

LIFESTYLE SPECTRUM 1984

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Thirty years ago, for my generation, there were few lifestyle choices that were considered valid. Either you got married or, if it was your vocation, you became a priest or a nun. Anything other than marriage was considered as going against home, family, and religious and national heritage. Today, it is a different world. Our children and, indeed, even we ourselves have many choices in lifestyles, any of which is considered legitimate in some section of our society, and it is a fact that in this latter part of the 20th century, a large proportion of Americans are feeling free to choose from this wide variety.

Often the term *lifestyle* is confused with the term *sexual orientation*. The latter refers to a person's individual preference in erotic patterns—what “turns a person on.” Lifestyle refers to the relational patterns around which individuals organize their living arrangements. These lifestyles can be heterosexually, homosexually, or bisexually oriented. Many contemporary women, men, gay persons, young people, married couples, single adults, and older people are pioneering in living in nontraditional ways. In this article we will explore the concepts behind some of these choices and look at the types of lifestyles that Americans are choosing today.

One of the most important issues that arises in the process of analyzing and understanding the various choices is the issue of monogamy. Prior to the 16th century, most Western philosophical and religious thinkers either ignored lifestyles or regarded them as a matter of secondary importance. This is not true today. It is a matter of major importance and concern. Robert Pickett of Syracuse University found in his research that practically all cultures have had alternatives to monogamy which were usually reserved for the elite or upper-class citizens. Monogamy was usually prescribed for the lower and slave classes as a way of having control over them. It may be that monogamy is not natural for all people, which could account for the fact that so many people are not monogamous. My purpose is not to challenge monogamy or even to make a value judgment regarding it, but rather to point out that for many people in our society monogamy is not an important issue. Certainly our divorce statistics today show commitment to marriage as an institution, but not to *life-long* monogamy.

At least 14 possible lifestyles have been identified, although there is no consensus on the total number and varia-

tion. Those discussed below are to a great extent taken from a listing in *The New Intimacy* by Ronald Mazur.

Traditional Monogamy. It is interesting that this traditional and societally upheld lifestyle is no longer the strongly predominant choice in American culture. From various studies, it is estimated that only approximately 30–40% of Americans continue in one monogamous relationship for life—with no secret affairs or one-night stands and with sexual fidelity as one of the most valued parts of the relationship. Certainly most couples who marry do so believing in the concept of “until death us do part.” The most serious threat to this lifestyle is not from without, but from within, given the high rate of divorce and separation and the number of couples who turn to an alternative lifestyle later in marriage. But certainly we should not consider traditional monogamy as on its way out as a viable lifestyle, as there are many who do and will continue to choose this pattern as a fulfilling and valued way of life.

Child-Free Relationships. It is very difficult for most of us who have children to understand our children who decide that parenthood is not for them. There are a growing number of couples today who want to be in a long-term relationship but who feel that their lives will be more meaningfully fulfilled if they remain childless. Only a few years ago, this decision would have been unthinkable. It was traditional that couples who did not have children were to be pitied and encouraged to adopt. Marriage and parenthood have been synonymous in our culture. But those who choose a child-free lifestyle today are making the choice with valid and justifiable reasons. With the growing world population and nuclear warfare as real threats, they do not feel guilty for not procreating. Other more personal factors that can affect this decision are dual careers, influence of divorce on the couple's own childhood, and interracial and interfaith considerations. There are even materials available today to help a couple decide whether or not they would make good parents.

Single Parenthood. This lifestyle is very different from the “unwed” or “illegitimate” motherhood that I heard about so often as a young person. There are a good number of responsible members of our community today who are saying that, although they do not want to be bound in a permanent relationship, they *do* want the benefits of parenthood. Both

women and men are choosing to raise a child or children without a partner in marriage. No definite statistics on the number of men choosing this lifestyle are available. However, it is not unusual to find ads in the personal columns of magazines or underground newspapers through which a man is seeking a woman to bear his child. (There is usually a sum of money offered for this service.) According to the U.S. Department of Health and Human Services, out-of-wedlock births rose by a record 11.4% in 1980, the last year for which there are census figures available. It is not unusual to find singles using terms like "elective parent" and "single parent by choice" to describe their lifestyle. Many fertility clinics have made their services available to single women who are seeking artificial insemination, a procedure which is safe and involves few legal complications. The fact that up to 50% of our school children come from divorced couples and live with one parent has contributed to removing the stigma from illegitimacy once associated with out-of-wedlock births.

Singlehood. The words *spinster* and *bachelor* are not as common in our vocabulary today as they were 30 years ago. Persons who do not marry are no longer considered second-class citizens. At least 10% of our population will choose to remain single in order to fulfill their life goals. Marriage is not something they would avoid "as the plague," but is rather a state they choose not to enter into for many valid reasons—from career choices to being mobile without family responsibilities. The Bureau of Census has reported that in the last dozen years the number of Americans aged 25–34 who have not married has doubled. While it is true that many of these per-

sons will later marry, there is a definite trend toward staying single longer. In 1978, 22% of all households were made up of single persons. This represented an 8% increase over the preceding year.

Cohabitation. In this lifestyle, two or more people live together in a relationship similar to marriage but without the legal ties. It has often been identified with college students. Indeed, several studies indicate that between 50–80% of college students would elect a cohabitation arrangement if permissible on their campus, while probably up to 35% of college students already are in such a lifestyle. But they are not the only ones. More and more couples in their middle and later years are now choosing to live in a cohabitation arrangement. In 1970, the Census Bureau reported one million couples living together; by 1977 this figure had grown to two million. Many gay couples set up cohabitation agreements and lifestyles which represent for them the pattern closest to a legal marriage. Also many senior citizens, widowed or divorced, opt for this lifestyle because of the financial disadvantages of marriage in regard to Social Security payments, etc., and to avoid inheritance problems for their children.

As a college teacher and clinician, I have noted two interesting trends: One is in the number of parents who are actually encouraging their young people to live together for a while before getting married. One reason often given is that marriage is meant to last for a long time and they want their son/daughter to be absolutely sure of the decision. And there are parents who do not want their children to repeat their own mistakes and enter into a bad marriage or get married for the wrong reasons. Another trend is in the increasing number of persons cohabiting before entering into a second (or later) marriage. A reason often given me is that they want the choice to be right and responsible.

Serial Monogamy. Most people who become divorced want to remarry and many do. If they have received marital therapy for the first marriage, they often find the second marriage a happier and more satisfying experience—although a significant percentage of second marriages also, unfortunately, end in divorce. The majority of those who go from one monogamous relationship to another are, however, looking for one which is more mature and fulfilling than the first. As mentioned previously, a sizeable number of this group will live together before remarriage.

Communes. Considering the kinds of ecological and economic crises we are facing today, one can understand the appeal of a communal setting, thousands of which have sprung up across the country during the last decade or so. While we have tended, in our generation, to think of communes as a phenomenon of youth, today this lifestyle is more and more being identified with older people—middle-aged and up. An entire book could be written on the classification of different types of communes. People live together for many varied reasons: professional, craft, agrarian, philosophical, political, therapeutic, religious, or some combination thereof. Participants can be single, married, divorced, or widowed. Communes are found at every level of society, economically and educationally. In the envisioned future, many people, in order to maintain the style of living they have become accustomed to, may find the solution in communal living.

Back in the mid-1970s, the American Baptist denomination encouraged and sponsored a communal living arrangement near Philadelphia—in a Roman Catholic abbey which was no longer in use. As a consultant to this group, I felt very involved

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in the life of this community. There were eight family units (from a one-person unit to married couples; from persons in their early 20s to a couple in their middle 50s). The community was interested in ecology. They found that among them they had 12 automobiles; they needed only eight. Instead of eight refrigerators, washers, dryers, and other appliances, they needed less than half that number. They shared household chores which meant much less work than in their single unit houses. Each family unit had its own private space as well as community space: a common kitchen, dining room, living room, playroom, and library. They ate one meal together a day, usually the dinner meal; the other two meals were fixed individually. (What amazed me was that in 1978 they were able to feed their community for \$7.50 per person per week, and they ate well. We could not feed our family of six on twice that amount.) While there are some communes which include the sharing of sexual intimacies, this particular one did not. The community remained together until the Catholic Order took the abbey over again. All of the family units felt that the five-year experience had been a very valuable and significant part of their lives and, although the majority returned to their single-unit lifestyles, those I talked to agreed that they would do it again under the right circumstances.

Swinging and/or Group Sex. Probably most men and women have fantasized about a sexual relationship with someone other than their spouse. Today, a growing number of couples are making this fantasy a reality. There are estimated to be 10 million so-called swinging couples today, with national, state, and local organizations for them to join. Swingers are couples who meet other couples with the intention of pairing off for sexual and/or sensual experiences with someone new. Individuals and couples who do not belong to an organized swingers' group may join together as friends for sexual purposes. People who enjoy this lifestyle come from every economic, educational, religious, and racial group in our society. Most often these people lead conventional lives in every other respect. They consider sex a healthy, recreational pastime rather than a sin, vice, or indulgence in perversion. Contrary to popular myths, some research studies have found that swingers often rate their marriages as happier and more fulfilling than do those couples who have no other intimate relationships. I have known several swinger couples, none of whom fits our society's stereotyped "far out" picture of such people, and which include a 70-year-old couple who have been married for 43 years.

While this sexual lifestyle may meet with disapproval in the population at large, it is important to remember that this is a mutually agreed-upon lifestyle between the partners and it does receive support from other swingers. Swingers, then, have the advantage of an internalized ideology which considers their behavior both moral and desirable. The swinger couples that I have talked to insist that they strongly value fidelity in their marriage, but they discuss fidelity in terms of an open, honest, and trusting relationship. There seem to be at least three types of swingers: those who desire only sex with an outside partner, with no social or emotional expectations; the recreational swingers who see the social aspects of swinging as being as important as the sexual and who often belong to private clubs with rather stabilized memberships; and finally, those who are seeking close and lasting relationships or friendships with their outside partners.

Group Marriage. While heterosexual monogamy is legally seen as the only acceptable marriage lifestyle, there are those

in our society who are choosing to live in a marriage-type relationship involving three or more committed adults. Some group marriages are closed, in that sexual intimacy is kept within the bounds of the relationship. Other group marriages have an open contract that allows members of the marriage to have other outside sexual contacts. My first experience with group marriage participants—two men and one woman who came to my office—was very helpful to my understanding of some of the dynamics and pressures involved in this lifestyle. The woman and one of the men, legally married, met and subsequently became close friends with the second man—close on almost every level: intellectually, emotionally, socially, and spiritually. And, as they describe it, "it was a logical and smooth transition for our feelings of intimacy to be expressed on a physical/sexual level." They even had their three-person union solemnized by a member of the clergy. Their purchase of a home together precipitated the twofold problem which brought them to me: First, because of their lifestyle, the neighbors had signed a petition against their living in that neighborhood. Second, one of the men was in danger of losing his job because his employer felt their lifestyle would be offensive to the public his company served. The threesome wanted my help in learning how to build a greater understanding between themselves and those who were against them. They were very sincere about wanting to be creative in educating their critics. As we worked together on their problem, I developed a real appreciation of their love and commitment to each other. They had no other outside sexual relationships but were committed to the idea of fidelity in their "marriage."

Synergamous Relationship. I first heard about this lifestyle concept from Robert Rimmer's book, *Thursday, My Love*. The idea is that a couple involved in a primary relationship go on to develop a committed secondary relationship. The resulting secondary couple may even set up another residence where they spend time, which could be one day a week (as in "Thursday, my love"), or one weekend a month, or one month a year. Ideally, the primary partner knows about and approves of the secondary relationship. Indeed, I have met several couples who have a synergamous marriage and who find it to be a very meaningful arrangement. I have also known several couples where one or both of the partners is bisexual and they have found a synergamous relationship to be ideal for their marriage since it allows the bisexual partner an opportunity to have a committed same-sex arrangement. In two of these situations, the secondary relationship of one of the partners has been ongoing for several years and, in each case, the spouse knows of it and approves.

Open-Ended Relationship in Marriage. Some couples, although they want to be married, just cannot adjust to and be happy with a monogamous relationship. If both partners agree, they may decide to enter into an open-ended marriage. In this arrangement, both are free to establish other independent, significant relationships. Sexual exclusiveness may or may not be part of the open contract. Open-ended marriage can be growth-producing and successful for some couples, especially if they already have a strong and rewarding sexual and emotional relationship with one another. However, I have never known an open relationship to save a troubled marriage. This lifestyle has no place in a relationship that is characterized by jealousy and possessiveness. Open marriage can, however, be an effective way of bridging the gap which may open up in the sexual relationship between husbands and wives in their later years. Tom McGinnis in his book *More Than Just a Friend* gives

extensive data on extra-marital relations. He has identified different personality and marital types and, based on given combinations, can predict whether or not a particular couple can have a successful open-marriage contract.

Celibate Marriage. It is difficult to know how many couples are living in a celibate relationship, but from my own clinical practice I know that it does exist. There are couples who have an otherwise excellent relationship but have no sexual desire or activity. A phenomenon often seen by the clinician is the madonna/whore syndrome. In this syndrome, women are divided into two types: madonna, representing the woman who, held up and adored, is the person one marries and cares for but who has no sexual desire or needs (other than to have children) and whose model is the Virgin Mary; the other type of woman is whore, representing the woman of passion and sexual appetite, sensual, sexual, and seductive. Some couples will begin their relationship with high sexual activity and desire, but after marriage the sexual part begins to deteriorate, often quickly for some couples and after the birth of children for others. Additional reasons for a marriage becoming celibate are hostility, boredom, and apathy.

Some persons choose a lifestyle of *lifelong* celibacy. Their reasons for this choice may be based on religious vows, as in the case of priests and nuns, or simply on the fact that they have never found a mate with whom they want to develop a sexual and emotional relationship. Other reasons may stem from a fear of sexual intimacy or a lack of need for and/or interest in a sexual relationship.

Family Network System. In this lifestyle, also known as the voluntary extended family, two or more family units join together as a way of sharing life's experiences (e.g., meals, vacations, special events), and as an emotional support system. In a world too often filled with loneliness and isolation, the family network system can fill a real need. Sharing sexual intimacy with other members of the network may or may not be part of the system. It seems to me that fulfilling a supportive role was the original intention, sociologically, of our religious institutions. At one time, the church or synagogue was the center of family life—it provided a support system for family members, was the center of social, cultural, educational, and recreational activities for the family. Today, in our highly mobile and compartmentalized culture, the church and synagogue have too often lost the sense of offering a family network system to their members. Thus many families are reaching out on their own to establish and become a part of an expanded network to help them feel less isolated and alienated from others.

If I were to describe my own family's present lifestyle, it would fit best under this category. Several years ago, we joined with two other families from our church in a family network system. We began by having three evening meals together each week, with, on a rotating basis, the host family preparing the meal and cleaning up afterwards. We also share tools, help each other with home repairs, and often socialize together. Our particular network pattern does not include intimate relationships. It has been a very rewarding experience and we have found that through the years it has provided a much-needed support system in times of stress.

The Secret Extra-Marital Relationship. Finally, I add to the above list the seemingly monogamous relationship in which one or both of the partners carry on a secret affair. Several studies estimate that 65–70% of married men and 45–65% of married women engage in extramarital relationships at some

time during their marriage. The majority of these are secret and, in general, they are not helpful to the primary relationship. The amount of energy used to nourish the relationship and maintain its secrecy can rob the primary relationship of the kind of energy needed to keep it alive and healthy. This type of lifestyle is usually a forced choice and not a person's preferred pattern. An extramarital relationship can consist of anything from a one-time experience to an ongoing and committed sexual relationship. More so than in any other of the lifestyles discussed, the person involved here is often filled with guilt and remorse and is not interested in dissolving the primary relationship. It is important to note, however, that in some cases the extramarital relationship is a possible outlet for a partner who may have a greater sexual need or capacity than his/her spouse or in cases where physical disability in one's partner precludes sexual activity. And in a situation where the partners' sexual relationship is unsatisfactory, an extramarital relationship may give the partner involved important new insights into sexual communication and make possible an improved primary relationship.

With the exception of this last lifestyle, I have tried to put forth the above alternatives without making judgments about them. There are moral and socially responsible persons to be found in all of them and, if we were to analyze the lifestyles of people we associate with in our everyday life, we would no doubt discover that many of these individuals have, through various periods, been involved in more than one of these patterns. Thus these lifestyles I have described are not mutually exclusive. One final thought: As a society we need to be more accepting and open to the various alternatives that fit people's emotional, social, and sexual needs or desires. If it involves no inherent physical or emotional harm and no infringement on the rights of others, a chosen lifestyle has the right to exist—as an individual's "typical way of life."

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DO YOU KNOW THAT...

AASECT-SSSS Joint Meeting

A joint annual meeting of the American Association of Sex Educators, Counselors and Therapists and the Society for the Scientific Study of Sex will be held June 6-10, 1984 in Boston, Massachusetts. The theme for this meeting will be "For Today and Tomorrow: Personal and Professional Growth in the Sexual Sciences."

Lesbian/Gay Health Conference

The National Gay Health Education Foundation has announced that the first International Lesbian/Gay Health Conference will be held in New York City June 16-19, 1984. The theme, "Toward Diversity," reflects the meeting's multi-focus purpose, with special emphasis on Third World, international, and lesbian health concerns. The conference will be held in conjunction with the Third AIDS Forum, sponsored by the Federation of AIDS Related Organizations. For additional information, write to: National Gay Health Education Foundation, 80 Eighth Avenue, Suite 1305, New York, NY 10011.

1984 SIECUS/NYU Colloquium

The Fifth SIECUS/New York University International Colloquium for Human Sexuality Professionals is tentatively scheduled to be held in Indonesia, pending final approval by that government's President and Ministry of Education. The projected dates are July 26 through August 9, 1984, and the approximate cost will be \$3,500 inclusive.

Previous colloquia have been held in Sweden, Thailand, The People's Republic of China, and Sri Lanka. By joining with the NYU Human Sexuality Program's Summer Study Abroad group, colloquium participants are given the unique opportunity to explore many aspects of the culture with perspectives provided by professionals and lecturers from the host country.

Optional graduate credit is available from New York University. Inquiries should be addressed to: SIECUS-NYU Colloquium, 80 Fifth Avenue, Suite 801, New York, NY 10011.

NAF Annual Meeting

The National Abortion Federation will hold its 8th annual meeting on May 13, 1984 in Los Angeles. This year's theme will be "Victory and Its Consequences." Among the topics to be considered are health and psychological effects of abortion on women of different ages and counseling approaches for different cultural groups. Physicians, counselors, and therapists who have been involved in abortion issues and are interested in attending the meeting and/or presenting papers (abstract deadline, February 1, 1984) should contact the National Abortion Federation, 900 Pennsylvania Avenue, SE, Washington, DC 20003; (202) 546-9060.

Resources to Write for . . .

Child Sexual Abuse and Incest: An Annotated Bibliography (1982) was prepared by Sarah Lawton-Speert and Andy Wachtal of the Child Sexual Abuse Project, United Way of Lower Mainland, Vancouver, B.C. Material included falls into three groups: articles that have been widely quoted or cited in the literature, recent books and articles which illustrate the intense interest in the subject, and some lesser known materials and conference papers. The 68 citations are divided under headings such as general topics, incidence, etiology, family dynamics, etc. To obtain this publication, contact: The National Clearinghouse on Family Violence, Social Service Programs Branch, Health and Welfare Canada, Ottawa K1A 1B5, Canada.

Top Secret: Sexual Assault Information for Teenagers Only (1982) is a 40-page publication of King County Rape Relief. The format, designed to be easily read and understood by adolescents age 12-17, includes questions and answers, quizzes, personal vignettes, and practical suggestions and advice. Some of the topics covered are: stranger and acquaintance rape, self-protection, legal aspects of sexual assault, incest, reporting sexual assault to the police and having a medical exam, and how to help a friend. Single copies may be purchased for \$3.00 (plus \$1.00 p/h) from: King County Rape Relief, Department DM, 305 South 43rd Street, Renton, WA 98055. Bulk rates are available.

Gay Men's Health Crisis Health Letter is a continuing series published by Gay Men's Health Crisis, Inc. to provide up-to-date information on new developments in AIDS research being carried on all over the world. If you are interested in receiving this publication, write to: GMHC Health Letter, Box 274, 132 West 24th Street, New York, NY 10011.

DO YOU KNOW THAT . . .

Resources to Write for . . .

The New Venereal Disease Prevention for Everyone is now available in its 10th revised edition (1983) as a 14-page booklet. STD prevention as an integral part of overall disease prevention is emphasized, and there is discussion of the importance of cleanliness and personal hygiene, the relationship between contraceptives and STD prevention, and the use of germicidal preparations by men and women. Factual information about sexually transmitted diseases—including gonorrhea, syphilis, AIDS, herpes, hepatitis, and numerous others—is also presented. To receive a copy, send a tax-deductible contribution of \$1.00 or more to: American Foundation for the Prevention of Venereal Disease, Inc., 527 Madison Avenue, Suite 1415, New York, NY 10022. In bulk, copies cost \$20 per 100.

Growing Up With Spina Bifida: A Book About Puberty, Independence, and Caring (1981) by M. C. Treadwell and R. L. Patrias is addressed to puberty-age children with this disability. Spina bifida and puberty are both explained and very clear illustrations are provided. Discussions follow on body image, hygiene, independence, sexuality, dating, showing affection, and having children. This 27-page booklet concludes with a glossary and bibliography. To request a single copy, send a stamped (37¢), self-addressed, 7" x 10" envelope to: Dr. Mason Barr, University Hospital, K2027 Holden, Box 07, Ann Arbor, MI 48109. Additional copies cost \$1.00 each.

The Rights of Gay People by Thomas B. Stoddard et al. is an American Civil Liberties Union Handbook published in 1983 as a revised edition of the 1975 guide on the same subject. This 194-page book is divided into 10 chapters covering different topical areas: freedom of speech and association, equal employment opportunities, occupational licenses, armed services, security clearances, immigration and naturalization, the gay family, criminal law, and the rights of transvestites and transsexuals. Appendices include a bibliography of works on law and civil rights of interest to gays, examples of existing antidiscrimination statutes, and lists of gay organizations and ACLU state affiliates. This publication is available for \$3.95 (plus p/h) from: Bantam Books, 666 Fifth Avenue, New York, NY 10103.

"Am I Getting Through to You?" (1981), an eight-page pamphlet written for both teenagers and parents, provides practical suggestions to enhance communication between them about sexuality concerns. The section for adolescents gives advice on how to get past the obstacles, silence, differences, fear, and embarrassment, as well as how to express oneself effectively and also be a good listener. The section for parents advises them, first of all, not to feel they have to be experts on the topic, and among other things, to get to know their children's world and to take the initiative if their children do not approach them. Single copies may be ordered at no charge from: Planned Parenthood of Toronto, 58 Shaftesbury Avenue, Toronto, Ontario M4T 1A3, Canada. Bulk prices available.

"Can I Tell My Parents?" is the title of a 1983 pamphlet written by Robyn Menin, executive director of Mifflin/Juniata/Huntingdon Women's Health Services. Designed especially for adolescents, the brochure gently encourages teens to consider the possibility of talking to their parents about their sexual relationships, discusses reasons for doing this, and then gives practical suggestions on how to go about approaching parents on this important but delicate subject. Prices range from \$5.00 for 10 copies to \$100 for 1,000. Orders should be sent to: Family Planning Council of Central Pennsylvania, The Pennsylvania Center, 3425 Simpson Ferry Road, Camp Hill, PA 17011.

Guide to Films on Reproductive Rights is a joint publication of the Reproductive Rights National Network and Media Network. This 24-page booklet describes and evaluates 60 films, videotapes, and slide presentations on issues including abortion, contraception, child care, women's health care, lesbian and gay rights, sterilization, reproductive hazards in the workplace and in the general environment, sexuality, adolescent pregnancy, and family and household arrangements. Evaluations are based on responses by more than 50 panelists from diverse backgrounds. The guide also gives detailed advice on how to organize a successful film festival. To order, send \$3.00 (includes p/h) to: Media Network, 208 West 13th Street, New York, NY 10011. Bulk rates are available.

Teach-A-Bodies: An Effective Resource for Sex Education, Investigation, Therapy, and Courtroom Testimony (1983) by June Harnest is a 60-page booklet specifically written to be used along with the dolls of the same name. Actually it would be helpful to anyone working with any of the anatomically correct dolls currently available for purchase. Information is provided on using dolls to build self-esteem, teach appropriate sociosexual behavior, investigate sexual abuse of children, provide therapy to abused children, and give testimony in court. Several case studies involving successful use of the dolls are provided, along with a list of slang terms which children might use to describe various sexual parts or activities. To order, send \$5.00 (includes p/h) to: Teach-A-Bodies, 2544 Boyd Street, Fort Worth, TX 76109.

Sexual Adjustment to Cancer Surgery in the Vaginal Area (1983) is oriented toward women who have had or are about to have radical surgery to remove cancer from the lower abdomen and reproductive organs (i.e., pelvic exenteration) and to the professionals working with them. This illustrated, spiral-bound publication was written by M. Edward Clark and Javier Magrina. The first 81 pages consist of chapters covering various forms of pelvic exenteration, sex after surgery, use of fantasies for sexual gratification, and partner involvement and response. The book's second half, which may be photocopied for use with patients, consists of seven brochures summarizing much of the information in the main text. Six of these concern forms of exenteration and the seventh is on sexuality. To order, send \$8.75 (plus \$1.00 p/h) to: Book Store, University of Kansas Medical Center, 39th and Rainbow, Kansas City, KS 66103.

SPEAKING OUT

... On Lesbian Mothers

Audrey I. Steinhorn, CSW
Chairperson, Study Group on Homosexuality
American Orthopsychiatric Association

A popular bumper sticker these days states: "Every Mother is a Working Woman," to which I would add: "Lesbian Mothers Work Harder." To understand why this is true, we must look at the position of lesbians in our society.

In the United States, it is not uncommon for the word *homosexual* to be assigned the male gender; lesbianism is frequently missing from the total picture of homosexuality. This is due, in part, to the disturbance many people experience at the loss (real or imagined) of a valued and powerful member of the male sex to a way of life or behavior more commonly seen as weak or feminine. The invisibility is also due to the devalued status of women, the denial of women's sexuality in general, and the denial of lesbian sexuality in particular.

Despite this invisibility, lesbianism does and can involve all of the same dimensions found in the more commonly accepted and preferred heterosexual relationships: emotional satisfaction, physical intimacy, social responsibility, economic interdependence, family commitment, and the raising of children. Like heterosexual mothers, lesbian mothers come in all shapes, sizes, ages, and temperaments. Like heterosexual mothers, lesbian mothers are raising their children in family units or as single parents. Like heterosexual mothers, lesbian mothers conceive their children in a heterosexual union or through artificial insemination. They also choose their children through adoption.

Choosing a same-sex life partner, however, engenders special fears that are unique and critical elements in a lesbian mother's experience. Homosexual parents are different from their heterosexual counterparts in that they have no assurance (protection) under the law that, regardless of the quality of their parenting, their children will not be taken away from them. Because of society's irrational fear of and hostility toward homosexuality, their basic rights such as privacy, freedom of speech and association, and equal protection under the law are not always guaranteed.

It is important for lesbian mothers not to feel "guilty" about their difference. This is not an easy task in a society that discriminates against you if you are "different" and where an increasing number of groups are fighting to define what is "right" or "wrong" and are trying to promote beliefs which impinge on the rights of others. Living in a hostile environment can be overwhelming, and a lack of assurance that they can keep their children can be damaging to lesbian mothers' self-esteem. Many a lesbian parent feels, because of these pressures, that she has to be a "super straight" Mom.

Lesbian mothers are also vulnerable economically. Children are long-term investments into which much love, care, affection, and money are poured. Unless a lesbian mother has

Continued on next page

... On Gay Fathers

Henry Walter Weiss, Esq.
Attorney at Law
Member, Gay Fathers of New York I

A gay man who is also a parent frequently finds himself spending much of his time having to explain himself. He is an anomaly in *both* the gay and straight worlds.

If, like Frank (a pseudonym), he has custody of his two children, he must deal with issues revolving around sexuality and privacy much sooner than they might normally be dealt with in a child's education. In Frank's case, as in the case of every gay man who opts for coming out to his children, he must explain his own sexuality to his children. In our society, where the suggestion that one's parents are sexual beings is sometimes considered almost an obscenity, the need for the gay father to explain himself can be a burden. But it also can be an opportunity: He is given the chance to open up a dialogue between himself and his child about the issue of sexuality.

Once open with his children, however, Frank must also discuss with them the question of how much of his life they will or should share with their friends. Children, often deeply aware of a pervading societal homophobia, may be confused about what, if anything, to tell their friends about Daddy. It is the father's responsibility to alert the child to the fact that s/he may not want to share the information with everyone.

Another complication arises when the father has a male lover. Inevitably the lover is in a step-parenting role, often without any of the authority that a straight step-parent derives by virtue of a marriage license. The type of relationship which develops between the child and the father's lover will depend on a number of variables. Some men (gay or straight) dislike children in general and will have little to do with them, whether their own or another's. Other men develop close and warm ties with the children of their lovers. In one instance, after a long relationship ended and the lovers split up, the "step-father" sought and received visitation rights to see the children for whom he cared deeply.

In the two-income household, the "step-father" may frequently be the person looking after the children during periods when the father is unavailable. He will thus exercise parental authority, and will be subject to painful feelings when he hears a child insist on his/her father's care on a special occasion or during an emergency. Undoubtedly those feelings are the same for any step-parent. Perhaps they are made worse by the fact that the step-father here must reflect on the fact that he is without status in the eyes of the law.

Gay fathers who have involved themselves in the parenting movement soon realize that single custodial parents, gay or straight, have similar problems, and that non-custodial fathers complain of the absence of sufficient contact with their children. Again one's sexual orientation does not really affect one's feelings in these situations.

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Lesbian Mothers, Continued from preceding page
sufficiently prepared herself through education for a career, she is probably not going to be employed in an adequately paying job. Discriminatory hiring practices toward women and homosexuals also affect the lesbian mother's potential earning power. Parenting responsibilities are time-consuming and there are limits to the amount of time she can work. Her sexual orientation may impose a further limitation on a lesbian mother. If there is a heterosexual father involved, she knows that her lesbianism can be used by him as a weapon in a custody fight and she may hesitate to ask him for more support or to institute court proceedings to collect delinquent payments. All of the above issues indicate why a lesbian mother may have to "work harder" for financial security.

How will the lesbian mother deal with the issue of child care? Quality day-care services in our society are not usually seen as a priority. The probability is that three out of four children are in unlicensed or informal facilities, homes of relatives or friends, baby-sitting services, or a parent cooperative. Here again, lesbian mothers have to "work harder." If she is "in the closet," the lesbian mother cannot risk leaving her verbal and communicative children with friends or relatives who would be disapproving of the lesbian-related information that a child might bring up. In attempting to keep her alternative lifestyle private, a lesbian mother and her children must keep secrets to insure the retention of essential services and friends. Setting in motion such a dual system of relating can cause role strain and conflict for all concerned.

What about cooperatives? Most of those available tend to be composed of married or at least heterosexual parents; in the lesbian community, childcare cooperatives are rare. The sense of isolation at being "between" two groups can be extreme. A lesbian mother may receive little support for her homosexuality from other lesbians because of her children. She may frequently feel forced to masquerade as heterosexual in order to be accepted by the heterosexual mothers with whom she has more in common. The conflicts inherent in this split could drain energy from the lesbian mother's effectiveness as a parent. It's hard work to play multiple roles.

A lesbian mother has to work harder to prove that she is not a danger to her own child's gender identity development—particularly if she is forced into a court custody battle. Many people mistakenly believe that "homosexuality is catching" and that a child might be influenced by a homosexual role-model to choose that lifestyle. The reality is that sexual preferences of growing children cannot be predicted. Because the legal system is geared to the hypothetical "best interests of the child," and because our society still tends to label homosexuality as an "illness" (despite its having been removed as a psychiatric disorder from the American Psychological Association Manual), the lesbian mother is put in the unique position of having to work harder to defend her sexual preference not only for herself but also for her child. She must show that she believes that if her child chooses to be gay, it will be a matter of that child's own preference—not some decision imposed by her. This situation is very different from that of the heterosexual mother who is not considered a "threat" for stating that she wishes her child to embrace heterosexuality—her sexual preference.

How the children of lesbian mothers handle the atypical nature of their parents' lifestyles depends heavily on how comfortable the mother is with her identity. Since many black and Jewish parents have successfully helped their children deal

with prejudice, it is not an impossible task, just one a lesbian mother has to "work harder at." All children need to know about sex and sexuality, love and affection, and commitment to a relationship. The unique dimension for a lesbian in dealing with these issues is that she is sharing with her children her choice to love someone of the same sex. And her children will need help in deciding which friends to tell or not to tell because they must be prepared to find out that some people may not accept the news understandingly. All children, but adolescents in particular, need to feel that they can talk to their mother about how difficult it may be for them to be the child of a lesbian.

Even though a lesbian mother may have to work harder to share an important part of her world and herself with her children, the rewards can be exciting. What counts in the long run is not so much the sexual preference of the adults, but the opportunity for both children and parents to meet the obstacles along the road of life from a stable base of love, trust, and security. We must remember that families which thrive on cooperation and support will produce moral and caring individuals who can be strengthened by differences and change, not overwhelmed by them.

At the present time there is no nation-wide support group for lesbian mothers. Groups tend to be locally based and there has not been extensive networking among them. Contacting a local gay or lesbian switchboard might lead to obtaining the appropriate information. However, for lesbian mothers who are involved or who may become involved in a custody court fight, there are specific resources to contact. Some of these are: Lesbian Rights Project, 1370 Mission Street, San Francisco, CA 94103; Custody Action for Lesbian Mothers (CALM), Box 281, Narberth, PA 19072; and Lesbian Mothers National Defense Fund, 2446 Lorentz Place N., Seattle, WA 98109.

Gay Fathers, Continued from preceding page

In the past, many gay men who left their marriages felt that living a gay life perforce precluded continued contact with their children and many, having determined to lead an openly gay life, therefore cut off all contact with their children. During the last 13 years, however, since the beginning of the gay liberation movement, there has been a growing sense that one could be both gay *and* a parent. That sense has been fostered by support groups which have sprung up independently throughout the major cities of the country during the last seven years, and has coalesced into the Gay Fathers Coalition which now has an office in Washington, D.C. (P.O. Box 50360, Washington, DC 20004).

The format for the groups varies from community to community. In general, they offer leaderless peer group meetings with testimonials not unlike the ones at AA meetings, each man who speaks bearing witness—some to fears about coming out to children, others who have in fact come out providing testimony of reassurance. The almost universal story is that the children, when told, are supportive. If they are old enough to appreciate the significance of what they are being told, their frequent response is one of anger—not about the revelation that their father is gay, but rather about his failure to share the information with them at an earlier age.

At present most large cities and many smaller ones have gay fathers groups. They can usually be reached through the local gay switchboard or the National Gay Fathers Coalition. Such a group provides important assistance to any man wrestling with the issue of being both gay and a father.

BOOK REVIEWS

American Couples: Money, Work, Sex. Philip Blumstein and Pepper Schwartz. New York: William Morrow & Co., 1983 (656 pp.; \$19.95).

Reviewed by Alan P. Bell, PhD, Department of Counseling and Educational Psychology, Indiana University, Bloomington, Ind.

This book describes in fascinating detail how four different types of couples (married heterosexuals, cohabiting heterosexuals, gay males, and lesbians) get on with each other in three important areas: how their money is spent, how it is earned and by whom, and how their sexual lives are conducted. It is about as ambitious a project as any I have ever come across.

A short perusal of the 40-page questionnaire fashioned in the mid 70s by the two authors, both sociologists at the University of Washington, and distributed to thousands of men and women across the country between the spring of 1978 and late 1979, reveals a veritable feast of inquiry. There is the promise of enough data for the authors and anyone else they choose to invite to their banquet table to go on digesting for an entire lifetime. The 28 computer cards required for each participant in the study contain information on: the respondent's notions of the ideal partner and partnership as well as of his or her ideal self; the actual experience of the current relationship (areas of agreement and disagreement, the division of household responsibilities, communication between the partners, commitment to the relationship, and sexual relations); the partners' current relationship with their parents; and finally, such matters as how leisure time is spent and friendships are managed. The statistical information goes so far as to include the subject's height and weight as well as the participant's experience of prior relationships. But this is not all there is! Information gathered from closed-ended questions is supplemented by open-ended interviews of

from two-and-a-half to four hours' length with approximately 300 couples, all of them living in the areas of Seattle, San Francisco, or New York City and selected on the basis of the duration of their partnerships as well as their educational status. This gold mine of information is used as illustrative material throughout the book and, more fully, as the basis for the twenty cases (five of each type) which are presented at the end and which comprise approximately one-third of the entire volume. But wait, even this is not all there is! Eighteen months after the survey had been completed, shorter questionnaires were sent to half of those who had been interviewed face to face in order to ascertain whether the partnership had been terminated and if so, why. Even granted that the sheer amount of statistical and open-ended information must be staggering, its course of analysis among four different types of couples—approximately 3,600 married heterosexuals, 650 co-habiting heterosexuals, 950 gay male couples, and 750 lesbian couples—complicates and expands the authors' work even further. Whatever else can be said about this particular study, the investigators were surely undaunted by the scope and complexity of the task they set for themselves.

And exactly what is that task? Observing the fact that new social options for both men and women can profoundly affect the ways in which they connect with each other, the authors compare married couples with those who live together but are not legally married in order to assess the impact of institutional marriage per se upon couples' relationships. Heterosexual couples are compared with their homosexual counterparts in order to see what happens when there are no gender differences between partners, and gay men and lesbians are compared to see what may be viewed as distinctly male vs. female needs and interests. A major focus throughout is the balance of power in these various kinds of partnership: what

accounts for any differential in power distribution, how that differential is reflected in the management of money, work, and sex, and how it ultimately affects the quality of people's intimate relationships.

Not surprisingly, the investigators find that the partner who earns more money tends to have the greater power, that equal control over how money is spent tends to promote tranquility, and that the pooling of money tends to reflect a higher level of commitment to the partnership. In the area of work, the reader will not be surprised to learn, for example, that "married couples who disagree about the wife's right to work have less happy relationships"; or that "working wives still have almost all the responsibility for housework"; or that "for employed wives, the happier they are with their job, the happier they are with their marriage"; or that "fighting about the intrusion of work into the relationship can undermine a couple's satisfaction." Whatever the value of such findings, they are presented and discussed in a highly readable fashion. The percentages and/or correlation coefficients on which the findings are based together with exact data on how the statistical analyses were conducted are carefully presented in the Appendix. And while no systematic attempt is made to relate their findings or to discuss them with reference to others' investigations, couples' open-ended comments, which form a large part of the text, make for interesting reading and insure that the study's subjects are not entirely lost in figures and tables that would tell us very little about any couple in particular. I would have preferred a little clearer explanation of how the open-ended interviews were conducted and of the process by which certain statements were selected for illustrative purposes, but no matter. The juxtaposition of ideographic material with the study's normative data is a model which other survey researchers would do well to follow.

Another leaf we would do well to

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.

take from Blumstein and Schwartz's book in studying dyadic relationships is their use of intra-couple scores as the preferred unit of analysis. As the authors point out, typically husbands' and wives' reports have been considered in separate aggregates when, in fact, it is often the *differences* between attitudes and perceptions *within the couple* that are primarily responsible for particular outcomes, and not husbands' or wives' *individual* beliefs or attitudes. For example, again as the authors point out, how frequently a couple engages in sexual relations is not particularly informative. It would be much more important to know how often either partner *expects* to engage in sex and how partners' expectations differ. But whereas the authors remain true to their belief that couples' reports should be considered in tandem, the nature of their data does not allow them to go far enough. For example, although they state that "having sex is an act that is rarely devoid of a larger meaning for a couple," a statement with which I wholeheartedly concur, the study fails to capture or to analyze the "larger meaning" to which the authors refer. Not only were a large number of sexual questions omitted from the original questionnaire (some were not asked until the follow-up with those who had been interviewed and, then, only with those still living together at the time of the follow-up), but a systematic attempt to explore the various meanings assigned to different aspects of sexual exchange in the open-ended interviews is not made readily apparent. Had this been done and then followed by an analysis of couples who differed in the various cognitive elements of sexual exchange, I have no doubt but that the authors' findings would have far surpassed those which did emerge, such as: "The frequency of sex declines the longer a couple is married"; or "The more powerful partner is more likely to refuse sex"; or "The less power a heterosexual woman has in her relationship, the more likely it is that that couple's intercourse will be performed in the missionary position," etc. Given their failure to include, attend to, and systematically analyze the most crucial elements involved in sexual exchange, the authors are left to report, for example, a relation between how often couples engage in sex and how satisfied they are with their overall sexual relationship that leaves more than three-quarters of the variance unaccounted for! In the same view, for this reviewer at least, it is

not enough to report that conventional religiosity has no particular bearing on a person's non-monogamous proclivities. How much more interesting it would have been to compare couples in which the male and not the female or the female and not the male had been non-monogamous on a variety of relationship measures. But this is not the study's principal aim. More interesting to the investigators is the extent to which there is a continuity of male behavior and female behavior which finds its way into couples' bedrooms as well as into other corners of their lives.

Despite the study's drawbacks—some based on readers' "druthers" about what might have constituted a more interesting or important inquiry, others concerned with more basic matters such as the fact that the sample is made up largely of white, well-educated, middle-class people—I intend to make this volume required reading for students in a graduate course I conduct in marriage and family counseling. Where else can be found a study conducted on so large a scale, so carefully fashioned, and so ambitious in the scope of its inquiry? The fact that gay couples are considered in the same breath as straight couples makes the work especially notable. The questions that the book raises, together with the promise of still more to come out of a panoply of data, make it imperative for anyone in the field of sex education and counseling to become well acquainted with this work. It is a notable achievement. **A, PR**

Getting Pregnant in the 1980s: New Advances in Infertility Treatment and Sex Preselection. Robert H. Glass and Ronald J. Ericsson. Berkeley, Calif.: University of California Press, 1982 (164 pp.; \$10.95).

Reviewed by Joan W. Schonberg, MA, Director of Counseling, Planned Parenthood Association of Cincinnati; Co-Director, Human Sexuality Program, University of Cincinnati College of Medicine, Cincinnati, Ohio.

In an age when medical breakthroughs are occurring with startling regularity, it is probably axiomatic that any book attempting to cover the cutting edge of medical technology will be outdated by the time it's in print. Though successful embryo transfer was accomplished by the summer of 1983, *Getting Pregnant in the 1980s* still treats the technique as too

unproven and futuristic for truly serious consideration. The authors are not to be faulted. These are dazzling times in medicine when treatment fantasies can become overnight realities.

Glass and Ericsson provide an exceptionally thoughtful explanation of the various contributors to male and female infertility, making clear the complexity of diagnosis when multiple factors may be involved. The quality of the woman's cervical mucus, for example, can either abet or hinder sperm penetration. Ordinarily, most women will have a clear, thin mucus for several days prior to and a day following ovulation. For other women, the mucus remains thick throughout the cycle, creating what seems to be an effective barrier. Despite such an inhibitor, however, some women with poor mucus still manage to become pregnant. The male factor must be taken into account and there is considerable range in the strength and motility of the sperm from individual to individual. Diagnosis would be incomplete if it ignored the interaction of particular sperm with particular mucus.

Varicoceles, varicose veins in the testicles, are present in 25% of infertile males and are thought to inhibit sperm production by altering the scrotal temperature controls. Yet despite the presence of varicoceles, a significant number of men will have no sperm abnormalities and no problems with fertility. Surgical removal of the varicocele should therefore await a careful assessment of any female contribution to the couple's infertility problems. Frequently, maximizing the woman's potential for conception will enable a pregnancy to occur without taking the more invasive step involved in testicular surgery.

For couples undergoing diagnostic tests and procedures, this book will be especially valued. For each test or treatment possibility, the purpose, protocol, benefits, and limitations are clearly discussed. Even potential discomforts and financial costs are included. Medical unknowns and uncertainties are candidly revealed. For the reader, there is the feeling that the doctor has set aside time for a special patient or colleague and is leaning back in the chair, warmly sharing enthusiasms and hesitations. Such openness is certain to be appreciated by those whose physicians are unable to extend such generous time and respect.

Ronald Ericsson's work on sperm separation and its potential for sex preselection receives appropriate emphasis in

view of the author's involvement in this special aspect of fertility management. For the average infertility patient struggling for any pregnancy, sex determination may seem like a high-class worry; for others, it may present a thorny ethical issue; but for the curious reader who wants to be in on the cutting edge of reproductive technology, Ericsson's non-technical discussion is fascinating. **A, PR**

Gay/Lesbian Almanac: A New Documentary. Jonathan Ned Katz. New York: Harper & Row, 1983 (764 pp.; \$16.95).

Reviewed by Dennis Rubini, PhD (Oxford), Fellow of the Royal Historical Society; The Graduate School, Temple University, Philadelphia, Pa.

Gay/Lesbian Almanac provides chronologically arranged documents covering first "The Age of Sodomitical Sin, 1607-1740," and then "The Invention of the Homosexual, 1880-1950." The wide variety of documents includes: personal testimony and news reports, diaries and medical case records, letters, trial testimony, laws, cartoons, and reviews of books, plays, and movies. The work is a follow-up to Katz's *Gay American History* (1976) but, as with so many sequels, the documents are of less importance; more are from secondary sources; and some are all but reprinted from the earlier work. In the latter, for example, we are told of the trial and conviction of "five beastly sodomitical boys" in 1629; the only new information provided in the 1983 volume is that the Massachusetts Bay Colony governors appointed two members to acquaint the parent company in England of the offense. The young men's fates, which would have been of genuine interest, are not discussed. On another occasion, Katz all but reprints an item while admitting in a footnote that it adds but "a few details." Still, there is good material in the Colonial section, particularly if one has not read the previous work.

The modern section, despite its greater reliance on secondary sources, is the more provocative. The selection of documents again reflects Katz's personal politics, which may be described as "polyvanguardist" with a strong emphasis on the lesbian-feminist-egalitarian component. Unfortunately, this means that such political deviations as the sado-masochistic gay subculture are completely ignored as being too "low-

conscious." Katz is at his best in providing us with insights relating to oppressed gays. A passage from Claude McKay's *Home to Harlem* (1928) brings the reader quite forcefully into a most interesting bar, which one might have been unlikely to frequent. This was "The Congo," a bar patronized by the "unwashed of the Black Belt. Or if they were washed, smells lingered telling the nature of their occupations. Pot wrestlers, cooks, W. C. attendants, scrub maids, dish washers, stevedores." A list of early 1940s gay slang is useful, particularly for those who have not read *The Queen's Vernacular* (Rodgers, 1972) which is more provocative. There are some (but not enough) cartoons about gays, with helpful glosses. The author's use of medical journals in the work to document the development of the terms *homosexual* and *heterosexual* should be of particular interest to SIECUS readers.

Readers may be disappointed with Katz's discussion of the word *gay*. Possibly in an effort to make the term seem more "high-conscious," Katz all but ignores the possibility that it may have emerged from the world of prostitution, where *gay* was contrasted to *modest* and served as an umbrella term for all sexual minorities. Victorian gentlemen, for example, would ask an attractive woman or effeminate young man walking the streets, "Are you gay, my dear?" i.e., not prudish and readily available for a cash payment. Katz very correctly notes the reluctance of the *New York Times* to use the term *gay* even in the 1980s (unless referring to a group which uses the name as part of its title). It seems, when we look back over the *Times* reviews of books and plays of the earlier era, that many members of the staff were more comfortable then than now with homosexuality. Indeed, even the so-called provincial papers such as the *Philadelphia Inquirer* seem well ahead of the *Times* in this regard. Katz does not offer any motive for this lack of humanitarianism in the world's most influential newspaper. But Dennis Altman (*The Homosexualization of America*, 1982) puts forward the provocative supposition that the *Times's* literary establishment, not having excelled on the football field, are forced to prove their masculinity through scholarly homophobia, thus indicating that they are he-men and not "weenies." Roger Wilkins, the Pulitzer Prize-winning journalist, indicated, however, that the problem goes deeper than the *Times* literati. At a national press conference in May 1983,

he stated that whenever he wrote a sensitive piece about gays for the *Times*, the story was spiked by senior editors on a variety of specious grounds. At about the same time, Geraldo Rivera, in a 20/20 (ABC television) exposé on the AIDS epidemic, brought the *Times's* near-criminal sins of omission to the nation's attention. Katz, in documenting the background to such prejudice, has done humanitarianism a considerable favor. **A, PR**

The Teenage Body Book Guide to Sexuality. Kathy McCoy. New York: Simon and Schuster, 1983 (128 pp.; \$7.95).

Reviewed by Konstance McCaffree, PhD, Human Sexuality Educator, Council Rock High School, Newtown, Pa.

In its appropriate level of presentation and its comprehensive coverage of the subject *The Teenage Body Book Guide to Sexuality* is exceptional. Although most public schools would not be able to use it because it addresses personal decisions about such topics as masturbation, abortion, and sexual experience, organizations whose constituents need good information and an arena for looking at the concerns of other teenagers could certainly recommend this book. And I think many parents would find it an excellent resource for a young- to middle-teenage child. Two of its sections provide a list of questions teens can ask themselves to determine "Am I Really Ready for Sex?" and "Am I a High Risk for Pregnancy?" Each list covers the emotional issues as well as individual values which need to be considered. Suggestions on how to say "No . . . for Now" are given for those who feel they may not yet be ready for sexual involvement.

The book's overall format, using questions written by teenagers themselves to begin each discussion, is appealing to that age group. The first chapter, "Am I Normal?" addresses many complex issues in a style simple enough for the young teenager to understand. The anatomical explanations are straightforward and uncomplicated in dealing with concerns about "normal" build, color, shape, and function.

In several places where the sexual experience is discussed, the reader is aware that the media-heightened picture of sex is gently, yet directly, being brought into realistic proportions. One

Continued on page 17

DO YOU KNOW THAT . . .

Resources to Write for . . .

Herpes, Your Questions Answered (1983) is a 16-page booklet especially oriented toward high school students in sex and family life education programs. It contains a pre-test and a post-test, as well as information on symptoms, transmission, and recurrences, and on the relationship of herpes to pregnancy and to cancer. To order, send \$1.25 per pamphlet to: Health Publications, P.O. Box 9157, Morristown, NJ 07960. Bulk rates are available.

Guidelines and Recommendations for Healthful Gay Sexual Activity is a 1983 (3rd ed.) publication of the National Coalition of Gay Sexually Transmitted Diseases Services. This eight-page flyer begins with a list and brief description of 10 common sexually transmitted diseases. This is followed by discussion of a number of suggestions regarding hygiene and healthful sexual activity. Finally, there is a "sex practices" test for gay men to take to determine whether they are at high, medium, or low risk of developing STDs. Based on the score obtained, specific recommendations are made for frequency of routine STD testing. Prices of this pamphlet vary from \$1.00 each for 1-4 copies to 12¢ each for 2,000 or more. Order from: NCGSTDS, P.O. Box 239, Milwaukee, WI 53201-0239.

Growing Up Sexually (1982) by Angela M. Bednarczyk is a publication of Gallaudet College (for the hearing impaired). It has been field-tested in middle schools, high schools, residential and day schools, self-contained and mainstreamed classes, and oral and total communication settings. The student text (\$26.95) is divided into seven chapters (each a separate booklet) and an eighth for parents. The chapters are arranged from the more easily discussed topics to the more difficult, and each presents an introduction, objectives, information about the topic, discussion questions, activities, and review questions. There is also a 173-page teacher's manual available for \$18.95. Order from Kendall Demonstration Elementary School, Gallaudet College, Kendall Green, Washington, DC 20002. Add \$3.50 for p/h.

Surviving Sexual Assault (1983) is an expanded version of a booklet prepared at the request of emergency room personnel and others dealing with rape survivors. It was edited by Rochel Grossman and Joan Sutherland for the Los Angeles Commission on Assaults Against Women and the National Council of Jewish Women, Los Angeles section. Its 86 pages offer legal and medical information, as well as material on psychological and emotional counseling. It answers such questions as: "How could this happen to me?" "Does anyone know how I feel?" "Will I ever feel safe again?" Special information is provided for pre-teen, teenage, male, lesbian, senior, disabled, and undocumented alien survivors of rape. This fine resource concludes with lists of addresses and phone numbers of rape crisis centers and victim assistance programs across the country. To obtain a copy, send \$1.95 (plus p/h) to: St. Martin's Press, 175 Fifth Avenue, New York, NY 10010.

Operating a Resource Center and **Anatomy of a Media Fair** are two 1982 publications of the Nassau County Coalition for Family Planning based on its own experience in operating a Resource Coordinating Center for four years. The first booklet (\$3.00) contains information on selection and circulation of materials, publicity, information services, special events and programs, and record-keeping and evaluation. The second (\$5.00) discusses all aspects of organizing and running a one-day "display" of a wide variety of print and non-print resources in a selected field such as family life education. Both booklets contain many publicity flyers, information sheets, and statistical forms used in the operation of these services. Send your order to: Nassau County Coalition for Family Planning, 353 Fulton Avenue, Hempstead, NY 11550. Add \$1.00 for p/h for each publication.

Sexual Abuse of Children: A Resource Guide and Annotated Bibliography (1982) by Benjamin Schlesinger covers its subject with a comprehensive variety of information on research findings, books and films, and services available for families. This 200-page book also includes chapters about interviewing children, guidelines for investigation and assessment, legal aspects, and policy recommendations. The extensive annotated bibliography and appendix enhance the book's usefulness to anyone concerned with child sexual abuse—parent, professional, friend, or teacher. To order, send \$10.00 to: University of Toronto Press, 33 East Tupper Street, Buffalo, NY 14203.

Touch Study Cards (1981) consist of a set of 13 poster-size 14" by 22" instruction cards printed on durable white cardboard. They grew out of the well-known Minneapolis Illusion Theater presentation on the "touch continuum" and are aimed at educating elementary-age students about sexual abuse. On one side of each are colorful graphics of types of touch ranging from playful to exploitive. The reverse sides present sample educational guidelines and discussion questions for use by professionals working with the students. To order, send \$35.00 per set (plus \$1.50 p/h) to: Illusion Theater, Hennepin Center for the Arts, 528 Hennepin Avenue, Minneapolis, MN 55403. An excellent brochure for parents, entitled "Touch and Sexual Abuse: How to Talk to Your Kids About It," is also available @ 50¢.

It's My Body: A Book to Teach Young Children to Resist Uncomfortable Touch (1982, \$2.95) tells children that they have a natural way—through their feelings—of telling if a touching situation is comfortable or uncomfortable for them and that there is a way to communicate those feelings to others. This very simple, large-print, 24-page text was written by Lory Freeman, and each page was illustrated by Carol Deach. An accompanying 57-page *Parent's Resource Booklet* (1983, \$5.00) is filled with suggestions for ways of protecting children from sexual abuse, building self-esteem, and teaching about sexuality. To order, write to: Planned Parenthood of Snohomish County, 2730 Hoyt, Everett, WA 98201. Add 25% for p/h. Bulk rates available for the children's book.

AUDIO-VISUAL REVIEWS

The audio-visual reviews below, compiled and written by Leigh Hallingby, Manager of the SIECUS Information Service and Library, represent summaries of the combined opinions of three separate groups of people on films shown at three different screening sessions. Audio-visual review panel members for the first film were: Carmen Reyes Aviles, MEd, SIECUS Parent Project, and Leigh Hallingby, MSW, MS.

DES: The Timebomb Drug. 1982, 16 mm, color, 27 min. Purchase, \$475; rental, \$50. Filmmakers Library, 133 East 58th Street, New York, NY 10022; (212) 355-6545.

This film examines the history, marketing, and medical consequences of diethylstilbestrol (DES), a drug prescribed to pregnant women from the 1940s-1960s to prevent miscarriages. After the children born to these women reached adolescence, grave medical problems began to appear—such as cervical and vaginal cancer, genital abnormalities, and serious problems with conception and carrying pregnancies to term. *DES: The Timebomb Drug* consists largely of interviews with a wide variety of people affected directly or indirectly by DES—mothers, daughters, a son, physicians, consumer advocates, and a drug company representative. Several women express guilt at having blindly followed doctors' orders and anger at the medical establishment in general for having prescribed too casually. There are two particularly poignant interviews, one with a young nurse who had to have a hysterectomy and another with a mother and father whose 17-year-old daughter died of DES-induced cancer.

The individuals interviewed are all articulate spokespeople for their experiences and points of view. Besides being a fine documentary about a drug which is still being prescribed (as the morning-after pill), this film is also an excellent consciousness raiser about the hazards of prescription drugs in general. **LT, A, P, PR**

The following films were reviewed at a Film Festival sponsored by the Planned Parenthood Federation of America in New York City on November 4, 1983. Audio-visual review panel members for this occasion were: Meredith Bernstein, Director of Education, Planned Parenthood of Bergen County; Leigh Hallingby; and Nancy Langer, Community Educator, Parent Education Program, Planned Parenthood of New York City.

Girl Stuff. 1983, 16 mm or video, color, 22 min. Purchase, \$395 (16 mm), \$335 (video); no rentals available through distributor. Churchill Films, 662 North Robertson Boulevard, Los Angeles, CA 90069-9990; (213) 657-5110.

Both animation and live action with girls ages 11-15 are used to provide physiological information and consumer advice related to puberty. Five major subjects are explored: underarm perspiration and odor and preparations for them; odors from vaginal secretions and the hazards of sprays and douches; vaginal infections, their causes and symptoms; menstruation and the different reactions girls have to it; and finally, the use of tampons and pads.

Reactions to the film varied from mostly positive—"very good racial mix," "an unusual and useful film"—to mostly negative—"drawings anatomically incorrect," "message to girls is negative." Therefore, no consensus could be reached and it is recommended that educators working with early teenage girls preview the film to determine whether they would be comfortable using it. **ET, P, PR**

Herpes Simplex II. 1982, 16 mm or video, color, 20 min. Purchase, \$295; rental, \$15. Milner-Fenwick, 2125 Greenspring Drive, Timonium, MD 21093; (800) 638-8652.

In this film's presentation, a good balance is achieved between the human and the clinical aspects of herpes geni-

talis. The human side is dealt with very effectively via clips from a discussion group made up of an excellent age and racial mixture of people with herpes. Their poignant comments (such as the lament of one woman who contracted herpes as a result of her first extramarital relationship in 30 years of marriage and passed it on to her husband) validate the feelings involved in having herpes and encourage exploration of these emotions via such channels as talking with partners and friends, and joining a support group. The medical aspects of herpes—the causes, symptoms, examination, treatment, and course of the infection—are covered by a woman narrator and by graphics which are clear and informative.

This film seems most appropriate for people with herpes, but, in view of the high incidence rate, other audiences interested in learning more about the topic could certainly benefit from it also.

LT, A, PR

Walk With Me. 1983, 16 mm or video, color, 25 min. Purchase, \$425; rental, \$40. Perennial Education, 930 Pitner, Evanston, IL 60602; (800) 421-2363.

In this film on parent-child communication about sexuality, produced by the Cleveland Program for Sexual Learning, a single mother, a black couple, and a white couple speak appealingly and articulately about their own sex education while they were growing up, their feelings about giving birth to their children, and the sexual learning that takes place between themselves and their children. Although much of the film is presented through a "talking heads" format, there are also scenes of parents and children interacting separately and with each other, and of parent sex education workshops. Some of the messages of *Walk With Me* are: that it is all right if parents do not know all the pertinent facts; that they can use both discussion and literature for sex education in the home; and that what they say and do not

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.

say, and do and do not do are all important. The parents also discuss their traditional sex-role patterns and their desire to make changes in these patterns.

The educators at the Planned Parenthood Film Festival who work with lower socio-economic level populations were unanimous in feeling that this film is made for a suburban middle-class audience and would not be suitable for an inner-city group. However, with an appropriate audience, it should give parents much to relate to and provoke lively discussion. **A, P, PR**

Chile Pequin. 1982, 16 mm or video, color, 30 min. Purchase, \$470 (16 mm), \$355 (video); rental, \$39 (16 mm), \$32 (video). Extension Media Center, University of California, Berkeley, CA 94720; (415) 642-0460.

"Chile pequin" is both a small hot pepper and an appropriate nickname for Irma, a spirited Chicana who chose to leave home to obtain a university education in California and pursue her ambition to be a professor. A visit home to Texas for her father's funeral revives painful memories of adolescent clashes with her parents over the constraints of a small town, of her father's traditional Hispanic values concerning women, and of her closely knit family. This film is part of a Planning Ahead Series which deals with the psychological and cultural dimensions of career planning and sexual equality. The series' three parts each tell the story of a young woman—a Chicana, a black, and a white—engaged in a struggle for independence, purpose, and identity.

Chile Pequin would be best used with Mexican-American and other Hispanic adolescents and would no doubt provoke a lively discussion about the issues dealt with. However, the same purpose could have been accomplished in about two-thirds of the time. Also, the acting leaves something to be desired, and at times the characters seem like caricatures. **LT, A, P, PR**

Better Safe Than Sorry II. 1983, 16 mm, color, 15 min. Purchase, \$290; rental, \$30. Filmfair Communications, 10900 Ventura Boulevard, P.O. Box 1728, Studio City, CA 91604; (213) 985-0244.

With a multi-ethnic group of youngsters ranging in age from five to nine, television personality Stephanie Edwards

discusses three simple rules which can help prevent potential sexual abuse: Say no, run away, and tell someone. These rules are verbalized a number of times and displayed on cards for further reinforcement. The children are also taught that sexual abuse is never the child's fault and that it can come from both strangers and adults they know. A few potentially dangerous situations are dramatized, depicting, for example, a man asking two girls to go with him to look for his dog, and a male neighbor inviting a girl in for lemonade and then trying to take her clothes off because "it's too hot a day for long sleeves and corduroy pants." The six children are then asked to decide what to do and are given feedback on their responses.

This film provides excellent information and strategies for children. Suggestions on what a child should do if s/he cannot get away would have made it a more powerful if also painful. A less saccharine moderator would have improved the overall presentation. **C, P, PR**

Saturday's Children. 1982, 16 mm or video, color, 34 min. Purchase \$485; rental, \$70. Parenting Pictures, 121 N.W. Crystal Street, Crystal River, FL 32639; (904) 795-2156.

On Saturday, June 12, 1982 (while one million people marched through the streets of New York for nuclear disarmament), the four births depicted in this warm, human film took place consecutively in a hospital in Florida. The four couples involved are followed on camera from the time of their arrival at the hospital through the lovely parent/child bonding scenes that occur immediately after delivery. Three couples are married—two being first-time parents—and one is a single mother with a male neighbor who is serving as her coach. The film was designed to emphasize warm, supportive labor-coaching techniques by partners and hospital staffs, and shows many positions a woman can assume during labor (such as being on "all fours" with her coach rubbing her back). The labor periods range from long to very short. One woman delivers in a birthing chair, and another helps the doctor deliver her baby by pulling the infant from under the arms out of her vagina and immediately onto her abdomen.

This film definitely "feels good" and makes a most appealing case for prepared childbirth. One only wishes that all

the couples were not white and all the babies not boys. But in this special case, perhaps the film's producer couldn't "plan ahead." **LT, A, P, PR**

Delayed Parenthood. 1982, 16 mm or video, color, 25 min. Purchase, \$425; rental, call distributor. Carousel Films, 241 East 34th Street, Room 304, New York, NY 10016; (212) 683-1660.

Narrated by Diane Sawyer of CBS *Morning News*, this film is a pieced-together series on older-age parenthood derived from that television program. There are interviews with mothers, fathers, physicians, a family therapist, and even the grown children of older parents. Topics covered include the possible medical risks of delayed parenthood, the stresses and successes of balancing careers and children (always seen as primarily the woman's responsibility), the isolation of older parents whose contemporaries may be dealing with adolescents or even older children, and the feelings of young adults about having grown up with parents older than those of their peers.

The audience for this film would be limited, first by the subject itself and then further by the fact that all of the individuals interviewed are upper-middle-class people with professional careers, with none of the parents involved having chosen to stay home with their children after birth. However, for some courses and workshops dealing with issues of how late to plan a family it would be appropriate. **A, PR**

Why Men Rape. 1980, 16 mm or video, color, 40 min. Purchase, \$600 (16 mm), \$450 (video); rental, \$50. Learning Corporation of America, 1350 Avenue of the Americas, New York, NY 10019; (212) 397-9360.

The core of this provocative, complex film is its interviews with 10 convicted perpetrators of rape who are in prison in Canada. This group of rapists represents the most violent kind, since that is the population most likely to be incarcerated. There is a significant effort made to show the "victimizer" also as a "victim" who himself had an emotionally thwarted childhood, did poorly in school, had few friends, and felt like a "nobody" and a failure. The viewer is torn between sympathy for these losers and anger at their "macho," hateful attitudes toward

women who become the target of their frustration and anger. Other aspects of the film include interviews with leading authorities on rape, men in a singles bar, and a woman who was raped, as well as clips of a group of students who share their own feelings about sexuality, sex roles, and sex education. All of these pieces are narrated by a rather self-righteous man who can be quite offensive (e.g., when he says that one man who had already raped 10 women turned himself in "in time").

Why Men Rape is a confronting film which can be upsetting as the prisoners describe very violent acts against women. Although the film is somewhat uneven, the fact that its vantage point derives from where the offender sits makes it unique and valuable. A skilled facilitator will find much food for discussion here on the basics of rape, the social conditioning of men and women, and the cycle of hatred and abuse that can be perpetuated from one generation to the next. **LT, A, P, PR**

The following films were reviewed by the SIECUS audio-visual review panel. Members for this issue were: Patti O. Britton, Acting Director of Education, Planned Parenthood Federation of America; Martha Calderwood, MA, Human Sexuality Program, UMDNJ-New Jersey Medical School, Newark, N.J.; Holliday Casey, high school student, New York City; Andrea Eschen, graduate student at New York University in International Public Health and graduate assistant at the SIECUS Information Service and Library; Leigh Hallingby; Jean Levitan, PhD, Assistant Professor, William Paterson College, Wayne, N.J.; Herb Samuels, MSSW, Instructor, La Guardia Community College, New York City; and Alex Sareyan, Mental Health Materials Center, New York City.

The Touch Film, With Jessie Potter. 1983, 16 mm or video, color, 22 min. Purchase, \$425 (16 mm), \$390 (video); rental, \$60. Sterling Productions, 500 North Dearborn Street, Room 1119, Chicago, IL 60610; (312) 329-1183.

"Every human being on earth should be required to see this film," commented one panel member, and the rest unanimously agreed. Jessie Potter's film fills a long-standing gap in the list of audio-visuals available for use by sexual-

ity professionals. It is fascinating to realize that, while virtually every type of explicit sexual behavior that one can conceive of has been documented on a movie reel, it took until 1983 for a film to be released showing the simple but profound act of one human being touching another.

The film starts somewhat slowly with Dr. Potter sitting in front of a group of adults, sharing her insights into the emotional and physical benefits of touch, as well as the consequences of lack of touch. Then consistently good dramatizations and true-to-life scenes illustrate her points: that many children get touched primarily when they are sick or are being punished, thereby positively reinforcing these negative situations; that girls and boys are socialized very differently regarding touch; that pets provide a major area of permission to touch; that helping-professionals such as doctors, nurses, and social workers can use touch to great advantage in their work; and that people go to hairdressers (and teenagers even get pregnant) partly because of their need to be touched. By the end of the film when Dr. Potter rises to hug members of her audience, there is no question but that she has been most effective in projecting her vital message. **ET, LT, A, P, PR**

Keltie's Beard: A Woman's Story. 1983, 16 mm or video, color, 9 min. Purchase, \$275 (16 mm), \$225 (video); rental, \$35. Filmmakers Library, 133 East 58th Street, New York, NY 10022; (212) 355-6545.

Keltie's grandmother and mother had always surreptitiously removed their facial hair in order to comply with social norms of female appropriateness and attractiveness. Keltie decides that this path is not for her and lets the natural beard under her chin grow. During this

brief "zinger" of a film, she talks directly to the camera about what her beard means to her (while occasionally running her fingers through it) and what the consequences have been in terms of social ostracism, relationships with lovers, and challenges to her feminism. This is a disarming, confronting film guaranteed to draw a visceral reaction from any audience and to promote a lively discussion of sex roles, societal norms of beauty, body image, self-expression, women's liberation, etc. **LT, A, PR**

Chicken Ranch. 1983, 16 mm or video, color, 84 min. Purchase, \$1200 (16 mm), \$600 (video); rental, \$125. Nick Broomfield Productions, 24 Lincoln Park, Marblehead, MA 01945; (617) 639-0632.

Located in the desert 60 miles outside of Las Vegas, the Chicken Ranch is one of 38 legal houses of prostitution in Nevada. In 1970, proprietor Walter Plankinton bought the name and the furnishings of the original brothel of the same name which inspired the hit musical *The Best Little Whorehouse in Texas*. The film portrays the work-a-day lives of these women who pay taxes on their earnings, receive regular medical examinations, and work three weeks at a time followed by a one-week break. They are cared for by Fran, the stern but motherly madam, and regularly lectured to by Walter, who is given to biblical homilies.

A recurring thematic scene of *The Chicken Ranch* is the line-up in which the women present themselves to prospective customers who are mainly tourists from Las Vegas brought in by limousine or private plane. During the course of the film, the women also entertain a Japanese tour group, buy "work clothes" from a lingerie salesman, assemble to take their birth control pills, and talk about themselves, their

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profession, and men. A dramatic and surprising ending occurs as Walter, caught in a confrontation with a woman who is quitting, unleashes a tirade and tries to stop the cameras.

The panel members found this to be an interesting, worthwhile film about this particular type of prostitution. They felt that its length and cost preclude its use in most classrooms but definitely recommend it (if available for viewing commercially as it has been in New York) to students and professionals in the sexuality field for their own enlightenment. It would be a fine piece for conferences and film festivals dealing with, for example, prostitution and sexual issues pertaining to women. *Not a Love Story* (reviewed in the November 1983 SIECUS Report) and *The Chicken Ranch* would make a powerful package on commercial sex available to heterosexual men. **LT, A, PR**

Learning to Talk About Sex When You'd Rather Not. 1983, 16 mm or video, color, 30 min. Purchase, \$400; rental, \$35. Special Purpose Films, 416 Rio Del Mar Boulevard, Aptos, CA 95003; (408) 688-6320.

Planned Parenthood of Santa Clara County produced this film in order to demonstrate teaching and group facilitation skills for use in discussing the subject of sexuality and mental retardation. The following four groups explore this topic with Lynn Stiggall and other facilitators, all of whom are impressively skilled: mentally retarded students, parents of mentally retarded sons and daughters; operators of residential care homes; and staff members of agencies serving persons with mental retardation. Some of the issues covered in the group discussions are: the names and functions of sexual body-parts; appropriate touching and hugging behavior; strategies for avoiding potentially exploitive situations; teaching values, morality, and responsibility; ability of mentally retarded people to develop close, loving relationships; and desires to be a parent versus realities of parenting.

Panel members' reactions were mixed. The major comments on the positive side related to the first-rate modeling of working with the mentally retarded in a non-patronizing way and of specific teaching techniques to use with this group. Negative comments included unanimous agreement that the film is too long and that the scenes with par-

ents and caretakers are not as effective as those with the mentally retarded. Also the emphasis on the negative (the film begins with warnings about getting into a car with strangers) and the heterosexual bias were seen as drawbacks. **P, PR**

Understanding Sexuality. 1980, 16 mm or video, color, 30 min. Purchase, \$495 (16 mm), \$250 (video); rental, \$55. Films Incorporated, 733 Green Bay Road, Wilmette, IL 60091; (800) 323-4222.

This film, originally a PBS television program that was part of a series entitled *Look at Me*, is narrated by Phil Donahue who, in his typically down-to-earth, reassuring style, gives a series of generally sound pieces of information and advice to parents on how to deal with the sexuality/sex education of their young children. Each point is illustrated by a vignette—such as one in which a mother reads a sex education book to her two children and another in which a physician explains to a six-year-old his examination of her pregnant mother. The quality of these skits ranges from excellent to offensive.

The negative comments on this film, which outweighed the positive, related

to the unevenness, superficiality, and drawn-out length of the program. On the positive side, however, some panel members felt that *Understanding Sexuality* has the educational and entertainment values one would expect of better television programs and that people who are used to watching a lot of television might respond well to it. The film would not be appropriate to stimulate discussion, as it is clearly meant to stand on its own, but it could be useful to provide answers to parents' typical questions in a setting such as a PTA meeting where there might be minimal time for discussion. **P, PR**

So Many Voices: A Look at Abortion in America. 1982, 16 mm or video, color, 30 min. Purchase, \$450 (16 mm), \$275 (video); rental, \$50. Phoenix Films, 468 Park Avenue South, New York, NY 10016; (212) 684-5910.

Ed Asner and Tammy Grimes narrate this film in which members of both pro-choice and anti-abortion (so-called right-to-life) organizations explain their positions in public and private forums. The SIECUS panel members agreed that the scales here are tipped in favor of the pro-choice viewpoint which is not surprising since the film was made by the National Abortion Rights Action League (NARAL). There is, for instance, an interview with a former anti-abortion woman who chose to terminate an unplanned pregnancy and was subsequently comfortable with that decision. But there is no interview with a woman whose anti-abortion views caused her to carry a pregnancy to term and who felt that she made the right decision.

Some of the more emotion-laden aspects of abortion and related issues are brought out via interviews with the mother of a Tay-Sachs child who chose to become pregnant a second time only because she knew that amniocentesis and, if necessary, abortion were available should this baby also have the disease; with a woman who relives her rape experience; and with a woman who works with children who have suffered from abuse and incest.

Panel members reported that they found *So Many Voices* engaging and provocative and felt that it would be an excellent vehicle for generating a lively discussion on abortion. They felt that the facilitator should be careful, however, to introduce it as a film that advocates the pro-choice viewpoint. **LT, A, P, PR**

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

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Book Reviews, Continued from page 11 of the most helpful and fascinating sections for teens is that which discusses all the "games" being played in the often bewildering process of finding a way into the world of relationships. There are many excellent descriptions of non-exploitive behavior. There is also an excellent update on the laws and rights of minors which includes a simplified but thorough discussion of the controversy surrounding proposals currently being considered by our governing bodies. The section on sexually transmitted diseases is also thorough and up to date. I was fascinated to see what a positive difference it makes when this routine information on diseases is presented within an interesting format.

The only real criticism I have derives from a bias concerning the language used in reference to adoption. Those who are hoping to promote a healthy concept around the idea of loving mothers placing their babies with a family more suited for raising a child find the book's phrase "giving the baby up" a negative one. "Placing a child" is the preferred phraseology.

For me, the best evaluation of this book came from teenagers themselves. When I asked several of my students who had copies of the book what their reaction was, I found that each had eagerly read it and passed it on to a friend to share. **ET, LT, P, PR**

Incestuous Families. George Thorman. Springfield, Ill.: Charles C Thomas, 1983 (195 pp.; \$21.75).

Reviewed by Joan A. Nelson, PhD cand., Institute for Advanced Study of Human Sexuality, San Francisco, Calif.

Instead of *Incestuous Families*, George Thorman's book should be entitled *Father/Offenders and Daughter/Victims* since, except for a token mention in the final chapter of mother/son and brother/sister incest, it focuses narrowly on father/daughter sexual exploitation. The publisher describes the book as a resource for professionals and "an overview of the nature, extent and effects of incest." The latest in a flurry of incest publications, it is actually an overview of half a dozen books written in the past few years whose authors are repeatedly quoted throughout. Perhaps the book's failure to come to life lies in this second-hand point of view. Even the personal accounts illustrating the development,

progression, and treatment of father/daughter incest were taken from other authors. Thus this book simply does not compare well in terms of intellectual balance and humane point of view with, for example, the vitality and freshness of the similar material in *Incest: Understanding and Treatment* by Domeena Renshaw (reviewed in the May-July 1983 issue of the *SIECUS Report*). Why do we not hear about Thorman's own experience treating what he calls "incestuous families"? If he has had no such experience, then should he really be telling clinicians how to deal with these issues?

In any case, the author, a professor of social work at St. Edward's University, a small Roman Catholic school in Austin, Texas, intends to provide a reference for clinicians who treat and attempt to prevent sexual abuse within the family. As a practical clinical guide, it falls short of Renshaw's suggestions in terms of specific recommendations. Renshaw, for example, outlines three, well-defined phases of treatment for families with problematic incest; Thorman leaves us to our own devices except for a few general suggestions. And while, as a theoretical piece, this book provides background for clinicians who are unfamiliar with the current incest literature, it nevertheless remains one-sided in its simplistic, problem-centered overgeneralization of the difficulties found in the population defined within the clinical setting.

Thorman's thinking is based on classic, stereotypic, clinical case material on the dysfunctional family system in which the father ("offender/perpetrator") has a predisposition to "commit incest" under environmental conditions that produce stress and which is combined with cultural patterns that support institutionalized patriarchy. This includes "sexual slavery" and subordination to fathers who are endowed with superior authority. This picture also contains a mother whose personality and lack of sexual response can be interpreted as outright rejection of her husband. Although the book may be somewhat useful to the counselor who is inexperienced with such families, it nevertheless falls short as a scholarly work. It is laced with insubstantially supported statements beginning with phrases such as "Scientific studies indicate . . ." and then mentioning only one such study backed with inadequate facts and figures; or it cites others' comments and opinions rather than supporting data. The reader's confidence is further

undermined by a number of typographical errors, two glaring examples being mistakes in the names of the writers/researchers from whom he is getting his information, e.g., Sandra Butler is referred to as "Susan"; Kryso is spelled *Dryso*; and Kryso's name is misspelled once more in the index as *Kryse*. Although the author may not be directly responsible for such errors, they do, in the long run, reflect on his lack of scholastic rigor.

Academic and, as a result, practical confidence is further weakened by a plethora of overly generalized statements. For example, the author states: "All incest victims are troubled by low self-esteem combined with a feeling that they have been spoiled or damaged by the incest." My own research reveals this statement to be true in some cases, but by no means *all*. Thorman is simply reporting on the kinds of problems he has seen (or read about). Leroy Schultz, who is cited in support of other arguments but is *not* cited in this case, says: "While data are scanty, the conception of all child victims being sacrificed to adult lust would seem unfounded. Sexual behavior between adult and child or between two minors is neither harmful nor harmless always" (*The Sexual Victimization of Youth*, 1980). Neither does Thorman quote Renshaw, who says: "While some persons were upset at the time the incest experience occurred, most had coped well. Moreover, quite a few of these same adults we were seeing . . . had none of the reported or predicted dire sequelae of incest." The following are more examples of the author's tendency to generalize: "Adolescent incest victims are tempted to engage in a series of sexual relationships to counteract the feeling that they are damaged by the incestuous experience." "All family members are caught up in the events that follow the disclosure of the secret relationship and the crisis that ensues has a devastating impact on their lives."

My main concern with Thorman's failures in academic precision and with his irresponsible generalization is based on the ultimate results of such carelessness. Author/experts such as Thorman continue to proliferate the hysteria generated by incest by generalizing about and exaggerating its consequences. In fighting fear with fear, they contribute to the problem by increasing anxiety in the professionals they address. Those of us who write about incest would far better serve the community by placing each

incest situation more appropriately in its place on a *continuum* of such experiences, only a part of which would represent the stereotypic family Thorman presents.

My purpose in this criticism is to call attention to the failure of professionals to question the broad fundamental assumptions of society at large. Thorman bases his discussion on society's assumption that incest is something to be feared rather than understood. Rather than enlightenment, this produces a knee-jerk labeling. Such thinking prevents the objective assessment Thorman says he is trying to achieve.

The author is to be commended for his effort to see the "offender" (though he continues to label him as such) not as a freak but as a human being whose life experiences have brought him to this point. When he says, "Incestuous fathers who turn to latency-age children in the family for sex are motivated by a desire to relive their childhood," Thorman may be overgeneralizing again, but this at least is an effort to see the father as a human being rather than objectifying him primarily as an offender. In this way he encourages respect for the "offender" without advocating approval. He makes the point that incestuous parents tend to be grown children who haven't received adequate nurturing and care during their own individual childhoods. The author concludes:

The prevention of incest lies partly in helping parents learn how to manage stress and how to deal with their own sexuality and the sexuality of their children. The rights of children must be recognized and their protection from sexual abuse and exploitation guaranteed by making incest a reportable offense in order to help them and their families get prompt professional help in dealing with the problem. Measures to strengthen and support the family through full employment and adequate access to health services must be taken in order to provide a safe environment in which children will not be sexually abused."

Though this will not be an important book in the field, it does synthesize and distill some of the current limited literature on dysfunctional father/daughter incest dynamics, and it represents a rudimentary effort to understand the problems which arise for clinicians in a civilization which creates great confusion by drawing rigid lines between sexuality and love, thus giving its children

double messages. If professionals are to prevent sexual abuse, and particularly the father/child exploitation discussed in this book, we must rethink the restricted statements of clinical and legal intervention in terms of better understanding and less prejudice. This is a formidable task which probably will not be achieved by any one person, let alone one solitary college professor who wants to provide some guidelines to the rest of us who are equally perplexed. **PR**

AIDS: Acquired Immune Deficiency Syndrome. Margot Joan Fromer. New York: Pinnacle Books, 1983 (273 pp.; \$3.95).

Reviewed by Dennis V. Passer, MD, Fellow AAFP, President, New York Physicians for Human Rights.

The aim of *AIDS* is not only to present the known facts about this disease but also to describe the homosexual milieu in which it has affected the largest number of people. For the most part, the facts it presents are correct, although they will rapidly be outdated as more facts emerge. There are, however, some glaring errors, particularly in its definitions of scientific terminology for the lay reader; e.g., *autoimmunity* is defined as "that [immunity] with which one is born," whereas it should be defined as "immunity directed against one's own cells." *Antibody* is defined on three separate occasions in three different ways, only one of which is correct—in the glossary. The definition of how T-Cells function is woefully inadequate and incorrect. On the other hand, the definition of *epidemiology* is excellent and the discussion of its role in helping unravel the mysteries of AIDS is very good.

There are also instances of conjecture being presented as fact, inadequate differentiation between related terms, and overly brief coverage of various elements in the clinical picture. While the discussion of treatment is generally good, the section on symptoms does not include the following: chronic and persistent cough unrelated to smoking, persistent watery diarrhea without a definable cause, and drenching night sweats. These are glaring omissions from a book of facts on AIDS. Another major flaw in the book's scientific portions is the lack of documentation—there is no bibliography or reference listing.

The historical perspective data are accurate and well presented. In the section on hemophiliacs, however, no discussion is presented around the fact that the number of AIDS cases related to blood transfusion is minuscule when one considers the total amount of blood being transfused in the U.S. If the conjecture of a two-year incubation period for AIDS is indeed correct, the number of AIDS cases related to transfusions should be much higher at this point. Why not allay some of the fears of the general public in this regard?

In the chapter on the "Blood Connection" an accurate description of the controversy surrounding the donating of blood of gay men is given, but little mention is made of the efforts of the gay community, which voluntarily asked its promiscuous members not to donate blood. This oversight should be corrected.

The fight over secrecy in research is adequately described and thus sheds light, for the general public, on this seemingly unethical research practice.

The discussion of promiscuity and homosexuality is particularly well done in that it mentions all the possible etiologies and their heterosexual counterparts. Reference to the "still full backrooms and baths," however, is not documented and, at least in New York City and San Francisco, is not true. Lifestyle changes, such as reducing both the number of sexual partners and the use of recreational drugs, are occurring among the majority of openly gay men in these cities in an attempt by those individuals at high risk to reduce that risk.

The description of the lives of individual AIDS patients is interesting and offers some insights into the various aspects of different gay lifestyles, while at the same time providing "the human element" which makes the threat of AIDS more real to the reader. Ideally it should also have included information about the lives of some Haitians, hemophiliacs and intravenous-drug users as well.

The author makes an important point when she states: All the relief and support services for homosexual males come from homosexual males." But no further discussion of this disregard by society, government, and charitable institutions is provided. The obvious homophobia involved needs a stronger presentation.

Overall, the author does an adequate job of discussing the acquired immune deficiency syndrome; its possible causes;

its social, political, and economic consequences; and its brief history to date. While the book will most likely be outdated soon after publication, it should continue to serve as a primer on the syndrome and its early historical perspective. **A, PR**

Adolescent Gynecology and Sexuality.

B. Norman Barwin and Serge Belisle, eds. New York: Masson Publishing, 1982 (125 pp.; \$15.75).

Reviewed by Donald E. Greydanus, MD, Director, Adolescent Medicine Program, Raymond Blank Memorial Hospital, Iowa Methodist Medical Center, Des Moines, Iowa; member, SIECUS Board of Directors.

This is a brief symposium summarizing a meeting on Adolescent Gynecology and Sexuality sponsored by the Canadian Fertility Society. There are 11 chapters in this small book and 11 contributors, all but one of whom are gynecologists. Although this book's intended audience is not clearly defined, I gather that it is intended for other gynecologists—and perhaps other physicians with an interest in this general area. As often happens with such symposia, the finished product is a mixture of some very good chapters and others somewhat limited in scope. Thus, we are presented with a mixed monograph covering various aspects of teenage sexuality and gynecology.

The manuscript is divided into two sections: clinical aspects of adolescent sexuality and clinicosocial aspects of adolescent gynecology. Section 1 covers six subjects in a rather arbitrary and confusing sequence: sex education, gynecological examination of children and teenagers, puberty, evaluation of late sex development in teenagers, pediatric vulvovaginitis, and dysfunctional uterine bleeding in the adolescent. The chapter on sex education is somewhat disappointing—very brief, reflective of the author's private musings—and it contains a limited bibliography. Its main focus is on a summarization of Dr. Peter Scales's comments taken from a paper published in the March 1978 issue of the *SIECUS Report*.

The chapter on gynecological examination of children and teenagers is interesting but is based on the premise that the first gynecological examination should be done by a gynecologist. I

would disagree and state that this first examination should be done by the generalist (family physician or pediatrician). If a specific problem arises, *then* the specialist (gynecologist) can be consulted. It is not helpful to imply in this way that the pelvic examination is such an unusual process that a specialist should immediately be consulted. This chapter does make an important point: The impact of this first gynecological examination may influence the patient for the rest of her life. While the chapter discusses details of the pelvic examination, it fails to bring up a very important but very controversial question—*when* to do the first pelvic examination in the asymptomatic, non-sexually active girl. Some argue that it should be done during early to middle adolescence so one can discuss aspects of normal sexuality with the patient and thus identify problems early. Other clinicians simply wait until overt symptoms arise. A clear statement in this regard would have been helpful. The discussion also brings up the issue of doing a rectal examination—as if it should be done with all pelvic examinations. This may be true for the adult, but not for the teenager. The rectal examination can be the most uncomfortable part of this entire procedure and should be avoided for young people unless there are clear clinical indications for it.

The sections on puberty (written by a pediatrician), evaluation of delayed puberty, and dysfunctional uterine bleeding represent some of the best parts of this monograph. They are well written, scholarly, and of value to clinicians wishing to learn important concepts of adolescent gynecology. They have good bibliographies as well. In the middle of this section is a brief chapter on pediatric vulvovaginitis in which the clinician will find important pearls since the author, Dr. Albert Altchek, is a well-known expert in this topic.

Section 2 covers four topics in five chapters: contraception, abortion (counseling aspects and complications), pregnancy, and sexual assault. The chapter on contraception is brief and contains information which should already be well known to the gynecologist. Again, it is unclear for whom this book was really written. The individual not very knowledgeable about the topic would find this chapter useful—but there are other books better suited for such education. The cited bibliography is limited and generally not current, covering the early to mid 1970s. There is an important chapter following this which argues for

the physician's role in abortion counseling. Too often the physician is seen solely as an abortionist—that is, as a technician. As this section notes: "The counsel and opinion of physicians are generally sought with as much or greater frequency than their diagnostic and therapeutic skills." The next chapter is a good summary of current statistics on adolescent therapeutic abortion in Canada. The chapter on teenage pregnancy is too brief to adequately explain the many aspects of this topic it attempts to deal with, and it also ignores the literature of the past five years. Finally, there is an interesting section on adolescent sexual assault which covers rape as well as incest. It mainly reviews some of the important statistics and theoretical aspects of this topic, and not the clinical aspects such as examining the rape or incest victim.

In summary, this brief monograph suffers the fate of many such symposia—being a loosely organized collection of chapters, some detailed and others very superficially written. As noted, there are some useful sections, but for most readers interested in this field, I would recommend looking for other more current and comprehensive discussions. It should be pointed out, however, that there is still a definite need for additional works on this important topic of adolescent gynecology and sexuality. **PR**

Alcoholism and Human Sexuality. Gary G. Forrest, Springfield, Ill.: Charles C Thomas, 1983 (395 pp.; \$34.50).

Reviewed by Eli Coleman, PhD, Program in Human Sexuality, University of Minnesota, Minneapolis, Minn.

There has been a growing awareness of a correlation between alcoholism and sexuality problems. Dr. Forrest has attempted to draw upon existing research and his own clinical experience to illustrate these connections and to outline effective treatment strategies for individuals with these dual problems. It is unfortunate that the book contains so much misinformation, so many oversimplifications, and innumerable contradictions. The basic problem lies in the fact that Forrest's expertise is in the field of alcoholism and not in research and treatment of sexuality concerns. His awareness of the field of human sexuality has obviously come from an extensive review of the literature, but, without

primary involvement, one's understanding of the research and literature in another field can easily be conceptually confused. Forrest would have done well to write this text in collaboration with a sexologist.

There are some very definite conceptual problems throughout—even concerning alcoholism. At different points in the book the author describes alcoholism variously as a disease, an interpersonally determined disorder, an acting-out of interpersonal and intrapersonal conflicts, a neurotic solution to narcissistic injury, a sadomasochism, and a highly exhibitionistic disorder.

In his review of the most common sexual dysfunctions and psychosexual disorders, there are other confusions. Despite acknowledging the admonitions from Helen Kaplan about referring to erectile dysfunction as "impotence," Forrest chooses to perpetuate the mythology created by the use of this word. Furthermore, he does not even acknowledge the new classification system, DSM III, which refers to erectile dysfunction as "inhibited sexual excitement." Beyond the terminology problems, he exhibits a very basic, shallow understanding of the problem and only a superficial understanding of the treatment strategies. Basic information is missing about such things as nocturnal erection monitoring, testosterone replacement therapy, penile implant surgery, and alternative counseling strategies for the alcoholic with organic erectile dysfunction. Forrest does point out the high incidence of organic-induced erectile dysfunction among alcoholic men but seems to be unaware of solutions.

He also chooses to perpetuate another sexual myth which he acknowledges has been exposed by the sexology field. According to Forrest, women are still "frigid" if they have difficulty reaching orgasm, experience lack of desire, or have difficulty becoming lubricated. An example of his over-simplified and misconceived notions of sex therapy for women's sexual dysfunction is his assertion that a basic precursor to effective sex therapy for the "frigid alcoholic woman" is "a reasonably intact and stable relationship with a man." While he does acknowledge Lonnie Barbach's work, he misses the fact that a woman can become orgasmic without a man.

Another myth is promoted when Forrest asserts that an alcoholic woman is a sadomasochist. First of all, this kind of generalization is an overstatement.

Secondly, he confuses sadomasochism with victim-like behavior. He fails to understand the victim dynamics of alcoholic women (40–80% of alcoholic women have been reported to be victims of sexual abuse). This victim dynamic is something very different from sadomasochism.

Also, in referring to the male alcoholic's wife, he talks of a high incidence of sexual dysfunction. He defines a wife's lack of sexual desire for her husband's approaches (and sometimes marital rape) as *her* sexual dysfunction. Many women in this situation are actually responding appropriately to a negative stimulus.

An overall problem throughout the text and epitomized in the chapter on homosexuality is Forrest's basic heterosexist bias. In this chapter Forrest refuses to acknowledge the research on homosexuality which promoted the American Psychiatric Association's declassification of homosexuality as a mental illness. He also chooses not to mention any of the newer research on the treatment of homosexuality which accepts the individual's orientation and is concerned with facilitation of homosexual functioning. The *carte-blanche* acceptance of the psychoanalytic research on homosexuality without any acknowledgement that this research has been criticized illustrates his homophobia and heterosexism. He chooses to see homosexuality as an illness and includes the topic in his section on sexual deviation, along with rape, incest, child molestation and child abuse, sadism, masochism, exhibitionism, voyeurism, fetishism, and transvestism.

A final problem relates to the difficult issue of *when* to treat sexuality concerns in conjunction with alcoholism treatment or sobriety. Without giving any rationale for his statements, Forrest indicates that it is important to wait 4–6 months post detoxification before treating retarded or premature ejaculation, 60–90 days for "impotence," and 15–18 weeks for "frigid" women. What is the reason for the differences in these time periods? While he is adamant that the alcoholism needs to be treated first in all cases, he then acknowledges an exception in the case of rape victims. But if there is a rationale for making *this* exception to his iron-clad rule, might there not be occasions for other exceptions, given individual circumstances, dysfunctions, and problems? The over-simplification of this difficult issue may give some start-up guidance for the

novice therapist, but it provides little or no help for the more sophisticated professional therapist.

While to the uninitiated this book on alcoholism and human sexuality may seem highly informative, practical, and scholarly, it is regrettably marred by misinformation, misconception, and a perpetuation of the mythology which professionals in the sexology field have worked so hard to eliminate. It is unfortunate that this important topic has been addressed so poorly in this book.

Challenges in Sexual Science: Current Theoretical Issues and Research Advances. Clive M. Davis, ed. A publication of The Society for the Scientific Study of Sex, P.O. Box 29795, Philadelphia, PA 19117, 1983 (195 pp.; \$16.00).

Reviewed by Robert O. Hawkins, Jr., MEd, PhD cand., Associate Professor and Associate Dean, School of Allied Health Professions, Health Sciences Center, State University of New York at Stony Brook, N.Y.

This book is a collection of 15 invited presentations from the 1981 Annual Meeting of the Society for the Scientific Study of Sex. In the preface, Clive Davis indicates that "they reflect the points of view of major scholars in the field with respect to the current theoretical issues and relevant research advances."

The book begins with an address by Thomas Szasz in which he attacks rhetoric with rhetoric, criticizing what he calls the "rhetorical character of . . . the proposition that masturbation is therapeutic, rather than pathogenic." He concludes with a statement about the inherent neutrality of behavior in general and sexual behavior specifically, and suggests that judgments of good, bad, or indifferent are often combined and confused with diagnoses and treatment.

Since the book is about theoretical issues, it is somewhat puzzling that Szasz opens his presentation with a statement that is never specifically challenged in the book, yet is reflective of some of the theoretical assumptions that appear throughout: "It is possible, of course, to make certain factual statements about sexual matters. Accounts concerning the anatomy, physiology, and pathology of the genital organs fall into this class." There are several other references throughout the book suggesting that

some sciences are "better" than others in that they have well-established methodologies and theories and can make "factual" statements. The problem is that some statements about anatomy, physiology, and pathology of the genital organs have turned out to be not quite so "factual" after all. This may be caused by an inability of many scientists to question the possible influence of culture on sexual behavior, on their own theoretical bases, or perhaps on the physiology of the genital organs. For example, physiologists once believed that the Bartholin glands provided all the vaginal lubrication; it was not until late in the 70s that some of our major sexual science scholars recognized that ejaculation and orgasm were not synonymous in the male; and on a more modern note, the G-spot controversy, an anatomy and physiology issue, was alive and well in 1981 when this presentation took place.

Szasz's major failing in his criticism is that he, like other critics of sexology, fails to recognize its highly individualistic nature. Using his own example of masturbation, one could (but nowhere in the book is this done) point out that sexual scientists do *not* see masturbation as a necessity for everyone. Principle 7 of the SIECUS/NYU Principles Basic to Education for Sexuality (1980) clearly points that out: "... It [masturbation] is a source of enjoyment and can provide an intense experience of the *self* as well as preparation for experiencing an *other*. Many persons, however, do not express their sexuality in this way and this also is an individual choice."

Erwin Haerberle, Joseph LoPiccolo, Mary Calderone, and John Gagnon, a very impressive array of scholars, were invited to respond to Szasz, and they each politely and eloquently did so, even though his presentation might otherwise have been labeled as an attempt at sensationalism through uninformed rhetoric. As mentioned several times in the book, people like Szasz and groups like the Moral Majority are "foil[s] against which [we] galvanize our collective energies," and while some of us might prefer to exert our energies in other directions, we are forced to examine and reexamine what we are doing and teaching. Certainly, the four responses to Szasz constitute worthwhile reading, providing some thought-provoking analyses of some of the issues in sexual science.

Haerberle presents little-known, important historical information in pointing out the need to develop a theoretical

framework that reflects the very positive results of sex therapy for many people. LoPiccolo discusses other challenges to sex therapy, citing the problems in attempting to define dysfunction, in the diagnostic system for dysfunction, and in the fact that the effective parts of sex therapy have yet to be isolated and identified within the whole process. Calderone discusses parents' roles and ultimate aims in educating their children for sexuality and, in discussing the ways parents react to childhood learning, she suggests that the very different parental reactions to children's language learning and to their sexuality learning indicate that parents need to be educated about their children's healthy sexuality development. John Gagnon's paper, "Modern Sexual Theory and Sexual Reform: Emergence, Transformation, and Critique," clearly illustrates the interest in sexual reform that is apparent in sexual research, and the effects of social institutions and practices, such as private bathrooms and bedrooms and coeducational public schools, on sexual learning. He discusses the changing definitions of sexual "disorder" and "treatment," showing that "old diseases [e.g., masturbation] have become treatments for novel disorders . . . [e.g.] pre-orgasm."

These four presentations are followed by eight papers identified by Davis as "'state of the science' lectures," with focus on education, research, therapy, and general issues of sexual science. Elizabeth Roberts, in discussing childhood sexual learning, uses the results of a 1976-77 study of 1,400 parents of children 3-11 years old in Cleveland, Ohio, to expand on Calderone's earlier point that parental education for childhood sexual learning is sadly lacking. Donn Byrne discusses "The Antecedents, Correlates, and Consequents of Erotophobia-Erotophilia," using theory and extensive research findings to suggest that sexuality is a dynamic process and that sexual attitudes may change by education and therapy, as well as by "the unplanned occurrences of everyday life." Raymond Rosen's paper on "Psychophysiological Methods in Sex Research and Therapy" is an excellent synopsis of all the issues involved in the measurement and meaning of penile erections or, to use his alliterative phraseology, "facts and fallacies of phallometry." This is followed by Carol Cassell's excellent paper on "The Great Sex Education Debate."

The next paper, by Leonard Rosenblum and Gayle Sunderland, summarizes

two studies which attempted, through the use of a monkey model, to understand the "evolutionary basis of interactive factors in male sexual inhibition," and to provide an appropriate animal model for the study of the psychobiology of male sexual dysfunction. Not acknowledged here is the issue of the importance of the psychological base of much adult sexual behavior. How can we measure a monkey's psychological state, and what place, if any, does sexual fantasy play in the sex life of a monkey? While it *might* be helpful to develop a monkey model for studying human sexual dysfunction, the arguments, the method, and the results presented here are far from satisfactory evidence that we either need one or are near to producing one.

Vern Bullough's paper, "Sex Mythology or the Difficulties of an Interdisciplinary Science," focuses on the strengths and weaknesses of such a science and concludes with: "To be effective and knowledgeable in the sex field, one has to be a sexologist as well. That is, we have to acquire expertise beyond our discipline," suggesting that sociologists, psychologists, psychiatrists, historians, etc. who have moved into the specialty of sexuality need to broaden their backgrounds. This is followed by Haerberle's paper in which he argues for a prominent place for sexology among the other sciences. He continues his revelation of a number of rare, previously unknown and untranslated works in reconstructing the history of sexology and in suggesting that "a possible structure of sexology departments [in universities] can be found in the early programmatic writings of our pioneers . . . [such as] Bloch, Hirschfeld, Wolf, Kunz, and Kronfeld." This particular paper should be required reading for any sexologist. Joseph Bohlen closes the "state of the science" section with a review of sexual physiology research, pointing out how little we know about such basic matters as sexual arousal, orgasm, and sexual pleasure.

The book ends with Ira Reiss's presidential address, "Trouble in Paradise: The Current Status of Sexual Science," and Richard Green's conclusion of the conference, "Sex Researcher; Sex Therapist; Sex Educator: How Many Hats?" The Reiss article extolls the disciplinary diversity in sexual science, and suggests that "sexology" as a discipline is less desirable than the "specific disciplinary exploration of sexuality," and the Green article concludes that "we are *all* sexolo-

gists. Our field is sexual science." This leaves us with a reminder that one of the major challenges in sexual science today is to determine exactly who we are, what we do, and how we do it.

As with most edited collections of articles by various authors, there are some weaknesses, most notably in organization, in that papers on similar topics could have been grouped together and edited for repetitious material. However, this book makes the reader aware of many important issues in the field—both identified and hidden—and it should be of interest to everyone involved in the study of sexual science.
PR

The Gender Trap. Chris Johnson and Cathy Brown, with Wendy Nelson. New York: Proteus Publishing Co., 1982 (200 pp.; \$14.95).

Reviewed by Leah C. Schaefer, EdD, President, Community Sex Information, Inc.; President, Eastern Region, Society for the Scientific Study of Sex; psychotherapist in private practice, New York, N.Y.

The life story of any particular transsexual person is dramatic enough, but here we have the combined stories of two such people. *The Gender Trap* recounts the experiences of a most unusual couple, Eugene and Anne who, after years of solitary torment, both believing they had been "born in the wrong body," met in their native England in 1975 and fell in love. After Anne gave birth to their child, Emma, the two parents decided it was time to fulfill what they each believed to be their inevitable destiny—to change gender roles and to do this early enough in Emma's life so that she could consistently see her parents in their preferred gender roles and not be forced to adjust to confusing changes. Thus Anne, the biological mother, crossed over to become Chris the father, and Eugene, the biological father, changed over to become Cathy, the mother. From this comes the subtitle of this remarkable story: *Chris and Cathy, the First Transsexual Parents*.

That these two people should find each other, fall in love, and decide to weave their lives together is a miracle in and of itself. Any instance of finding one's soulmate and falling in love is always a miracle to be sure, but that this should happen to these opposite-sexed

transsexual people seems even more miraculous. It is a tribute to the inherent dignity of Eugene/Cathy and Anne/Chris plus the sensitivity of their biographer/writer Wendy Nelson that their story never becomes in any way ludicrous or even faintly comic. In fact, although Nelson was certainly sympathetic and compassionate, the treatment of so many of the book's phenomena gives it an almost fairy-tale quality.

The book's title, *The Gender Trap*, while certainly appropriate, is not very well realized. These two people—a genetic male and a genetic female, both transsexuals, both meeting and appreciating the opposite-sex spirit within the other, passing through the birth of a child since they felt they would never be allowed to adopt one, and at present trying to physically *become* the opposite sex they each feel represents their true selves—certainly don't seem "trapped" in the gender of birth. But they certainly are two people who struggle with their gender conflicts, with their religious alliances, and in their work and social relationships. They even associated themselves with the "punk rockers" of England in their search for people who would be able to accept them—and the androgyny of the punk movement was certainly an interesting choice for them socially. At a reasonably young age (20s), in a country not very sympathetic to them (England), and up against a coterie of doctors who seem more interested in secrecy than in genuine help for suffering patients, they appear to have succeeded fairly well in gaining some of their objectives toward eventual sex reassignment. Thus, they are not so much "trapped" as unlucky in their country of origin.

My major criticism is that the story as told lacks depth; amazing events are often described in rather simplistic terms. Although readers will learn a lot about two unique people who are transsexuals, they will not learn much about the scientific history, etiology, and current therapy designs concerning transsexualism itself. But perhaps the writer could not add insight to what her subjects themselves did not fully understand. Indeed, one can only wish that this couple could have had more psychological counseling as they began hormone therapy and experienced the changes in their bodies. And counseling would also be a great help on their path toward eventual sex reassignment surgery—which is presently denied to them because of the publicity their

unusual story has engendered. Eventually perhaps they will come to the United States, one of the few countries where they can arrange for the surgery they so desire—and deserve—as a relief to their mutual dilemmas.

People's responses to this gender phenomenon can range anywhere from horror to fascination. Yet the issue of gender is perhaps the most compelling of all personal subjects; each time we have the opportunity to learn about a particular transsexual's life and experiences, we learn more about ourselves as human beings. **A, PR**

A Challenge to Love: Gay and Lesbian Catholics in the Church. Robert Nugent, ed. New York: Crossroad Publishing Co., 1983 (290 pp.; \$10.95).

Homosexuality and the Catholic Church. Jeannine Gramick, ed. Chicago, Thomas More Press, 1983 (176 pp.; \$8.95).

Reviewed by Kevin Gordon, MPhil, Director of the Consultation on Homosexuality, Social Justice, and Roman Catholic Theology; former chairperson, San Francisco Archdiocesan Gay/Lesbian Task Force, publishers of Homosexuality and Social Justice, 1982.

New Ways Ministry, through its codirectors, Robert Nugent (a Salvatorian priest) and Jeannine Gramick (a School Sister of Notre Dame), has been courageously pursuing the question of "homosexuality and the Roman Catholic Church" for some years now. With the publication of these books, we see dramatically the high level of its leadership.

Since each book has its own origin and purpose, it would be unfair to compare and contrast them. Nugent's is a collection of 18 original essays by a group of very high caliber American theologians and other academics, many writing publicly on the topic of homosexuality for the first time. The Vatican has already moved to condemn the collection as "dangerous to the good of the Church." Gramick's nine chapters are based on solid presentations given at the First National Symposium on Homosexuality and the Catholic Church held in Washington D.C. in November 1981. The two books taken together give us a clear overview of the state of this question in liberal Roman Catholic circles,

though perhaps at times with a problematic clarity that its editors neither foresaw nor intended.

As necessary background to these books, it is helpful to understand that the Roman Catholic Church holds homosexual Catholics to life-long venereal abstinence (more often termed chastity) which functionally means celibacy. While the homosexual orientation is considered morally neutral, any same-sex activity is forbidden throughout a homosexual's lifetime. As that person works gradually toward the ideal of such life-long venereal abstinence, sincerely regretted lapses of same-sex embodied activity, even within a permanent committed relationship, must be forgiven by understanding priests. In *A Challenge to Love*, Daniel Maguire zeroes in on this "be-but-don't-do" position, as he calls it, in "The Morality of Homosexual Marriage," possibly the best, as well as the wriest, piece in the book. His reaction to the opinion that there is nothing wrong with being a homosexual as long as you do not act on it is that it is "too tidy. There is a lot wrong with being a homosexual if all the values that attach to sexual expression are denied you. Sex is more than orgasms; it is an important avenue to many personal values. If the sexual avenue is categorically closed off to gay persons, that is no slight impairment. It makes the condition itself an abridgement of personality. . . . The programmatic exclusion of gay persons from the multiple benefits of erotic attraction . . . is arbitrary, harmful, cruel, and therefore sinful . . . the burden is clearly upon those who would so prescribe. Instead we receive poor exegesis of religious texts, biologisms, and warmed-over biases in place of argument."

Three ensuing essays by women theologians raise sophisticated methodological issues in sexual ethics. Lisa Sowle Cahill in her "Moral Methodology: A Case Study" concludes, with lucid moral analysis, that "the consistent positive contribution of the Christian tradition on sexuality is that 'normative' human sexuality is heterosexual, marital, and has an intrinsic relation to procreation, love, and commitment. However, the sticky task of Christian ethics is determining when, why, and how to make exceptions to the norm." She proposes that, "while heterosexual marriage is the normative context for sexual acts for the Christian, it is possible to judge sexual acts in other contexts as non-normative but objectively justifiable in the excep-

tional situation, including that of the confirmed homosexual." This conclusion is similar to that of Charles Curran in his essay "Moral Theology and Homosexuality" in Gramick's book. Both theologians feel their valid contribution is to attempt to formulate, through formal categories, an ideal of the "normatively human" or the essentially, authentically, or genuinely human, "in order to transcend the particularities, intricacies, ambiguities, and distortions of concrete human existence."

Margaret A. Farley in "An Ethic for Same-Sex Relations" moves beyond whether and when homosexual relations can be morally justified to what norms should characterize them when they are justified. She sees the task of such a formulation as no different from selecting the norms meant to govern heterosexual relations and activity. "My answer has been: the norms of justice. . . . More specifically, sex should not be used in a way that exploits, objectifies, or dominates. . . . Freedom, integrity, privacy are values to be affirmed in every homosexual (and heterosexual) relationship."

Lesbian feminist theologian Mary E. Hunt, in a splendid essay entitled "Lovingly Lesbian: Towards a Feminist Theology of Friendship," suggests that the lived experience of *friendship* among lesbian women, minus any fixation on the presence or absence of genital activity, is what is central, characterized at its best by being "mutual, community seeking, honest." Hunt, along with Barbara Zanotti (in "Overcoming the Structured Evil of Male Domination and Heterosexism" in Gramick's book), provides valuable elucidation of the *historical actuality* of lesbian experience, and fills out the more formal concepts of "the normatively human" of theologians like Cahill and Curran. Similarly sophisticated elucidations of historical actuality need to be forthcoming from the gay male community experience.

Traditional Roman Catholic theology formulated its concepts of sexuality many centuries ago, and its methodology has painted itself into a corner, making it difficult to handle the leaps necessary to admit new, and certainly conflicting, evidence from modern biology, genetics, anthropology, sociology, and so on. Professional sexologists will be pleased to see in the essays here a refreshing focus on human sexuality as a central factor of embodied existence, pervading the total reality of the person. Gabriel Moran's excellent essay on

"Education: Sexual and Religious" suggests that homosexuality is itself one of the missing links between sexuality education and religious education, and that ". . . until the reality of homosexuality is calmly accepted throughout education, no one's education is adequately religious or healthily sexual."

Although the vocational section of Nugent's collection contains essays of definite value, it is the weakest part of the book. My principal objection is that the writers are closed in on themselves in a tortured world of language and distinctions. While priests, sisters, and brothers represent only about 1% of the Roman Catholic population, they traditionally write most of the Church's theology from out of their own life experience in monasteries, convents, rectories, seminaries, chancery offices, and Church tribunals. This does not make their work irrelevant, but it does all come from a comparatively thin slice of life. Thus, in their writings on orientation/behavior and their focus on the values of chastity/celibacy, they often unwittingly keep alive a practically meaningless and pastorally useless distinction.

While my emphasis here may seem to be more on the Nugent book, the Gramick collection, divided into Sociological Perspectives and Ecclesial Perspectives, also presents a thoughtful and balanced picture of human experience and theological reflection as it focuses on the important topic of Homosexuality and the Catholic Church. Nugent's chapter, "Homosexuality, Celibacy, Religious Life, and Ordination," is particularly hard-hitting, and other contributors have been cited above.

Obviously neither of the books is comprehensive. Some of the authors seem relatively unaware of the range of sensitive issues under research and debate by modern sexologists and revisionist lesbian/gay historians and sociologists—such as studies in gender development and identity which raise questions about gender as an essential and innate given, absolutely determined by nature or God. And the academic, white, middle-class contributors are deficient in addressing issues of race, class, culture, and educational privilege. However, together these books can serve as an excellent guide in studying the lesbian/gay challenge to love. New Ways Ministry continues to properly regard homosexuality as "life-sized" within a church that has made it seem disproportionately "bigger than life." **A, PR**

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