first six-week session, only one or two children were withheld permission, and one of them eventually attended another session. But being offered the option made the parents feel they still had some control. However, this controversy gradually disappeared, and now I think the slip that's sent home says something like "Your child is enrolled in this course and if you have any questions, please call the guidance counselor."

**Carrera:** Nationwide, probably less than 5%—it may even be as low as 1 or 2%—of parents have opted not to send their children to these programs when given a choice. As Audrey said, there'll be a lot of groups that will raise their voices, but if we meet it head on and explain what we're about, what we stand for, what the point of view is, inevitably the majority of that kind of resistance dissipates.

**Schwartz:** I've recently been having a little confrontation with regard to print material—some sections in a sexuality textbook for the senior high school. Although our teachers say, "We don't moralize, we lead, we give information," the parents said, "We can't control what the teacher says, but we certainly can control the books you give."

**McCaffree:** If the consensus in a community is not to deal with something like abortion, then my idea is to develop a program without that topic. There are so many, many other things that can be covered.

**Miller:** One of the things we have done in Mount Vernon to avoid opposition is to form a community advisory panel which has grown from 25 to 75 or more participants, with

## SIECUS REPORT

Volume XII, Number 1

September 1983

The *SIECUS Report* is published bimonthly and distributed to SIECUS Associate members.

Associate member annual fees: Individual \$40; Student (with validation) \$20; Organization \$90; Benefactor \$150 or over.

Library and Institutional subscriptions: \$40 annually.

Outside U.S.: Canada and Mexico, add \$5.00 per year to the above fees; other countries, add \$10.00 per year.

Single copies of back or current issues of the *SIECUS Report* may be ordered for \$4 each, prepaid.

All inquiries should be directed to the SIECUS Publications Office at the address below.

*SIECUS Report* is available on microfilm from University Microfilms, 300 North Zeeb Road, Ann Arbor, MI 48106.

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Library of Congress catalog card number 72-627361.

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people from various religions, government and city agencies, PTA—really a cross-section of the community gatekeepers. We show them questionnaires, etc. that show what the needs are, what the program should include, and then later give them reports of reactions to the programs. In this way, they can help us plan for the future, and help in making decisions about including controversial topics.

**Schwartz:** I really can't stress too much the importance of some kind of watchdog group, be it an advisory committee or, as we have, a family living council, consisting of a psychologist, social worker, members of religious faiths, students, practitioners, administrators. Interestingly enough, sometimes their views go beyond ours. For instance, through the medical people on the committee, we identified venereal disease as an important topic since students were found to be looking for treatment, buying pills, etc. Then, when we put venereal disease into the 8th grade (it originally started in the 11th), the parents said, "How can you teach VD without teaching contraception? You really have to." A council can have a very positive influence.

**McCaffree:** Often one of the things that happens is that pregnancy prevention becomes a focal point in sexuality education, and we're back to teaching strictly intercourse again, and away from family living and relationships.

**Miller:** In our program, for which pregnancy prevention has become one of the primary goals, the family is still the anchor, the center spoke of the whole curriculum. Each unit—be it on reproduction or sex roles—is related to family life, and we even have a new unit now on the community. Everything is tempered with a daily living event, so the physical aspect is seen in the context of one's whole personality. And once we explain to the parents that a lot of what we consider sexuality education pertains to how one relates to one's child, how one communicates, how we develop a sense of intimacy, they get away from the "dirty pictures" kind of mindset.

**McCaffree:** In our community, I've chosen to stick to using the term *human sexuality* instead of *family living* in order to try to educate the general public, to let them know the positive aspects of human sexuality. What I find works best is being a good public relations person, knowing and projecting exactly what the program is, making sure people understand it, and never deviating from that standard. And I refuse to tie in with any attempt, even informally, to equate sex with "dirty." I go out of my way to promote how wholesome and beautiful this whole area of human sexuality can be.

**Carrera:** It's interesting to hear various viewpoints about why a community chooses certain language to describe its program. You know, sometimes problems arise when we try to reduce very complex issues about life to "button phrases," things we put on our lapels, little cute sayings that don't really communicate what we're all about. Such as, "Let's teach young women to say NO." And everyone says, "Yeah, right on!" and it becomes catchy. Yes, it raises people's consciousness and points out that women have rights, but the down side is that it's sexist. If we're really going to teach young women that it's okay for them to say "no," then we should also be teaching young men not to ask.

**McCaffree:** Which is exactly the next point I was going to make. I think that one of the things inherent in so many sexuality programs is a tendency to focus on females and female kinds of things. In my area, our big push for the last two or three years has been to make sure that males are very involved in all aspects of learning to communicate, to understand what other males are doing, because I think the males in this world are cut off

from one another in intimate sharing and learning about one another, except on an external "macho" kind of level. And in this effort one of the most difficult things has been to find good reading material for the high school boys—not factual books about men's health, but books about men doing things, men role-modeling, men as caring, nurturing people.

**Carrera:** One of the problems that we face about teenage boys is that the researchers who present the data which influence our thinking and our programs have portrayed pictures of boys derived from interviewing girls. A lot of what we've learned about the reluctance of boys as contraceptors, the fact that they tend to disappear if there's an unintended pregnancy, the fact that they're not concerned about their feelings or the feelings of their partners has not come from talking to *them*, but from talking to people of the other sex.

**Keshavarz:** It's like a myth that may not be apparent, but subconsciously people think that for some reason women band together but men should take it by themselves.

### Sex Education vs. the "Three Rs"

**Silverstone:** In line with the economic realities that many boards of education are facing, how do you rationalize the addition (or even continuation) of a sex education program which is not part of the basic "three R" framework?

**Keshavarz:** Math helps you with numbers. English with reading and spelling. But sexuality education teaches you a lot about your whole self so that maybe you can feel better about yourself and learn to concentrate more effectively in all the other areas.

**Ramirez:** One of my friends got a 70 on an important social studies test, and an A on a homosexuality paper. When I told her she should do something about social studies, she said, "I don't think that that course is really going to help me, but the sex education will help me deal with other people as well as myself—it touches things that will concern my entire life. I always have to live with myself, and how I feel about myself."

**Carrera:** I've had some thoughts pertaining to social studies classes. Unfortunately, sex education programs are often evaluated with respect to whether or not unintended pregnancy rates decline, STD rates decline, or the use of birth control increases, etc. How come no one is saying, "Let's do away with the social studies programs because 50% of the people aren't voting any more"? There shouldn't be different standards for our programs.

**Evans:** As Renee suggested, if we know ourselves, where we're going, how we're getting there, then that spreads to every other aspect of life—to the community, to our home, to all interactions. The way I see it as a parent, if that is at the core of family life or human sexuality programs, that is a definite plus, and it should be number one in front of math and all the rest.

**Silverstone:** Benjamin Bloom, in his book *Human Characteristics and School Learning*, says that the most important thing for people learning something is that they have the necessary cognitive entry behaviors. You can't learn to divide fractions until you know about division, until you know about fractions. But the next most important thing is the affective entry behavior—the way a person feels about her- or himself both as a learner and as a person. And the better one feels about oneself, the better one learns *anything*.

**Hansen:** In our board's discussion on whether or not to include sex education courses, and in the face of one member's litany on why I should vote against them, I reached an affirmative decision basically because I feel people really have prob-

lems in relationships; and if this kind of course just opens up the idea that other people are having feelings similar to your own, regardless of what it is, if it shows you how other people feel, and opens up topics important to all society, then I think it should be taught in the public school system because that's where you're really geared into learning.

**Silverstone:** Part of the problem in some areas is that school board members and administrators don't want to offend anybody. Well, we may not want to offend a *majority*, but when 80% of parents favor sex education and only a small minority oppose it, *that* is offensive. I'd rather offend the 20% than the 80%. At this point, I think it might be appropriate to discuss the question of what makes good teachers, since they are at the heart of any program.

### What Makes Good Teachers?

**Schwartz:** When I'm looking for a teacher in family living, I often wish I had a crystal ball to help me identify someone who is educationally and psychologically and emotionally prepared to teach this material, someone with an openness about him/herself, who can speak frankly with students, not necessarily project a good girl/good guy kind of impression, but be able to relate extremely well to any age or curriculum level needed. And they should be aware of societal changes—recognize that, yes, there are out there certain conditions, and it's important to give students information to consider regarding those conditions. I believe the actual knowledge needed is accessible to anyone, but to be really effective, the person should be empathetic, with an understanding of personal, social, and family behavior, and while not necessarily sitting in a judgmental seat, be able to respond to the students' questions and concerns.

**Miller:** We have had over 70 people go through our teacher training. No one is ever forced to go. We interview in advance and then reach a mutual decision. The people who have become the best teachers are those who are warm, empathetic, full of zest for life. They take the written curriculum materials and make them seem full of love. They know when to stop, when to repeat, and when to move ahead. They bring life to the suggested activities and life to the students. They're like piper pipers.

**Hansen:** In our 8th grade class, we have team teaching, a male and a female, because we feel strongly that you need both approaches to the subject. And those selected, who may be guidance counselors, phys. ed. or industrial arts teachers, have all fit the picture Marcia drew. And the man/woman team-teaching has worked well. The students feel more comfortable, and each has at least one role model.

**McCaffree:** I just did a workshop in Washington, D.C. with a group of teachers, and there were about four people there who had been *mandated* to teach sex education by their schools. And I could tell this immediately. They were angry. They didn't want to teach this course. And the saddest thing is that they were men, and we certainly need sensitive, caring, sharing men in this work to serve as role models for the boys we're having trouble reaching. I wished then that I had had with me one of the men in my own group to show that there are men in this field who do very effective work with teenagers.

**Carrera:** How nice that in our discussion there has been an appropriate absence of mention about whether teachers are married, young, heterosexual—things which quite properly have no bearing. In regard to the question of wanting to teach or being forced to teach, some recent California studies indicate that the sex education students exposed to willing teachers—regardless of their certified disciplines—tended to

get more out of the experience than those being taught by someone who had to do it by virtue of being in the appropriate department. If you're not comfortable with the material, that message comes across.

**Evans:** Who actually selects the teachers?

**Carrera:** This varies with every school district. There are no universal selection processes. But even starting before that, other than at NYU and two or three other institutions, we don't even have in our field what can be called primary training. Generally, you volunteer or are identified to teach the course and then you go through a workshop or a training program. Sexuality is always tacked on to something else, rather than being a primary object. There is a certification awarded by the American Association of Sex Educators, Counselors, and Therapists (AASECT) which is gradually becoming more rigorous. If we see more sex education/family life programs springing up all around the country in elementary, junior and senior high schools, then I think it really is in our interest to include a unit of sex education in the training curriculum for *all* teachers. My own fantasy has been not to have any separate sex ed/family living courses at all. There are sexuality issues inherent in almost every school subject. By not being isolated, these issues could be more naturally integrated into everyone's life.

**McCaffree:** Unfortunately I've seen it happen that teachers in other classes who do introduce sexuality issues put the emphasis on what I consider the wrong things. For instance, in English, the teachers often accentuate the sexually explicit in order to add more interest. This is a negative influence, and they actually are allowed more leeway with language than I'm allowed in my sexuality education classes! But let's hear from the students about what they think makes a good teacher.

**Keshavarz:** You want somebody that can be objective but not cold, somebody who's not going to condemn—somebody you can talk to.

**Ramirez:** And I appreciate a person, like our teacher, who may not offer opinions in class about what you should or shouldn't do, but who gives you the sense that she is interested in you and would be available to talk to after class.

**Fong:** The teachers should be clear on their facts and also be the kind of person you can easily relate to. And since you certainly can't cover every aspect of sexuality in one semester, it should be a person you can approach and ask specific questions in areas you're interested in.

**Graves:** Ideally it should be someone interested in helping us grow and develop our own ideas—willing to listen and be concerned with the students themselves, not just teaching.

**Keshavarz:** Also it's more effective and interesting when the teacher can relate the topic to everyday life, so it's not remote—give you examples that match your own life.

**Ramirez:** There are teachers I've heard about who turn students off—act silly about the topic, give ridiculous analogies, and make lewd comments. They're not comfortable with the subject and give the impression they were stuck with it.

**Miller:** There are always some who try hard but just don't have all the qualities we've talked about. When a school system has 10,000 students in 11 buildings just at the elementary level, then logistically it gets very complicated to find 100% perfect teachers for every class.

### Programs for Parents and Children

**Silverstone:** Let's discuss now the issue of parents and their children in programs. Should programs be run for them together or separately? Why is it important? At what age and course level? What are the goals?

**Keshavarz:** You're really trying just to open up the flood-gates, trying anything to get them talking to each other. But I think that if you have parents and kids meeting together right off the bat, from a teenager's point of view, you're really intimidating the kids. It's somewhat inhibiting. You don't want to say anything that people might laugh at. When adults and kids meet separately, they get to know each other, become supportive, and the kids feel "I won't be by myself. I'll have somebody to back me up."

**McCaffree:** The format I'm most comfortable with is working with both but not initially at the same time. As Ebrahim said, parents need an opportunity, beyond the normal social occasions, to sit down with the other parents away from their kids, and find out, "Gee, you've got some of the same problems I have." And that's one of the values of a sex education course itself—kids need to share with one another also, not just locker room talk, but real peer sharing in a more formal way. In my parent groups, the first four of the six sessions are held without the children.

**Evans:** As a nurse, I'm aware that children go through certain levels of growth and development, but other parents are not as aware of these different phases, and in meeting together they can learn more about what to expect.

**Silverstone:** Are there things about programs for parents and children together that don't work?

**McCaffree:** This is not particularly a failure, but we do find that the sessions work better for the children that have already had sexuality education than for those who have not. You have to work with them a lot more. There's a rapport that's missing. Also the parents who stick with the sessions are bothered by the parents who drop out. They get angry that some people just don't want to take the time to deal with these issues.

**Silverstone:** Before we had a sex education program in the schools, we tried to urge adult education programs to offer sex education for parents who want to be their own children's sex educators. We found very quickly that parents did not enroll or dropped out. It was a frustrating experience. Now in this last year alone, in three different school systems, with parents and students together for 10 hours over a period of four weeks, we've had up to 250 coming. What we're really doing is building a support team of hundreds of parents who see what we do, and who are there if any challenges arise. We maintain a file of anonymous evaluation cards that we ask parents and students to fill out at the end of each evening. When they have a chance to see what sex education really is, parents become ardent supporters. Now, what about the issue of critical ages? When is it most appropriate to provide sexuality/family life education?

**Evans:** We should start out young when mothers come from the hospital, so they can go through all the stages of growth and learning.

**Stewart:** I've been working for some time with a preschool parent population. One of the biggest turnouts we've had was for a program on sexuality and early childhood. So if the need is there, we have to be concerned about meeting it.

**McCaffree:** There are things that first graders are dealing with, second graders, third graders—it all builds. For example, in fifth/sixth grade, I would look at family units and alternates, because children at that age are very capable of looking at family relationships and brother and sister relationships. And exploitation. I do a lot with young children on touching—who touches who, when, where, and under what circumstances. Sexual touching as against affectionate touching. Things like that need to be talked about at that stage. And you keep building, repeating things in more advanced ways, expanding

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the framework as you do in all other disciplines. We know that young children's memories can be really short, so a consistent and progressively more informative treatment of something like contraception ensures a better level of understanding. And also this allows for variations in the level of teaching.

**Schwartz:** We found, too, that sometimes you have to reintroduce a topic appropriate to that particular age level and for that particular set of circumstances. At the 8th grade level, students' concept of venereal disease is somewhat fuzzy. As they go up through the grades, it becomes more of a familiar topic, an everpressing situation. Actually, we administer a needs assessment in order to find out what information needs reinforcement.

### Conclusion

**Silverstone:** It's time now to sum up.

**Heydet:** What I got from our discussions is the sense that ideally there should be an ongoing family life education program from kindergarten through 12th grade, with each level of development handled in an appropriate way.

**McCaffree:** And how nice to have had the added dimension of the four students' ideas. My students feel like real loners much of the time because of their being really comfortable with sexuality issues, since out in the real world, their peers who haven't had sex education find this ease of communication baffling, hard to handle, and often misinterpret a desire for discussion for an invitation to action. I'm glad to hear other teenagers are getting good sexuality education courses.

**Evans:** This roundtable has been very interesting to me as a parent. The programs we've been talking about are in line with what I feel parents are expressing a need for now. And that is, "Tell my child he is somebody, that when he gets out there he is going to be able to stand on his own two feet."

**Silverstone:** Nobody's going to better that! Thank you all for your thoughts and your humanness. We need to keep working.

## DO YOU KNOW THAT...

### Resources to Write for . . .

#### On the Possible Prevention of Sexual Problems in Adolescence

by Mary S. Calderone is a three-page article which appeared in the June 1983 issue of *Hospital and Community Psychiatry*, a journal of the American Psychiatric Association. Here Dr. Calderone elaborates on her contention that a primary cause of sexual problems is failure to teach children about sexuality before they reach adolescence. A reprint of this article may be obtained (while the supply lasts) by sending a stamped, self-addressed envelope to: Dr. Mary S. Calderone, 715 Broadway, Second Floor, NYU, New York, NY 10003.

#### Adolescent Sexuality in a Changing American Society: Social and Psychological Perspectives for the Human Services Professions

by Catherine S. Chilman, originally reviewed in the January 1981 *SIECUS Report*, is now available in a revised second edition. Written in less technical terms, the current volume adds material on 1976-81 studies, and includes new chapters concerned with professional practice with adolescents and their families. This comprehensive study is priced at \$27.95 and may be ordered from: John Wiley & Sons, 605 Third Avenue, New York, NY 10158.

# WHERE THE ACTION IS

## New Jersey's Family Life Education Regulation: Controversy Amid Compliance

Susan Wilson  
Former Vice President  
N.J. State Board of Education

As a prognosticator, Linda Hendrixson, the author of "Sex Education Goes to School: New Jersey's Controversial Mandate," (the first article on this subject to appear in the *SIECUS Report*, November 1980), was clairvoyant. In her conclusion, she predicted: "The New Jersey family life education controversy is far from over; I feel confident, however, that the proponents will prevail and that family life programs will become a reality for all New Jersey schoolchildren."

On both counts, Hendrixson was right: On September 1, 1983, the State Board of Education's administrative policy requiring family life education programs in public elementary and secondary schools became a reality for all children except for those whose parents choose to have them excused. However, as late as mid-June, after hundreds of districts had adopted policies, convened curriculum development committees, and hired staff—thereby complying fully with the regulation—opponents mounted still one more effort to have the mandate overturned in the State Legislature.

The opponents are the New Jersey Coalition of Concerned Parents, Catholics United for the Faith, and the state branches of Right to Life, the Moral Majority, and the Eagle Forum. They believe that the decision to provide children with information about sexuality, interpersonal relationships, responsible personal behavior, and the development of strong families (the curriculum areas in the code) should be left to the discretion of the state's 600 local school boards or, better still, only to parents. They refuse to face the reality that some parents find it difficult to talk to their children openly and freely about sexual matters and that school courses can often open opportunities for such conversation. They are unwilling to acknowledge that the Jersey regulation tries to make parents partners with school professionals in family life instruction. Under the code's provisions, parents will receive an outline of the curriculum for their child's grade; at the district office they can look through all the materials which will be used for the entire program; and they can decide to remove their child from portions with which they are not comfortable.

During the past year, these groups directed a letter-writing campaign at key members of the State Assembly, all of whom run for re-election in November. Even at the eleventh hour, their tactics were almost successful: After receiving 4,000 letters and cards against the mandate, the Speaker of the Assembly decided to bring up a bill which, if passed, would have started a process of nullification.

The mandate's proponents, for the third time in as many years, beat back the challenge. With only 36 hours in which to make their views known, supporters deluged the Speaker's

office with telephone calls, many of which he answered himself. After listening to State Board members, State Department of Education staff, representatives of the New Jersey Catholic Conference (giving the views of the five Catholic Bishops of New Jersey) and many individuals from the 43 statewide organizations in the New Jersey Network for Family Life Education (including the New Jersey Division of the AAUW, the Junior Leagues, the New Jersey Chapters of the National Committee for the Prevention of Child Abuse, the National Council of Jewish Women, the Coalition of 100 Black Women, the New Jersey Congress of PTAs, the Urban League, and Planned Parenthood affiliates), the Speaker reversed his position. "After consulting with dozens of experts and interested parties in education," he announced in a statement to the press, "I am satisfied that the family life curriculum in our schools is worth continuing despite the enormous pressure placed on us by certain groups."

It has been these "certain groups" who are responsible for the dual response pattern which has emerged since the mandate's final adoption in August 1980. There has been compliance at the local school district level, but there have been outbreaks of controversy at the legislative level, in the courts, and occasionally in the press. School board members, professional educators, and community members have accepted the State Board's new policy and have implemented it in good faith. They have done this despite the fact that the major education organizations—the New Jersey School Boards Association, the New Jersey Education Association, and the New Jersey Association of School Administrators—opposed the regulation and lobbied hard against its passage; their reason was jurisdictional in nature—they objected to the State Board's intrusion into what they deemed were local school districts' affairs. Moreover, the mandate has been implemented smoothly, although since 1980 a new Governor has been elected (Republican Thomas H. Kean replaced Democrat Brendan T. Byrne), a new Commissioner of Education and new State Board members have been appointed, and the State Department of Education has been restructured to emphasize more local decision-making.

Perhaps there has been compliance because of the public's general perception that the State Board was acting well within its authority and because of members' insistence that their action reflected the wishes of the majority of the state's children and parents. Shortly after final passage, the respected Eagleton poll of Rutgers University confirmed that 87% of parents with school-age children in New Jersey support sex education programs in the public schools.



The laws of the state guarantee "a thorough and efficient education to all children." This phrase in Article VIII of the New Jersey Constitution was defined in the Public School Education Act of 1975 to mean that the system of free public schools should provide all children, "regardless of economic status and geographic location with the educational opportunity which will prepare them to function politically, economically, and socially in a democratic society" (N.J.S.A. 18A:7A-4).

Interestingly, it was the State Commissioner of Health who asked the State Board to assess the effects of its 1967 "voluntary" policy on sex education programs. She drew members' attention to the serious health problems affecting the adolescent population and conjectured that early sexual activity, rising incidences of abortions, venereal disease, and teenage pregnancy and parenting came from lack of knowledge about sexuality and the demands of family life. She questioned whether enough children and young people were receiving sufficiently comprehensive instruction in human sexuality and family responsibilities, and early enough in their lives, to give them the skills to make responsible, sensible decisions about interpersonal relationships and their growing, developing selves.

After studying data showing the depth of support for school family life/sexuality programs (Gallup, Yankelovich, Skelley and White, and CBS/*NY Times*) and a careful scrutiny of research showing, overall, the benefits of these programs, the Board began to consider a policy change. Additionally, Board members were influenced by the information that although 40% of the state's 600 local school districts had implemented programs, many had had difficulty, and others had been deterred by the intensity of the attacks of a few local opponents. Although State Board members realized that, in all likelihood, they would incur the wrath of these opponents, they decided it would be better for them to feel the opponents' anger and hear their arguments than to allow another generation of children to attend school without receiving knowledge and skills to support their social development. With only one of its 13 members opposed, the Board in April 1980 voted to change its optional policy and require that all school districts offer family life education programs by 1983 to all children except those whose parents chose to have them excused because of conscience, or moral or religious beliefs. P. Paul Ricci, the President of the State Board, explained the rationale for the policy change with these words:

Our state goals for all public schools include helping students to acquire the knowledge, habits and attitudes that provide personal and public health, both physical and mental, and to acquire the capacities for playing satisfying and responsible roles in family life. . . . Sharp increases in health dangers related to pregnancy, abortion, venereal disease and births among unwed teenagers give ample testimony to the reasons for our action.

The first challenge to the regulation came hard upon the heels of passage. No sooner had it been born than a bill introduced in the State Senate threatened its existence. However a compromise was struck: The bill was defeated in committee, but the Senators passed a resolution calling upon the Board to reconsider its action. Although the resolution asked for reconsideration of certain aspects of the policy, its mandatory nature was not one of them. The Board agreed to make certain emendations and deletions at the Senators' request; overall, the changes strengthened the role of the local districts in the curriculum development process. The Board substituted an

elementary-secondary program for its original requirement of a K-12 sequential curriculum. It removed a specific list of subjects which were to be taught by the end of 8th and 12th grades. Although sexual abuse and incest were to be covered by 8th grade, the topics of contraception, abortion, homosexuality, and venereal disease were never included in either list. The changes were accepted by the Senators and the Board adopted the amended version of the regulation in August 1980. The policy was indeed a state directive for local curriculum development. Local boards retained the prerogatives to develop the specifics of their own curriculum within the code's four general categories, select teachers, choose resource people, and decide how much emphasis to place on the program.

Of course, the new, amended version did not satisfy the opponents and they continued to press legislators in the State Assembly to bring up a measure, introduced by a Republican Assemblywoman, which "would prevent any state agency from mandating family life education programs." Ironically, it was the vote of a Democratic Assemblywoman, responding to the concerns of the Black Muslim ministers in her district, which released the bill for a floor vote in the Assembly in the spring of 1981. A coalition of proponents—the Department of Education, the New Jersey Catholic Conference (40% of the children who attend public schools are Catholic), and public and private social welfare, health, and child advocacy agencies and organizations—lobbied against passage of this bill. It failed to pass by five votes.

One year later, another bill, virtually similar in all respects to the one defeated previously in the Assembly, but introduced by a Democratic Assemblyman (whose district has a sizeable Right to Life constituency), surfaced in the Education Committee. Once again the vote of the Democratic Assemblywoman with the Black Muslim constituents helped to release the bill from committee. It languished, however, for nearly a year until 4,000 cards and letters, and the prospect of a close election, combined to persuade the Speaker of the Assembly to schedule it for a floor vote as previously mentioned.

The opponents also challenged the legality of the regulation. Soon after its original passage, five appellants from the New Jersey Concerned Parents brought suit against the President of the State Board and the Commissioner of Education (*Mary K. Smith, Et. Al. v. P. Paul Ricci, Etc., Et. Al.*). They charged that: (1) the rule governing family life education violated religious freedom guaranteed under the Establishment Clause of the Constitution (the State Board was furthering the doctrine of "secular humanism"); (2) the rule violated the Free Exercise Clause of the Constitution ("their moral beliefs will be contaminated in their children by attendance wherein sex education will be mandated"); (3) the rule deprived them of their right of privacy under the 14th amendment (they cited *Roe v. Wade*); and (4) the Legislature's grant of rulemaking authority to the State Board was illegal, and procedural irregularities had occurred during the process of adoption.

The unanimous decision (7-0) of the New Jersey Supreme Court, handed down on May 25, 1982, rejected all of the appellants' arguments. Writing for the court, Associate Justice Robert Clifford stressed the secular nature of the rule and said that its parent excusal policy fully protected those parents and children who felt it violated their moral and religious beliefs. In conclusion he said: "The record reveals a sufficient factual basis for the Board's conclusion that the family life education program is a reasonable, desirable, and necessary method of dealing with readily identifiable education and social problems."

The appellants pressed on to the United States Supreme Court. After that Court, without comment, refused to hear the appeal "for want of a substantial federal question," the appellants' lawyer admitted that his clients had exhausted their hopes for judicial remedy. For the handful of local school board members who had waited out the legislative and legal challenges, the federal court signalled that they, too, had to comply with the regulation.

A great many school districts implemented the regulation without seeking advice about curriculum development, resources, and teacher training assistance. Others directed questions to the State Department of Education, the state public colleges, and the New Jersey Network for Family Life Education. When they turned to the State Department for assistance, they found a new Commissioner and his appointees busily working to restructure the department. More importantly, they found that the Commissioner had decided to close down four Educational Improvement Centers, decentralized branches of the Department, where they believed they would find curriculum resources and teacher training sessions. The state had no other avenues of help to offer local districts after the centers closed.

Fortunately, they found a rich resource in the New Jersey Network for Family Life Education. For many districts the process of implementation has been eased by the existence and activities of the Network—its executive coordinator believes that she has provided some form of technical assistance to over 200 districts in the last year and a half.

The Network grew out of a conference on the regulation sponsored in October 1980 by the Center for Community Education of the School of Social Work at Rutgers, the State University. The Center's director, Estelle R. Robinson, had already developed the New Jersey Network on Adolescent Pregnancy, bringing together service providers from across the state to improve services to pregnant teens. She sensed the contribution that a network of organizations which supported the concept of family life/sex education programs in schools could make to the regulation. By early 1981, under her leadership, 25 organizations (both public and voluntary) had formed a networking relationship. After funding was obtained from the Fund for New Jersey and the Huber Foundation, an executive coordinator was hired to carry out the Network's goals. Its principal purpose was, as it still continues to be, "to promote community awareness and understanding of family life education in New Jersey's public schools." Toward this end, the executive coordinator, Roberta Knowlton, provides program assistance, a statewide speaker's bureau, and film and curriculum resources for community agencies, organizations, and committees. The mandate requires committees composed of a broad spectrum of community groups to give ideas to school board members and administrators in the development of curricula. When Knowlton is invited to speak at these gatherings, her thoughtful comments about the importance of family life education effectively dispel misunderstandings. The contribution of the Network to the regulation was never more evident than in those days last June when many of its 43 member organizations called the Speaker of the Assembly and asked him to change his mind.

The efforts of Network members may become even more critical during the first year of implementation. In the months ahead, opponents, proponents, legislators, and reporters will examine and publicly evaluate the programs. Whereas those who have been complying with the regulation and those who have been attempting to thwart it have been moving along parallel pathways, they may in some cases join forces when the

contents of these programs are revealed. While opponents will continue to attack the entire program, proponents may criticize certain weaknesses in them. Some will say they are too bland. Some will protest that too little time is devoted to them. Some will say that certain programs do not cover the general areas specified by the code. Some will complain that the parental excusal policies are difficult to utilize. Undoubtedly many will say that the training for teachers has not been adequate.

Meanwhile, opponents will be waiting in the wings for a teacher's misstatement, an inappropriate curriculum topic, or an embarrassed child so that they can run back on stage and pressure legislators to re-examine the program. A new Senate and Assembly will be elected in November 1983 and no one can predict if it will remain Democratic or turn Republican, or how its members will line up on family life education.

A far more serious threat to the fledgling programs than the initial analyses and early mistakes may come from the recent clutch of major reports which are all highly critical of U.S. education. Led by the members of the National Commission on Excellence whose report was entitled "A Nation at Risk: The Imperative for Educational Reform," a consensus of policy makers agrees that more class time should be concentrated on basic subjects and less on what they term "personal service courses." The authors of the reports recommend that children study science, mathematics, foreign languages, and computer technology much more intensively than they presently do. They decry such courses as those concerned with marriage and the family, a category into which sexuality education is readily placed.

These reports have handed the opponents of the family life mandate powerful ammunition. They can quote authoritatively such statements as this one from "A Nation at Risk": "Schools are routinely called upon to provide solutions to personal, social, and political problems that the home and other institutions either will not or cannot resolve." Then they can argue that family life courses are costly and irrelevant and should be replaced with tougher academic ones.

Supporters can counter the impact these reports and arguments surely will have. They can argue that family life education is indeed a basic subject to be studied, one of the most basic of all for children's well-being. In fact, it can be said that it belongs in the category of the "new basics": as computer science is to mathematics, family life education is to the increasingly stimulating, sexually-provocative "soaps" and advertisements beamed at the young. In addition, supporters can suggest that tougher standards should apply to all courses taught in schools. To guarantee children a chance to carry an increased course-load, more funds for public education will be needed at the federal and state levels; more money will pay for an extended school day, a lengthened school year, and an augmented salary scale to attract the ablest people to the teaching profession. Proponents can also emphasize that family life education, while obviously no panacea for all the economic and social problems of our complex society, contains the element of prevention which is more cost-effective than remediation. A family life educator said recently: "Education can equip teenagers to make responsible decisions. It's like casting bread upon the waters."

Despite some inevitable controversy, if thoughts such as these are conveyed with eloquence to education policymakers in the critical months ahead in New Jersey—and in all other areas across the country which are involved in similar program implementation—then family life education programs will have a chance to take root and grow.

# RESEARCH NOTES

"Research Notes" is usually prepared by Elizabeth Rice Allgeier, PhD, Psychology Department, Bowling Green State University, Bowling Green, Ohio. For this special issue on sexuality education, Douglas Kirby has contributed a report on a relevant research project recently completed.

## The Mattech Research on Adolescent Sexuality Education Programs

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currently at Center for Population Options, Washington, D.C.

When SIECUS proposed that I summarize the Mattech research findings on sexuality education for this special issue, I believed that we would have completed our final report. However, this research project, like many other research projects, has taken much longer than expected. Accordingly, in this article I will describe our overall methodology, discuss our preliminary findings, and summarize the contents of the report to be released in late fall.

### The Need for Research

At the beginning of this century, professionals working with youth espoused sexuality education programs to help alleviate a variety of sexual problems encountered by youth. They believed sexuality education would reduce teenage sexual activity, pregnancy, and venereal disease. Immediately those proponents were attacked by people who believed that sexuality education would increase sexual activity or would be ineffective. Now, 75 years later, proponents, opponents, and others are still debating some of the same issues.

One reason for the continuing debate has been the lack of good evidence to resolve this controversy. Some studies demonstrate that those programs evaluated do increase knowledge and that a few of them may facilitate attitudinal change if that is a clear goal of the course. A few surveys (e.g., those by Zelnik and Kim) indicate that programs have little impact upon sexual activity, but may reduce pregnancy somewhat. A few experimental studies of college programs indicate that they have little impact upon actual sexual behavior such as petting or sexual intercourse, but that those courses which emphasize contraception may improve the use of effective methods of contraception and thereby reduce pregnancies.

Unfortunately, there are numerous limitations with these past studies:

- Many studies evaluated single programs which may or may not be representative of all sexuality education programs, and thus it is difficult to generalize from them to other courses.
- The studies as a group may give a biased view, because research data which show positive results are more likely to be written up and published than data which indicate either no impact or negative results.

- Some studies did not have control groups.
- Very few studies measured effects beyond the end of the program.
- Most studies focused upon knowledge and failed to measure the impact upon many important attitudes and behaviors such as sexual activity and pregnancy.
- The results of a few studies have been viewed as quite positive, when in fact the changes between the pretests and posttests were very small, and were statistically significant only because of very large sample sizes.

Consequently, previous studies have left unanswered many important questions about the effects of programs.

### The Mattech Project: Background and Design

During the mid 1970s the federal government increasingly recognized the large number of unintended teenage pregnancies and it sought solutions. Recognizing that sexuality education was a potentially effective solution but that the effectiveness of programs had not been well demonstrated, the federal government asked the Center for Health Promotion and Education (formerly the Bureau of Health Education) in the Centers for Disease Control to assess and help develop effective sexuality education programs. CHPE in turn awarded Mattech two consecutive contracts to undertake this development and research.

The basic goal of this research was to find, improve, evaluate, and describe effective approaches to sexuality education. To meet this overall goal, we completed several steps in the two contracts. In the first contract we:

- defined two important goals of sexuality education: reducing unintended pregnancy, and improving psychological health through a more positive and fulfilling sexuality;
- identified and had 200 professionals rate potentially important features and outcomes of programs believed to facilitate those goals;
- identified different approaches to sexuality education and promising examples of each;
- developed preliminary methods and questionnaires to evaluate programs;
- reported our findings in the six-volume report, *An Analysis of U.S. Sex Education Programs and Evaluation Methods* (1979).

In the second contract we:

- selected nine specific programs representing different approaches;
- improved each program as much as feasible by conducting an initial evaluation, suggesting program changes, providing training, and providing materials;
- improved the questionnaires and methods of evaluation;
- evaluated the effectiveness of each program using quasi-experimental designs and questionnaire and pregnancy data;
- prepared another six-volume report which presents our results and provides curricula and implementation and evaluation guides for the more effective approaches.

### **Methods Used in the Evaluation**

As much as feasible, we designed this study to overcome the problems and limitations that characterized previous studies, and we were somewhat successful. However, no single study can overcome all the methodological problems specified above, and this study is not an exception.

**Sample of Programs.** We devoted considerable effort to finding promising programs for development and evaluation. We identified 10 programs for our initial evaluation, but dropped four of them for a variety of reasons and replaced them with three other programs. They include six-hour programs, semester programs, conferences, programs for young people alone and with their parents, peer education programs, both school and non-school programs, and both educational and clinic approaches. We believe these programs are excellent examples of different approaches. However, we certainly cannot and do not claim that they are the best programs in the country, for there are many excellent programs that were not included. All of the programs we evaluated are replicable. However, they are not typical or randomly selected, and thus one should not generalize from these programs to all sexuality education programs.

**Use of Quasi-experimental Designs.** In all but one of the sites we collected pretest and posttest data from the students in the sexuality education classes. In some of the sites, we also collected posttest data three to five months after the program ended in order to better measure longer term effects. This is important because after each program ends, some of its effects may greatly diminish, while others may not become apparent until months later when the students become more sexually active. In four of the sites we collected data from control groups that were similar in composition to the experimental groups. In the remaining sites we were able to obtain control groups within the same school or organization. Consequently, we then matched these sexuality classes with the most appropriate control groups from the sites with control groups. The data analysis clearly indicated that having control groups was very important, because both the experimental and control groups had small amounts of change. Our unsuccessful efforts to obtain more control groups were most frustrating, since better control groups would have enhanced the quality of our research.

**Multiple Methods of Collecting Data.** An important principle in methodology is that evaluators should collect several different kinds of data. If the data collection methods are maximally different, then they will probably involve different assumptions and introduce different sources of error. Thus, if all the methods support the same conclusions, then the evaluators can have much greater faith in those conclusions. Conversely, if the different methods produce different or contradictory conclusions, then the researcher knows that one

or more of the methods and conclusions are invalid.

In this study we used several different methods. First, we administered questionnaires to the students and asked them to assess how the program had already affected them or would affect them in the future. Second, we administered pretests, posttests, and delayed posttests to the students and actually measured change in numerous outcomes. Third, we administered questionnaires to the parents of the students and asked them to assess the impact of the program upon the students. Finally, in three sites, we obtained estimates of the pregnancy rates in the schools both before and after the programs were initiated, or among students taking and not taking the course.

**Questions in the Questionnaire:** In the questionnaires we tried to reliably and validly measure most of the outcomes that professionals rated as important for sexuality education programs. Consequently, we measured knowledge; understanding of self; clarity of values; attitudes toward premarital sex, birth control, the role of sexuality in life, gender roles, sexual exploitation, and the importance of the family; social and sexual decision-making and communication skills; comfort with a wide variety of social and sexual activities; communication about sexuality and birth control with boyfriends or girlfriends, other friends, and parents; existence of past sexual activity; frequency of current sexual activity; frequency of sex without birth control; and use of birth control methods.

On many occasions I have emphasized that the criteria that we are using to evaluate sexuality education programs are both incredibly difficult to attain and very different from those used to evaluate other educational programs. Educational programs are typically evaluated according to how much students learn, not according to changes in attitudes, comfort levels, interpersonal skills, and behavior. For example, school health classes are not evaluated according to their impact upon the eating habits of the students or upon the incidence of colds or the flu or dental cavities. However, many educators rated as most important many of the outcomes stated above; many sexuality education programs include them as goals; these goals often serve to justify the implementation of programs; and accordingly we are evaluating the impact of programs upon them.

### **Preliminary Results of Our Evaluation**

Thus far we have analyzed a massive amount of data, but we have not completed our analysis. Therefore, all our findings stated at this time are somewhat tentative. Nevertheless, our preliminary data analysis supports several major conclusions.

First, both students and their parents believe the teachers and their courses were excellent. On 1-5 Likert-type scales ranging from "Very Poor" to "Excellent," median scores on all aspects of the programs are nearly always about 4.0, and are frequently 4.8 or 4.9.

Second, in their assessments of the impact of the course upon themselves, students typically claim that the course increased their factual knowledge and self-understanding, made their values about sexuality more clear, made them feel that birth control is more important, increased the chances that they would use birth control and be more comfortable using it if they have sex, improved their general social and sexual decisions, increased their skill and comfort in talking about sexuality, and improved their self-respect. To a lesser extent, they claim that the course increased their communication with their parents, and their satisfaction with the social and sexual aspects of their personal lives. They also indicate very clearly that the course did not affect the chances that they would have sex. On

*Continued on page 21*

# SEXUALITY AND FAMILY LIFE EDUCATION

## An Annotated Bibliography of Curricula Available for Purchase

This annotated listing of sex education curricula available for purchase was prepared by Leigh Hallingby, MSW, MS, SIECUS librarian. Almost all of these curricula are available for use at the SIECUS Resource Center and Library at New York University, and all are available for purchase from the sources listed with each entry. Prices listed include postage and handling unless otherwise noted.

The curricula are presented without evaluation, in keeping with the "SIECUS Position Statement on Sexuality Education in the Public Schools," which states: "Such programs must be carefully formulated by each community in order to respect the diversity of values and beliefs represented in the public school classroom." Although the scope of this bibliography is much broader than K-12 sex education in the public schools, the same principle applies in developing a sex education program for any population or community: that the program must be appropriate in the context of the setting in which it will

be taught. There are no model curricula which can be recommended across the board.

For the most part, specific content areas covered in each curriculum are not listed in the annotations. The reason for this is the great overlap of topics, especially from the age of adolescence on. Topics often covered include: sexual anatomy and physiology, reproduction, contraception, abortion, masturbation, homosexuality, sex roles, and sexually transmitted diseases. Many curricula also include sections on: self-esteem, interpersonal relationships, communication, decision making, and values clarification. Virtually all curricula include lists of recommended print and non-print resources.

Single copies of this bibliography are available from SIECUS on receipt of \$1.00 and a stamped, self-addressed, business-size envelope for each list requested. In bulk, they are 50¢ each for 5-49 copies; 35¢ each (plus \$2.00 for postage and handling) for 50 copies or more.

Please note that SIECUS does not sell or distribute any curricula.

### GENERAL

#### ADVANCED VALUE CLARIFICATION

Howard Kirschenbaum

Part 1 covers theory and research regarding value clarification. Part 2 discusses designing value-clarification experiences for workshops and for use in public school systems. "Building Value Clarification into the Curriculum" is the title of Part 3. Part 4 has chapters on the past, present, and future of value clarification.

University Associates (1977; 187 pp.), 8517 Production Avenue, P.O. Box 26240, San Diego, CA 92126; \$12.95

#### FAMILY PLANNING AND SEXUALITY PROGRAMME HANDBOOK

Janis Scott and Vicki Kelman

Part 1 is designed for those involved in planning a four- to six-session program for preteens, teens, adults, or professionals. Part 2 gives ideas for those experienced in developing their own programs who are looking for a new activity to "spice up" their presentation. Programs for mentally and physically disabled, preliterate, immigrant, and elderly people are the focus of Part 3.

Family Planning Services (1980, with 1982 update; 223 pp.), 37 Spadina Road, Toronto, Ontario M5R 2S9, Canada; \$12.00

#### GROUP STRATEGIES IN UNDERSTANDING HUMAN SEXUALITY: GETTING IN TOUCH

Robert Kaplan, Linda Brower Meeks, and Jay Scott Segal

The initial group of six exercises is designed

to facilitate introductions and self-disclosure and build group trust. The next 52 strategies concerned with "Getting in Touch with Knowledge, Attitudes, and Values" cover many aspects of human sexuality. The final pair concern saying goodbye and keeping in touch.

William C. Brown Co. (1978; 165 pp.), 2460 Kerper Boulevard, Dubuque, IA 52001; \$9.95 plus postage.

#### A GUIDE TO VALUES CLARIFICATION IN SEX EDUCATION

Jacqueline Pappalardo Dumont

Exercises designed to evoke students' awareness of values, to clarify how these were developed or inherited, and to evaluate their effectiveness, importance, and relevance to the students' lives. Section 1 contains 33 exercises which, when used progressively, will build trust and risk levels. Section 2 contains specific resource material on a variety of human sexuality topics.

Preterm Cleveland (1979, 2nd ed.; 108 pp.), University-Cedar Medical Building, 10900 Carnegie Avenue, Cleveland, OH 44106; \$6.43

#### INTIMACY IS FOR EVERYONE: A SEX EDUCATOR'S GUIDE TO TEACHING INTIMACY SKILLS

Bob McDermott and Barbara Petrich

Although this unique curriculum was developed in prisons, juvenile facilities, and substance abuse treatment institutions, it is intended to be useful to all sex educators looking for a new approach to relationships education. Includes special sections on heartache, hopelessness, and overcoming fear, as well as on survival skills for educators.

Planned Parenthood of Santa Barbara County (1983; 282 pp.), 518 Garden Street, Santa Barbara, CA 93101; \$18.00

#### THE MAGIC OF STRUCTURE: A MANUAL FOR PLANNING AND EVALUATING FAMILY PLANNING EDUCATION PROGRAMS

J. Stephen Kirkpatrick

Part 1 includes information needed for setting priorities, assessing needs, writing goals and objectives, budgeting, setting fees, allotting staff time, and planning programs. Part 2 provides instructions on writing tests, constructing questionnaires, conducting surveys and analyzing their results, using experimental research techniques to evaluate programs, calculating basic statistics, and locating sources of data and information.

Planned Parenthood Federation of America (1981; 248 pp.), 810 Seventh Avenue, New York, NY 10019; \$17.00

#### A MANUAL FOR GROUP FACILITATORS

Brian Auvine et al.

A basic resource on group facilitation especially addressed to persons inexperienced in performing this role. Chapters follow sequence of preparation, getting started, group process, and evaluation.

Center for Conflict Resolution (1978; 89 pp.), 731 State Street, Madison, WI 53703; or Wisconsin Clearinghouse, 1954 E. Washington Avenue, Madison, WI 53704; \$5.50

#### PRACTICAL APPROACHES TO SEXUALITY EDUCATION PROGRAMS: PREADOLESCENTS, ADOLESCENTS, PARENTS, AND MENTALLY RETARDED PERSONS

Ann Thompson Cook and Pamela M. Wilson, eds.

For programs with each of the four groups listed in subtitle, provides information and suggestions regarding rationale, program description, special considerations, and

selected resources.

*Sex Education Coalition (1982; 70 pp.), Friendship Station Box 39733, Washington, DC 20016; \$6.50*

### **A PRACTICAL GUIDE TO VALUE CLARIFICATION**

Maury Smith

Chapter 1 presents an explanation of the basic theory of value clarification; 29 activities with variations comprise Chapter 2; Chapter 3 discusses design considerations relevant to value-clarification programs and gives a check list for evaluating new activities and designs. The remaining chapters are made up of background readings in value clarification and an annotated bibliography. *University Associates (1977; 322 pp.), 8517 Production Avenue, P.O. Box 26240, San Diego, CA 92126; \$16.95*

### **SEXUAL EXPRESSION: A MANUAL FOR TRAINERS**

Carl Hartman, Jane Quinn, and Brenda Young

Contains chapters on desensitization; solo, one-to-one, and small-group exercises; and the interdisciplinary team. Overall emphasis is on developing comfort, both with one's own sexuality and with sexual issues presented by clients and students. *Human Sciences Press (1981; 152 pp.), 72 Fifth Avenue, New York, NY 10011; \$14.95 plus postage*

### **SEXUALITY EDUCATION: A GUIDE TO DEVELOPING AND IMPLEMENTING PROGRAMS**

Ann Thompson Cook, Douglas Kirby, Pamela M. Wilson, and Judith S. Alter

Covers building a program, establishing guidelines for the program, designing the course, selecting and training leaders, implementing programs, linking young people with medical services, and evaluating the course. Also included are fact sheets on such topics as sexual knowledge and behavior of adolescents, parent/child communication about sexuality, and effects of sexuality education programs.

*Network Publications (in press for 1984; 116 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506*

### **SEXUALITY EDUCATION: A HANDBOOK FOR THE EVALUATION OF PROGRAMS**

Douglas Kirby

Discusses need for evaluating sexuality education programs; selection of program characteristics and outcomes to be measured; experimental designs; survey methods; questionnaire design; and procedures for administering questionnaires, analyzing data, and using existing data. Appendix contains reliable, valid questionnaires.

*Network Publications (in press for 1984; 179 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506*

### **SEXUALITY EDUCATION: AN ANNOTATED GUIDE FOR RESOURCE MATERIALS**

Pamela M. Wilson

Reviews books, films, filmstrips, cassettes,

slides, curricula, charts, models, games for use with K-12. Provides discussion of material, as well as distributor, length, cost, and recommended grade level.

*Network Publications (in press for 1984), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506*

### **SEXUALITY EDUCATION AND TRAINING: THEORY, TECHNIQUES, AND RESOURCES**

Joan Helmich and Jan Loreen

Includes extensive description of basic teaching techniques, with elaboration on variations, methods of adaptation, and possible effect of each technique; information on planning, delivery, and evaluation in sexuality education; basic theory on how groups function and how to facilitate that process; and suggested games, group exercises, and combinations of techniques developed for specific topics.

*Planned Parenthood of Seattle/King County (1979, 2nd ed.; 129 pp.), 2211 East Madison, Seattle, WA 98112; \$5.25 plus 20% postage and handling*

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## K-12

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### **EDUCATION FOR SEXUALITY: CONCEPTS AND PROGRAMS FOR TEACHING**

John J. Burt and Linda Brower Meeks

The first three sections are designed to acquaint teachers with basic information and concepts related to sexuality. In section 4, detailed teaching units are presented for each of grades 1 through 6, and then for grades 7 through 12 as a whole. Final 100 pages are an "Atlas of Teaching Illustrations" which teachers may remove and use for overhead projection or other visual purposes. *Holt, Rinehart, & Winston (1975, 2nd ed.; 537 pp.), 383 Madison Avenue, New York, NY 10017; \$21.75 plus 5% p/h*

### **FAMILY LIFE AND HUMAN DEVELOPMENT (K-12)**

A booklet explaining the Family Life and Human Development (Sex Education) program offered by the Prince George's County Public Schools to carry out mandate from State Board of Education to provide this as part of a total health program. Includes information on who teaches the program, what the goals are, how parents are involved, and what the curriculum is at the elementary, middle-school, senior high, and special education levels.

*Prince George's County Public Schools (1983, rev. ed.; 19 pp.), Upper Marlboro, MD 20772; no charge*

### **A RESOURCE GUIDE FOR SEXUALITY EDUCATION**

Primary emphasis is on integrating the cognitive and affective aspects of sex education. Presents numerous techniques and activities which provide students with experience in

values clarification, problem solving, decision making, self-awareness, and self-disclosure. A copy of the book *Values in Sexuality* by Eleanor S. Morrison and Mila Underhill (otherwise out of print) is included. *Planned Parenthood Centers of Western Michigan (1978; 360 pp.), 425 Cherry Street SE, Grand Rapids, MI 49503; \$30*

### **SCHOOLS AND PARENTS: PARTNERS IN SEX EDUCATION Public Affairs Pamphlet #581**

Sol Gordon and Irving Dickman

Examines why, in the face of overwhelming public support, sex education has not been widely implemented in U.S.; what school programs cover; and what the effects of sex education might be. Includes model curriculum of topics and concepts for K-12 sex education program.

*Public Affairs Committee (1980; 28 pp.), 381 Park Avenue South, New York, NY 10016; \$.50; bulk rates available*

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## MIDDLE SCHOOL

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### **CHANGES AND CHOICES: HUMAN GROWTH AND DEVELOPMENT FOR CLASSROOM USE**

Kathryn Bosch

Provides 14 sessions for use with 5th and 6th grade students, each covering an individual topic. Each session includes an introduction to the topic, followed by a variety of activity options, each with basic objectives, procedures, and discussion possibilities. Suggestions are offered for journal assignments and homework with parents.

*Family Planning Council of Western Massachusetts (1982; 107 pp.), 16 Center Street, Northampton, MA 01060; \$10.00 plus \$2.00 p/h*

### **FAMILY LIFE EDUCATION CURRICULUM FOR PRE-ADOLESCENTS**

Marcia W. Miller

Covers grades 5-9. Contains 12 unit plans consisting of behavioral objectives, detailed factual material about the topic, vocabulary, lesson plans, motivation, and several suggested activities. Topics progress along three parallel tracks: self, family, peers; physical, emotional, social; and informational, attitudinal, and behavioral.

*Marcia Miller/David Rider, Mount Vernon Public Schools (1982; 163 pp.), 165 North Columbus Avenue, Mount Vernon, NY 10553; \$15.00*

### **FAMILY LIFE EDUCATION: RESOURCES FOR THE ELEMENTARY CLASSROOM: GRADES 4, 5, 6**

Lynne Ann DeSpelder and Albert Lee Strickland

Designed for use by elementary school teachers in conjunction with locally approved curricula. Provides more than 75 examples of activities in five topic areas: self,

family, friends, body, and decisions. *Network Publications* (1982; 338 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506; \$20.00 plus 15% p/h

**HUMAN SEXUALITY:  
A CURRICULUM FOR PRE-TEENS**

Jane M. Dodds

For grades 5-8. Contains 12 chapters each of which is divided into five components: introduction to key concepts for class discussion, factual material for class presentation, group exercises and discussion questions, resources, and evaluation resources. *Planned Parenthood of Rochester and Monroe County* (1978; 92 pp.), 24 Windsor Street, Rochester, NY 14605; \$15.00

**IN BETWEEN: A FAMILY LIFE  
EDUCATION CURRICULUM FOR  
EARLY ADOLESCENTS (AGES 10-14)**

Focuses on individual and group activities which celebrate the family, encourage healthy attitudes toward pubertal changes, and introduce problem-solving skills in peer relationships. For optional purchase with curriculum are three films entitled *In Between* (Parts I, II, III), designed to stimulate discussion about the new privileges and problems associated with reaching puberty.

*Memphis Planned Parenthood* (1981; 115 pp.), 1407 Union, Memphis, TN 38104; \$18

**NEW METHODS FOR PUBERTY  
EDUCATION: GRADES 4-9**

Carolyn Cooperman and Chuck Rhoades

Outlines original lesson plans that explore: the factual aspects of the body changes which occur during puberty; the emotional responses to these changes; how body image affects a person's self-esteem and interactions with other people; and skills for retaining reliable information about the human body. It is intended that teachers will select lesson plans to be integrated into the existing puberty education component of the total family life education curriculum as is appropriate for their individual classes.

*Planned Parenthood of Northwest New Jersey* (1983; 176 pp.), 195 Speedwell Avenue, Morristown, NJ 07960; \$20.00 plus \$3.00 p/h

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## HIGH SCHOOL/ ADOLESCENTS

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**EXPLORING THE PARENTHOOD CHOICE:  
AN ACTIVITIES GUIDE FOR EDUCATORS**  
*National Alliance for Optional Parenthood*

Assumption behind the guide is not that all students will be parents someday, but that all students need to think about what is involved in parenthood and be aware of alternatives in order to make responsible choices. Guide suggests 20 different activities grouped in six sections: Preliminary Activities, Resources for Family Life, Knowledge About Children, The

Parenthood Option, The Childfree Option, and The Decision.

*Network Publications* (1981; 78 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506; \$8.95 plus 15% p/h

**FAMILY LIFE EDUCATION:  
A PROBLEM-SOLVING CURRICULUM  
FOR ADOLESCENTS (AGES 15-19)**

Focuses on activities which strengthen decision-making skills, enhance self-concept, and promote greater awareness of sexual attitudes and roles. Also available for purchase with this curriculum are five trigger films which present typical dilemmas faced by today's teenagers.

*Memphis Planned Parenthood* (1980; 181 pp.), 1407 Union Avenue, Memphis, TN 38104; \$18.00

**FAMILY LIFE EDUCATION:  
CURRICULUM GUIDE**

Steven Bignell, ed.

Presents specific 10-session models for programs at both junior and senior high school levels. While both attempt to provide a broad overview of the areas commonly covered within sex education courses, the junior high program tends to focus more on the issue of self-esteem, while the senior high program focuses on problem solving and decision making.

*Network Publications* (1980; 392 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506; \$20.00 plus 15% p/h

**HUMAN DEVELOPMENT SERIES:  
A SEXUALITY EDUCATION PROGRAM  
FOR ADOLESCENTS**

Joseph Fay and Mary Grace Umbel

Designed to meet the needs of both the beginning sex educator looking for help with course content and the veteran who wants advanced strategies and fresh ideas. Outlines 18 sessions, citing the purpose, rationale, materials, study topics, and suggested activities for each.

*Planned Parenthood of Central Pennsylvania* (1983, 2nd ed.; 74 pp.), Education Department, 728 South Beaver Street, York, PA 17403; \$12.95 plus \$1.00 p/h

**HUMAN SEXUALITY:  
A CURRICULUM FOR TEENS**

Jane M. Dodds

Contains 14 chapters which can be presented as 14 or more class sessions. Each session is made up of five components: overview of concepts for class discussion, factual material to be presented, group exercises and homework assignments, resources, and knowledge and attitude surveys.

*Planned Parenthood of Rochester and Monroe County* (1979; 145 pp.), 24 Windsor Street, Rochester, NY 14605; \$20.00

**HUMAN SEXUALITY: A TRAINING  
MANUAL FOR JOB CORPS CENTERS**

Jeanette M. Calnek and Steven G. Levine

First half is a 14-16 hour training program

for counselors, instructors, medical and recreational personnel, and dormitory staff. Second half is a two-day sexuality education program for Job Corps students aged 16-21, taught from the assumption that many may already be sexually active.

*Genesee Region Family Planning Program* (1981; 110 pp.), 315 Alexander Street, Rochester, NY 14604; \$3.50

**IMPLEMENTATION OF FAMILY LIFE  
EDUCATION CURRICULUM: TEACHING  
MATERIALS AND STRATEGIES**

Joan Benesch, Jean Kapp, and Louise Pelouquin

Oriented toward urban sex educators developing programs and materials specific to school objectives and guidelines. Each of the 10 sections reviews a particular content area and includes curriculum objectives, factual materials, and exercises.

*Sex Education Coalition* (1981; 125 pp.), Friendship Station Box 39133, Washington, DC 20016; \$15.00 plus \$2.00 p/h

**LIFE STYLES EDUCATION  
AND COUNSELING PROGRAM:  
CURRICULUM MANUAL**

Pam Sofferin et al.

Provides a multifaceted approach to working in the area of teenage parenthood prevention. Contains 16 units, each consisting of introduction, goals and objectives, optional exercises, overhead transparencies, suggested discussion questions, pre/post tests, and resources.

*Child Development Program* (1979; 400 pp.), Community Mental Health Center of Escambia County, Pensacola, FL 32501; \$75.00

**SEX EDUCATION TEACHER'S GUIDE  
AND RESOURCE MANUAL**

Steven Bignell

Designed as a companion volume to *Family Life Education: Curriculum Guide*, this manual is an aid to sex educators who are developing sex education classes or enhancing existing programs. Offers extensive teaching techniques and bibliographic material, as well as comprehensive background on topical areas usually covered.

*Network Publications* (1982, 2nd ed., 277 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506; \$20.00 plus 15% p/h

**SEXUALITY AND THE ADOLESCENT:  
A TEACHING GUIDE**

Jerelyn B. Schultz, ed.

The second of a three-part curriculum entitled *Contemporary Parenting Choices*. Major topics addressed are: the decision to parent, sexuality and the adolescent, and caring for children in today's society. Presented in double-page four-column format consisting of: competencies to be acquired by students, possible generalizations, learning activities, and resources.

*Iowa State University Press* (1981; 260 pp.), Ames, IA 50010; \$16.95

**SEXUALITY AND THE TEENAGER:  
A TEACHING GUIDE FOR SEX EDUCATION**

Contains two major sections: "Sexuality and Your Body" and "Sexuality and Your Relations with Others." Within each are lesson plans suitable at various grade levels ranging from 7th through 12th.

*Planned Parenthood New Brunswick (1981; 182 pp.), Centre de la Santé, Victoria Health Center, 65 Rue Brunswick, Fredericton, New Brunswick E3B 1G5, Canada; \$8.00*

**SEXUALITY EDUCATION: A  
CURRICULUM FOR ADOLESCENTS**

*Pamela Wilson and Douglas Kirby*

Consists of 11 units, each of which has a statement of goals and objectives, an overview of the unit contents, several activities and, where needed, lecture notes and handouts. Based primarily on courses developed and taught at Council Rock High School in Newtown, Pa.; University City High School in St. Louis, Mo.; and George Mason High School in Falls Church, Va.

*Network Publications (1983; 352 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506; \$20.00 plus 15% p/h*

**WE'RE NOT JUST TALKING SEX . . .  
A LEADER'S GUIDE FOR  
TEEN SEX EDUCATION**

Contains information about group facilitation, program content, teaching methods, evaluation instruments, and supplementary teaching materials. Outlines three complete programs which can be presented independently or as a series: Health Care for Teens; Values, Decision Making, and Sexuality; and Sexuality and Relationships.

*Education Department, Planned Parenthood of Southeastern Pennsylvania (1983; 130 pp.), 1220 Sansom Street, Philadelphia, PA 19107; \$12.95 plus \$1.95 p/h*

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**PEER (ADOLESCENTS)**

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**PEER EDUCATION: A FAMILY  
HEALTH EDUCATION PROGRAM**

*Juliette M. Van Putten*

Consists of 15 90-minute sessions. Various teaching methods used include lectures, role playing, films, group discussions, and strategies aimed at values clarification. Once the training is completed, the trained students present two to five educational programs to other students in a classroom setting.

*Office of Health Education, San Bernardino County Department of Public Health (1982; 350 pp.), 351 North Mountain View Avenue, San Bernardino, CA 92415; \$20.00*

**PEER EDUCATION: AN ADOLESCENT  
SEX EDUCATION PROGRAM**

Covers methods for starting a peer education program, recruiting students to be peer

educators, training them for 30 hours over a 10-day period, and having them present a one-week sex education program via giving lecture/demonstrations, leading exercises, and facilitating group discussion.

*Planned Parenthood of Monterey County (1981; 141 pp.), 5 Via Joaquin, Monterey, CA 93940; \$20.00*

**PEER EDUCATION IN HUMAN SEXUALITY**

*Louise Peloquin, Jinny Sewell, and Ginny Levin*

Designed to give an understanding of the peer education model, a step-by-step guide to initiate and continue a peer education program, and ideas for using peer educators after training. Peer educators demonstrate their skills through public speaking, role playing, salespersonship, individual and group education, and referral techniques.

*Planned Parenthood of Metropolitan Washington (1980; 106 pp.), 1108 16th Street, NW, Washington, DC 20036; \$12.00*

**TO BE A LEADER: SKILLS IN  
GROUP LEADERSHIP FOR TEENAGERS**

*Teen Advisory Committee and Education Department*

Offers advice on characteristics of an effective group leader, preparing for a group, conducting a group on one's own or with others, opening and closing sessions, and handling difficult situations. Suggests "icebreaker" and program activities, and discusses special concerns in peer sex education group leadership.

*Planned Parenthood of Southeastern Pennsylvania (1983; 34 pp.), 1220 Sansom Street, Philadelphia, PA 19107; \$3.95 plus 60¢ p/h*

**A TRAINING MANUAL FOR WORKING  
WITH ADOLESCENTS AS  
PEER COUNSELORS**

*Judith Segal-Favor*

Includes an overview of the peer counseling program from which this manual evolved; a philosophical and theoretical framework making possible the creation of an atmosphere for both personal and group development; many examples of techniques for team building, trust development, information giving, and skill learning; suggestions for keeping in touch with participants; and administrative considerations.

*Pasadena Planned Parenthood (1979; 86 pp.), 1045 N. Lake Avenue, Pasadena, CA 91104; \$10.00*

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**PARENTS**

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**COMMUNICATING ABOUT SEXUALITY:  
PARENT AND CHILD**

*Anne Wuerscher and Phyllis R. Goldman*

**Subtitle:** A Guide for Training Family Edu-

cators and Counselors. Copy unavailable for annotation at press time.

*Statewide Family Planning Training Program (1981), Department of OB-GYN, University of Connecticut Health Center, Farmington, CT 06032; \$10.00*

**CONNECTIONS**

*Phyllis R. Goldman*

Designed to help professionals with human services background easily conduct a three-hour workshop for parents of adolescents. Packaged as folder with two pockets of materials—one for instructors and one for parents.

*Statewide Family Planning Training Program (1983), Department of OB-GYN, University of Connecticut Health Center, Farmington, CT 06032; \$7.50*

**GROWING (UP) TOGETHER: SEXUALITY  
AND COMMUNICATION: A CURRICULUM  
GUIDE FOR PARENTS AND CHILDREN**

*Kathryn Bosch*

Six units for use with parents and their children ages 10–13, plus a parents' introductory session. Adaptable for use in a variety of time schedules. Curriculum format includes parents and young people together and apart and necessitates a minimum of two facilitators.

*Family Planning Council of Western Massachusetts (1982; 54 pp.), 16 Center Street, Northampton, MA 01060; \$7.50 plus \$1.00 p/h*

**PARENT-CHILD SEX EDUCATION:  
A TRAINING MODULE**

*Jean G. Brown et al.*

Includes four separate course outlines for mother-daughter groups (girls 9–12 and adolescent girls), and father-son groups (boys 9–12 and adolescent boys).

*Parent-Child Experience, Inc. (1980; 76 pp.), 1518 South 18th Street, Saint Joseph, MO 64507; \$18.75*

**PARENT-TEACHER GUIDE TO  
SEX EDUCATION PROGRAMS**

*Jane M. Dodds*

Provides information about doing a needs assessment in the community; public relations for a parent sex education program; and design, implementation, and evaluation. Sample exercises and lists of resource materials are provided.

*Planned Parenthood of Rochester and Monroe County (1978; 46 pp.), 24 Windsor Street, Rochester, NY 14605; \$15.00*

**PUTTING THE BIRDS AND BEES IN  
PERSPECTIVE: A PARENT  
EDUCATION MANUAL**

*Barb Cote and Jan Lunquist*

Covers how to put together a parent education project; topics in sexuality with parent guidelines; program designs for parents of preschoolers, school age children, and pre-teens/teens; also for single, teen, and adoptive parents; and for parents and children



together. Includes file of ideas, activities, and resources.

*Planned Parenthood Centers of West Michigan* (1982; 239 pp.), 425 Cherry Street SE, Grand Rapids, MI 49503; \$30.00

#### SEMINARS FOR PARENTS ON ADOLESCENT SEXUALITY

Contains detailed outlines for four seminars, including overall goals, suggested agenda, techniques for encouraging discussion, and background reading and information. Additional seminar outlines are also provided for parents wishing to explore particular topics in more depth. This is part of a larger educational program entitled "Starting a Healthy Family."

*Education Development Center* (1978; leader's guide, 147 pp.; parent packet, 141 pp.), 55 Chapel Street, Newton, MA 02160; curriculum alone, \$14.65; curriculum plus four audiotapes, \$31.45

#### A SEXUAL LEARNING CURRICULUM FOR PARENTS OF YOUNG CHILDREN

Kathryn F. Green, Jacqueline M. Hrnyak, and Susan A. Dean

Designed to encourage parents of children ages 3-11 to think about their feelings, opinions, and values and how they want to communicate them to their children. Exercises can be used individually or as part of a complete 6-8 hour session.

*Cleveland Program for Sexual Learning* (1982; 29 pp.), 12429 Cedar Road, Room 26, Cleveland Heights, OH 44106; \$3.50

#### SEXUALITY EDUCATION FOR PARENTS: A TRAINING MANUAL FOR FACILITATORS

Stephanie Braaten Hanson and Nadeane Nass

Provides material for four two-hour sessions, each including a warm-up activity, small and large group discussions, and individual exercises. Designed for an audience of middle-class mothers and fathers.

*Planned Parenthood Association, Dodge-Jefferson Chapter* (1979; 106 pp.), 159 West Garland Street, Jefferson, WI 53549; \$8.50

#### SEXUALITY EDUCATION: A CURRICULUM FOR PARENT/CHILD PROGRAMS

Jean Brown et al.

A revised and expanded version of *Parent-Child Sex Education: A Training Module* (see entry above). Consists of suggested course outlines; activities, supplementary teacher resource sheets, and handouts; and appendices on resources and evaluation.

*Network Publications* (1983; 203 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506; \$20.00 plus 15% p/h

#### SEXUALITY EDUCATION FOR PARENTS OF YOUNG CHILDREN: A FACILITATOR'S TRAINING MANUAL

Sally A. Koblinsky

Section 1 provides overview of program from which this manual was developed and

presents rationale for offering sexuality education program to parents of children from infancy to age eight. Sections 2 and 3 deal with organization, management, and curriculum for training of facilitators. A model for designing, implementing, and evaluating programs for parents appears in Section 4. Final two sections include informational summaries for sexual topics covered in both the facilitator and parent training programs, plus appendices, bibliographies, and resource lists.

*Ed-U Press* (1983; 296 pp.), P.O. Box 583, Fayetteville, NY 13066; \$11.95 plus 15% p/h

#### TEACHING PARENTS TO BE THE PRIMARY SEXUALITY EDUCATORS OF THEIR CHILDREN

Judith Alter and Pamela Wilson

A three-volume set: 1. Guide to Designing and Implementing Multi-Session Courses; \$15.00 plus 15% p/h. 2. Curriculum Guide to Courses for Parents; \$20.00 plus 15% p/h. 3. Curriculum Guide to Courses for Parents and Children Together; \$20.00 plus 15% p/h. *Network Publications* (1983), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506

#### WHAT SHOULD WE TELL THE CHILDREN? A CURRICULUM GUIDE FOR PARENTS

Kathryn Bosch

A 10-hour curriculum which provides information on myths and facts, communication skills, and peer pressure. Includes exercises and resources for parents from school, church, and community groups.

*Family Planning Council of Western Massachusetts* (1982; 40 pp.), 16 Center Street, Northampton, MA 01060; \$7.50 plus \$1.00 p/h

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## MENTALLY DISABLED

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#### BECOMING ME: A PERSONAL ADJUSTMENT GUIDE FOR SECONDARY STUDENTS

Teresa Throckmorton

Includes units on personal and social development, health and self care, and human growth and development, all focused on nurturing the practical skills needed for everyday life. For each topic, a content outline, behavioral objectives, learning activities, and suggested resources are presented.

*Grand Rapids Public Schools* (1980; 91 pp.), 143 Bostwick, NE, Grand Rapids, MI 49503; \$12.00

#### BEING ME . . .

Jean Edwards and Suzan Wapnick

**Subtitle:** A Social/Sexual Training Guide for Those Who Work with the Developmentally Disabled. Includes examples of curricula and lesson plans from a variety of sources ap-

proaching a broad student population from mildly to severely disabled, from age 6 up to young adults and older persons. Designed both to supplement existing training and to serve as a complete new program.

*Ednick Communications* (1981; 226 pp.), P.O. Box 3612, Portland, OR 97208; \$30 plus \$2.50 p/h

#### CIRCLES

Marklyn Champagne and Leslie Walker-Hirsch

**Subtitle:** A Multimedia Package to Aid in the Development of Appropriate Social/Sexual Behavior in the Developmentally Disabled Individual. Teaches each individual that s/he is the most special person in the world whom no one touches unless s/he wants to be touched. Also teaches students not to touch anyone who does not want to be touched. Total package for \$325.00 (plus \$5.00 p/h) also includes two slide programs, a teaching drop cloth, and a set of 10 teaching photographs.

*Stanfield Film Associates* (1983; 72 pp.), P.O. Box 1983, Santa Monica, CA 90406; \$12.00 plus \$1.50 p/h

#### EDUCATION FOR ADULthood

Madeline Greenbaum and Sandra J. Noll

Part 1 deals with training staff to teach the curriculum presented in Part 2 which is oriented toward adolescents and adults. Includes units on body image, feelings, acceptance of disability, expressing sexuality, and interpersonal relationships. Part 3 offers list of resources, reference material, and bibliographies.

*Staten Island Mental Health Society, Inc.* (1982; 254 pp.), Center for Developmental Disabilities, 657 Castleton Avenue, Staten Island, NY 10301; \$27.75

#### ESSENTIAL ADULT SEX EDUCATION FOR THE MENTALLY RETARDED: E.A.S.E. SEQUENTIAL CURRICULUM GUIDE

David B. Zelman and Kathie M. Tysen

Sequenced set of objectives, procedures, and materials grouped into four instructional units: biological data, sexual behavior, health, and relationships. Pre/post tests and teaching picture cards are included in curriculum guide. Total E.A.S.E. package for \$125.00 (plus \$5.00 p/h) also includes two introductory cassettes, 100 Diagnostic Pupil Profile sheets, color filmstrip, and menstruation and birth control products kit.

*Stansfield Film Associates* (1979, 2nd ed.; 70 pp.), P.O. Box 1983, Santa Monica, CA 90406; \$25.00 plus \$3.50 p/h

#### FEELING GOOD ABOUT YOURSELF: A GUIDE FOR PEOPLE WORKING WITH PEOPLE WHO HAVE DISABILITIES

Gloria Blum and Barry Blum

New, expanded edition. In addition to socialization and decision making, a wide variety of sexual topics is covered. The continuing focus is on self-esteem as the essential ingredient in preparation for adulthood. *Feeling Good Associates* (1981; 74 pp.), 507 Palma Way, Mill Valley, CA 94941; \$9.95

## A GUIDE FOR TEACHING HUMAN SEXUALITY TO THE MENTALLY HANDICAPPED

Phyllis Cooksey and Pamela Brown

Contains nine categories such as interpersonal relations and contraception. Under each one are listed topics to cover, points to make, and suggested activities and resources. A companion bibliography is available for \$2.50.

Planned Parenthood of Minnesota (1981, 3rd ed.; 22 pp.), 1965 Ford Parkway, St. Paul, MN 55116; \$3.50 plus 20% p/h

## PERSONAL DEVELOPMENT AND SEXUALITY: A CURRICULUM GUIDE FOR DEVELOPMENTALLY DISABLED

Lenore Morrey et al.

Presents general statements, behavioral objectives, activities, and resources for a series of topics such as self-actualization, personal hygiene, and human sexual response. Also gives guidance about how to be a facilitator and how to plan and evaluate sex education programs.

Planned Parenthood of Pierce County (1978; 123 pp.), 312 Broadway Terrace Building, Tacoma, WA 98402; \$20.00

## A PROGRAM IN HUMAN SEXUALITY FOR THE DEVELOPMENTALLY DISABLED

Nancy Howes

Designed to be conducted in a rotating series of 12 one-hour sessions, beginning with the most basic topics and advancing according to the ability of the group. Each week pertinent information covered in past sessions is reviewed, and a new topic introduced.

Nancy Howes (1978; 21 pp.), Box 2107, Hanover, MA 02339; \$4.50 plus \$1.00 p/h

## SEX EDUCATION FOR PERSONS WITH DISABILITIES THAT HINDER LEARNING: A TEACHER'S GUIDE

Winifred Kempton

Includes chapters on: characteristics of mentally handicapped students and of sex educators, subject matter to be taught, teaching techniques, and the teacher as counselor to both the students and their parents.

Planned Parenthood of Southeastern Pennsylvania (1975; 162 pp.), 1220 Sansom Street, Philadelphia, PA 19107; \$7.95 plus \$1.19 p/h

## SEXUALITY AND SOCIAL AWARENESS

Dawn A. Lieberman and Mary Bonyai Melone

**Subtitle:** A Curriculum for Moderately Autistic and/or Neurologically Impaired Individuals. For use with adolescent boys and girls age 12 and older for whom sexual relationships are not encouraged because such behavior is bound to lead to frustration and disappointment. Includes six sequential units, each containing goals and specific behavioral objectives.

Benhaven Press (1979; 40 pp.), 9 St. Ronan Terrace, New Haven, CT 06511; \$18.55

## TEACHING SEX EDUCATION TO ADULTS WHO ARE LABELED MENTALLY RETARDED

Al Strauss

Part 1: the development, administration, and implementation of a sex education program for persons labeled mentally retarded. Part 2: program sequence with specific information regarding unit objective, lesson plans, techniques, materials, tests, and rationale. Final portion consists of bibliography and references.

Al Strauss (1976; 59 pp.), P.O. Box 2141, Oshkosh, WI 54903; \$6.00

## PHYSICALLY DISABLED

### FEELING FREE

Jean Edwards et al.

**Subtitle:** A Social/Sexual Training Guide for Those Who Work with the Hearing and Visually Impaired. Can be used with severely or more mildly handicapped individuals, ranging in age from 6 to 36. Teaches responsible decision-making based on concepts of public/private and appropriate/inappropriate. Also available: 55 picture cards with paperdoll models, keyed to lesson plans and designed to assist in communicating important learning concepts; \$19.50 plus \$2.50 p/h. Ednick Communications (1982; 243 pp.), P.O. Box 3612, Portland, OR 97208; \$30.00 plus \$2.50 p/h

### SEX EDUCATION AND FAMILY LIFE CURRICULUM

Formulated along two cumulative progressions which lead to a sequence of objectives based on students' developmental and cognitive levels. Developmental sequence is divided into five levels from early childhood through adolescence, and cognitive into primary through high school levels.

Perkins School for the Blind (1977; 102 pp.), Office of Public Relations and Publications, 175 North Beacon Street, Watertown, MA 02172; \$15.00 plus 75¢ p/h

### SEX EDUCATION FOR DEAF-BLIND STUDENTS

Ellen Cadigan and Roslye Roberts Geuss

Contains six units on: self identity, anatomy of the reproductive system, human reproduction, growth from infancy through puberty, adolescence, and personal health care and hygiene. Within each unit is a series of skills to be learned (such as understanding the concept of marriage) and under each skill is a series of objectives (such as being able to define the words *husband* and *wife*).

Perkins School for the Blind (1981; 130 pp.), Office of Public Relations and Publications, 175 North Beacon Street, Watertown, MA 02172; \$10.00 plus 75¢ p/h

## PROFESSIONAL

### FAMILY LIFE EDUCATION: TEACHER TRAINING MANUAL

Ellen Wagman, Lynne Cooper, and Kay Rodenberg Todd

Written for those wishing to prepare school personnel to teach family life education to junior and senior high school students. Organized around the steps of needs assessment, objective writing, training, management, design, delivery, and evaluation. Uses concrete examples and sample activities, designs, forms, and instruments to clarify each step.

Network Publications (1981; 536 pp.), 1700 Mission Street, Suite 203, P.O. Box 8506, Santa Cruz, CA 95061-8506; \$27.00

### GUIDELINES FOR TRAINING IN SEXUALITY AND THE MENTALLY HANDICAPPED

Winifred Kempton and Rose Foreman

Outlines nine sessions, each developed around one pertinent area of interest. Each session consists of three parts: factual material with some opportunity for questions and exchange of ideas; examination of participants' feelings, comfort levels, and attitudes; and communication, teaching techniques, practice exercises, and resources.

Planned Parenthood of Southeastern Pennsylvania (1976, 2nd ed.; 163 pp.), 1220 Sansom Street, Philadelphia, PA 19107; \$7.95 plus \$1.19 p/h

### HOW TO BE A TRAINER

Terry Beresford

**Subtitle:** A Self-Instructional Manual for Training in Sexual and Reproductive Health Care. Text covers how to design training sessions, deliver training effectively, think like a trainer, and deal with common group management problems. Resources section contains more than 50 exercises for staff training in communications, assertiveness, contraception, abortion, and sexuality.

Planned Parenthood of Maryland (1980; 142 pp.), 610 North Howard Street, Baltimore, MD 21201; \$12.50 plus 15% p/h

### SEX COUNSELING SKILLS WORKSHOP: A TRAINER'S HANDBOOK

Robert R. Wilson

Outlines three phases: sex attitudes awareness (3 days), sex counseling skills (3 days), and case studies (1 day). Stresses first phase because of its innovative design of relying not on explicit films as primary catalyst, but instead on specific sexual images of past and present which participants recreate prior to each session.

Carolina Population Center (1977; 77 pp.), University of North Carolina, University Square 300-A, Chapel Hill, NC 27514; \$2.00 plus 85¢ p/h

**SEX EDUCATION FOR THE HEALTH PROFESSIONAL: A CURRICULUM GUIDE**  
Norman Rosenzweig and F. Paul Pearsall, eds.

A compendium of articles covering curriculum design; teaching methodology; courses for special target audiences such as gynecologists, urologists, and nurses; and some sample programs.  
Grune and Stratton (1978; 336 pp.), 111 Fifth Avenue, New York, NY 10003; \$39.00 plus \$2.00 p/h

**STAFF SEXUALITY TRAINING: A MODEL FOR COMMUNITY AGENCIES**

Divided into three sections: an overview of the problem of teenage pregnancy and the East Harlem Council's program; curriculum for a two-day workshop to train staff to talk comfortably with teens about sexuality; and an outreach section.  
East Harlem Council for Human Services (1982; 56 pp.), 2253 Third Avenue, New York, NY 10035; free, with \$1.25 for p/h

**TEACHER TRAINING IN FAMILY LIFE EDUCATION**  
Jean Klein-Falzalore

Four six-hour training agendas on self-esteem, enhancing effective communication, the process of valuing, and self-directed decision making. Format of each consists of training objectives, overview of schedule, pre/post tests, ground rules, structured learning activities, lectures, and film presentations.  
Office of Health Education (1982; 292 pp.), San Bernardino County Department of Public Health, 351 North Mountain View Avenue, San Bernardino, CA 92415; \$20.00

**TRAINERS' RESOURCES: HUMAN SEXUALITY**  
Margaret B. Dollar, ed.

Includes activities for: assessing trainees' feelings, attitudes, and knowledge; values clarification; communication skills; and helping consumers with sexual problems.  
Regional Training Center for Family Planning (1977; 92 pp.), 100 Edgewood Avenue, NE, Room 802, Atlanta, GA 30303; \$3.50 plus 15% p/h

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## SEX ROLES

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**AS BOYS BECOME MEN: LEARNING NEW MALE ROLES**  
Doug Thompson

Activities for junior and senior high school students cover defining the male role stereotype, images of men in the media, men's attitudes toward work, competitive sports, communication styles and language, emotions, fathering, and relationships with other males and females.  
Institute for Equality in Education (1980; 72 pp.), University of Colorado, 1050 Ninth Street, Denver, CO 80202; \$2.50

**BEING A MAN: A UNIT OF INSTRUCTIONAL ACTIVITIES ON MALE ROLE STEREOTYPING**  
David Sadker

For use with junior high students. First section provides background information about the issue, and second section contains classroom strategies and lesson plans intended to help students identify, analyze, and evaluate the male sex-role stereotype in particular and sex-role stereotyping in general.  
Superintendent of Documents (1980; 64 pp.), U.S. Government Printing Office, Washington, DC 20402; \$5.00

**EXPLORING CONTEMPORARY MALE/FEMALE ROLES: A FACILITATOR'S GUIDE**  
Clarke G. Carney and Sarah Lynne McMahon, eds.

A collection of activities, instruments, and readings intended as a resource for facilitators working with any group of individuals who may wish to clarify their sex-role identities and/or who are struggling with other people's sex-role expectations for them.  
University Associates (1977; 276 pp.), 8517 Production Avenue, P.O. Box 26240, San Diego, CA 92126; \$18.50

**OPEN MINDS TO EQUALITY**  
Nancy Schniedewind and Ellen Davidson

**Subtitle:** A Sourcebook of Learning Activities to Promote Race, Sex, Class, and Age Equity. Initial sections are concerned with building trust and developing skills for creative cooperation. In later chapters, students define and recognize prejudice and stereotypes and their effects and are encouraged to reconsider their attitudes in light of this new information. Finally they are sensitized to perceive institutions close to them from a new perspective and to pursue realistic ways to foster greater equality.  
Prentice-Hall (1983; 273 pp.), Englewood Cliffs, NJ 07632; \$16.95 plus p/h

**UNDOING SEX STEREOTYPES: RESEARCH AND RESOURCES FOR EDUCATORS**  
Marcia Guttentag and Helen Bray

Contains non-sexist curriculum packets for early childhood classes, middle grades, and junior high school. Background materials, resource agency listings, and bibliographies are also provided to help administrators and teachers achieve non-sexism in their classrooms.  
McGraw-Hill (1976; 342 pp.), 1221 Avenue of the Americas, New York, NY 10020; \$9.95 plus p/h

**WHEN I GROW UP**  
Michelle Kavanaugh

**Subtitle:** Structured Experiences for Expanding Male and Female Roles. Volume I: The Early and Middle School Years, 206 pp. Volume II: High School and Beyond, 183 pp. Exercises are for all students at all developmental levels from pre-kindergarten through late adolescence and for the adults who work with them.  
Humanics (1979), P.O. Box 7447, Atlanta, GA 30309; \$14.95 each vol.; p/h: \$3.60 for both, \$2.60 for one

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## MISCELLANEOUS

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**DEMISTIFYING HOMOSEXUALITY: A TEACHING GUIDE ABOUT LESBIANS AND GAY MEN**  
Human Rights Foundation

Includes classroom techniques, lesson plans, questions, answers, and discussion about the lifestyles, concerns, and sexuality of lesbians, gay men, and bisexuals. Lists community and educational resources.  
Irvington Publishers (1983; 200 pp.), 551 Fifth Avenue, New York, NY 10017; \$12.95 plus \$1.50 p/h

**EXPLORING HUMAN SEXUALITY**  
Preterm Institute

A structured six-week program for adults with concerns about sexual attitudes, identity, performance, physiology, relationships, dysfunction, and development. Consists of two-hour weekly group meetings and daily at-home individual assignments.  
Schenkman Publishing (1975; 109 pp.), 3 Mount Auburn Place, Cambridge, MA 02138; \$11.75 plus 63¢ p/h

**FOUNDATIONS FOR DECISION MAKING: A VD TEACHING GUIDE**  
Thelma King Thiel and Newton Richards

For the lower grades, teaching units are limited to providing students with a basic understanding of germs and communicable diseases. For the middle grades, students are introduced to some of the sexually transmitted diseases. For the upper grades, emphasis is on prevalence of STDs, modes of transmission, and personal responsibility for prevention.  
American Council for Healthful Living (1979; 112 pp.), 439 Main Street, Orange, NJ 07050; \$6.50

**SEXUALIDAD HUMANA Y RELACIONES PERSONALES**  
René Jaimes, ed.

A series of essays by several authors who express their own views on human sexuality themes. Sections arranged developmentally from early and later childhood through adolescence and adulthood. Also includes sections on teaching methodology and a bibliography of over 300 works available in the Latin American region. (Text in Spanish)  
International Planned Parenthood Federation (1981, 2nd ed.; 362 pp.), 105 Madison Avenue, New York, NY 10016; \$15.00

**WORKING WITH CHILDBEARING ADOLESCENTS**  
Linda Barr and Catherine Monserrat

**Subtitle:** A Guide for Use with Teenage Pregnancy: A New Beginning. Assists adults from a variety of backgrounds to improve their effectiveness in working with pregnant teenagers and teenage parents. Builds lesson plans around an accompanying textbook for pregnant adolescents.  
New Futures, Inc. (1980; 154 pp.), 2120 Louisiana, NE, Albuquerque, NM 87110; \$10.00 plus \$2.00 p/h

# DO YOU KNOW THAT . . .

## Resources to Write for . . .

**Short-Term Counseling of Sexual Concerns: A Self Instructional Manual** is oriented toward health care providers, social workers, and counselors. It will enable them to learn effective ways to share information and provide education, while stressing the importance of the referral process in dealing with problems requiring treatment. Subjects include: First Verbal Responses, Language, Giving Permission, Information Giving, Sex Response Cycle, Common Problems in Sexual Functioning, and Guidelines for Referral. Written by Terry Beresford and Joan Mogul Garrity, this 57-page resource was published in 1982. Copies are available for \$6.00 each (plus 15% postage and handling) from: Planned Parenthood of Maryland, 610 North Howard Street, Baltimore, MD 21201. Bulk rates are also available.

**Age at Menarche: A Misunderstanding** by Vern L. Bullough is a reprint of an article which appeared in *Science*, 17 July 1981, in which the author points out that "through a misinterpretation of historical data, the age of menarche in the 19th century is erroneously taken to have been 17 years. This error has resulted in unwarranted beliefs about change in female sexual maturation in the United States." Since this supposed change (from 17 to 12.5 years) has been labeled as a factor to consider in assessing the rate of increase in teenage sexual activity, Bullough's clarification of early data regarding menarche will be helpful to professionals working in this field of study. To receive a copy of this reprint, send a self-addressed, stamped (37¢ postage) envelope to: Vern L. Bullough, RN, PhD, Dean, Faculty of Natural and Social Sciences, State University College, 1300 Elmwood Avenue, Buffalo, NY 14222.

**Sexually Transmitted Diseases: Epidemic Among Teenagers** (1982, rev. ed.) by Jules Saltman, a 28-page Public Affairs pamphlet, provides information about the symptoms, effects, treatment, and prevention of gonorrhea, syphilis, nongonococcal urethritis, and herpes. Other subjects discussed are: why STDs are so widespread, what can be done to halt this epidemic, and what people who have been exposed should do. Like all Public Affairs pamphlets, this one (#517A) is written at a simple reading level and is available at low bulk rates. Single copies may be purchased for 50¢ from: Public Affairs Pamphlets, 301 Park Avenue South, New York, NY 10016.

**Sex Role Attitudes Among High School Seniors: Views About Family and Work Roles** is the final report of a two-year project sponsored by the National Institute of Education. The findings suggest that young people are in large measure committed to the principle of equal opportunity for men and women but not to identical family roles. Changes in attitudes across five senior classes from 1976-80 are documented, and the seniors' sex-role attitudes are correlated with their various plans for adult roles. This 250-page report, written by A. Regula Herzog and Jerald G. Bachman, includes many statistical tables. Copies are available for \$15.00 from: Survey Research Center, Institute for Social Research, University of Michigan, Ann Arbor, MI 48109.

**Come Tell Me Right Away: A Positive Approach to Warn Children About Sexual Abuse** (1982) by Linda Tschirhart Safford is a 23-page booklet adapted from her book *The Six Children: A Parent's Guide to Prevention of Child Sexual Abuse*. It gives parents encouragement and concrete help and advice on how to deal with this difficult, sensitive issue. Six copies can be ordered for \$1.75 (plus 15% postage and handling) from: Ed-U Press, P.O. Box 583, Fayetteville, NY 13761. Bulk rates available.

**Integrated Treatment of Child Sexual Abuse** (1982) was written by Henry Giarretto, who developed the well-known Child Sexual Abuse Treatment Program (CSATP) of Santa Clara, California. This excellent book comprehensively delineates the program organization and structure, as well as identifying the personal needs and fears of people involved in child abuse. It also presents a detailed outline for a training course which covers co-counseling, the law, job descriptions, and other concerns. To order, send \$25.00 to: Science and Behavior Books, E 11457, Palo Alto, CA 94306.

**Sex and the Female Ostomate** (1982) is a new publication of the United Ostomy Association (which also publishes *Pregnant and the Woman With an Ostomy*, *Sex and the Male Ostomate*, and *Sex, Courtship, and the Single Ostomate*). The four chapters of this 38-page consumer-oriented booklet, written by Gordon L. Dickman and Carolyn A. Livingston, discuss factors which influence sexual intimacy, information about female sexual functioning, making love, and talking about sex. This is an excellent resource for women who have had ostomies; their partners, families, and friends; and for professionals working with them. To order, send \$1.00 to: United Ostomy Association 2001 Beverly Boulevard, Los Angeles, CA 90004. Bulk rates are available.

**It Could Happen to You** (1983) is an account of the unsuccessful 1978 Gay Civil Rights Campaign in Eugene, Oregon. Its authors (the Gay Rights Writer's Group), in an effort to determine and analyze the reasons for the defeat, contacted people who had worked on the gay rights campaigns in Washington and California, and then produced this detailed report of the Oregon Experience, in the hope that it will be useful to other activists involved in this movement. It is available for \$4.50 (including postage) from: Alyson Publications, P.O. Box 2783, Boston, MA 02208.

## SSSS Monograph Series

The Society for the Scientific Study of Sex, in cooperation with Prometheus Press, is currently accepting submissions for a new series of monographs on various aspects of human sexuality. The Editorial Board is particularly interested in papers which appeal to both professionals and the college-educated lay public. Interested authors should address letters of inquiry to Deborah Weinstein, MSW, Executive Director, P.O. Box 2979, Philadelphia, PA 19117.

**Mathtech Research, Continued from page 12**  
a 1-5 scale ranging from "much less" to "much more," the median score in affecting the chances of having intercourse is typically 3.0 ("about the same").

Third, although we asked parents fewer and less detailed questions, they generally support the students' claims that the course had a positive impact upon them. Specifically, they indicate that their teenagers know more about sexuality, have more clear attitudes and values, and are more likely to make good decisions about sexuality. Surprisingly, they indicate that their teenagers were more likely to have sex. Finally, they also indicate that they themselves feel more comfortable talking with their teenagers about sexuality, that they talk more frequently, and that their teenagers communicate with them more effectively.

Fourth, the pretest/posttest questionnaires which directly measured many of the possible outcomes give a very different picture; they strongly indicate that with a few exceptions the courses had very little impact. On most outcomes there was no significant impact; on a few outcomes there was a statistically significant impact, but the impact was very small and did not last.

In many sites there are numerous statistically significant increases in the scores in the experimental groups (the sexuality classes), but these increases are not significantly greater statistically than the increases in the control group, because the scores of the control group also increased. In some programs there are a few significant differences between the sexuality classes and the control classes in a few outcomes at the end of the course, but these differences are commonly lost by the second posttest administered about four months later.

However, there are several important exceptions to this general finding. First, some programs did increase knowledge, although the increases were typically very small and in only a few knowledge areas. Second, in the more comprehensive programs there is some evidence that the programs increased the self-understanding of the students, particularly clarity of values, although the impact does not appear to last to the second posttest. Third, the parent/child program in St. Joseph, Missouri, did increase parent/child communication about sexuality. That program brought parents and children together for five to six sessions, provided information through films, short lectures, and discussions, and had parents and their children participate together in numerous classroom activities requiring communication about sexuality. Fourth, the Maternal and Infant Care program in St. Paul, Minnesota, clearly increased the use of contraceptives and decreased unintended pregnancy. That program combined sexuality education in the classroom with clinic services on-campus in the school health clinics. The clinics provided a wide variety of services including athletic physicals, family planning counseling, contraceptive follow-up, prenatal care, and day-care services.

### **Discussion of These Results**

The student and parent course assessments on the one hand and the pretest/posttest data on the other give differing pictures of the impact. The course assessments are very encouraging, but such assessments commonly give overly positive and biased results. Such a bias is particularly likely to occur when the students like both the teacher and the course, as they do here. Thus, the pretest/posttest data are probably more valid.

In some sites the experimental and control groups both improved their scores. This could suggest that the experimen-

tal group may have talked to, dated, or otherwise affected the control group. However, this possible explanation is not likely because the measured changes in the experimental group were far too small to have much of an impact upon the control group.

The small impact on knowledge, particularly for the more comprehensive programs, is perhaps one of the most surprising findings because most previous studies have found a greater impact upon knowledge, and also because both school and nonschool programs are generally more successful at teaching information than changing behavior. There are several reasons why the pretest/posttest evaluation may have understated the amount students learned. First, although nearly all teachers saw the knowledge test, approved it, and indicated that they covered those facts and topics in their course, the test was nevertheless a standardized knowledge test and did not necessarily ask questions about those facts that the teachers emphasized in the classroom. Second, the knowledge tests were given at the beginning and end of the program. Some programs lasted 15 weeks, and thus teachers may have covered some of the factual material on the test up to 14 weeks before the students took the posttest, and they may have forgotten it by that time. This partial explanation would not be encouraging to educators concerned with long-term learning, but it may partially explain the data.

There are also several reasons why the students did not learn and retain more factual information. In some classes students did not take written notes during class, did not have homework, and didn't study for tests. Certainly none of the students studied for this evaluation test. Thus, students may not have reinforced the factual material that they had learned. Second, sexuality classes are very different from other courses in school in an important respect. Teenagers continually participate in a large pool of information. While teenagers may learn correct information in class, that correct information may be diluted by incorrect information learned later outside of the classrooms. This is in contrast to other topics in school which students rarely discuss outside of class. If a student has correctly learned factoring in algebra class, that student is less likely to discuss and learn an incorrect method of factoring outside of class.

The few successful changes in attitudes, self-esteem, comfort levels, skills, and behavior are less surprising for two reasons. First, few studies have found major changes in attitudes or behavior. Most studies have either failed to measure them; have found no consistent changes in attitudes; or have found very small changes but failed to use control groups or measure long-term change. Second, from research in other areas and from our own practical experience we know that it is very difficult to change attitudes, self-esteem, behavior, etc. Realistically, we might not expect six hours or even 75 hours in class to change attitudes and behavior patterns based upon strong emotional needs, strong sexual desires, years of communication or non-communication with parents, thousands of hours of television and other media exposure, and thousands of hours of interaction with peers.

The failure of most of the programs to affect behavior at the end of the program or four months later does not mean that sexuality education should be eliminated, but it does have serious implications for educators. Specifically, programs should have less ambitious goals, and if their aim is to affect behavior, they may need to focus upon a particular goal, and design both the structure and content of the program to achieve that goal. For example, the parent/child program and

the clinic were specifically designed to affect parent/child communication and the use of contraception respectively and they were successful.

### Conclusion

In sum, the pretest/posttest data indicate that these programs had a much more limited impact than previously believed. Some programs increased knowledge and clarity of values, but the increases were small and not long lasting. The program which actually brought parents and their children together and got them talking about sexual topics did in fact increase parent/child communication both during and after the program. The program which greatly facilitated obtaining contraceptives did in fact increase the use of contraceptives and reduce pregnancies. Most programs did not have any impact upon whether or not teenagers had sex, how often they had sex, or how often they used birth control. Thus, the non-clinic programs are not likely to have an impact upon unintended pregnancy.

However, it should be remembered that there were some difficulties in getting adequate control groups and that these are preliminary conclusions. The last word is certainly not in.

### Contents of the Final Report

The final report will contain six volumes and will be available in late fall from Network Publications, ETR Associates, in Santa Cruz, California.

The first volume, *Sexuality Education: An Evaluation of Programs and Their Effects*, summarizes the structure and content of sexuality education in the United States, reviews the literature on the effects of sexuality education, describes the evaluation methods, presents the evaluation results of each program, and discusses the implications of the results for sexuality education programs.

Volume II, *Sexuality Education: A Guide to Developing and Implementing Programs*, provides suggestions for developing and implementing effective educational and clinic-based approaches to sexuality education. It discusses the

reasons for and nature of responsible sexuality education and describes approaches to building a community-based program, selecting teachers and finding training, assessing needs of the target population, and designing and implementing programs for them.

Volume III, *Sexuality Education: A Curriculum for Adolescents*, is based upon the curricula of the most comprehensive programs. It contains the following units: Introduction to Sexuality, Communication Skills, Anatomy and Physiology, Values, Self-Esteem, Decision Making, Adolescent Relationships, Adolescent Pregnancy and Parenting, Pregnancy Prevention, Sexually Transmitted Diseases, and Review and Evaluation. Each unit has a statement of goals and objectives, an overview of the unit contents, several activities that address the goals and objectives, and, wherever needed, lecture notes and handouts.

Volume IV, *Sexuality Education: A Curriculum for Parent/Child Programs*, is based upon the one effective parent/child program evaluated in this project. It includes several suggested course outlines and the following units: Introduction to Course; Anatomy, Physiology, and Maturation; Gender Roles; Sexually Transmitted Diseases; Reproduction; Adolescent Sexuality; Birth Control; Parenting; and Review. Each unit contains several activities and, wherever necessary, lecture notes and handouts.

Volume V, *Sexuality Education: A Handbook for Evaluating Programs*, is based upon the many trials and tribulations we experienced in evaluating these programs. It discusses the need for evaluation of sexuality education programs; selection of program characteristics and outcomes to be measured; experimental designs; survey methods; questionnaire design; and procedures for administering questionnaires, analyzing data, and using existing data.

Volume VI, *Sexuality Education: An Annotated Guide for Resource Materials*, reviews books, films, filmstrips, cassettes, slides, curricula, charts, models, and games for youth in elementary school through high school. It lists the distributor, length, cost, and recommended grade level, and provides a discussion of the material.

### New SIECUS Publication

In June 1983, an important new resource was added to SIECUS's list of publication. A 24-page booklet designed for parents of preschool and young children, it is available in both English—**Oh No! What Do I Do Now?**—and Spanish—**¡Ay No! ¿Qué Hago Ahora?** Its step-by-step process shows individual parents how to determine what messages about sexuality they wish to give their children; how to effectively formulate these messages in responding to their children's questions and behaviors; and, most importantly, how to become comfortable and relaxed in talking about sex. And within this process, the parents' own cultural and religious attitudes and values about sexuality are respected.

Originally developed for the SIECUS/CHOICE Parent Learning Project, this resource has proven effective with a wide range of parent groups. Single copies of either version are priced at \$1.50 postpaid (bulk rates available). Write to SIECUS for free promotional brochures.

## DO YOU KNOW THAT...

### SIECUS Position Statements

The SIECUS Position Statements, originally formulated in 1974 and rescinded as of October 1982, are in the process of being revised and updated. The new statements will be published in a forthcoming 1984 issue of the *SIECUS Report*.

### A Call for Measuring Tools

The editors of a forthcoming comprehensive manual of standardized human sexuality, pencil-paper measuring tools—such as questionnaires, scales, tests, and interview schedules which deal with either knowledge, attitude, or behavior within specific sexuality-related areas or with sexuality in general—request that those interested in having their instrument considered for inclusion contact: William L. Yarber, Associate Professor of Health Education, Director, Human Sexuality Research and Education Program, Lambert Building, Purdue University, W. Lafayette, IN 47907.

# DO YOU KNOW THAT . . .

## Resources to Write for . . .

**A Positive Look at Menopause: Teacher Training Manual**, a 1982 publication by Delores Hemphill and Yvonne Kimber, is designed as a resource for persons wishing to teach menopause seminars to women of all ages. The first section includes practical information on how to set up the seminar, such as teacher selection, community development, fundamentals of organization, and group leadership skills. The second section focuses on seminar content, providing information on the physiological and psychological aspects of menopause, the sexual response cycle, estrogen replacement therapy, nutrition, male mid-life experiences, and viewing menopause as "a new beginning." A copy may be obtained by sending \$9.95 (including postage) to: Planned Parenthood of Central Missouri, 800 North Providence, Suite 5, Columbia, MO 65201.

**Intimacy and Disability** (1982) is an excellent new resource by Barbara F. Waxman, Judi Levin, and June Isaacson Kailes. Each author has a disability and also has had extensive professional experience working with people with disabilities. In this 90-page book they explore many topics related to developing and maintaining intimate relationships, including self-image, meeting prospective partners, and exploring sexual options. Although this publication is specifically oriented toward persons with disabilities, it also is highly recommended for their partners, families, and friends, as well as for any able-bodied person seeking a greater understanding of intimacy. To order, send \$6.00 to: Institute for Information Studies, 200 Little Falls Street, Suite 104, Falls Church, VA 22046.

**Remedial Intervention in Adolescent Sex Offenses: Nine Program Descriptions** is a 1983 publication of the Prison Research/Education/Project of the New York State Council of Churches. Written by Fay Honey Knopp, this report examines current knowledge about the pervasiveness of the problem of sexually abusive male youth and provides some criteria for assessing the need for remedial intervention. Recommendations for prevention, culled from interviews with offenders and treatment providers, are included. Presented in detail are nine programs that treat sexually abusive young men. They range from community based services to secure residential settings for the most assaultive offenders. To order, send \$15.00 (plus \$2.50 for postage and handling) to: Safer Society Press, 3049 East Genesee Street, Syracuse, NY 13224.

**Adolescent Reproductive Health: Organization and Policy Statements** is a 1982 publication emanating from a conference entitled "Preventing Adolescent Pregnancy: The Role of the Youth Serving Agency." In these statements, the agencies represented have each outlined their purpose and goals and, when appropriate, their involvement with adolescent reproductive health concerns. The types of agencies range from Big Brothers/Big Sisters of America to SIECUS to Planned Parenthood Federation of America. The booklet costs \$1.00 and can be purchased from: The Center for Population Options, 2031 Florida Avenue, NW, Washington, DC 20009.

**Recommendations for Improving Legal Intervention in Intra-family Child Sexual Abuse Cases** by Josephine Bulkley is written for legislators, lawyers, judges, and others involved in the legal profession. The 1982, 51-page booklet covers general principles of court proceedings in abuse cases, civil and criminal proceedings, and evidentiary issues. Each chapter begins with recommendations to the legal community and follows with a commentary on examples of previous cases, varieties of legal proceedings, and suggestions for handling the court case. The publication also includes a bibliography of related legal literature. For \$5.00, the book can be ordered from: The American Bar Association, 1800 M Street, NW, S-200, Washington, DC 20036.

**The Extra Dimension: A Jewish View of Marriage** by Roland B. Gittelsohn (1983), a completely revised edition of the author's earlier book *My Beloved Is Mine*, presents a discussion of marriage in the 1980s. In a framework of Jewish ethics, tradition, and practice, its 16 chapters analyze the dilemmas engaged and married couples face today in "contemplating and sustaining" their relationships. The book costs \$7.95 and may be ordered from: Union of American Hebrew Congregations, 838 Fifth Avenue, New York, NY 10021.

**The Sensuous Heart** by Suzanne Cambre, a 16-page booklet written for post-coronary men, contains the basic and reassuring message that people who enjoyed sex before a heart attack can also enjoy it afterwards. Information is included on "getting in touch again," the sexual response cycle, frequency of sex, positions, eating and drinking, and medications. Single copies are available for \$4.00 each from: Pritchett and Hull, 3440 Oakcliff Road NE, Suite 110, Atlanta, GA 30340. Multiple copies are \$2.50 each.

**About Our Children** is a 15-page pamphlet published in 1982 by the Federation of Parents and Friends of Lesbians and Gays. Written in English, Chinese, French, Japanese, and Spanish, it is designed to help parents understand and accept their gay and lesbian children. Single copies are available free of charge by sending a stamped self-addressed, business-size envelope to: Parents/FLAG, P.O. Box 24565, Los Angeles, CA 90024. Additional copies are 15¢ each, and bulk rates are available to organizations.

**Mom, I'm Pregnant: A Personal Guide for Teenagers**, written by Reni L. Witt and Jeannine Masterson Michael, presents its material in a clear, easy-to-read, non-judgmental manner. It provides pregnant adolescents with the essential information about what options are available to them; what the pros and cons of each choice are; and what must be done to carry out decisions concerning marriage, motherhood, adoption, foster care, and abortion. The last section of this 240-page book is an extensive guide to hot-lines and agencies in the U.S. and Canada. Parents of and professionals working with adolescents will also find this resource useful. For a copy send \$6.95 (plus postage and handling) to: Stein and Day Publishers, Scarborough House, Briarcliff Manor, NY 10510.

## AIDS NOTES:

### “Like a second coming out . . .”

*Below are excerpts from the speech by Arthur Bennett, a New York City resident with AIDS who spoke at the AIDS vigil in Washington, D.C. on June 19, 1983.*

What I really want to talk about right now is something that happened to me yesterday. I spend yesterday afternoon in NIH visiting a good friend of mine who is critically ill. A good many of you probably know him. . . . But right now he's very, very critically ill. He's gone through his fourth bout of pneumocystic carinii pneumonia. He has Kaposi's sarcoma. As of last week, he lost what little sight he had left. He's now totally blind. . . . I also visited with six or seven other AIDS patients. . . .

Being up here is like a second coming out. The first one was really easy compared to this one. But it is like coming out, being an AIDS patient when you have to tell your family and you have to tell your friends. Their reactions—you never know what people are going to say or do or think; whether they're not going to want to talk to you again. I've known people whose families have totally disowned them. . . .

There's a lot of suffering out there. We're dealing with something that's unknown. That's what makes it so scary. We're dealing with our own mortality at a very young age. Most people don't have to deal with that until they get much, much older. . . . Once you have AIDS for a while, you think a lot about death and you tend to get over that. What you worry about more is what lies between now and whenever that might be. . . .

I'd like to leave you with some positive things. . . . One, the organizations cropping up to rally around all of us is wonderful to see. I can't tell you what a feeling this is—a feeling of unity and oneness that they care. And I think Gay men are starting to care for each other a little bit more through this and I think the Gay community will come out benefiting from this. . . . It's hard to see that now, but I think it's going to happen. . . .

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I chose to reprint this speech not only because I found it moving and pertinent, but also to emphasize the words “. . . a feeling of unity and oneness that they care.” For all of us in the health care and education fields, “caring” involves being informed—making it a point to collect and disseminate up-to-date, accurate information about Acquired Immune Deficiency Syndrome. In this way, we can help to provide and maintain a rational approach to this serious health concern while the research goes forward in seeking its cause and cure. The literature on AIDS is not currently extensive, but the *SIECUS Report* will try to keep its readers informed of new material. In a forthcoming issue we will be reviewing a new book, *AIDS* by Margot Jean Fromer, published by Pinnacle Books, 1430 Broadway, New York, NY 10018 (\$3.95 plus 75¢ p/h). In July, the U.S. Department of Health and Human Services set up a nationwide toll-free AIDS hot line: 800-342-AIDS (2437).

Anne Backman, Editor

## DO YOU KNOW THAT . . .

### Sex Therapy Training Program

The Program in Human Sexuality at the University of Minnesota is sponsoring a full-time, nine-month sex therapy training program beginning in January 1984, for professionals in the areas of sex education, counseling, and therapy. The format involves intensive didactic learning combined with clinical practice in intake assessments, individual, conjoint, and group therapy. Certification will be awarded based on fulfillment of program criteria. For further information, contact: Eli Coleman, PhD, or Diane Campbell, Program in Human Sexuality, University of Minnesota, 2630 University Avenue SE, Minneapolis, MN 55414.

### Sexual Assault and Abuse

On October 24–25, 1983, at Walt Disney World, Florida, the Sexual Assault Research Association and Forensic Mental Health Associates will present a two-day workshop on “The Male Victim of Sexual Assault and the Juvenile Sexual Offender: Neglected Clients.” Serving as faculty are A. Nicholas Groth, PhD, and Robert E. Longo, MRC. From October 1983 through November 1984, Forensic Mental Health Associates will also present a two-part seminar on “Child Sexual Abuse” (with A. Nicholas Groth, PhD, and Suzanne M. Sgroi, MD) at various locations across the country. For further information on all the above, write to: H. Jean Birnbaum, FMHA, 3 Ireland Road, Newton Center, MA 02159.

### Resources to Write for . . . .

**Girls Are People Too! A Bibliography of Nontraditional Female Roles in Children's Books** (1982), compiled by Joan E. Newman, is a selection guide for parents, teachers, and librarians to use when recommending books for young readers. The major criteria for inclusion in this list of 500 children's books involve the nontraditional aspects of the female character's role, the dignity of her portrayal, and the intelligence in her perception. Works of fiction published within the last 10 years form the nucleus of the bibliography, but nonfiction books are also included. An appendix chronologically lists notable events and personalities in the history of women. Single copies cost \$12.50 and orders should be sent to: Scarecrow Press, Inc., P.O. Box 656, Metuchen, NJ 08840.

**Considering What to Do** is the first in a three-pamphlet series from the Planned Parenthood Federation of America, published in 1981. This eight-page booklet urges women who miss their periods to get a pregnancy test immediately, and it spells out for them the choices available if they are pregnant. *Caring for Two* gives those women who decide to continue a pregnancy clear, concise advice about how to have a healthy pregnancy and a healthy baby. For those who are considering terminating a pregnancy, *Deciding on Abortion* has information on types of abortion, post-abortion care, costs, and the risks involved. Each pamphlet costs \$.50. Send your order to: Planned Parenthood Federation of America, 810 Seventh Avenue, New York, NY 10019. Bulk rates are also available.



# BOOK REVIEWS

**Raising a Child Conservatively in a Sexually Permissive Society.** Sol Gordon and Judith Gordon. New York: Simon and Schuster, 1983 (224 pp.; \$13.95).

Reviewed by Mary S. Calderone, MD, Adjunct Professor, Human Sexuality Program, Department of Health Education, New York University, New York, N.Y.

This is an important book coauthored by a worker of especial significance to the sexual health field: Sol Gordon, who has been contributing mightily to the oft-times troubled professional field of the study of human sexuality, and who is bound to raise some eyebrows and some hackles (not to mention heckles) with the wording of the book's title. *Conservatively?* Does Sol really know the meaning of the word?

It turns out that Sol and his coauthor (his wife, Judith) do indeed know its meaning: They, and many other fellow conservative sexologists including myself use this word because it describes with singular exactness what many of us are about. We are endeavoring to help our society learn how to *conserve*—a dictionary alternate for *preserve*—the sexuality with which all children are endowed even before their actual birth. The book is one they address to *all* of us who are involved in raising children, whether or not we are parents. How do they think we should go about this job?

In their introduction, they state clearly: "We write for parents who appreciate differing value systems, enjoy a sense of humor and try not to be hypocritical." They take for granted that "parents want to be the principal sex educators of their children, that even the best-intentioned parents make mistakes, that sex isn't everything (or even the main thing) in life, and that no book will change a person dramatically." They also point out a basic factor: The atmosphere in the home will play a more critical role in the evolution of a child's personality, including his or her sexuality, than any formal sex education. In

pointing out these things in the first two paragraphs of their introduction, Sol and Judith Gordon set the stage for their book.

Chapter 1 places the family squarely in today's almost worldwide setting of "sexual revolution," highlighting the great need for parents and children to be mutually trusting in this as in all enterprises, and indicating the authors' own biases in favor of a conservatism that includes love of country and respect of its constitution and laws in the face of any disagreement with them, and belief in God, with self-determined ways of worship naturally following. It is their contention that conservative families favor gradual as opposed to revolutionary change and that the family, however it may be defined, is the central constituent of our society. They outline their own special credos for achieving a warm and good family in an improved (and improving) society, and lay the groundwork for the next chapter's focus.

Thus in Chapter 2 the authors discuss the traits that go into the establishment of a firm sense of self-esteem in each so different child, beginning with the solid foundation in a first 12 months of life uneroded by parental unresponsiveness to the baby's basic needs. Overdemands in such critical areas as toilet training, development of feelings of competence in new skills, and relationships outside the family can serve to hinder the burgeoning sense of self of the growing child. The Gordons point out the importance of a sturdy sense of self-esteem as protection against being taken advantage of or "falling for" undesirable outside influences. They close the chapter with a clear consideration of how moral values develop, ending with a relevant quote from James Nelson's book, *Embodiment*: "Genuine self-acceptance is basic to humility. Authentic humility is . . . realistic self-appreciation founded upon the experiential conviction of divine acceptance."

Chapter 3 is an informative one, dis-

cussing for parents the many elements that should be considered in coming to terms with their own sexuality, if they are to help their children in understanding and coming to terms with theirs. In 18 short sections, solid information is given on all aspects of human sexuality, including subjects parents often find difficult to deal with, such as masturbation, homosexuality, violent or exploitive sexual behaviors, and many others. Highlights in this chapter are such telling observations as: "People who are afraid of [because of ignorance about] their healthy sexual impulses have a problem no matter what their sexual orientation."

Chapter 4 on becoming an "askable" parent quotes children and young people who have dilemmas with "unaskable" ones, and points out that no matter what you think, you *are* sex-educating your children even (or especially) when you do *nothing*, and that "the question is not *whether* you will teach your children about sex but *how well*." There are many commonsense "how-tos," such as how to handle a child's entering your bedroom when you are having intercourse. Answers to 19 key questions are offered in simple but (literally) telling terms.

Chapter 5 discusses sex education in the schools informatively instead of argumentatively. Chapter 6 outlines what children need to know in the preschool and preteen years, with a poignant "I wish" series beginning with: "I wish my parents had canned the stork story and fairy tale explanations and told me the truth." (This reviewer has herself often prayed that parents everywhere would stop telling sex lies to the children they claim to love so dearly.) The chapter closes with five pages of children's questions "in their own words," each followed by the authors' suggested answer and, in *their own words*, what the authors believe children of 9 to 12 years ought to know about sexual matters. In Chapter 7 they expand essentially the same pattern for adolescents; in Chapter 8 they identify and respond to

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**Audience Level Indicators:** C—Children (elementary grades), ET—Early teens (junior high), LT—Late teens (senior high), A—College, general adult public, P—Parents, PR—Professionals.

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numerous questions by parents about their adolescent children; and in Chapter 9 they identify and provide answers for a long series of questions asked of them over the years by teenagers and young adults. There are many wise observations, such as the following:

Mature love is a slowly developing, exciting experience. Many relationships don't start out that way, but with effort and time they can become mature. The relationship does need to be mature before you take on shared responsibilities such as marriage and children. Mature love isn't motivated by a desire to be taken care of. If you feel that you are nobody unless somebody loves you, you'll be nobody after somebody loves you. No one can validate who you are. You need to feel good about yourself in order to be good to anybody else.

Surely this is what all young people should be learning from their parents long before they are teenagers, for it provides the groundwork for being convinced as a teenager that intercourse itself belongs only in a context of mature love—which should be part of adult rather than of adolescent life. Questions and answers cover many topics, including contraception and STDs.

Chapter 10 covers STDs in detail, regrettably omitting AIDS. In Chapter 11 special situations are taken account of, among them single parenthood. Here the critical topic of the parent absent because of abandonment is wisely and realistically treated: "Suggestions that the absent parent still loves [the children] can only confuse and upset them. If the abandoner has lost interest or found another home, the children might be encouraged to accept the reality of it, instead of pretending for years that the parent may be coming back or 'thinks of you all the time.' Assurances of enduring love are called for only if they have credibility." The question of new relationships of the single parent, and their possible outcomes, along with all the possible complications for both parent and children is well and helpfully covered, as is that of sexual health and disabilities, in parents or in children.

Chapter 12 recognizes that "the family is alive and getting better," with such heartening observations as the following: "Ninety-two percent of all Americans eventually marry, although a majority of them will not do so until their middle twenties. Only 25% end in divorce or desertion. About 75% of

these people remarry. Of all noninstitutionalized children under 18, 80% live with two parents; 63% of these reside with both natural parents of a first marriage; 20% live in one-parent families." The chapter closes with a fine discussion of the special and much needed role of fathers ("The quality of love and caring between the parents is the most significant aspect of children's sexuality education.") and of grandparents who, "as secondary caretakers of their children's children . . . have a wealth of love and experience to offer."

Appendix A which contains nine pages of extensive book listings divided into age and interest categories is perhaps bewilderingly over-extensive for uniform appropriateness and total accuracy. Appendix B lists other sources of information, also by categories.

To conclude, the warmth, caring and concern, high intelligence, and probity of the authors are completely embodied and reflected in this loving, satisfying, and helpful book. **ET, LT, A, P, PR**

**The Gift of Touch.** Helen Colton. New York: Seaview/Putnam, 1983 (224 pp.; \$14.95).

*Reviewed by Lester A. Kirkendall, PhD, Professor Emeritus, Department of Family Life, Oregon State University, Corvallis, Ore.*

Touch as an aspect of mental health has received extensive attention lately and in view of its importance, well it should. *The Gift of Touch* adds a personal dimension, however, which is too often omitted from academic books. Helen Colton has experienced touch, has touched others, and has found it both pleasurable and therapeutic. Chapter 1, "Touch—Our Lost Sense," lays the groundwork for an exploration of touch and its meaning as it is manifested in numerous aspects of life—at the time of birth, within the family, sexually, as we touch ourselves, our friends, strangers. Chapters are also devoted to touching those who are grieving or are disabled, and to the touching involved in particular situations, such as in sports, schools, business, politics, and cross-cultural interchange.

Readers of the *SIECUS Report* will be interested in Chapters 3 and 4, "Touching in Family Life" and "Touching in Sex." Regarding family life, Colton emphasizes the strength that can come in times of distress and sorrow through

hugging, embracing, and body closeness. She notes how often children are apparently seeking affectionate and comforting touch from their parents, but are offered "crackers, candy, or cookies" instead. She suggests that this is "undoubtedly the beginning of obesity for some who, as adults, reach for food for the stomach as a substitute for what they would prefer—food for the skin." To sustain her position, she cites the statements of others as well as her own experience as a family life counselor. Perceptive readers who believe in the importance of touch are likely to find support for their positions. Take for example the quote from Arthur Janov: "Cults and related movements offer a new family. They provide the follower with new people to worry about him, to offer him advice, to cry with him and importantly, to *hold him* and *touch him*. Those are unbeatable attractions." (Emphases in the original.) This quotation supports a concept as to why people join cults—a concept I have believed in for a long time.

While Colton stresses the importance of physical closeness, she also recognizes that for some parents this produces concerns about incestuous relations. The answer is not to ban hugging, but to recognize its importance in establishing loving relationships, and to broaden our concepts of sexuality. Chapter 4, "Touching in Sex," is devoted to the latter concern. The approach here is definitely in favor of body pleasure. She essentially discards all the wraps we have placed around the pleasurable experiencing of genital response. As long as experiencing erotic pleasure is non-exploitive and communication is free and open, why not enjoy it? She mentions specific illustrations where this has occurred: males who have enjoyed having their penises fondled while driving a car; a couple sitting side by side in a restaurant who can and do touch each other's genitals under the table while waiting to be served; the use of feathers to produce "shivers and goosebumps of delight" as they are lightly trailed down the spine and around the genitals. But how will the average American adult handle these illustrations? Some will find them displeasing, without doubt. Yet when set within the overall context of sensuous touching (involving, remember, non-exploitation and open communication), they become much more acceptable.

Two aspects of sexuality and its relationship to touching should have been treated more extensively. One is sexual

*SIECUS Report*, September 1983

touching as it affects infants and small children. The other is homosexuality. The latter expression is regarded as acceptable, but the only extended discussion (one page) is found in the chapter "Touching In Sports." More is needed.

The manuscript is rich in illustrative materials. For example, in opening the concluding chapter on "Touching in Other Countries," Colton notes that if you were in another culture and suddenly came upon a nude woman bathing, she would (depending upon what she had been taught) hide a certain part of her body: if a Mohammedan, her face; a Laotian, her breasts; a Chinese, her feet; a Sumatran, her knees; a Samoan, her navel; a Western worlder, her genitals. Moving on from that observation, Colton mentions tactile customs, sometimes using past history, sometimes current, in Japan, Greece, Italy, Sweden, Finland, Mexico, Australia, Arabia, Latin America, and other cultures. But to complicate the matter there are other factors to consider as well: population density, attitudes toward members of the other sex, the climate, adherence to certain religious concepts, superstitious beliefs, attitudes toward strangers—all of which can alter practices. Thus acceptable touching becomes a complicated experience.

Near the close of her book, Colton suggests a forward-looking approach: "Let us all help to create our own destinies by lovingly touching around the world, simultaneously crossing the boundaries of all kinds of skins and all kinds of states." **A, P, PR**

#### **Social Work and Child Sexual Abuse.**

Jon R. Conte and David A. Shore, eds. New York: Haworth Press, 1982 (184 pp.; \$20.00).

*Reviewed by Lorna Oppenheim-Littner, CSW, Coordinator/Trainer, Adolescent Sexuality and Pregnancy Prevention Training Program, The Children's Aid Society, New York, N.Y.*

This book contains the material originally presented in the first two issues of a new periodical, *Journal of Social Work and Human Sexuality*. The editors' goal was to provide the reader with a "state of the art" overview of the issue of sexual abuse and in this they have succeeded admirably. Many of the most noted and knowledgeable researchers and clinicians in the field are repre-

sented by articles in the collection. While the book is addressed to social workers, it really has a much wider appeal. Any readers in professions that bring them in contact with young people and/or families would benefit from exposure to this multifaceted view of the issue of sexual abuse.

Based on the most current research and clinical experience, the articles explore the following areas: (1) a historical view of childhood sexuality and the sexual rights of children; (2) profiles of the offender, victim, and the family in which sexual abuse occurs; (3) a systems review of the most current treatment modalities available; (4) operational definitions of and differentiations between sexually abusive behaviors; (5) descriptions of patterns of abuse and effects of disclosure; (6) pragmatic descriptions of specific treatment programs and issues that have emerged as important to the provision of service to the victim, the family, and the molester; (7) legal ramifications of prosecution and/or court referral to treatment; and (8) sexual abuse within the confines of child-care institutions.

Several common themes are woven into the content of the articles, ir-

respective of the contributors' various areas of expertise. The lack of empirical research is cited by many as the chief stumbling block to the understanding of the dynamics of sexual abuse in general; to assessing both the short- and long-term effects of abuse; to determining the implications of treatment of the victim, the molester, and the family; and to acquiring the ability to make informed judgments as to the efficacy of one treatment modality over another.

The possibility of "increased trauma" as a direct result of contact with the helping system is another common theme. Descriptions of several treatment programs detail how a sensitivity to this potential has affected the staffs' ability to provide services without further traumatization—especially to the child already victimized.

Finally, most of the contributors drew the connection between the lack of formal training in human sexuality in the study program of many social workers and the effect this gap has on their ability to identify and deal intelligently, effectively, and compassionately with sexuality in general and sexual abuse in particular. As a certified sex educator and social worker, I applaud this acknowledgement and am hopeful that the appearance of the new journal from which this book is derived portends the beginning of an era in which training in human sexuality becomes an integral component of the preparation of all social workers and others in the helping professions. **PR**

#### **Sex Education: Theory and Practice.**

Clint E. Bruess and Jerrold S. Greenberg. Belmont, Calif.: Wadsworth Publishing Co., 1981 (319 pp.; \$16.95).

*Reviewed by Florence Fleming, RN, ACSE, Family Life Coordinator, Waterloo County Separate School Board, Kitchener, Ontario, Canada.*

This book is both a basic and unique tool for those studying to become sex educators and for those who are already working in the field. I am not aware of any previous publication that has assembled so much valuable information in such clear, accurate, and concise form. How many of those teaching a course in the area of sex education have lamented that fact that, beyond periodical literature, no one resource has pulled all the facets together! This is precisely the purpose of this book—to provide compre-

## **Choices: In Sexuality with Physical Disability**

(16 mm & Video/Color/60 Mins.)

Produced for:  
Institute of Rehabilitation Medicine  
New York University Medical Center  
Joan L. Bardach Ph.D., Project Director  
Frank Padrone Ph.D., Co-Director

... Choices is a film which can be used time and time again in rehabilitation facilities human sexuality programs and in any group where issues of sexual interaction and adjustment to a disability are being discussed. If both parts cannot be purchased, Part 1 is a tremendously good discussion starter and should not be missed...

**Pam Boyle, Coordinator:** Reproductive Health and Disabilities Program of the Margaret Sanger Center of Planned Parenthood. NYC.

# **MERCURY**

Mercury Productions  
17 West 45 Street, NYC 10036  
(212) 869-4073

hensive coverage of the many aspects of human sexuality and of the teaching skills that are necessary to prepare a sex educator. It also presents the realistic picture of what sex educators have been dealing with in the field these past ten years and gives some very clear facts and insightful suggestions as to how to deal with the sex education controversy.

The basics are similar whether sex education is conducted in a classroom, in a community agency, or in a medical setting. Thus the practical ideas offered here can be applied in virtually any sex education program. The authors have presented a wide variety of settings, which emphasizes this universal applicability. They have recognized the vital importance of sex education to everyone, and have attempted to give attention to the needs of all age groups.

After dealing very candidly with agreements and disagreements regarding the qualifications for sex educators, the authors state that no definitive studies are available to recommend one particular set of qualifications. They solve the problem by suggesting that all the characteristics discussed are necessary for a qualified sex educator.

Although this book is not a human sexuality text per se, the biological subject matter presented is complete and vital to the sex educator's knowledge base. The decision-making process and the need to understand official positions of contemporary religions and the ways value systems influence the achievement of human potential are thoroughly discussed. In my opinion, the one area which could and should be further developed is that which concerns the definition of morality.

The basic ground rules to be dealt with and the use of sexual language—fundamental areas to be developed by all sex educators—are very clearly covered here. The learning strategies of sex education are based on an underlying theme—planning—and here again the authors hit at the very core of a good sex education program. They demonstrate the need for a program to be consistent, rational, sequential, and educationally sound. The numerous activities in each chapter of the book, as well as the complete Chapter 14, "Implementing Learning Strategies for Sex Education," all support this underlying theme. The authors also assist the reader in clarifying the difficulties involved in sex education evaluation and research. The resource listing included in the appendices is exceptionally well done, providing

excellent supplementary information.

This is definitely a text to help all those in the field become better sex educators. **PR**

**It Won't Happen To Me: Teenagers Talk About Pregnancy.** Paula McGuire. New York: Delacorte Press, 1983 (235 pp.; \$14.95).

*Reviewed by Ann Thompson Cook, ACSW, freelance writer, Washington, D.C.*

This book presents 15 women, age 15-33, who describe in their own words what it was like for them to become pregnant during their teens, face the pregnancy—and handle relationships with their parents, the young men involved, and their schools. The young women, the majority still in their teens, describe the reasons for their decisions to have an abortion, carry to term, keep the baby, place for adoption, or marry. They describe changes, surprises, disappointments, worries, and new understandings. Throughout they voice concerns about their futures and a strong determination to work things out.

We hear from them the whole range of experiences—from one who conceived within a long-term caring relationship to one who was raped by a boyfriend with whom she had increasingly come in conflict; from some who were relatively satisfied with whatever decision they had made to others who reflect a sense of not having been fully informed and involved in their decisions.

We hear about real parents—one who tried to forbid her daughter to see her boyfriend and threatened police involvement; one who preferred that her daughter choose an abortion but who accepted another decision; others who were ready to support and help through thick and thin.

Five professionals also speak out in interview style: a high school counselor for pregnant students, a Planned Parenthood social worker, a public health physician, and two child welfare workers in adoptions. Unfortunately, information and perspective on the broader societal and policy issues are mixed in with misinformation and bias: "The guys seem to be interested in only one thing: the number of girls they take to bed." "Kids always want their freedom, but without any restraints or responsibilities." We aren't even told the names of the profes-

sionals making such statements; their identities were disguised "to protect their privacy."

Nevertheless, for female teenagers and their parents, the author has admirably accomplished her intention: to let "teenagers talk to other teenagers to share with them the way it feels to face an unplanned pregnancy." And although it is difficult to imagine many young men voluntarily reading much of this book—since they are represented only by a male physician who blasts them for "macho" irresponsibility—those who do read it will learn a great deal. The opportunities this book could provide educators, counselors, youth workers, and others working with parents and young people are probably limited only by their imaginations. Groups could pull out vignettes as a starting point for discussion, to provide a basis for role playing, to evaluate decision making. Any young woman facing a pregnancy herself could find company in these pages and maybe assistance in clarifying her own situation. Parents may be able to "hear" the eloquent, moving statements of the young people in the book more easily than they can hear their own youngsters. Just as importantly, the book could well provide training materials for professionals who are working or preparing to work with adolescents and their families. **LT, P, PR**

**Men on Rape.** Timothy Beneke. New York: St. Martin's Press, 1982 (171 pp.; \$12.95).

*Reviewed by Martha Calderwood, MA, Human Sexuality Program, University of Medicine and Dentistry of New Jersey—New Jersey Medical School.*

"Rape is a man's problem. It is men who rape and men who collectively can end rape." Timothy Beneke is clearly a man who is using his personal power to that end, and this consciousness-raising book is part of the process.

It is Beneke's thesis that men's unexplored and/or unexamined anger toward women is the basic motive behind this fast growing crime (up 35% in the past five years). Even after years of media attention to the statistics and to rape speakouts, and despite the seeming shift in public awareness, men's attitudes, he believes, have not changed significantly.

Beneke has transcribed opinions, feelings, ideas, and explanations from

men about rape. The major part of the book consists of interviews with a variety of men—husbands, lovers, friends, lawyers, doctors, policemen, even a rapist. They say the expected and the unexpected; they are sincere and they are self-righteous; they are insightful and they are insensitive.

One could become angry or depressed reading what some of these men have to say about rape. What they say is, in fact, anger-producing and depressing. However, Beneke has set a framework which allows one to read with purpose, letting the transcripts illustrate and illuminate his thesis, and making one feel closer to solutions. The first chapter of this slim book (it is only 171 pages) contains his analysis of some factors that inform men's concept of rape; these factors range from rape signs (what does "cave man" bring to mind?) and rape language (metaphors that shape our thinking about rape), to "pornographizing" women and blaming the victim. This is a powerful essay. Along with the final chapter, a response to the transcripts from an advocate for rape victims, it stimulates readers to stretch their understanding beyond clichés and to test their perceptions against his conclusions.

I recommend the book for all professionals and for student discussion from the high school level onward. **PR**

**Herpes: Cause and Control.** William H. Wickett, Jr. New York: Pinnacle Books, 1982 (234 pp.; \$3.50).

**Herpes: A Complete Guide to Relief and Reassurance.** Frank Freudberg, with E. Stephen Emanuel. Philadelphia, Pa.: Running Press, 1982 (160 pp.; \$6.95).

**Herpes: What to Do When You Have it.** Oscar Gillespie. New York: Grosset & Dunlap, 1982 (108 pp.; \$4.95).

*Reviewed by Yehudi M. Felman, MD, FACP, Clinical Professor of Dermatology, State University of New York, Downstate Medical Center, Brooklyn, N.Y.*

Yes, we do need to be aware of the existence of herpes, and understand the nature of these infections. A definitive book on the subject would therefore be most useful for patients and the general public alike. Unfortunately, since much research remains to be done in this area, no such ideal book can yet be written. The three reviewed here are representa-

tive of what is currently available for general use.

*Herpes: Cause and Control* seems to be directed at high school or junior high school students. Its tone is that of a popular self-help book, using fictional names in the cited case histories (e.g., "Atlas was a wrestler..."). While it probably would not appeal to private patients, this book might be of value to VD clinic patients with limited reading skills since it provides elementary and long, step-by-step explanations of the herpes infections. Some of the "apples and oranges" comparisons of various phenomena are very fanciful. The section on what triggers herpes presents a great deal of completely unproven and anecdotal data as factual. Some of the suggestions for intensifying the body's immune response, such as "arch and straighten your back," are equally farfetched.

In Freudberg's *Herpes: A Complete Guide to Relief and Reassurance*, the basic tone is similar to Wickett's, but on a somewhat higher educational level. Again, we are presented with numerous case histories with fictional names. Some plus factors: The author provides a good, well-thought-out discussion of the interpersonal aspects of herpes; the presentation of keratitis and encephalitis is excellent; and the section on treatment is complete and avoids discussion of mythical remedies. My major criticism is that too much space is devoted to the prevention of stress and to "correct" nutrition, neither of which is of any proven value. Out of a text of 130 real pages, 25 are devoted to these very questionable factors.

In *Herpes: What to Do When You Have It*, Gillespie provides a solid, adult treatment of the problem. He clearly points out that herpes has been oversold and overpublicized by the media—which have done more to frighten people than to enlighten them. The book is short and to the point, presenting more factual information in 100 pages than Wickett does in over 200. The author avoids perpetuating myths, paints the entire problem in its proper perspective, and quickly disposes of worthless treatments. His analysis of the interpersonal side of herpes infection is well done, along with the section on how to discuss the problem with spouses, lovers, potential sex partners, and friends. And the two-page question and answer section at the end of the book is a helpful addition. Unfortunately, Gillespie, too, devotes a good

deal of attention to "how to reduce stress," as if this had been proven to make a difference, and as if it were easy to do. He even includes a "stress inventory" chart! Nevertheless, his book is definitely the best among the three reviewed here. **A, PR**

**The End of Sex.** George Leonard. Los Angeles, Calif.: J. P. Tarcher (distributed by Houghton Mifflin, Boston), 1983 (236 pp.; \$12.95).

*Reviewed by Sam Julty, sex educator and specialty writer on men's roles, health, and sexuality; author of Men's Bodies, Men's Selves (Dell, 1979).*

This book brings to mind a folk tale about an Arkansas farmer who had a fine, strong, but stubborn mule. Wanting the mule to work at his command, he hired a trainer who showed up for the first lesson with a length of 2 x 4 lumber. Without saying a word, he crashed it on the head of the mule. The animal didn't flinch. The assault was then repeated. Again the mule stood its ground. When the trainer raised the beam for a third blow, the farmer said, "Hold on there! I hired you to train this animal, not kill it." The man answered, "Before you can train a mule, you've got to get his attention first."

Like that trainer, George Leonard has something good to give us—his ideas on how we can be better realized as individuals and as partners through loving intimacy and closer ties with Eros. But his teachings seem to be secondary to his need for "getting our attention first" by repeatedly hitting us over the head with damage reports wrought by present-day sexual mores and the limitations of sex. Thus dichotomies are created where none should exist—sex (bad), erotica (good); sexual dogma (bad), erotic fantasy (good).

Leonard starts his agitated gesturing immediately—with the book's title. No editor's hype, this. It's definitely the author's. He has little good to say about sex, or the positive changes in sexual attitudes, or the advance of sexual knowledge, or the development of therapeutic techniques for correcting sexual dysfunctions. Indeed, those who helped loosen the oppressive sexual restraints are accused of attempting to create a sexual utopia with a dogma which insists that immediate pleasure

and satisfaction are the chief aims of sexual activity. "Victorian proscription has been replaced by pervasive prescription," he says.

In his rationale, Leonard includes a number of anecdotes which are either irrelevant or sex-negative, or are promotions for loving via cosmic spirituality. One is about a man who was involved with a great deal of loveless sexual activity and then discovered his innermost loving feelings when he met a woman and was able to restrain his desire to seduce her. Another in the same class is a detailed description of Leonard's youth, his family, his father's stern warnings on the awful consequences of masturbation, and the deep love he had for his younger sister. The point of this tale is that Leonard's uncommonly close relationship with his sister throughout the years was made possible only by the restraints he put on his incestuous desires toward her. He describes his LSD trip with his wife as a spiritual journey, and uses the graphic anatomic/physiologic details of a couple involved in sexual activity as a metaphor for the joining of two souls. More disturbing is his insistence that, except for Eros, everything—including sex—is an abstraction.

Few can argue that unconditional love, honesty, intimacy, and unrestrained erotica are not exactly commonplace today. Fewer will argue against the need for making these qualities our personal goals. But to insist, as Leonard does by rhetoric and anecdote, that sex is the major gate holding back this flood of self-realization is simplistic. Such reduction completely negates all the social and technological forces we have to confront every day which militate against intimacy.

Actually, I like what Leonard asks us to aim for. What I do not like is his naming sex as the enemy. The argument is contrived. Only a sexual illiterate could be unaware that sex per se has nothing to do with intimacy. Why look for a fight by propounding a thesis that intimacy is retarded by sex.

When I think of how long and how much effort it took for us to get out of the sexual Dark Ages, I resent the dismissals of what the media and George Leonard (a former editor of *Look*) call the "sexual revolution." And when I think of all the vultures perched on the cliffs of the Moral Right who await the deaths of sex education in primary schools, unlimited availability of con-

traceptive information, increased funding for STD clinics, abortion on demand, and the sexual freedom (yes, and excesses) we now have, I wonder how much they are being nourished by Leonard's badmouthing of sex—done in the name of spiritual intimacy.

**Incest: A Family Pattern.** Jane Renvoize. Boston: Routledge & Kegan Paul, 1983 (224 pp.; \$15.95).

*Reviewed by Janet Rosenzweig Smith, MS, CSE, Executive Director, Girls Club of Dallas, Dallas, Tex.; original director of the Project Against Sexual Abuse of Appalachian Children, the Knoxville Institute for Sexual Abuse Treatment Training.*

The author of this text on incest has an admirable goal: to learn as much as possible about the state of the art of understanding and dealing with incest in the United States—in order to help move the field forward in her native Britain. To accomplish the task, she visited and interviewed researchers, practitioners, and members of incestuous families in various areas in the U.S. The resulting text is a mixed bag, with good information mixed with bad, fact mixed with conjecture, and topics just mixed—regardless of the chapter title.

The strengths of this book lie primarily in its broad representation of professional opinions. A valuable perspective is gained by presenting the experiences of professionals working at the grass roots level with incest families. For example, Gari Hatcher of the Los Angeles Department of Social Services speaks on incest fathers voluntarily accepting therapy: "People are traditional in their thinking: when you commit a crime, you're supposed to pay. I've only come to see this in the past two or three years. Before, I would not have gone along with this point of view." Agree with her philosophy or not, understanding the point of view of the practitioners—not the researchers and authors—tells a great deal about how incest is really treated in a community.

On the same topic, Deborah Anderson of the Hennepen County District Attorney's office is quoted as saying: "What I question is that anyone has the right to walk into people's houses and tell them they have to have therapy. . . . You don't do that to a burglar—why should you do it to an incest parent?" How much more interesting this text

might have been had the author juxtaposed and compared these two opinions, and maybe have added a third opinion of someone who considers incest primarily a clinical problem not necessarily requiring the criminal justice system to intervene at all.

First-hand accounts by victims and family members are interesting, and are used to illustrate points where appropriate. The author continually reinforces the need to not place blame on the victim—a critical point that must be made again and again, especially to non-clinical professionals intervening with the incestuous family. The author also draws heavily from the major authors on the topics: Meiselman, Finkelhor, Summitt and Kryso, and especially Giarretto.

A major weakness in the content of this text can best be described as the author's tendency toward conjecture. For example, she states: "As a result of the loving attention the sexually abused child often receives, she is likely to feel less bad about herself than a child who has been physically hurt by an abusing parent . . .," without basing this on any particular research, cases, or experience. Statements of this nature should clearly be labeled as opinion. This style is prevalent throughout the book.

Although a wealth of good, basic information on the family patterns of incest can be found in this book, in this reviewer's opinion it is often difficult to sort it out. Thus, anyone looking for a basic primer on incest would be better advised to read a more comprehensive text, such as Meiselman's. However, on the basis of its case studies and the points of views expressed by the practitioners, *Incest: A Family Pattern* would serve as a useful addition to a comprehensive collection on the subject. **PR**

**Men in Transition.** Kenneth Solomon and Norman B. Levy, eds. New York: Plenum Press, 1982 (503 pp.; \$39.50).

*Reviewed by Jim Covington, MDiv., MA, Director, New York Center for Men; Director, New York Society for Bioenergetic Analysis; author, Confessions of a Single Father.*

This book is not for the light or casual reader. It is primarily written for social scientists and mental health practitioners. But that's all right. It is heartening these days to witness the new interest in the male experience, both socially and psychologically, and especially by clini-

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cians in the professional fields. This new interest has arisen, in part at least, as a result of the women's movement, double-income families, and the anti-hero attitude that started with the Vietnam War. Sex roles are no longer as clear-cut as they were in the past. Hundreds of men across the country have been quietly meeting in groups for at least a decade now, questioning and exploring the issues of male identity. Now, at last, we are beginning to hear from the more professional communities.

*Men in Transition* attempts to review the changing masculine roles, how the traditional roles have stunted men's emotional lives, and how men are adjusting to new options of lifestyles available to them in today's world. Among the specific topics explored are: gender role conflict and stress in men's lives, development of male gender identity, male inexpressiveness, homosexuality, the abandoned husband, dual careers, men's groups, the older man, and androgyny. In addition, new therapeutic approaches are suggested in light of the changing social mores.

Overall, I was mentally stimulated by the book. At times I was confused by the technical jargon (since I am not a sociologist). At other points I was simply annoyed by the negative generalizations or implications about male behavior. Specifically, I was disturbed by the tendency in some of the essays to scapegoat men as the tyrants of our society. Intimations from some women within the feminist circles and now by some men in the men's movement that men are the culprits of our social condition serve no good purpose. In my view, such an approach only serves to alienate men. The truth is that only a few men hold the reins of economic and political power; most men never experience such power but live lives of "quiet desperation" in order to at least appear "tough" even if they are not powerful and successful. It is also true that men in general have difficulty expressing emotions, but the fact is mostly a result of environmental learning, participated in and encouraged by both sexes for generations. Attacking and demeaning men for their emotional insensitivity only creates greater defensiveness.

Finally, I want to add a personal view about the emphasis on androgyny these days in general and specifically by the writers of this book. I am certainly in favor of "sex role transcendence" as advocated in one of the essays. However, I also believe that gender is the

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given of human nature. We are all endowed with gender, some weakly or poorly, others strongly or excessively, but endowed we are and this force is the most powerful factor in our emotional orientations to our sexual identities. It is true that social forces, sexist traditions, and dogmas can cripple or limit people, bend them away from their most potential self. But none of these forces eliminates the reality of gender. I believe the roles associated with gender are both given and learned. It is important for us always to examine the socially imposed roles and eliminate them when they curtail selfhood for both men and women. Let us not, however, deny the roots of gender as found in the biological realities of our bodies. Maleness and femaleness start out being essentially different in the quality of internal chemistry and in the geometry of anatomy. To what degree these differences affect our maleness and femaleness is, of course, the debate of the 80s. I, for one, believe that these are important differences. From the well of gender—our maleness and femaleness—comes the emotional passion for others, and for life itself. Perhaps my strongest disappointment in *Men in Transition* was that this side of the debate was not very well addressed.

But I hail the writers' courage and thought-provoking efforts in exploring and addressing these timely issues. I highly recommend this book to those who are seriously involved and/or interested in the implications of social changes for the men of our day. **A, PR**

#### **Homosexuality in Renaissance England.**

Alan Bray. Boston: Alyson Publications (London: Gay Men's Press), 1982 (149 pp.; \$7.50).

*Reviewed by Vern L. Bullough, RN, PhD, Dean of the Faculty of Natural and Social Sciences, State University College at Buffalo, Buffalo, N.Y.*

Though issued by a press devoted to publishing books relevant to the male gay movement and to promoting the ideas of gay liberation, this in general presents an objective and dispassionate look at homosexuality in England in the sixteenth and seventeenth centuries. It relies heavily upon primary source material plus major secondary studies on households and families.

Bray's thesis is essentially that homosexuality, though widely condemned in the sixteenth century, was not separated

from other immoral conduct—that is, it was a kind of behavior that anyone who strayed from the straight and narrow might be susceptible to. Homosexuality had no distinctive social characteristics of its own beyond the immediately sexual, and the terms used to refer to it, such as *sodomy*, encompassed a number of forms of sexual relationships other than simply homosexuality. Thus homosexuality remained ubiquitous or potentially ubiquitous with society but was regarded for the most part as a temporary aberration. What cases do appear in the record often went on for a long time without anyone reporting them, and though there was some punishment, it usually was not severe.

This, according to Bray, changed in the seventeenth century with the appearance of "Molly houses," houses of prostitution devoted to homosexuality where certain behaviors came to be associated with homosexuality. In Bray's mind, this made homosexuality qualitatively more apparent and vulnerable to persecution, and with that came a sharper choice as well as the guilt and alienation associated with it. This was compensated for by making it possible for the perplexed and harassed homosexual individual to find a refuge in an alternative society and identity in which homosexuality had a coherent and central position. He could be a molly, encompassing the cause of his alienation and the means of overcoming it. Bray concludes that the appearance in England of a separate homosexual culture and a distinctive homosexual identity was part of that far-reaching transformation which English society underwent in the course of the seventeenth century, a transformation which played its part in the making of the modern world.

This is an interesting thesis, but one that can easily be criticized. The homosexual culture might well have been due to the population density of London which tolerated the grouping of people with different ideas. The problem is that, to a large extent, evidence of the same kind of attitudes which Bray describes as existing in the sixteenth century (and which one would think would have disappeared with the molly houses) can be found in nineteenth- or even twentieth-century England. In many of the smaller towns of the United States it can be found even today, and it certainly was the case even in large cities 40 years ago. Moreover, just how much the molly houses allowed a gay consciousness or gay

identity to develop is unclear. The existence of these houses is documented but unfortunately so far almost everything we have in the record about them stems from their opponents. If the kind of gay consciousness delineated by Bray did actually exist, then something should have survived. Nevertheless, the book's thesis forces a rethinking about the gay movement of today. **A, PR**

### **Adolescents, Sex, and Contraception.**

Donn Byrne and William A. Fisher, eds. Hillsdale, N.J.: Lawrence Erlbaum Associates, Inc., 1983 (314 pp.; \$29.95).

*Reviewed by Penny Breiman, RN, Nurse/Counselor, Personal Concerns Program, Equitable Life Assurance Co.; Trainer, Adolescent Pregnancy Prevention Program.*

*Adolescents, Sex, and Contraception* is a new book that attempts to look at the "noncontraceptive behavior of adolescents, the reason for that behavior, and possible solutions to this problem." The editors have compiled a collection of articles on this important issue by professionals from diverse backgrounds. This multidisciplinary approach offers the readers an opportunity to broaden their understanding of the social, cultural, psychological, and developmental factors related to the contraceptive behav-

ior of adolescents. This holistic approach is an important one for professionals to comprehend since one's use of contraception is not an isolated behavior but is related to the total person, and unless we can examine all the components of adolescent sexuality we will be hindered in developing effective ways to deal with this problem.

One of the most interesting chapters, "Sex Without Contraception," discusses a five-step process that is essential for individuals to follow in order to become effective contraceptive users: learn and remember information about contraception, acknowledge that one will be sexually active, obtain the chosen method, discuss that method with a partner, and then use the method. It is easy to see how attitudes about sexuality and certain developmental issues related to adolescents could create barriers for the teenager involved in obtaining and using birth control. Author Byrne points out that during sexual activity emotions such as embarrassment, anxiety, awkwardness, and fear may interfere with the adolescent's ability to remember information. He also points out that anxiety can even interfere with one's ability to hear and process the information.

In Kelly's chapter, "Adolescent Sexuality: First Lesson," she discusses how negative feelings about one's body learned from childhood may reappear in adulthood as disapproval of contra-

ceptives that require genital touching.

In an ensuing review of personality and attitudinal factors, we can see why adolescents who do not feel good about themselves, who are socially isolated, or feel guilty about or deny sexual activity may be less effective contraceptive users. Later chapters mention studies which indicate that adolescents who are doing well in school and have career goals are more likely to be effective contraceptive users. If there is a motivation to prevent pregnancy, then there is less risk-taking behavior.

In a discussion of the sexuality program at Indiana University, the issue of including males in programs concerning contraception is addressed. This is an area that many professionals in the field of family planning feel is being overlooked. Obviously, more research into male attitudes and behaviors is necessary, and the strategies proposed here are sound—e.g., using peer counselors and developing sex education programs that stress values clarification techniques.

The concepts discussed in this volume are important ones. For the many people who work with adolescents and express frustration and anger at the difficulty they experience in helping them become more effective contraceptive users, this book will provide insights into this multifaceted issue, thereby helping workers develop better strategies for dealing with this problem. **PR**

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SIECUS is affiliated with the Department of Health Education of the School of Education, Health, Nursing, and Arts Professions of New York University.

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September 1983

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