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**Gender Roles:
What Are We Really Teaching Young People?**

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MORE THAN JUST SAY NO:
WHAT SOME ABSTINENCE-ONLY-UNTIL-MARRIAGE
CURRICULA TEACH YOUNG PEOPLE ABOUT GENDER

Martha E. Kempner, M.A.

When I was seven, my father, an ethicist by training and former philosophy professor, was hired by a pharmaceutical company to study the issue of comparable worth. As a result, I learned that women were paid 59 cents for every dollar men made, and frequently heard about the glass ceiling in dinner table conversation. My mother, for her part, forbid Barbie dolls because she didn't like the messages they sent about women.

I am fortunate to have had generations of women pave the way for me and my peers (by the year I graduated from college 43% of all law degrees and 39% of all medical degrees were earned by women), but coming from this environment, I have always seen myself as a fighter for gender equity.

In fifth grade gym class, for example, I protested the fact that boys were given most of the gym to play a basketball game, while girls were given a small corner to practice free-throws. My athletic ability, however, didn't match up to my righteous indignation and I dropped my protest relatively quickly for fear of having to actually play. My sister one-upped my protest when in ninth grade she asked her gym teacher why girls were learning tumbling while the boys were being taught wrestling. Mr. Brooks responded that one day over tea and cookies he would try to explain the rules of wrestling to her. Not surprisingly my sister showed up the next day with a tea bag and a box of Fig Newtons and declared herself ready to learn.

Given this family background and penchant for complaining, there is no doubt that we would not have kept quiet if our school's formal sexuality education courses over the years had suggested traditional gender norms as preferable or passed on gender stereotypes as truth.

GENDER BIASES IN ABSTINENCE-ONLY-UNTIL-MARRIAGE CURRICULA

Perhaps this is why I was so surprised when I first began to review fear-based abstinence-only-until-marriage curricula. In addition to trying to scare and shame young people, many of the curricula used in abstinence-only-until-marriage programs (programs that are both federally/state- and privately-funded) present an inaccurate and highly biased view of gender. Over the years at SIECUS I have reviewed

more than two dozen of these curricula and have found that the majority contain gender biases focused on two topics—how men and women differ, particularly in terms of sexual behavior, and gender roles, particularly within relationships.

Differences Between Men and Women. Many of the curricula start by explaining that there are general differences between men and women. *Reasonable Reasons to Wait*, for example, explains that “girls care more about their hair and clothing” and “write notes and keep their comments somewhat private” where as “boys are more open and discuss their opinions...”¹ *WAIT (Why Am I Tempted) Training* explains that women are colder than men because their metabolism is lower, that women's hearts beat more rapidly, and that women have larger livers, stomachs, and appendices, but smaller lungs.² It goes on to explain that “...studies clearly show a large male advantage in visual-spatial abilities and higher mathematical reasoning. Every social explanation has been exhausted—this is innate. Only 20% of American girls in elementary school reach the average level of male performance in tests of spatial ability.”³ This statement suggests that girls should not bother attempting to change such innate weaknesses of their gender as mathematical reasoning.

It is unclear why these statements of general differences have such a prominent role in these curricula except to underscore the differences when it comes to sexual behavior. *Sex Respect* explains that “a man can experience sexual release with a woman even if he doesn't particularly like her. A woman, however, often experiences more sexual fulfillment with a person she trusts and whom she believes is committed to her.”⁴ *FACTS* explains that men may “use ‘love’ to get sex, eg. tell a girl he loves her, so she will do things sexually.” In contrast, the curriculum explains that women may “use ‘sex’ to get ‘love,’ eg. do something sexually to ‘hold on to’ the boy.”⁵

In promoting this age-old stereotype, the curricula often seem to be suggesting that women never truly desire sexual experiences. *Sex Respect* explains that “a young man's natural desire for sex is already strong due to testosterone, the powerful male growth hormone. Females are becoming culturally conditioned to fantasize about sex as well.”⁶

Ultimately these conversations put the responsibility for controlling sexual behavior on young women. *Sex Respect* says, “yet because they generally become physically aroused less easily, girls are still in a good position to slow down the young man and help him learn balance in the relationship.”⁷ *Reasonable Reasons to Wait* echoes this sentiment by saying that “girls need to be aware they may be able to tell when a kiss is leading to something else. The girl may need to put the brakes on first to help the boy.”⁸ *Heritage Keepers* explains it this way: “for a girl it may mean moving a boy’s hand.”⁹

These ideas run counter to the goals of comprehensive sexuality education which seeks to teach young people that everyone, regardless of gender, has the right and the responsibility to carefully make sexual decisions.

Traditional Gender Roles. In addition to presenting stereotypes about the differences between men and women, these curricula seem to recommend traditionally prescribed gender roles and behavior. *Sex Respect* tells young women that puberty “is when girls need to start acting as well-mannered ladies, instead of uncontrolled children, since they are physically capable of having a child and need to protect this potential gift by respecting the power to help give life to a child.”¹⁰ Many of the curricula also make references to how a young woman dresses. *Reasonable Reasons to Wait* says “a girl’s attire can rouse sexual feelings in boys. It is very important that teenage girls and boys dress appropriately, whether they are on a date or out in public. A boy can get the wrong message from what a girl might wear.”¹¹

The curricula make a number of additional references to seemingly outdated social norms. *Sex Respect* suggests that young people ask for their parents’ opinions on whether it is appropriate for girls to ask guys out. It goes on to list different responsibilities for young people on a date. The young man is responsible for providing transportation and having enough money while the young woman is responsible for being ready on time, telling her date about her curfew, and helping him get her home on time.¹²

In discussing marriage, *Reasonable Reasons to Wait* asks young people to consider “Will the wife work after marriage or will the husband be the sole breadwinner?” And, the *Art of Loving Well* asks young people to “think of the enormous wisdom contained in the fact that in a wedding ceremony the father ‘gives away’ his daughter.”¹³

In a section designed to predict and answer questions that students may have, *Sex Respect* asks “are boys who abstain really considered ‘virgins?’” The answer: “although the term more commonly is used in reference to girls, it applies to boys too.”¹⁴ While at some point in our history it may have been true that the word virgin was mostly used to refer to women, today it is commonly accepted that the

term refers to any individual who has not engaged in sexual intercourse. By suggesting otherwise, the curriculum is subtly reinforcing a model of gender inequality that requires chastity and purity in women but not men.

The curricula’s overall treatment of gender differences presents stereotypes and myths as universal truths. This presentation may confuse students who do not conform to these gender stereotypes, and be detrimental to all young people by limiting their options, influencing their behavior, and coloring their expectations for future relationships. In addition, the curricula miss numerous important opportunities to cultivate critical thinking skills in students. Students are not challenged to question the nature, validity, or origin of gender stereotypes, or to examine how such stereotypes can affect communication within friendships or sexual relationships.

WHAT ARE WE REALLY TEACHING OUR YOUNG PEOPLE?

As I read fear-based abstinence-only-until-marriage curricula, I always end up trying to imagine the fifteen-year-old version of myself sitting through a class in which I was told that by nature I had weaker math skills than my male peers or that any sexual desire I felt was artificially imposed on me by society. Would I have reveled in my self-proclaimed role as gender-equity police and challenged the teacher to prove these claims? Would I have sat there quietly telling myself that it was unfair and untrue? Or would I have taken it as fact, believing it to be the word of men and women who had lived longer and knew more?

Thankfully, I will never be fifteen again and will never know how these gender biases would have impacted me, but I am all-too aware that many of today’s fifteen-year-olds are sitting through classes like these and that we have a responsibility to determine how they are being affected.

This was the impetus for this edition of the *SIECUS Report*. We wanted to look closely at the messages (both implicit and explicit) that young people are learning about gender and explore ways that schools and health promotion programs could begin to do a better job. I am very excited about the articles we have included as each looks at a different angle of this complicated topic.

IN THIS ISSUE

Susan Hamson looks at how popular self-help books like *Men Are From Mars, Women Are From Venus* simultaneously validated the assumption that men and women would behave differently and provided an excuse for bad behavior and a lack of communication between genders. To inspire her article, Hamson wandered around WalMart to see how early and often society tells young people that “gee, men and women sure are different.”

We have also included an excerpt from the book *Fast Girls: Teenage Tribes and the Myth of the Slut* by Emily White. White interviewed hundreds of women across the country who were all labeled “the high school slut.” Weaving their stories with current observations from a suburban Seattle high school, White theorizes about what we might be teaching young people that makes them both fear and revere and, more importantly, create this almost mythical character.

In an effort to help readers find ways to improve teachings about gender, we have included articles from the Population Council, Margaret Sanger Center International, and the Center for Reproductive Health Research and Policy at the University of California, San Francisco.

The Population Council’s article describes a new project they are undertaking to address the question of how sexuality education might look if a gender perspective were incorporated more fully into the design of the curricula. The project includes creating a content analysis tool, reviewing existing curricula, examining evaluation approaches, and hosting a series of learning circles.

Marissa Billowitz and Surabhi Kukké of the Margaret Sanger Center International explain in their article how sexual and reproductive health outcomes are impacted by gender. They then examine how health promotion programs can be gender negative, gender neutral, gender sensitive, or gender equity promoting. Ultimately, they provide suggestions for reaching the high standard of gender equity promotion and examples of programs around the world that have done so.

In addition, Hector Sanchez-Flores of the Center for Reproductive Health Research and Policy provides us with an important, and often overlooked, perspective on this topic by examining the mixed messages young men receive about masculinity as well sharing successful strategies for helping them navigate their gender roles.

CONCLUSION

Ultimately, everybody learns about gender—and incorporates what they have learned—in different ways. For example, while I remain convinced that my mother’s anti-Barbie sentiments were justified and hope to also run a

Barbie-free household, my sister bought her daughter’s first Barbie while my niece was still *in utero*.

It is vitally important, however, that young people and adults alike are able to view the world through a gender-equity lens—to examine those ideas and practices in their communities related to gender that might impact the feelings, behaviors, opportunities, and wellness of those around them. This ability to critically analyze implicit and explicit gender messages is a crucial first step toward gender equity in both education and society.

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DOING GENDER THE “RIGHTS” WAY

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Gender has been a buzzword in sexual and reproductive health and rights (SRHR) programming worldwide for decades but has been treated superficially; it is often tacked on to meet donor requirements or comply with international standards. In some cases, unfortunately, gender has not even been considered in the development of programs and policies.

For example, at the recent International AIDS Conference in Bangkok, speakers highlighted an inherent limitation of the ABC approach—a popular program planning and political tool in many countries fighting the AIDS pandemic (ABC refers to a three-prong approach: abstain, be faithful, use condoms). It was abundantly clear, as panelist after panelist spoke, that gender is the missing element in this simplistic formula. The notion of choosing among these three options relies on having the power to negotiate within sexual relationships free of coercion, something that many women are not able to do. Although ABC is primarily used as a framework for implementing HIV programs, we must take this critique forward in all SRHR programs.

While the importance of gender equity to achieving SRHR goals is more widely accepted than the above example indicates, the truth is, program planners are still struggling to systematically integrate it into their work. First, planners must understand the concept. When we talk about gender *equity* we refer to the condition in which men and women have equivalent life options. This necessarily means recognizing their different needs and interests and requiring a redistribution of power and resources.² *Equality*, on the other hand, is a legal construct referring to non-discrimination and equality of opportunity. In contrast, gender equity implies equality of results. The gender equity approach also recognizes that policies may need to compensate for historical discrimination and disadvantage and provide additional support so that women and men can learn new roles and reshape gender systems in society.

Recently, the concept of gender equity has come into the mainstream of sexual and reproductive health and rights programming as a result of a number of important changes in the field. First, key international agreements, including those ratified at the International Conference on Population and Development in Cairo in 1994 and the Fourth World

Conference on Women in Beijing in 1995, affirmed the importance of including a gender equity perspective in all health and development programs. Vibrant and persistent movements for reproductive health and rights have served as further catalysts for the family planning and population fields to begin incorporating rights-based approaches. Gender equity promotion is a rights-based approach to “doing gender” because it helps to create the environment for all people to be self-determining and free of violence and discrimination.

A recent review of nearly 400 interventions addressing maternal morbidity and mortality, unintended pregnancy, sexually transmitted infections (STIs)/HIV, and quality of care found that the integration of gender into SRHR programs has had positive outcomes both in terms of reproductive health and gender goals.³ This study adds to the abundant and building evidence on the importance of addressing gender equity in order to improve the sexual and reproductive health of young people. Funding agencies, policymakers, and program planners alike feel a greater impetus to include gender in their programs, but many are still unclear as to what that means and how to implement it.

To that end, this article aims to review the concept of gender equity in the context of international sexual and reproductive health programming for young people, introduce a framework for the practical integration of a gender equity perspective into youth programs, and provide case studies of successful equity-promoting programs.

GENDER EQUITY AND SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

It is essential to understand that gender norms have direct implications on health outcomes. Gender roles and their relative power influence all aspects of work on SRHR, including sexuality education, HIV prevention, and adolescent pregnancy.

For example, in many countries, female infants die at a significantly higher rate than boys, because they are not as highly valued.⁴ Often boys are more likely to be immunized, have better nutrition, and receive medical care, while parents may wait longer to bring girls into the hospital or

clinic, or not take them at all. UNICEF statistics reveal that more than one million girls die each year from malnutrition, neglect, and abuse who would not have died had they been male.⁵ Moreover, sex-selective abortion continues to be practiced widely in some countries as women seek to please their families and communities by producing male children.

HIV/AIDS, other STIs, and unintended pregnancies also thrive in conditions of inequity, poverty, and lack of education and information. In many societies, gender norms keep boys from asking vital questions about sex and sexuality. Often boys are expected to demonstrate a bravado about sex that makes it impossible for them to admit that they don't know or understand how their bodies and those of their sexual partners work. In some cultures masturbation is believed to negatively affect a man's virility or "manliness," leading men to seek casual or commercial sex whenever they have any desire to ejaculate. These expectations lead to pressure on young men to have frequent sex with multiple partners, often without using condoms.

Meanwhile, girls' ignorance can also be deadly. Girls who "know too much" about sex are often thought to be promiscuous, so parents may be opposed to sexuality education in schools. Too many girls are afraid to seek SRH services because "good girls" are not supposed to admit to having sexual desires, let alone having sexual intercourse. Without gender equity, poor girls and women who need to go to clinics will continue to be intimidated by clinic personnel whose attitudes about what women and girls should or should not do, will keep them away. Furthermore, in many countries, economic inequities leave women few options for their livelihood, leading to their need to engage in transactional sex or formal sex work, often making them vulnerable to negative health consequences. In situations such as these, all of the condoms in the world will not change the reality of the power dynamic.

Program planners working on sexual and reproductive health and rights cannot do their jobs fully without a firm commitment to and grasp of the fundamentals of gender equity. Until issues of power, coercion, expectations, and access that stem from inequitable gender norms are addressed, we will not see the positive health outcomes we seek.

GENDER IN PROGRAM PLANNING

The integration of gender into SRHR programs has evolved substantially over the last two decades. While population control and family planning were prioritized by national governments as a matter of policy, little attention was given to the role or condition of women in the practice of family planning. With growing awareness of women's

rights, due in large part to the activism connected to a series of UN world conferences in the 1990s, new commitments arose to "mainstream" gender in development policies and practice.⁶ Initially, addressing women's issues was seen as a functional strategy to improve development outcomes. Women were understood as a resource that was necessary to increase the efficiency and efficacy of programs. Over time, however, it became clear that functional change alone would not suffice in bringing about improvement in the health and well-being of populations. Structural change was also necessary, which required a thorough analysis of gender and power within relationships, families, communities, and other social institutions.

It is essential to keep this trajectory in mind when considering the importance of integrating gender into SRHR programs for young people. Teaching young people ways to resist gender stereotypes and offering more sensitive and expansive ways of understanding social relations is a critical step toward transforming gender systems in society. Changing gender norms and supporting gender equitable relationships requires that we not only include girls in our programs, but that we also challenge both boys and girls to dismantle inequitable ideas about gender. Gender equity promotion refers to measures taken to change gender norms and roles and thereby improve the life conditions of women and challenge the gender inequities that affect the SRHR of women and men. Such programs may include any activities that can incorporate gender equity at different levels such as community workshops, home visits, peer education, support groups, leadership development, vocational training, clinical services, life skills training, and advocacy initiatives.

Many valuable resources on gender and development have been created over the last few decades. Excellent training manuals, guides, and information packs on sexual and reproductive health also exist, including numerous documents focusing on specific SRHR issues such as the prevention of STIs, maternal mortality, and HIV infection. However, there are few resources that focus on the practical aspects of how to specifically promote gender equity within the context of such programs and help program planners introduce such an agenda within their work.

At Margaret Sanger Center International (MSCI) we have been developing the *Gender Equity Promotion Guide*, a self-study guide for program planners to assess and improve the integration of gender equity promotion into each stage of program design.⁷

APPROACHES TO GENDER IN PROGRAMS

Even when we have a good understanding of gender concepts and their connection to the sexual and reproductive health issues we want to address, it can seem daunting to

know how to take it into account when planning a project or program. To facilitate this task, MSCI has developed, as part of its guide and workshops, a simple classification that clarifies how gender has been or can be incorporated into program planning. This scheme helps program planners analyze how they deal with gender in their programs and helps them move beyond negative stereotypes or superficial approaches toward an approach that aims to transform gender roles and relations.

Gender Negative

These programs include gender in ways that actually reinforce existing inequalities and promote gender norms and stereotypes that are already in place. They are often well intentioned, but use strategies that do not advance gender equity. For example, we have seen communications campaigns using stereotypical images. One poster showed a soldier looking at a woman wearing revealing clothing with a caption underneath that reads: “You don’t know where she’s been. When you’re not protecting the country, protect yourself from AIDS.”

In another popular campaign for vasectomy promotion, posters and coasters to be used in bars were printed with the image of a man’s flexed bicep tattooed with the word “Vasectomy.” Clearly the intention is to convey that a man is still masculine if he undergoes a vasectomy, but the image reinforces stereotypes based on the expectation that men will be strong and aggressive.

The So What? Report, written by the Interagency Gender Working Group Task Force, suggests that such images “reinforce male dominance of decision-making authority and resources.”⁸ While this particular project had successful results in terms of increasing the number of men who knew about vasectomy and chose it as a contraceptive option, the use of this kind of imagery may also reinforce undesired health behaviors, such as violence.

Gender Neutral

Gender neutral programs take gender into account by attempting to reach both men and women but do nothing to shift the gender status quo. While they may recognize differences in women’s and men’s behavior, they do not attribute them directly to gender inequity. For example, a training course in HIV/AIDS awareness may accept equal numbers of women and men and provide both sexes with the same information about how HIV/AIDS is transmitted and prevented and how condoms are utilized, but not include training on sexual negotiation or sexual and reproductive rights that

would acknowledge the underlying power dynamics in sexual relationships.

Gender Sensitive

These programs use strategies that accommodate men’s and women’s different needs, but they do not explicitly challenge gender inequity. For example, we have seen clinics that have extra evening hours to recognize women’s difficulty in coming in during the day after housework, fieldwork, and childcare. Similarly, Planned Parenthood of New York City started to offer services for males one night a week in its Bronx clinic, because that was the best time to reach the young male partners of its female clients. Other examples may include the use of service vouchers or the provision of childcare within programs or services.

In fact, these strategies may make it easier for men and women to fulfill their gender-related duties without reducing inequities, thus reinforcing gender roles and norms.⁹ This is not to say that these are undesirable options. To be sure, it is better to be gender sensitive than to disregard the impact of gender altogether. However, in terms of long-term strategies for social change, gender sensitive programs stop short of transforming gender roles.

Gender Equity Promoting

Programs that are equity promoting explicitly employ strategies to transform inequitable gender norms, especially those that impact negatively on men’s and women’s health. These programs tend to encourage understanding and awareness of gender-related inequities and their impact on SRHR, challenge the distribution of resources and responsibilities between men and women, and specifically reach out to men to address their responsibilities and recognize the benefits of gender equity for them and their partners, families, and communities.

For example, one women’s group mounted a campaign aimed at ending laws that classify women as minors. This reform would allow women to purchase contraceptives without needing permission from their husbands or fathers. To complement this, their clinic has special classes for men to cultivate more equitable attitudes and behaviors related to SRH.

MSCI recognizes that for most SRH programs, incorporating gender equity promotion would require such radical change that those responsible for implementing the programs may not know where to begin. To address the practical needs of program planners trying to integrate gender into their SRH programs in the “rights” way,

MSCI has developed the above-mentioned guide and a series of workshops that provide step-by-step advice on including a gender equity promotion perspective in the program planning process. For program planners who recognize the importance of working on gender issues, these tools show how simply framing a single program objective in an otherwise “mainstream” SRH program in equity-promoting terms can begin the slow process of social transformation in the communities where they work.

For example, many program planners use objectives such as “to reduce risky sexual health behaviors of girls in community X” to plan their programs. That objective could reflect a gender equity approach, however, if it were written as two complementary objectives: “to empower girls to make healthy sexual decisions” and “to reduce girls’ vulnerability to negative sexual health consequences in community X.” This new wording acknowledges the importance of fostering girls’ agency in decision making about their bodies. At the same time, it reflects an understanding that there are other factors affecting a girl’s sexual behavior that are outside her control, such as coercion, economic conditions, or cultural expectations. Simple steps such as these can put program planners on the road to transformative programs.

Ideally everyone would design programs in which all of the components promote gender equity. However, we recognize that for a variety of reasons this is not always possible in the communities in which we work. We encourage programs to design at least one objective and corresponding strategies to address gender inequities. In other cases, programs may add a few gender equity promoting components into several aspects of their programs. While it is not always possible to design programs that are thoroughly gender equity promoting, it is helpful to identify such programs and the results they can achieve.

CASE STUDIES

With this challenge in mind, we would like to present the following case studies of programs that clearly fall in the gender equity promoting category. We include descriptions of these programs not because every program can or should emulate them, but rather because so many colleagues have asked for concrete examples of the programs and activities that we are talking about. These particular programs stand apart from others that are only gender sensitive, and we hope that difference will be instructive to our readers.

Nigeria

The Girls’ Power Initiative (GPI) is an NGO that, with technical assistance from the International Women’s Health Coalition (IWHC), has implemented a program in Nigeria for girls ages 10–18. In a country where

girls traditionally are taught to be subservient to their male family members and husbands, the program provides girls with information on sexuality, human rights, sexual and reproductive health and rights, leadership, self-esteem, and life skills. GPI has not only aimed to educate these “gender sensitive girls,” but has also trained them to be advocates in their schools and communities to speak out and intervene against gender inequities. This last objective clearly sets a gender equity promoting program apart from ones that are merely gender sensitive.

GPI activities include skills training workshops; field visits to expose girls to professions not based on gender stereotypes; forums for parents, teachers, and health workers to sensitize them to the program’s objectives; counseling and referrals to health services; training courses for other NGOs; research; and curriculum development for sexuality education for girls.

Evidence has shown that, in addition to improved health indicators for girls in the program, they are more likely to assert their rights, pursue studies or careers that are non-traditional for Nigerian women, and challenge inequities they see in their communities. In addition, GPI’s work has been complemented by other programs supported by IWHC in Nigeria that include a gender equity perspective, including programs by Action Health International, which works on adolescent sexuality education, and Conscientizing Male Adolescents, GPI’s counterpart program that works with young men to change attitudes toward gender roles and issues.¹⁰

Kenya

Maendeleo Ya Wanawake Organization, a national grassroots women’s organization, was the first group in Kenya to undertake advocacy to eliminate the practice of female genital cutting (FGC). Maendeleo, in collaboration with the Program for Appropriate Technology in Health (PATH), developed a three-part strategy based on qualitative and quantitative studies on community practices and perceptions of FGC as well as the perceived health risks. The strategy employed in four districts in Kenya included: raising awareness about the harmful effects of FGC, devising ways to promote a positive image of uncircumcised girls, and developing an alternative rite of passage for girls that would replace initiation by cutting.¹¹

In order to garner community support, Maendeleo shared the results of the community studies and consulted with stakeholders in all four districts to help design follow-up activities that would sensitize the community to the health implications of FGC and

challenge myths about uncircumcised girls.¹² The creation of alternative rites of passage for these girls, the planning of which involved the community at every level, shows the truly transformative nature of this program, as opposed to one that simply advocates against FGC.

An evaluation of the alternative rites of passage, combined with education and advocacy measures, demonstrated considerable behavioral and attitudinal change. The prevalence of FGC dropped among girls ages 14–19, and the number of women in favor of discontinuing the practice grew substantially.¹³ These results indicate the importance of participatory program design that is responsive to the needs of the community and works to transform gender systems within cultures. Eliminating a harmful practice such as FGC is akin to removing a marker or symptom of gender inequality. A gender equity promoting approach can be effective in changing the complex web of norms that maintain the gender system from which such practices emerge.

Brazil

One highly lauded gender equity promoting endeavor is Project H (Proyecto H—the “H” stands for “homens” or “men”), a training project developed by the Instituto Promundo based on research into the factors necessary for young men to be “gender-equitable.” Instituto Promundo is a Brazilian NGO that seeks to improve health and life conditions for men, women, children, and families through research, technical assistance, and identification and implementation of new strategies focusing on gender, health, and community development.

Project H created five manuals for service providers and educators working in the health field to facilitate their work with young men ages 15–24.¹⁴ The guidelines and activities focus on themes of sexuality and sexual/reproductive health, paternity and care, violence prevention, mental health, and HIV/AIDS prevention and care. By working with young men to modify their attitudes toward gender roles and responsibilities in conjunction with providing sexual health information, the project aims to reduce gender-based violence and generally improve health indicators, including reducing the transmission of HIV and other STIs for both the young men and their sexual partners. Project H’s objective of modifying attitudes about gender roles and relationships indicates the transformative nature of this project.

Project H demonstrated the extent of its equity promotion in an evaluation using the Gender-

Equitable Men (GEM) scale developed by Promundo and Horizons. The evaluation of Project H revealed improvements in young men’s attitudes, with fewer participants agreeing with statements such as “Men need sex more than women” and “I would be outraged if my wife asked me to use a condom.” In addition, the evaluation saw a drop in STI symptoms and an increase in condom use. These findings confirm that an equity-promoting approach achieved positive changes in both gender equity and health indicators.¹⁵

India

The Better Life Options Program (BLP) in India is a multi-sectoral program with projects in three different states that have reached more than 10,000 girls in 10 years of operation. Using an empowerment approach, these projects train low-income girls ages 12–20 (married and single) in family life education, literacy and vocational skills, and general and reproductive health. While each project is tailored to local contexts, they all stress leadership and social mobilization through advocacy and community involvement, with the goals of building girls’ self-esteem and self-confidence, as well as expanding their choices related to marriage, fertility, health, vocation, and civic participation.

An impact study found significant differences between girls who had completed the BLP course and a control group. BLP alumnae were more likely to be literate; to have completed secondary education; to be employed; to have learned a vocational skill; to have traveled outside their village or visited the health center alone in the last six months; and to make autonomous decisions about going to the market, spending what they earned, and deciding when to marry. Among married girls, a significantly higher number of the BLP alumnae group reported contraceptive use and HIV/AIDS awareness. In addition, a greater proportion of alumnae believed that men should help with housework and women should work outside the home, and that education is as important for girls as it is for boys. The success of BLP shows how the use of a gender equity promoting approach, and more specifically a women’s empowerment model, can be critical to achieving reproductive health goals.

CONCLUSION

Cases such as the ones highlighted demonstrate that programs can successfully include a gender equity perspective and that doing so helps improve the sexual and reproductive health of young people. Program planners, funding agencies, and policymakers can use these gender approaches to situate their programs within the scheme, and to encourage discussions

within their institutions on how gender equity promotion can be integrated into their work.

While ideally all programs would promote gender equity, we recognize that it may not be possible due to the realities that organizations and program implementers face at a community level. This kind of social change is a long-term process, which requires the active participation of the communities where programs are taking place. The most successful programs, such as the Girls' Power Initiative in Nigeria, have involved the community at different levels, winning acceptance of transforming the roles and lives of girls who live there. There are still many communities, however, where resistance to change may determine the speed at which a program can tackle gender inequity. At the very least, we advocate for programs that are gender sensitive, that do not pretend to address gender issues simply by including equal numbers of men and women in training workshops, and more importantly, do not rely on dangerous and damaging gender stereotypes. Those planning and facilitating these programs should develop a vision for implementing a gender equity promoting strategy over time, as appropriate for their setting.

Finally, we believe that gender equity promotion is not only important to improve sexual and reproductive health and rights but that it also promotes the human rights of all people by empowering women and helping men to change harmful behaviors. Doing gender the "rights" way requires us to make a commitment to promoting gender equity in our programs in order to simultaneously improve SRHR outcomes and challenge systems of power that create vulnerabilities.

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PLACING GENDER AT THE
HEART OF SEXUALITY EDUCATION

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Our field now sits on an enormous body of literature documenting the ways that gender dynamics profoundly shape knowledge, attitudes, and behavior in the area of sexual and reproductive health. In recent years, clinical and community-based sexual/reproductive health programs around the world have increasingly reconfigured services to reflect an awareness of the power imbalances that exist between males and females. Some efforts have also been made to pay attention to gender issues in formal sexuality education, but these strides have, for the most part, been less thorough than they might be.

Substantial evidence illustrates the ways that gender roles shape sexual attitudes, behavior, experiences, and outcomes. For example, pressure on young men to “prove their manhood” may lead to attitudes that condone risk-taking and abusive behavior, while creating sexual performance pressure and anxiety related to sexual dysfunction. At the same time, in many settings, girls are taught to be submissive and not to associate sex with their own pleasure. Not surprisingly, studies also show that gender often shapes the reasons adolescents become sexually active: Boys typically cite such things as curiosity and pleasure as primary reasons for having sex, whereas girls’ principal reason is for love or approval.

Adherence to traditional gender norms is an antecedent to poor sexual health outcomes, including those that sexuality education programs typically aim to influence—early sexual initiation, greater number of partners, and low rates of condom and contraceptive use.

**NEW PROJECT AT
POPULATION COUNCIL**

The Population Council program in Gender, Family, and Development—coming out of parallel institutional streams of work in adolescence, sexuality, and sexual health—is hoping to foster a dialogue to address the question of how sexuality education might look different if we were to incorporate a gender perspective more fully into the design of curricula, materials, training, and evaluation.

Under the direction of Nicole Haberland and Debbie Rogow, the project is beginning with the assumption that for young people to have the promise of satisfying and healthy sexual and reproductive lives, they need not only information and communication skills, but also greater understanding of how traditional gender norms increase their risk of poor outcomes (particularly, but not only, for girls). This includes developing greater awareness of—and strategies for reducing—the enormous power differential girls suffer vis-à-vis male partners. The project is focusing on sexuality education in both US-based and developing country settings.

In cooperation with their colleagues, both within the Council and in sister organizations, Haberland and Rogow are undertaking several activities to foster this dialogue including developing a content analysis tool, reviewing curricula, examining evaluation approaches, and facilitating learning circles with colleagues in the field.

Content Analysis Tool

The project is currently completing revision and testing of a tool that programs can use to assess how thoroughly, and to some degree, how thoughtfully, their own curricula address gender issues. In its current form, the tool involves approximately 40 questions, some in a checklist manner, others more scaled, along with guidelines for use. The instrument helps a reviewer identify:

1. whether and how the promotion of gender equality is incorporated into the objectives of a curriculum;
2. how gender is addressed in the content of the curriculum, and what possible gaps may exist with regard to highlighting girls’ and boys’ social roles in intimate relationships, but also in the family, the community, the workplace, the larger society, and the law;
3. whether a curriculum seeks to promote critical thinking and reflection about how traditional gender roles inhibit equality and lead to poor sexual health outcomes, and practical and strategic avenues for addressing inequality;

4. the proportion of time that gender issues receive in a curriculum and how the relevant lessons are distributed throughout the curriculum; and
5. the difference and balance between gender-“blindness” and gender-sensitivity in a lesson.

The content analysis tool is expected to be completed and distributed in 2005.

Curricula Review

The project is also conducting a content analysis of selected curricula from both the US and developing countries. The goal is to gather a sense of the “state of the art” and to compile sample lessons and curricula that are particularly thoughtful or creative, even if they have not been rigorously evaluated. To date, we have reviewed 24 curricula, in large part using the tool described above. We have identified a number of very strong lessons (and curricula) that teach adolescents how to recognize, disentangle, and challenge the gender-based social scripts that so deeply influence their own sexual behavior and health outcomes. These examples more often tend to come from community-based rather than school-based programs, and more typically, from curricula designed for developing countries. However, a number of them are adaptable for various settings and can inspire and/or serve as useful resources for others.

Overall, however, this preliminary review indicates that curricula largely ignore gender or address it in a fairly superficial manner. Some tack a lesson on gender onto the end of a curriculum. Alternatively, some curricula make reference to gender issues in a number of places but never discuss the issue in any depth. Rarely do programs thread attention to gender—a basic underpinning of sexual attitudes, decisions, and behaviors—throughout a curriculum in a coherent and consistent way. Lessons that help students rethink traditional masculinity, that foster reflection on homophobia, and/or that address social power are particularly scarce.

Often, emphasis on the adolescent “couple” eclipses specific attention to gender. As Delia Barcelona and Laura Laski of UNFPA have written about traditional approaches, “By focusing on the generic adolescent or the adolescent ‘couple,’ such curricula, for the most part, have buried the critical issues. They have failed to take adequate account of boys’ and girls’ often distinct—and frequently competing—rationales, constraints, experiences, interests, expectations, feelings, and meaning in regard to sexuality and relationships.”¹

Evaluation Approaches

Currently, sexuality education programs are evaluated for their effectiveness in contributing to specific social, health, and demographic outcomes. Typically, these include delaying sexual debut, increasing contraceptive and condom use, reducing the number of sexual partners, and reducing rates of pregnancy. The Council is currently examining how program effectiveness varies by gender. Preliminary results suggest that the majority of rigorous evaluations find different outcomes for girls as compared to boys for one or more indicators. In other words, one program may delay sex among girls but not among boys, while another has the converse effect. A curriculum may be proven to increase condom use among participating girls but not among their male classmates, while a different curriculum has the opposite effect. Such findings suggest that boys and girls have different learning needs. This notion should not be that surprising, given the underlying issues facing boys and girls.

In addition, program evaluations—shaped by the original goals of programs and by some practical and political considerations—have rarely sought to learn whether sexuality education is influencing the quality or nature of young people’s sexual experience. Which programs reduce the high levels of sexual coercion and violence? Which are most effectively promoting attitudes favoring mutuality, equality, and respect? Do some curricula result in girls attaining a greater measure of pleasure when they become sexually active? Do any curricula effectively provide a greater sense of safety and self-esteem among homosexual youth? Finally, how do such program-based outcomes vary by gender?

The project operates on the assumptions that in promoting a gender perspective in sexuality education, these outcomes matter in their own right, are amenable to change, and are worthy of investing in as wisely as we can. Current activities in this domain focus on promoting a dialogue on these issues in the field through various professional and collegial venues, including publication of a policy-oriented paper and sponsorship of the “learning circle” series at the Council (see next section).

Learning Circles

Haberland and Rogow are currently planning a series of small discussions focused on specific topics related to gender issues in sexuality education. The goal of these discussions is to work with colleagues in the field to bring to light recent research, consider programmatic implications, and explore ways to ensure that sexuality education is as effective as possible. Effectiveness would be measured as enabling young

people to foster intimate relationships that are not only safe, but also mutual, respectful, and pleasurable; helping young people delay sexual debut until they are developmentally capable of engaging in such relationships; and laying the groundwork for a healthy and satisfying adult sexual life.

Reflecting the desire to learn from and with our colleagues, there are four “learning circles” planned. The precise direction of these groups is subject to change, based on the interest of participating colleagues. Tentatively, one will examine questions related to evaluating sexuality education with the hopes of considering the specific methodological challenges and opportunities that arise in addressing evaluation with a greater eye to gender. A second learning circle may focus on the question of whether young men around the world are facing a crisis in their traditional roles, and what that implies regarding teaching about masculinity within sexuality education. A third circle will review and consider research and curricular implications related to the issues of coercion/voluntarism/wantedness in sexual decision-making. A fourth circle may involve sharing resources

from cutting edge programs around the world. The expectation is that out of this collaborative process will emerge a shared follow-up plan for widening the dialogue on effective ways to bring lessons about gender into sexuality education.

Authors Note: We welcome correspondence from colleagues interested in discussing these issues, receiving sample copies of interesting curricula or lessons, and learning of relevant studies currently underway. For more information, please contact Michelle Skaer at mksaer@popcouncil.org.

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The author is an intern at the Population Council program in Gender, Family, and Development. The above article was adapted from a Population Council document by Nicole Haberland and Debbie Rogow.

ADDRESSING THE DISPROPORTIONATE BURDEN WOMEN FACE IN THE GLOBAL HIV/AIDS EPIDEMIC

In the international fight against HIV/AIDS, advocates have struggled to bring the needs of women and girls to center stage. In areas where the general population is—or is beginning to be—at high risk of HIV-infection, women and girls suffer disproportionate risk of infection. Advocates say that addressing the vulnerability of women and girls and providing them with appropriate services will not only alleviate the suffering of individual women but also curtail the pandemic at large.

Recognizing that gender inequalities are a linchpin in the HIV/AIDS pandemic, the United Nations Secretary-General’s Task Force on Women, Girls and HIV/AIDS in Southern Africa, studied the role of gender in the AIDS crisis in nine countries severely affected: Botswana, Malawi, Mozambique, Swaziland, South Africa, Namibia, Zambia, Lesotho, and Zimbabwe. In its recently released report, *Facing the Future Together*, the Task Force writes, “Gender inequality fuels HIV infection because many women and

girls cannot negotiate safer sex or turn down unwanted sex. The findings also demonstrate that HIV/AIDS deepens and exacerbates women’s poverty and inequality because it requires them to do more domestic labour as they care for the sick, the dying, and the orphaned.”

The Task Force sets out six areas requiring immediate action: HIV-prevention among girls and young women; girls’ education; violence against women and girls; property and inheritance rights; women and girls as care-givers; and access to care and treatment for women and girls. For each area, the report describes the situation in the studied countries and proposes specific ways to address the problems.

For the complete Report of the United Nations Secretary-General’s Task Force on Women, Girls and HIV/AIDS in Southern Africa: Facing the Future Together: <http://womenandaids.unaids.org/regional/docs/Report%20of%20SG%27%20s%20Task%20Force.pdf>.

THE PASSIVE/ACTIVE DIVIDE: WHAT THE VILLAGE IS TEACHING OUR CHILDREN ABOUT GENDER

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With the publication of *It Takes a Village and Other Lessons Children Teach Us* in 1996, Hillary Clinton helped put the African proverb “It takes a village to raise a child” on the tip of every tongue in America. When looking at gender roles, the village as a whole is often responsible for explicitly and implicitly teaching young people about what it means to be a boy or a girl, a man or a woman. Before we even know our own noses, we’ve been stealthily slipped into society’s gender paradigm. We continue to reinforce the gender roles that have been imposed on us by buying toys, clothes, and accessories that conform to what is considered to be a “cultural norm” and adopting behavior that is identified with these supposed norms.

For this article, I wanted to take a closer look at what the village really is teaching about this issue. Clearly it was time to conduct some serious research. I had to pick a village setting wherein I could observe the interaction of children and American culture—so I went to Wal-Mart.

Why pick a discount department store to observe this facet of American culture? Think about it: from the moment a pregnancy is confirmed or testing reveals the baby’s sex, this child’s gender roles will be continually reinforced by a string of purchases. Consider the baby color scheme: pink for girls, blue for boys, and mint green or yellow for mystery babies. Moreover, colors are reinforced with specific visual cues: trains and planes on blue clothing, flowers and bunnies on pink clothing. Toys for infants aren’t really separated by any gender preference (rather they are mainly made in primary colors), but then tiny babies don’t play with them too much; they are more interested in discovering toes and being fed.

I followed the sound of squealing happy children and found the toy department. There I observed that boys went right to the action figures and girls swarmed around the baby dolls. Even though a lot of the baby dolls can move and talk independently of the child, they’re not referred to as action figures—I suppose they’re more like passive-figures. You put them in strollers to walk, hold them in your arms to feed, and rock them to sleep. Action figures are different: they shoot arrows, propel grenades, punch their foes, and control the world.

And it wouldn’t be a toy department if I didn’t mention Barbie and G.I. Joe. G.I. Joe, with his chiseled face, camouflage dress, and assorted weaponry is the embodiment

of the action figure. This guy’s going places. And Barbie? Well, I think of Barbie as a sort of “object figure.” It doesn’t matter if she’s dressed as a lawyer or a prom queen; she’s just as passive as the baby doll. Standing in stiletto heels as pretty as a picture there isn’t much you can do with Barbie except, like a picture, look at her.

The end result of this passive/active paradigm, so the experts tell us, is that boys focus on finding solutions to problems and working in teams. While girls focus more on interpersonal relationships and working as individuals.

EASY CATEGORIES

Categorizing is a great tool. It keeps your music collection in order, reigns in even the most disorderly of closets, and can help you sort your socks. The whole point of organizing anything is to make life easier, so it’s just a natural assumption that putting men and women into distinct categories will make dealing with them easier as well.

Indeed, categorizing people according to their gender has been a cottage industry for millennia precisely because it has worked so well. Although women in Ancient Egypt are known to have been able to initiate divorces, hold property, and even testify on their own in court, their sphere of influence was clearly in the home. If we fast-forward to the Middle Ages there are plenty of women who, if independent and unmarried, most likely found themselves toasted in a woodpile for the witches they were believed to be. The Victorian ideal was the married woman as the angel of the home and model of domestic virtue; the single woman was powerless—she was politically, economically, and socially marginalized. After women left their homes in droves to support the United States war effort in the 1940s, they were promptly pushed back into them in the 1950s. And, though the 21st century sees many women exercising their freedom to choose the kinds of lives they will lead, we are still fighting a never-ending battle to diffuse the expectations that a patriarchal society demands of us.

The genie of personal fulfillment has been released and, perhaps for the first real time in history, a woman in our society can choose her own path in life. But political pundits, right-wing think tanks, religious zealots, anti-feminists, and other social commentators have a hard time accepting this. If anything, the pressure to squeeze that genie back into the bottle is more intense than ever and women feel it.

While this pressure takes many forms, perhaps nowhere is it more obvious than in the realm of male-female relationships. This is, after all, the easiest way to cram men and women into gender pigeonholes. If we believe that men and women are hard-wired into acting one way or another then social inequalities can be explained away, justified, and continually reinforced.

MEN ARE FROM WHERE?

In 1992, the human desire to solve the gender problem and solve it easily led to no less than a publishing phenomenon with the publication of *Men Are from Mars, Women Are from Venus: A Practical Guide for Improving Communication and Getting What You Want in Your Relationships*. Featured in magazines and given publicity by daytime host Oprah Winfrey, Dr. John Gray hit the mother lode with this guide to gender differences. The reason why men and women had such trouble communicating and nurturing their relationships is because they were from different planets—a metaphor designed to explain that we really are hard-wired to be fundamentally different.

At its core, *Mars and Venus* asserts that women need validation to be content within their relationships. Men, in this book, do the validating. Right away Gray capitalizes on the active/passive roles that have been assigned to gender roles for millennia. This is a model with which we are familiar, and that makes an easy solution for a complex problem seem not only appealing and within reach, but entirely legitimate.

Gray argues that men, as part of their *natural* tendencies, “value power, competency, efficiency, and achievement.” Their sense of self is defined primarily through their ability to achieve results. “They experience fulfillment,” he continues, “primarily through success and accomplishment.” Women, on the other hand, “value love, communication, beauty and relationships.” Indeed, Gray maintains that a woman’s sense of self is defined through her feelings and the quality of her relationship.

Having already established in previous chapters what he believes are the inherent behaviors of men and women, Gray confidently attempts in the third chapter to enlighten the reader on how men and women manage stress. By further elaborating on the active/passive control mechanism that is the foundation of his book, Gray tells us that stress makes “men...increasingly focused and withdrawn while women become increasingly overwhelmed and emotionally involved.” Notice that by focusing on his problems, a man takes a proactive stance. Women adopt a passive response by becoming overwhelmed. The implication here, of course, is that men can deal with problems and women cannot.

Tom and Mary, two Stepford hopefuls, having previously made their appearance as a married couple who got

lost on the way to a party because Tom wouldn’t ask for directions, again serve as exemplars of a typical evening encounter after hard day’s work. (It is interesting to note who is working.) We are told that when Tom arrives home, “he wants to relax and unwind by quietly reading the news. He is stressed by the unsolved problems of his day and finds relief in forgetting them.” Mary also wants to relax, by talking about the problems of her day.

In an attempt to deal with their problems, Gray tells us that “Tom *thinks* Mary talks too much [and] Mary *feels* ignored.” The words that are used are very important because it tells us about the players in this tale. Again, Tom is, of course being proactive. He is the initiator of his own thoughts and opinions. Mary is the passive recipient of her perceived reality.

Enamored with metaphor of going back to our so-called home planets in order to find out how our “ancestors” developed this gender-specific behavior, Gray tells us that a man faced with a perplexing dilemma “becomes very quiet and goes to his private cave to think about his problem, mulling it over to find a solution.” When a solution has been found he then emerges from his cave. Following Gray’s gender paradigm, a man actually enters his cave. He is independent. Self-reliant. Self-motivated.

But the ways of the woman are not so bold. Gray states that a woman’s ego is “dependent not on looking ‘competent,’ but rather on being in loving relationships.” To that end a woman will talk in great detail about her day and “openly share feelings of being overwhelmed, confused, hopeless, and exhausted.”

When men are in their caves, Gray argues that they are “incapable of giving a woman the attention and feeling that she normally receives and deserves. [Their minds] are preoccupied and they are powerless to release them.” This is clearly an example of powerlessness, but not because they are overwhelmed, confused, hopeless, or exhausted, but because they have *declared* that they are powerless. You see, a man’s powerlessness at such times fits perfectly into Gray’s gender paradigm because this is an active response to a problem, and thus the proper response to a man.

“To expect a man who is in his cave to instantly become open, responsive and loving,” Gray asserts, “is as unrealistic as expecting a woman who is upset to immediately calm down and make complete sense.” Just in case you can’t quite believe that sentence, he rephrases it so that it sounds even better: “It is a mistake to expect a man to always be in touch with his loving feelings as it is a mistake to expect a woman’s feeling to always be rational and logical?”

So what is Gray telling us here? Is it men who are always rational? Is an angry woman someone who is noth-

ing more than a shrieking harpy who makes no sense? This seems a bit farfetched as many men fly off the handle and scream when they are upset, as do many women.

That all individuals need time to themselves in which to sort out problems or just reflect on their lives is a given as far as I am concerned. Whether you call it a cave or just private time, all couples need to recognize that their partners may need time alone to sort out life's ever-present complexities. The problem then is not that a man or a woman might "cave," it is Gray's erroneous assessment of gender-based behavior.

Ultimately, the lesson the author would like readers to take away from this portion of the discussion is that when men have retreated to their caves, women should not take it so personally. "They [women] learned that this was not the time to have intimate conversations but a time to talk about problems with their friends or go shopping."

Putting the shopping comment aside, one must question if the author ever considered that perhaps the solution is not to convince women to live with his cave concept, but to get men to be more open with their problem solving?

NOT HELPFUL

"Silver bullet" solutions to complex problems make self-help books and videos bestsellers. The problem is that simplistic solutions to complex questions can easily mislead and are often dangerous. Gray's simplistic analysis of human communication may contain a few cells of common sense observation with which men and women can identify, but his solution is insidious. *Men Are from Mars, Women Are from Venus* is not do-it-yourself therapy, but a prescriptive manual utilizing "differences" to perpetuate essentialist notions of gender.

In the end, however, *Mars and Venus* is not about "differences." That men and women manifest variations in communication is hardly surprising given that we are socialized differently, but perpetuating stereotypical archetypes of what is thought to be inherently masculine and feminine is hardly a positive step forward. This book, then, is completely useless as a "fix," but its popularity is invaluable for what it tells us about ourselves as a society. Given the amount of press this book has received over its twelve-year existence, ask yourself: How far have we come in recognizing that men and women are equally feeling, equally rational, and equally deserving human beings?

WHERE HAS MARS & VENUS GOTTEN US?

It seems the village embraced the book's message wholeheartedly. The metaphor was spun into a dozen incarnations—the most disturbing of them being the publication of *Children are from Heaven* and *Mars and Venus in the Workplace*. The model of gender-specific behaviors in boys and girls was spun into accepting and embracing one another's differences, the active boy and passive girl lesson. In the workplace Gray told us that men focus on task-oriented communication and use language to "convey content." Women, according to Gray, also use language to express content, but because they tend to talk more than men, "using extra words to make a point causes them to be viewed as less competent than they really are."

The Mars/Venus metaphor went beyond Gray himself, however, and seemed to become part of the popular culture. Over the years, countless sitcom plots, movies, and plays like "Defending the Caveman" have revolved around the conceit that "gee, men and women sure are different." This metaphor-turned-societal-mantra seems to have become an excuse for bad behavior and utter lack of communication on the part of both sexes.

WHAT SHOULD THE VILLAGE DO?

As I observed the children in the toy department it occurred to me that, while we think we have come a long way as a society since the 19th century, it behooves us to examine this assumption very closely as it relates to gender. Has society truly evolved when our young children absorb popular culture and receive the message that men are active and women are passive, and that a woman's self is inherently tied to her romantic relationships? We are no longer physically dragging spinsters into the woodpile while we accuse them of turning people into newts, but the village needs to work much harder at being a safe place for women and men to be themselves.

In the end, maybe it's not so much about "embracing differences" or assigning gender traits to the color of baby clothes. Perhaps this is as much about acknowledging that boys and girls/men and women share more traits than society is willing to admit. Perhaps the role of the village is simply about endorsing the idea of choice. While we all have differences as human beings, biases and stereotypes based on gender must be understood to be not only groundless but just as divisive and nonproductive as racial prejudice.

EVERYTHING I DO, A MAN DOES

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**“Everyday I look in the mirror and wonder if I am normal, if I am man enough.
But I still don’t know what a man is.”**

—16-year old Latino Male (Los Angeles, CA)

Everyday many young men, perhaps older men as well, look in the mirror and ask themselves this same question. The question would not be hard to answer if young men felt supported and the messages they received about what a man is were clear and consistent. The answer would simply be: “Everything I do, a man does.”

What makes the question difficult to answer for many young men is that they are trying to conform to gender identities set by their families and society.

Young men are exposed to many messages from different sources that inform them about what it means to be a man. Parents and other adults weigh in to make sure that young men understand what it means to be a man. Social groups and broader associations have their own set of expectations of men. Society as a whole has a say in what men are supposed to do through the institutions and policies it adopts. And just in case a young man has any doubts about what a man is after receiving input from family, friends, and society, he can turn on the television, listen to music, or read magazines to help sort it all out and provide clarity. After all, if real men don’t exist in the media then where can they be found?

CONFLICTING FRAMEWORKS OF MANHOOD

Parents and caregivers often indicate that they want to raise their sons to be sensitive and empathetic, and to possess a comfort and willingness to share their feelings and emotions. However, many of these same adults want the young men in their charge to avoid being perceived as weak by other young men (presumably to avoid being teased and bullied), be assertive, and have strong leadership attributes. Whether young men are capable of navigating these diverse expectations is not in question—there are many examples of adult men who have done so successfully. The question is what becomes of those men who are not successful in achieving a balance between sensitivity and strength? Is there a Darwinian effect that makes men who are unable to balance these attributes extinct, or are they elevated to a level of emulation? Does it depend on whether they are

leaders lacking sensitivity or sensitive men lacking attributes of strength?

Outdated Messages. “Boys don’t play with dolls, tea sets, etc.” “Boys don’t wear pink.” “Boys don’t tattletale.” Although these may seem outdated to many adults today, these ideals survive because social groups successfully transfer these messages from generation to generation in what appears to be a greater consensus to keep them in place than to change them. Perhaps, society simply cannot decide what that change might look like.

As a consequence, boys live in social networks that inherit and follow norms that determine both acceptable behaviors and the consequences for not behaving that way. And these norms have not changed too much from what we knew as children. By the time a boy reaches adolescence, just at the time he starts to define what kind of man he wishes to be, he has a framework of manhood under which to operate. Presumably, with all the input he has received, this updated definition of manhood will be a bit narrower than the ones that he started with when he was born.

For some people, questions about these frameworks pit the concept of nature against that of nurture, perhaps as a way to say that there are some things that we simply cannot change. The construction of the debate in such a way, however, ignores the fact that we can do better by our boys—much, much better.

INTERNALIZED MESSAGES

If you ask, young men will tell you what a successful man looks like, what he possesses, and a range of activities or professions in which successful men engage. Likewise, they can tell you the opposite—what a loser looks like, what he possesses, and the range of activities or jobs he pursues. These images can forge a definition of manhood within the

mind of a young man that can be very hard to alter once it has been internalized.

Many men, if not most, are successful in navigating the maze of adolescent identity-seeking and achieving a male identity that is less constricted and more balanced than their father's was. But do they achieve this balance because of the input they receive from family and society, or in spite of it?

We cannot determine with confidence or certainty whether a boy that internalizes the idea that boys do not play with dolls also internalizes the concept that nurturing and caring for children is for girls. There are abundant examples of men who were raised with this message who are engaged and nurture children as fathers, teachers, or mentors. There are also sufficient examples of men who abandon their nurturing role as fathers and caregivers because they are not connected to the reality that they too have a nurturing aspect. Lost in the lessons they learned was that nurturing is not gender specific *and* that there is absolutely nothing wrong with boys who play with dolls.

Boys Will Be Boys. Another message that males often hear is the refrain of “boys will be boys.” It is most often used to dismiss actions or behaviors that are challenging or seem impossible to change. As if to say that their gender excuses their behavior.

Rarely is this refrain sung when a group of boys combine efforts to beautify or contribute to their community. When was the last time we heard someone say, *“I saw a group of young men volunteering their time to paint over graffiti in the park. You know, boys will be boys.”* The phrase is most often used when a young man or a group of young men do something that they should have known not to do.

Highlighting the potential negative attributes that young men confront as they transition through adolescence is often done in an alarming way to incite fear and create a crisis. Unfortunately, some have already succeeded in creating suspicion and fear of boys, as is evidenced by zero tolerance policies directed at boys in schools and in juvenile laws.

How are we (family, friends, and society) serving the interest of boys by excusing what they do because they are boys? This standard does not serve young men well.

Nonetheless, this standard has a profound impact in how we engage young men about a broad range of topics, including sexual health information and education. The sexual health information afforded to young men by families, schools, and health providers touches on an aspect that young men believe is central to their concept of manhood—sex. And how we address this topic will affect a young man's sexual behavior.

Is “boys will be boys” the expression we will fall back on to explain why they act out their sexual behaviors and impulses?

CHANGING SEXUAL “NORMS”

The topics within sexual health contain issues that smack right into the “norms” that social groups set about manhood. How can the topic of sexual identity be addressed without the issue of homophobia being dealt with openly? How can we reduce the number of sexual partners a young man will have when the goal for some young men is to “get as much as you can” in order to prove he is a man? How can we construct a common language that allows young men to set sexual limits and respect the limits of others when they have not been engaged in that dialogue?

Although there are noble efforts by individuals and programs to engage young men in a substantive dialogue about gender and sexual health, greater commitment is needed at the national level to affect a truly substantive change. Of course, we must ask change toward what end?

Perhaps the change we should seek is one that allows young men to see beyond the norms they have inherited and understand how some outdated norms affect the professions they are attracted to, the type of partnerships they create with others, and whether they will be able to find fulfillment in their lives by expressing who they are. Perhaps we simply want to reduce the harm created when young men act out on their homophobic fears and harass, injure, or even murder to prove to others that they are not gay but real men. Maybe we want to increase the amount of information among young people about the pleasures *and* responsibilities that accompany a sexually active life. Or maybe we want to establish a goal that substitutes graduating from high school for becoming sexually active as the accepted rite of passage from boy to man. Some change is necessary, but where do we begin?

Steps We Can Take. One start might be to engage parents and caregivers and to communicate the crucial roles they have in supporting the young men in their life. If the goal is to raise a boy that can share what he feels then he must feel validated and secure when he actually does. He should not be told “don't be a sissy” or that “boys don't cry” when he experiences physical or emotional pain. If the goal is to instill confidence and positive self regard then exposing a boy to a broad range of activities so that he may uncover talents and master skills is important. Irrespective of the goals that adults have for boys and young men, parents and caregivers remain the critical link in a young man's ability to achieve his personal goals.

In addition, all efforts to educate boys and young men about their sexual health should contain more than medically accurate information. Parents and educators should create a dialogue with boys and young men and ask the questions that rarely get asked, such as:

What do you think being a boy means?
What does it mean to be a man?
What kind of partnerships do you see for yourself?
Do you think you'll ever have children? When?
How many?
What role does sex play in your definition of being a man?

The answers young men have to these and similar questions are a window to the attitudes that they have about themselves and others. If these questions are asked within a supportive environment, young men will have the ability to examine the norms that they have inherited and determine which norms serve them well and which norms should be retired.

ADDRESSING SEXUAL HEALTH

On more than one occasion I have had the privilege of working with programs that provide sexual health education to young men. In fact, these programs do much more than deliver sexual health information, they address broader concepts such as relationships and manhood. In some of these interactions, I have heard young men and their parents share how their attitudes about themselves have changed since they were exposed to new ideas during group discussions.

Working With Young Men. In San Diego, for example, a young man shared his experience in the program with me. He remembered talking about the range of emotions that men have and the idea that crying is not a sign of weakness for men. The first time he heard this he was in utter disbelief and rejected the idea that it is okay for men to cry. However, he slowly began to notice that men around him were in fact crying, he noticed that men in his family cried and he saw a mentor cry when speaking about his own children. Eventually he too started to cry when he was happy, sad, or in pain. He explained that “no one put me down when I cried, so now I cry if I feel like it.” When I asked him where he learned that young men should not cry, he responded, “I have been trying to figure that out since I started the program.” He added, “But if I ever have a son I will make sure that he knows that it is okay for boys and dads to cry.” Some adult men have yet to discover what this young 15-year old man has learned.

In another instance, a young man participating in a program in northern California indicated that he was constantly worried that he truly didn't know what it meant to be a man. He explained that his mother had raised him and was his role model, but “deep down inside I knew she was not a guy.” Although he knew that what she was teaching him was good, he wondered if it was the same as what other guys were learning from their dads. “I was faking it and thought others would find me out,” he said. “I would listen to other guys and see if

they would share what their dads had taught them.”

Through the program, however, he discovered that he wasn't “faking it” and that the concepts of manhood that his mother had exposed him to were exactly the ones that he should attempt to live by. He also learned that other young men in the program, even those who had two parents, felt the same way he did, still “we never talked about it.” When I asked him why he and his friends didn't talk about what it meant to be a man he said, “I guess we were afraid because none of us knew for sure what that meant.”

Working With Parents and Caregivers. Similar issues come up when I work with the parents and caregivers of adolescent boys. Both mothers and fathers indicate that as their sons entered puberty, conversations and communication became less frequent and that they were concerned about what their sons were learning about manhood.

One father told me that when he was growing up in rural Mexico, he went to school and then worked with his father in the afternoon, everyday except Sunday. This was his reality from boyhood through puberty and until the day he left Mexico to seek his fortune in the United States. He explained that later in life he came to understand that working beside his father he had learned through example and subtle guidance what it meant to be a father and a man. He understood, however, that he did not have the opportunity to teach his son in the same manner. At the same time, he wondered whether what he learned about being a man from his father was valid for his son, who was growing up in the United States. All of the parents in the group nodded when he said this because they too were immigrants and shared his doubts.

In response, the program director indicated that in addition to sexual health education, the program had a cultural aspect that reinforced the positive values that these Latino families were trying to convey to their sons. He also explained that the program encouraged young men to dialogue with their parents about what it was like to grow up in a different place and time.

When the parents were asked how they felt about a program that was addressing sexual health issues, a topic that is often thought to be taboo in Latino families, one mother indicated her appreciation for the program. She explained that neither she nor her husband were exposed to more than “the basics” surrounding their reproductive health and that they felt ill equipped to address the topic of sexual health with their children. Once again most of the parents nodded, indicating that they felt the same way.

WE CAN DO MORE

At recent gatherings of young men from California who represented nearly 30 communities that had higher-than-average teen pregnancy rates, I learned that working with

young men around sexual health issues really does matter and that things are changing for some young men.

The young men attending the meetings conducted and participated in workshops to share what they had learned, or in some instances re-learned, about sexual health, positive leadership, relationships, fatherhood, and manhood. Had their parents been present, they would have been proud to see that their sons were capable of being not only students but teachers as well. They would have also been impressed with the fact that these young men were well on their way to understanding that being a man means nurturing your potential so that you can contribute positively to your family and community, that relationships based on mutual respect and affection are the most fruitful, and that being a man has little to do with the number of sexual partners you have and more to do with the way you live your life.

These focused efforts to engage boys in a discussion about who they are, what manhood means to them, and their sexual health are needed, but the fact remains that we wait much too long to start these discussions. The delay may be caused by the unfounded fear that talking about these issues will wake young men to the reality that they are sexual beings. Meanwhile magazines and media are unrelenting in their commitment to “sex sells” and “boys will be boys” messages that are persistent and often unchecked.

Is it their responsibility to stop using sex as a tool to sell products or a false image of manhood? Or, is it our responsibility to begin the dialogue with the young men in our lives about sex, sexual health, and manhood and to help them reconcile the concepts of manhood that the media offers with what families want for their sons?

There is much to learn and even more that must be done to help young men navigate through adolescence. There will likely be agreement about some norms that are generally perceived as “good,” such as nurturing responsibility, and some norms that are thought to be “bad,” such as the association between sexual promiscuity and manhood. At the same time there may also be acrimonious debate on other issues such as how comprehensive sexual health education should be, what young men should learn about sexual orientation, what constitutes a family, and what role men play in families. This debate is healthy and necessary but the fact remains that boys and young men are waiting for us to help them figure all of this out.

Our goal must be to help those young men who stare at themselves in the mirror and wonder whether they are normal arrive at an answer that validates who they are and allows them to live happy and fruitful lives and construct meaningful relationships. If we succeed in this endeavor we will see young men develop and share their talents with their family and community, and we will all be the richer for it.

2005–2006 SEXUALITY AND POLICY POSTDOCTORAL FELLOWSHIP

The Sexuality Research Fellowship Program announces its 2005–2006 Sexuality and Policy Postdoctoral Fellowship competition which will award fellowships for research on sexuality and policy analysis, policy development and/or implementation, relevant to local, state, or national concerns.

ELIGIBILITY: Applicants who already hold the Ph.D. or its equivalent and who have received the Ph.D. degree no more than 10 years prior to the date of the deadline submission. Applicants cannot already be tenured, although they can occupy at the time of applying, a tenure track position. Policymakers, advocates, service providers, and program administrators who conduct research are also invited to apply. Research must be conducted in the United States.

RESEARCH CONSULTANT: Fellows should submit applications in partnership with another scholar/professional who will provide substantive expertise to the Fellow in research methodology/ design and/or policy, and provide overall assistance and advice in carrying out the research plan. The Research Consultant shall hold a doctoral degree from a U.S. university or from an accredited foreign univer-

sity, and shall demonstrate commitment to human sexuality research through his/her previous publication record and research experience.

STIPEND: One year fellowship awards will be given to six Postdoctoral Fellows; stipends will be based on the awardee’s previous year’s salary and professional standing, for a minimum of \$50,000 and up to \$60,000 to cover research costs and living expenses. For each fellowship awarded, an additional \$5,000 will be awarded to the Fellow’s Research Consultant, in compensation for his/her contribution to the research partnership.

APPLICATIONS: More detailed applications information can be found at: www.ssrc.org/fellowships/sexuality All online forms must be completed and electronically submitted by 9 PM Eastern Standard Time (U.S.), December 11th, 2004. The full application packet must be received at the SSRC by December 15, 2004.

CONTACT THE SRFP: Diane di Mauro, Program Director/ Lissa Gundlach at: srpf@ssrc.org (212) 377-2700 ext. 518

FAST GIRLS:
TEENAGE TRIBES AND THE MYTH OF THE SLUT

Emily White

Maybe this story begins in Portland, Oregon, in the fall of 1980, when Anna Thomas enters Washington High as a freshman. She's one unit in a shipment of 250 freshman girls. She's one name on a list.

Washington is a public school with a population of about two thousand students, mostly upper-middle-class white kids, except for those few bused in from minority neighborhoods, or the random few who, through some accident of zoning have ended up among kids of a different economic tribe. Anna's presence at Washington is part of this accident of zoning. Though she lives with her mom in an apartment in the same zip code as the rich kids, she is by no means a rich kid. She can't afford the clothes most girls at Washington wear. She wears knockoff versions of designer jeans and she eats government-assisted lunches. In the midst of a predominantly white student body she's half Filipina. She's exotic: her skin vibrates with the color of another world. Add to this the fact that her breasts have developed much quicker than most girls', that her mom is a waitress, that she doesn't have many girlfriends, and Anna's presence is a recipe for scandal.

Kids start spreading rumors about Anna on the first day of school, and by winter she's infamous. She is now called Anna Wanna. Anna wants every guy she can touch, Anna will do anything, Anna is the biggest slut ever born.

The rumors surrounding Anna are as elaborate and meticulous as fairy tales. Reliable sources claim she has lain down with boys or men in an infinite number of places: graveyards, the empty lot where kids throw kegers on weekends, some guy's basement, some guy's car. Ask her to go into a closet or a bathroom and pull her shirt off and she'll do it—she'll pull herself apart at the slightest provocation. She'll lie on her back saying, "I love, you" no matter who the guy is or where he has come from.

According to what everyone says and writes on the walls, Anna is a monster of desire, a freak of nature, an aberration. No one knows her very well, but the idea of her takes up a lot of space. When she walks down the hall, a murmur takes shape, irrepressible in the throats of all of the kids. Sometimes one distinct voice emerges, shouting over the tide of whispers: "*Whore! Anna Wanna is a whore!*"

For the most part Anna keeps her cool. She continues her progress through the hall, staring straight ahead. Occasionally she swirls around, and yells, "*Fuck you,*" and then there's the inevitable comeback: "*I already fucked you!*" After a confrontation like this her face reddens, and she looks as if she's on the verge—as if at any moment she might dissolve, her feet might curl up, like the witch killed by the flying house in *The Wizard of Oz*.

From where I sit her hair seems darker than midnight. I am part of the same army of freshman girls Anna belongs to but unlike Anna I'm not the kind of girl who attracts attention. Even when you look right at me, it's easy to look past me. I'm a well-behaved, unobtrusive goody-goody: on the honor roll but not too high up, involved in a Save the Whales club, one or two friends, pushing every symptom of rage or desire or wiled ambition down past the throat, down past the heart, all the way down into my guts.

I watch Anna swirl around and battle the catcalls and the predators; I find it difficult to take my eyes off her. Maybe because of my particular kind of invisibility, I become fascinated with Anna's infamy—the stories of sex and abandon and inappropriate kisses. When she's absent, which is often, school is far more boring than usual.

Long after high school has ended, I still dream about her. Like a kid obsessed in the hallway, I can't let go of questions of Anna and her true nature. Through the lens of memory, she becomes representative of a more generalized sense of chaos—moments when the good, orderly world you thought you knew falls away and a cruel reality begins to manifest itself. Anna and the rumors surrounding her seem to hold a clue to the past: Why did we want to talk this way? Why did we so effortlessly and automatically create a "slut," almost as if she were creating us? And why did we need to banish certain girls, push them out beyond the pale?

Sometimes in those conversations about high school that people in their twenties and thirties engage in more and more frequently, I'd bring up the question of the slut. Invariably, my Anna stories would be countered by stories of other versions of her: other girls whose alleged insatiable sexual appetites scandalized their school, girls whose bodies had no boundaries.

One friend remembers Donuthole, the girl everyone said had been completely worn out from so much sex. A guy remembers Blow Job Brenda and the way she was supposed to have invited the wrestling team home with her to be serviced. At Thanksgiving, every member of my family has some story about the “loose” girls, with the exception of my sister’s quiet boyfriend, who can’t bring himself to tell the story. He simply says, “Oh yes, Sharon Suttelmeier,” and nods gravely, mysteriously.

Gathering more and more anecdotes, I began to see similarities in the stories of the high school slut. Generally she was remembered by her first and last name and by her nicknames; she was remembered immediately, and often with regret; the stories surrounding her often focused on images of oral sex with multiple partners; and very few who participated in ostracizing her knew what had become of her. Often her fate after high school took on the sheen of stereotype. “I heard she was living in a basement with a coke dealer,” one friend told me. Funny, I’d heard almost the exact same story about Anna Wanna.

It became clear to me that the story I had attributed to Anna was actually rooted somewhere in the collective unconscious. Like an urban legend, the slut story proved remarkably similar across time and geography—a sixty-four-year-old woman and a thirteen-year-old boy I spoke with told virtually the same story of a girl who would give blow jobs for cigarettes. While the girls in the stories had different names and nicknames, and while the rumors often varied in their specifics, the myth of the promiscuous female remained constant. It was as reliable as an old wives’ tale, as irrefragable as a cliché. It was a story with a specific cadence, identifiable themes, and a clear moral: Don’t end up here. Don’t end up in the basement like she did.

I began to see that the promiscuous high school girl, isolated from the kids in the hallway, is actually part of a continuum. Bring her up among people who don’t know one another well, and instantly everyone finds themselves on common ground. Bring her up at Thanksgiving dinner, and people break out of their dull weather-talk. “Slut” is a word everyone knows, a word that always provokes a response. The word’s provocative power and the continued vitality of the myth behind the word imply that the slut is not a monster but a sign: she’s a window into the unconscious, a way of deciphering how the culture dreams of women, even if we’ve learned civilized people shouldn’t have such dreams. Like Dante’s Virgil, she’s the girl who can lead us into the underworld....

THE SLUT ARCHETYPE

Listening to the girls’ voices, transcribing the tapes in a cold office, I was presented again and again with variations of the same figure. After hearing a dozen girls tell essentially the

same story, I realized that at the heart of these specific and isolated testimonies, a kind of cultural recurring dream was at work. Girl by girl, an identical type gained ascendancy, a universal girl who’s gone too far, who can’t come back, who has sinned beyond the periphery of redemption.

The high school slut has all the characteristics of a Jungian archetype. Rooted in the collective unconscious, the slut is an idea the mind carries within it and grafts on to the world. She is a projection of ancient dreams. When slut rumors occur, when the story is told and the roles are assigned, the narrative is always a reenactment, an echo. For kids who take part in spreading rumors, they believe in her unquestioningly, just as they believe their own dreams when they are inside of them.

In the transcripts of my interviews, between the lines of these particular girls’ autobiographies, I could see the outlines of the archetype—it shifted and changed, but it was always present in some form. The slut archetype overpowered the self like a dream or a migraine. The girls in the rumors, the girl people saw when they looked at the slut, was part of an unconscious order that existed beyond my interview subjects, beyond their own histories. Becoming the slut these girls saw reality edged out by a myth that reached back into the past and belonged not only to high school but to what Jung would call humankind.

As Jung defined the term, an archetype is a category of the unconscious. We fall into these categories and their associated images involuntarily. We just start telling stories or dreaming dreams, with no idea where they’re coming from or why we need them so desperately. Jung used the idea of archetypes to explain the way humankind returns to the same mythic structures. In his blustery, poetic texts he created an unforgettable image of the mind held captive by timeless visions. Reading Jung, one is tempted to believe that nothing new had ever happened, that the world is made up of a few inescapable tales and we participate in them automatically gripped by the hand of destiny, maybe the hand of God.

Jung was writing in the 1930s and 1940s, and although his texts attempt a tone of universal objectivity, of distance and authority, they’re awash in a subjective and personal misogyny that sometimes makes his books unreadable to an educated feminist audience. Jung’s sexism has been well documented by feminist critics. Nevertheless, despite his virtual inability to consider the “woman question” with any kind of insight, Jung was a genius. And as with any true genius, once the basic lessons of his work are comprehended, it is hard to shake them. In considering the power of the slut myth, I continually returned to Jung and his notion of archetypes. Again and again it struck me that the slut lived outside of time as Jung’s archetypes do, and if the slut were ever to cease to

exist, it would take nothing less than a seismic shift in the imagination of the world, a shift felt all the way down in the deepest layers of the collective unconscious.

In *Archetypes and the Collective Unconscious*, Jung described archetypes as “universal images that have existed since the remotest times.” These images can be tracked through history in “certain continuities or modulations of the same figure.” Archetypes form and delineate the subconscious and manipulate the conscious mind. They are like messages from an underground world, subliminal yearnings. For Jung, every image in a dream is a manifestation or extension of self; conversely, the self is always caught in a dream, and one is never in full possession of the self because inexplicable images unravel the self’s edges, making self-possession unattainable.

At the Calhoun High pep assembly, when the kids whisper into one another’s ear, passing the rumor down the bleacher, they’re participating in a communal, shared process. They’re trying to free themselves of their own singularity. The rumor is a form of verbal and even physical connection: the cupped hand on your ear during the whisper, the way people come close when passing it on. It’s a bond that seems vital even if it is only transitory. When the command is uttered, “Pass it on,” it’s assumed the person receiving the command will cooperate—there is an implicit faith that the kid who hears it next will understand the significance of the rumor and understand why it should not be questioned or stopped. Taking part in these whispering campaigns, kids feel like they belong. They’re swept along by the crowd, and the crowd moves them out of the isolation of the self.

The reassuring quality of slut rumors and of archetypes in general is that they’re forms of thought that seem to come from beyond the self and eclipse it. You want to belong to the crowd because you want to be rescued—from loneliness, from the fear of the day when there will be no one there, no one to pass it on to, no one coming toward you with news you need to know.

Jung wrote about the ways religious tales of heaven and hell resemble one another from faith to faith across the world. He believed the idea of God moved across history, manifesting as different myths, threading the past together, making a pattern where there was none before. Like religious seekers, the kids in high school want to make sense of the chaos of reality. They tell tales that populations have been telling for centuries, that divide up the world into sinners and saints, the cursed and the blessed.

The characters in high school myths, like the various gods and goddesses of the past, are clearly defined and embody distinct human traits. The “jock,” the “cheerleader,” the “nerd”—all these types can be effortlessly evoked in high school conversations, and it is clear what each one means. I remember learning that an old friend had been part of prom court in high school. “Oh, you were part of prom court?” we asked, suspicious, certain this had deep-seated implication about his character and his ingratiation in the power structures of the larger world.

The “prom court attendant” is part of a powerful category. What’s interesting about the slut as a category is (1) the way she is both powerful and powerless and (2) the way she is essentially a category of one. She in many ways defies the clear-cut systems of meaning within the school’s civilization; she blurs the boundaries; she is the girl everyone despises but also the girl everyone remembers.

To become the slut is not to be associated with a group or a tribe; rather, it is to be singled out. In this way the slut as a figure is truly mythic—in the sense that specific mythical gods and goddesses embody specific human destinies. Like a character in a myth, the slut is a representative, a vessel of meaning a messenger from an underground world of sex. The slut is never diluted by the presences of a crowd. Even if they had a group of girlfriends, the girls I interviewed always felt they had it harder than the other females around them.

Slut rumors hinge on the fear of female sexuality and its mystery; they evoke fear of the woman with a hole at the center of her body that is infinite, the black hole of feminine space into which a man could disappear. By turning one girl into the slut among them, the kids try to reassure themselves that they are on the right side of fate: They are good while she is evil. They are safe while she is unsafe. They have the right kind of sexual desire while she has the wrong kind. In the haziness of sexual awakening, she is a clearly recognizable, boldly drawn cartoon. Like in a monster movie, the slut appears in naïve narratives of sex at a pivotal point—just when kids might be wondering what “too much” sex might mean and what a girl who wants too much sex might look like.

What is so monstrous about a sex-crazed girl? This is perhaps the question at the heart of the whole slut story.

Fast Girls: Teenage Tribes and the Myth of the Slut, by Emily White, published by Simon & Schuster, 2002. Excerpted with permission.

ANNOTATED BIBLIOGRAPHY: ADOLESCENT SEXUALITY

Educators, policymakers, researchers, and other professionals need current and accurate information about adolescent sexuality in order to design sexual health curricula and programs, advocate for sound public health policies, and develop new research projects.

This annotated bibliography presents a cross-section of available resources on adolescent sexuality. It includes books, reports, and studies that examine many aspects of adolescent sexuality including sexual development, behavior, attitudes, and beliefs. Readers are encouraged to seek additional resources in bookstores and libraries as well as by contacting the organizations listed at the end of this bibliography.

All of the books and reports listed are available for use at SIECUS' Mary S. Calderone Library. Each annotation also contains contact and price information (not including shipping and handling). SIECUS sells and distributes only its own materials.

This bibliography was compiled by Amy Levine, M.A., SIECUS Librarian, and updated by Jennie Correia, M.S., SIECUS Associate Librarian.

* *These books were included in SIECUS' previous Annotated Bibliography on Adolescent Sexuality and are still considered relevant and timely.*

BOOKS

Adolescent Romantic Relations and Sexual Behavior

Paul Florsheim, Editor

This edited volume presents a variety of theoretical approaches to, and data illustrative of, the romantic and sexual relationships of adolescents. A total of sixteen original studies are presented in the monograph, connecting theoretical research with practical implications and suggestions for clinical and educational applications.

2003; \$39.95; ISBN 0805838309;

Lawrence Erlbaum Associates, Inc.

Dilemmas of Desire: Teenage Girls Talk about Sexuality

Deborah L. Tolman

This book conveys the findings from in-depth interviews of 30 urban and suburban teenage girls on their experiences of sexual desire. The author considers teenage girls' desire a significant entity, a fundamental element of girls' self-identity, and a valid source of information about the inter-related social world that they inhabit. As a result, the monograph explores the subjectivity of adolescent females by analyzing how they describe and understand their own experiences of sexual desire.

2002; \$26.95; ISBN 0674008952;

Harvard University Press

Dubious Conceptions: The Politics of Teenage Pregnancy*

Kristin Luker

This book combines historical information, statistics, and personal narratives to paint a picture of teenage mothers in America today. It examines the important roles that race/ethnicity and socioeconomic status play in teenage pregnancy. It also shows how teen pregnancy rates are influenced by politics.

1997; \$14.95; ISBN 0674217039;

Harvard University Press

Fast Girls: Teenage Tribes and the Myth of the Slut

Emily White

This monograph considers the universal appearance of the "slut" in American high schools. The author posits that the slut functions as an important archetypal representation of our conflicting thoughts on burgeoning feminine sexuality. Through a series of interviews and correspondence with over 100 women across the country whose high school experiences were defined by having been labeled as sluts, common characteristics of the origin and development of the archetype are explored, as are the role and machinations of rumor and gossip in the creation of "reputation."

2002; \$22.00; ISBN 0684867400;

Simon & Schuster

Harmful to Minors: The Perils of Protecting Children from Sex

Judith Levine

This controversial book combines interviews with young people and their parents, headline news stories, classroom and clinic visits, and an investigation into the historical development of attitudes towards young people and sex in an attempt to debunk certain dominant assumptions about the dangers that sexuality poses for youth. "The sexual politics of fear" are examined in their varying forms, including sexuality education, criminal and reproductive law, censorship, and the media.

2002; \$25.95; ISBN 0816640068;

University of Minnesota Press

The HIV Challenge: Prevention Education for Young People, 2nd Edition*

Marcia Quackenbush, Kay Clark, and Mary Nelson, Editors

This book is intended to help individuals design, implement, and evaluate successful HIV-prevention education programs. Topics include "Real People, the Real World, and a Real Disease," "Real Learning: What Works?," "The Youth Connection: Where Does It Happen?," "In the Classroom: Students Need to Know," "Facing the Issues: Controversy and HIV Education," "Many Cultures, One Goal: HIV Prevention," and "Exceptional Circumstances, Additional Risks."

1995; \$29.95; ISBN 1560713631;

ETR Associates

Lesbian & Gay Youth: Care & Counseling*

*Caitlin Ryan, M.S.W., A.C.S.W.
Donna Futterman, M.D.*

This book discusses the care, counseling, and support that lesbian and gay youth need. Intended for providers, advocates, and parents, it offers specific guidelines for care and guidance on how to approach sensitive topics including sexual behavior, substance abuse, and suicide. It also includes a section of reviewed literature that will interest researchers, scholars, and general readers. 1998; \$22.50; ISBN 0231111916; Columbia University Press

Not in Front of the Children: "Indecency," Censorship, and the Innocence of Youth

Marjorie Heins

This book investigates the origin of the assumption that children and adolescents must be protected from sexual and "indecent" information that might harm their development. It examines the history of regulation for the "protection" of youths' innocence and discusses the numerous local and supreme court trials concerning censorship in the arts and mass media, obscenity laws, sexuality education, and television and Internet filters. 2002; \$15.00; ISBN 0809073994; Farrar, Straus and Giroux

Puberty, Sexuality, and the Self: Girls and Boys at Adolescence*

Karin A. Martin

The author interviews adolescents for this book to examine how they build their sense of self within the context of puberty and sexuality. Chapters include "Adolescent Bodies and Sexuality," "My Hair Is My Accomplishment," "I Couldn't Ever Picture Myself Having Sex," and "You Just Have to Be True to Yourself." 1996; \$18.99; ISBN 0415914256; Routledge

Queer Kids: The Challenges and Promise for Lesbian, Gay, and Bisexual Youth

Robert E. Owens, Jr., Ph.D.

This book consists of hundreds of stories of young people trying to define themselves sexually and emotionally in a society of judgment, stereotypes, anger, and expectation. Chapters include "Who Are Queer Kids?," "Coming Out of the Closet?," "Challenges for Queer Kids," "The Special Problems of Schools," "Addressing the Needs of Queer Kids," and "Parental Acceptance." 1998; \$24.95; ISBN 1560239298; The Haworth Press, Inc.

The Scapegoat Generation: America's War on Adolescents*

Mike A. Males

This book reviews statistics and findings that debunk myths about adolescents. The author maintains that adolescents are the scapegoats for a society that is not dealing with issues that need to be addressed. 1996; \$13.46; ISBN 1567510809; Common Courage Press

School Experiences of Gay and Lesbian Youth: The Invisible Minority*

Mary B. Harris, Ph.D., Editor

With the use of both qualitative and quantitative research as well as commentaries on the personal experiences of lesbian and gay youth in the classroom, this book reflects on the lives, the challenges, and the spirit of young people who are lesbian and gay. It is a useful resource for professional and lay people who are concerned about quality education for sexual minority youth. 1998; \$17.95; ISBN 1560231092; The Haworth Press

Sex and Sexuality among New York's Puerto Rican Youth

Marysol Asencio

This book explores the sexual experiences of the most rapidly growing ethnic minority group in the United States through a study of second-generation Puerto Rican adolescents in New York. The study aims to understand the beliefs about and practices around sexuality that influence Puerto Rican adolescents' ability to practice safer sex. The author relays first-person accounts regarding sexuality and related social constructs, examining the impact of class, culture, and acculturation on sexual attitudes and behaviors. 2002; \$49.95; ISBN 1588260739; Lynne Rienner Publishers

The Sex Lives of Teenagers: Revealing the Secret World of Adolescent Boys and Girls

Lynn Ponton

This book recounts the conversations between therapist and adolescents about sexuality and their feelings, desires, fantasies, and expectations. The voices of parents attempting to come to terms with their children's emerging sexual identities also appear in this book. Topics include pregnancy, abortion, masturbation, sexual orientation, Internet dating, gender roles, HIV/AIDS, and drugs. 2000; \$13.00; ISBN 0452282608; Penguin Group (USA) Inc.

Sexual Abuse of Children and Adolescents*

William E. Prendergast

This book is intended as a guide to help parents, teachers, and counselors prevent sexual abuse of children and adolescents. It includes information about abusers, those that are abused, prevention, recognition, and treatment. A parents' checklist, glossary, and index are also included. 1996; \$29.95; ISBN 0826408923; Continuum International Publishing Group

Sexual Teens, Sexual Media: Investigating Media's Influence on Adolescent Sexuality

Jane D. Brown, Jeanne R. Steele, and Kim Walsh-Childers, Editors

This edited collection explores the sexual content of U.S. mass media and the significant roles the media play in adolescents' sexual lives. Contributors address the topic of sexuality broadly, including evidence not only about physical sex acts, but also about the role the media play in the development of gender roles, standards of beauty, courtship, and relationship norms. 2002; \$36.00; ISBN 0805834907; Lawrence Erlbaum Associates, Inc.

Teaching Sex: The Shaping of Adolescence in the 20th Century

Jeffrey P. Moran

This book assesses the impact of shifting values and politics on the development of sexuality education in the schools over the last 100 years. In this broad cultural inquiry, the evolution of the concept of the "sexual adolescent" is explored, as are issues regarding the regulation of sexuality, sexual revolutions and liberalism, and social reform. 2000; \$27.95; ISBN 067400227X; Harvard University Press

Troubling Intersections of Race and Sexuality: Queer Students of Color and Anti-Oppressive Education

Kevin K. Kumashiro, Editor

Through autobiographical accounts as well as qualitative and quantitative research on gay, lesbian, and bisexual students of different racial backgrounds, this book offers theoretical insights and educational strategies for those committed to bringing about change. Essays include "Undressing the Normal: Community Efforts for Queer Asian and Asian American Youth;" "Adolescent Sexual Orientation, Race and Ethnicity, and School Environments: A National Study of Sexual Minority Youth of Color;" and "When Fitting in Isn't an Option, or, Why Black Queer Males at a California High School Stay Away from Project 10." 2001; \$26.95; ISBN 0742501906; Rowman & Littlefield Publishers, Inc.

We Don't Exactly Get the Welcome Wagon: The Experience of Gay and Lesbian Adolescents in Child Welfare Systems*

Gerald P. Mallon

This book focuses on 54 individuals who grew up in out-of-home child welfare centers. They discuss the hardships they encountered when staff, foster families, or other children discovered they were gay or lesbian. The stories stress the importance of creating comfortable living arrangements for all children.

1998; \$23.50; ISBN 0231104553; Columbia University Press

Working with Sexually Abusive Adolescents*

Masud S. Hoghughli, Surya R. Bhate, and Finlay Graham, Editors

This book gives an overview of the key factors involved in working with adolescent sex offenders. Chapters include "Sexual Abuse by Adolescents," "Cognitive-Based Practice with Sexually Abused Adolescents," "Relapse Prevention," and "Professional Reports on Abusive Adolescents."

1997; \$26.50; ISBN 080397759X; SAGE Publications

DIRECTORIES, REPORTS, AND STUDIES

14 & Younger: The Sexual Behavior of Young Adolescents

Bill Albert, Sarah Brown, and Christine M. Flanigan, Editors

This report contains seven papers based on six different sets of data on young adolescents ages 12 to 14. It provides information on topics such as sexual activity, pregnancy rates, contraceptive use, dating patterns, and communication with their parents about sexuality related issues. A summary is included.

2003; \$15; ISBN 15867104501; The National Campaign to Prevent Teen Pregnancy

America's Adolescents: Are They Healthy?

Elizabeth M. Ozer, Claire D. Brindis, Susan G. Millstein, David K. Knopf, and Charles E. Irwin, Jr.

This monograph provides an overview of the health status of adolescents. The report includes data on sexual activity, contraception and condom use, pregnancy, and STDs.

2003; Free; The National Adolescent Health Information Center

Can More Progress Be Made? Teenage Sexual and Reproductive Behavior in Developed Countries: Country Reports for Canada, France, Great Britain, Sweden and the United States

The Alan Guttmacher Institute

This multi-year study conducted between 1998 and 2001 with researchers from Canada, Great Britain, France, Sweden, and the United States explores why such large differences in the rates of teenage pregnancy and STDs exist between these countries and the United States. Each report focuses on one country and provides an in-depth study of adolescent sexual and reproductive behavior, societal attitudes about sexuality, reproductive health services for adolescents, and public policies and programs for disadvantaged groups. An executive summary is also available free of charge.

2001; \$15; The Alan Guttmacher Institute

Dangerous Liaisons: Substance Abuse and Sex*

The National Center on Addiction and Substance Abuse at Columbia University

This report examines the connections between alcohol and drug use and sexual activity, particularly for children, teens, and women.

1999; \$22; The National Center on Addiction and Substance Abuse at Columbia University

Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy

Douglas Kirby

This comprehensive review of evaluation research includes assessments of curriculum-based sexuality and abstinence education for teens and pre-teens, sex education for parents, contraceptive and family planning clinics and programs, early childhood programs, youth development and service learning programs, and multiple-component community initiatives. A summary is included.

2001; \$15; ISBN 1586710370; *The*

National Campaign to Prevent Teen Pregnancy

European Approaches to Adolescent Sexual Behavior and Responsibility*

Advocates for Youth

This monograph examines the roles of family, religion, media, community, public policy, sexuality education, and health care in promoting safer sexual behaviors among teens in the Netherlands, Germany, and France.

1999; \$20; *Advocates for Youth*

Facing Facts: Sexual Health for America's Adolescents*

Debra W. Haffner

This report is a guide for policymakers, health professionals, and parents to develop policies on adolescent health. It was created by the National Commission on Adolescent Sexual Health and includes a consensus on adolescent sexual health, characteristics of a sexually healthy adolescent, and recommendations for developing policies.

1995; \$12.95; *The Sexuality Information and Education Council of the United States*

Hearing Their Voices: A Qualitative Research Study on HIV Testing and Higher-Risk Teens*

Michaels Opinion Research for

The Henry J. Kaiser Family Foundation

This report covers the perceptions, attitudes, and experiences of higher-risk teenagers toward HIV testing.

1999; Free; *Publication Number 1492*;

The Henry J. Kaiser Family Foundation

In Their Own Right: Addressing the Sexual and Reproductive Health Needs of American Men

The Alan Guttmacher Institute

This report culls together data from national research findings to document and explore the sexual and reproductive needs of men. The report includes a chapter on adolescent men ages 15–19.

2002; \$20; *The Alan Guttmacher Institute*

In Their Own Right: Addressing the Sexual and Reproductive Health Needs of Men Worldwide

The Alan Guttmacher Institute

This report describes the sexual and reproductive behavior and needs of men ages 15–54 in 45 developing and developed countries. The comprehensive data originates from nationally representative surveys conducted between the mid-1990s and 2001 and various qualitative studies of men's attitudes, values, and behavior in regard to sexual and reproductive health. The report includes a chapter on men ages 15–24.

2004; \$20; *The Alan Guttmacher Institute*

Involving Males in Preventing Teen Pregnancy: A Guide for Program Planners*

Freya L. Sonenstein, et al

This guide is intended for program planners in California and throughout the country who wish to implement programs involving males in teenage pregnancy prevention. It has three main purposes: (1) to dispel myths about the target population by providing a description of the male partners of female adolescents at risk for pregnancy, (2) to identify established pregnancy-prevention programs that have successfully involved males in different settings around the country, and (3) to develop practical lessons from the experiences of these programs for those involved in fledgling programs.

1997; \$10; ISBN 0877666946;

The Urban Institute

Keeping the Faith: The Role of Religion and Faith Communities in Preventing Teen Pregnancy

*Barbara Dafoe Whitehead, Brian L. Wilcox,
and Sharon Scales Rostosky*

This report explores some of the barriers between the faith and secular communities around issues of adolescent sexuality and examines what the research says about the role religion plays in teens' sexual attitudes and behavior.

2001; \$10; ISBN 1586710400; *The*

National Campaign to Prevent Teen Pregnancy

National Survey of Adolescents and Young Adults: Sexual Health Knowledge, Attitudes and Experiences

The Henry J. Kaiser Family Foundation

This comprehensive survey examines the views and experiences of young people on issues affecting their sexual health. The survey looks at a nationally representative sample of over 1,800 young people in three key age groups: young adolescents (ages 13 to 14), adolescents (ages 15 to 17), and young adults (ages 18 to 24). The report assesses young people's knowledge and attitudes about sexuality; the pressure young people face to be sexually active and how they handle the pressure; what they know about HIV/AIDS and STDs; what they know and how they feel about contraception and protection; and what sources inform and influence their decision making.

2003; Free; *Publication Number 3218*;

The Henry J. Kaiser Family Foundation

National Survey of Teens on HIV/AIDS

The Henry J. Kaiser Family Foundation

This nationally representative survey of teens ages 12–17 assesses attitudes and knowledge about the HIV/AIDS epidemic among a generation at risk. The survey documents teen perspectives about the impact of the epidemic on young people and their own personal concern about becoming infected. It also includes findings about where teens get their information about HIV/AIDS, their information needs, and their attitudes toward HIV testing.

2000; Free; *Publication Number 3092*;

The Henry J. Kaiser Family Foundation

On the Right Track

The Sexuality Information and Education Council of the United States

This guide is designed to help youth development professionals recognize the need to address sexuality with young people, understand how sexuality education and youth development can complement each other, and determine ways in which youth development programs can begin to incorporate this important topic.

2004; \$10; *The Sexuality Information and Education Council of the United States*

Peer Potential: Making the Most of How Teens Influence Each Other*

Peter Bearmen, et al

This report analyzes peer influences on teen behaviors. The research findings will help parents and educators better understand adolescent relationships.

1999; \$15; *The National Campaign to Prevent Teen Pregnancy*

Power In Numbers: Peer Effects on Adolescent Girls' Sexual Debut and Pregnancy*

Peter Bearman and Hannah Brückner

This report provides extensive analysis of data from a large national survey of adolescent girls on the effect of peer influence on the timing of girls' first sexual intercourse and on girls' pregnancy risk.

1999; \$15; *The National Campaign to Prevent Teen Pregnancy*

Progress Pending: How to Sustain and Extend Recent Reductions in Teen Pregnancy Rates

Douglas Kirby and Karen Troccoli

This report examines why certain areas and groups continue to have high adolescent pregnancy while the nation as a whole has made significant progress in reducing rates of teen pregnancy and birth. The publication considers existing research on the effectiveness of various types of teen pregnancy prevention programs in relation to areas where teen pregnancy and birth rates are stagnant or even increasing.

2003; \$10; ISBN 1586710451; *The National Campaign to Prevent Teen Pregnancy*

Protection As Prevention: Contraception for Sexually Active Teens*

Claire Brindis, Susan Pagliaro, and Laura Davis

This paper addresses patterns and factors of contraceptive use, misuse, and nonuse among adolescents; cultural influences on contraceptive use; access to contraception; and the role of contraceptive technology in public policy, legal issues, and professional training.

2000; \$5; ISBN 1586710281; *The National Campaign to Prevent Teen Pregnancy*

SexSmarts Surveys

The Henry J. Kaiser Family Foundation and Seventeen Magazine

As part of an ongoing public information partnership called SexSmarts, *Seventeen* magazine and the Henry J. Kaiser Family Foundation conduct nationally representative surveys of teens 15 to 17 years of age on issues related to their sexual health. Series titles include "Birth Control and Protection;" "Virginity and the First Time;" "Gender Roles;" "Relationships;" "Teens and Sexual Health Communication;" "Sexual Activity and Substance Abuse among Youth;" "Sexually Transmitted Disease;" "Sexual Health Care and Counsel;" "Safer Sex', Condoms and 'The Pill';" and "Decision Making."

2000-2004; Free; *The Henry J. Kaiser Family Foundation*

Talking with Kids about Tough Issues: A National Survey of Parents and Kids*

The Henry J. Kaiser Family Foundation and Children Now

This survey of parents and kids 10 to 15 years of age was conducted to inquire about parent/child communication. It shows that many families are waiting too long and not talking enough about many issues, including sexuality.

2001; Free; Publication Number 1460; *The Henry J. Kaiser Family Foundation*

Trends in Sexual Activity and Contraceptive Use Among Teens*

Elizabeth Terry and Jennifer Manlove

This paper summarizes key trends in teen sexual and contraception behavior by gender, age, and race/ethnicity. In addition, it analyzes previously published rates of teen sexual experiences and activity, contraceptive use at first sexual intercourse and at most recent sexual intercourse, and consistency of contraceptive use.

2000; \$5; ISBN 158671029X; *The National Campaign to Prevent Teen Pregnancy*

Voices Carry: Teens Speak Out on Sex and Teen Pregnancy*

The National Campaign to Prevent Teen Pregnancy

This report offers a snapshot of what teens are saying, in their own words, about sexual activity, love, relationships, contraception, and the adults in their lives.

2000; \$5; ISBN 1586710303; *The National Campaign to Prevent Teen Pregnancy*

Young Men's Sexual and Reproductive Health: Toward a National Strategy—Getting Started

Freya L. Sonenstein

This report focuses on the sexual and reproductive health of men in the United States and specifically on young men ages 12 to 24. The publication explains the rationale for addressing the reproductive health of young men, explores the extent to which young men have unmet reproductive health needs, and presents a framework for organizations to begin to address and enhance young men's sexual and reproductive health.

2000; \$5; *The Urban Institute*

Youth Risk Behavior Surveillance—United States, 2003

Centers for Disease Control and Prevention (CDC)

This report from the *Morbidity and Mortality Weekly Report* (May 21, 2004, volume 53, number SS-2) includes statistics on high school students in grades 9 through 12. It addresses such issues as sexual intercourse, condom use, birth control pill use, alcohol and drug use at last intercourse, pregnancy, and HIV education.

2004; \$4.50; Superintendent of Documents, U.S. Government Printing Office

Youth Risk Behavior Surveillance, National Alternative High School Survey—United States, 1998

Centers for Disease Control and Prevention (CDC)

This report from the *Morbidity and Mortality Weekly Report* (October 29, 1999, volume 48, number SS-7) includes statistics on adolescents in alternative high schools, grades 9 through 12. It addresses such issues as sexual intercourse, birth control pill use, condom use, alcohol and drug use at last intercourse, pregnancy, and HIV education.

1999; \$1.75; *Superintendent of Documents, U.S. Government Printing Office*

ORDERING INFORMATION

Advocates for Youth

2000 M Street, N.W.
Suite 750
Washington, DC 20036
Phone: 202/419-3420
Fax: 202/419-1448
Website: <http://www.advocatesforyouth.org>

The Alan Guttmacher Institute

120 Wall Street
21st Floor
New York, NY 10005
Phone: 212/248-1111
Fax: 212/248-1951
Website: <http://www.guttmacher.org>

The Annie E. Casey Foundation

701 St. Paul Street
Baltimore, MD 21202
Phone: 410/547-6600
Fax: 410/547-6624
Website: <http://www.aecf.org>

Centers for Disease Control and Prevention

1600 Clifton Road
Atlanta, GA 30333
Phone: 800/311-3435
Fax: 888/282-7681
Website: <http://www.cdc.gov>

Columbia University Press

136 South Broadway
Irvington, NY 10533
Phone: 800/944-8648
Fax: 800/944-1844
Website: <http://www.columbia.edu/cu/cup>

Common Courage Press

P. O. Box 702
Monroe, ME 04951
Phone: 800/497-3207
Fax: 207/525-3068
Website:
<http://www.commoncouragepress.com>

Continuum International Publishing Group

Madison Square Park
15 East 26th Street
Suite 1703
New York, NY 10010
Phone: 212/953-5858
Fax: 212/953-5944
Website: <http://www.continuum-books.com>

ETR Associates

4 Carbonero Way
Scotts Valley, CA 95066
Phone: 831/438-4060
Fax: 800/435-8433
Website: <http://www.etr.org>

Farrar, Straus and Giroux

19 Union Square West
New York, NY 10003
Phone: 888/330-8477
Fax: 212/206-5340
Website:
<http://www.fsgbooks.com/index.htm>

Harvard University Press

79 Garden Street
Cambridge, Massachusetts 02138
Phone: 800/405-1619
Fax: 800/406-9145
Website: <http://www.hup.harvard.edu>

The Haworth Press

10 Alice Street
Binghamton, NY 13904
Phone: 800/429-6784
Fax: 800/895-0582
Website: <http://www.haworthpressinc.com>

The Henry J. Kaiser Family Foundation

2400 Sand Hill Road
Menlo Park, CA 94025
Phone: 650/854-9400
Fax: 650/854-4800
Website: <http://www.kff.org>

Lawrence Erlbaum Associates, Inc.

10 Industrial Avenue
Mahwah, NJ 07430-2262
Phone: 800/926-6579
Fax: 201/236-0072
Website: <http://www.erlbaum.com>

Lynne Rienner Publishers

1800 30th Street
Suite 314
Boulder, CO 80301
Phone: 303/444-6684
Fax: 303/444-0824
Website: <http://www.rienner.com>

National Adolescent Health Information Center

3333 California Street
Box 0503
San Francisco, CA 94143-0503
Phone: 415/502-4856
Fax: 415/502-4858
Website: <http://youth.ucsf.edu/nahic/>

The National Campaign to Prevent Teen Pregnancy

1776 Massachusetts Avenue, N.W.
Suite 200
Washington, DC 20036
Phone: 202/478-8566
Fax: 202/478-8588
Website: <http://www.teenpregnancy.org>

The National Center on Addiction and Substance Abuse at Columbia University

633 Third Avenue
19th Floor
New York, NY 10017-6706
Phone: 212/841-5200
Fax: 212/956-8020
Website: <http://www.casacolumbia.org>

Penguin Group (USA) Inc.

405 Murray Hill Parkway
East Rutherford, NJ 07073
Phone: 800/788-6262
Fax: 212/366-2679
Website: <http://www.penguinputnam.com>

Picador USA

175 5th Avenue
New York, NY 10010
Phone: 212/674-5151
Fax: 212/253-9627
Website: <http://www.picadorusa.com>

Routledge

10650 Toebben Drive
 Independence, KY 41051
 Phone: 800/634-7064
 Fax: 800/248-4724
 Website: <http://www.routledge-ny.com>

Rowman & Littlefield Publishers, Inc.

4501 Forbes Boulevard
 Suite 200
 Lanham, MD 20706
 Phone: 301/459-3366
 Fax: 301/429-5748
 Website: <http://www.rowmanlittlefield.com>

SAGE Publications

2455 Teller Road
 Thousand Oaks, CA 91320
 Phone: 805/499-0721
 Fax: 805/499-0871
 Website: <http://www.sagepub.com>

The Sexuality Information and Education Council of the United States

130 West 42nd Street
 Suite 350
 New York, NY 10036-7802
 Phone: 212/819-9770
 Fax: 212/819-9776
 Website: <http://www.siecus.org>

Simon & Schuster

100 Front Street
 Riverside, NJ 08075
 Phone: 800/223-2336
 Fax: 800/943-9831
 Website: <http://www.simonsays.com>

Superintendent of Documents

U.S. Government Printing Office
 P.O. Box 371954
 Pittsburgh, PA 15250-7954
 Phone: 866/512-1800
 Fax: 202/512-2250
 Website: <http://bookstore.gpo.gov>

University of Minnesota Press

111 Third Avenue South
 Suite 290
 Minneapolis, MN 55401
 Phone: 612/627-1970
 Fax: 612/627-1980
 Website: <http://www.upress.umn.edu>

The Urban Institute

2100 M St., N.W.
 Washington, DC 20037
 Phone: 877/847-7377
 Fax: 202/467-5775
 Website: <http://www.urban.org>

ORGANIZATIONS

Many of the following organizations offer additional resources on adolescent sexuality issues.

Advocates for Youth

This organization creates programs and advocates for policies that help young people make informed and responsible decisions about their reproductive and sexual health. Advocates for Youth provides information, training, and strategic assistance to youth-serving organizations, policy makers, youth activists, and the media in the United States and the developing world.

*2000 M Street, N.W., Suite 750,
 Washington, DC 20036;
 Phone: 202/419-3420; Fax: 202/419-1448;
 Website: <http://www.advocatesforyouth.org>*

The Alan Guttmacher Institute (AGI)

This organization's mission is to protect the reproductive choices of women and men in the United States and around the world. AGI seeks to support their ability to obtain the information and services needed to achieve their full human rights, safeguard their health and exercise their individual responsibilities in regard to sexual behavior and relationships, reproduction and family formation.

*120 Wall Street, 21st Floor,
 New York, NY 10005;
 Phone: 212/248-1111; Fax: 212/248-1951;*

*1301 Connecticut Avenue,
 N.W., Suite 700, Washington, DC 20036;
 Phone: 202/296-4012; Fax: 202/223-5756;
 Website: <http://www.agi-usa.org>*

American School Health Association (ASHA)

This association seeks to protect and promote the health of children and youth by supporting coordinated school health programs as a foundation for school success.

*7263 State Route 43, P. O. Box 708,
 Kent, OH 44240;
 Phone: 330/678-1601; Fax: 330/678-4526;
 Website: <http://www.ashaweb.org>*

American Social Health Association (ASHA)

This organization is dedicated to improving the health of individuals, families, and communities, with a focus on preventing sexually transmitted diseases and their harmful consequences, via public awareness, patient education and support, health policy, and provider training.

*P. O. Box 13827,
 Research Triangle Park, NC 27709;
 Phone: 919/361-8400; Fax: 919/361-8425;
 Website: <http://www.ashastd.org>*

Centers for Disease Control and Prevention (CDC)

This organization's mission is to promote health and quality of life by preventing and controlling disease, injury, and disability.

*1600 Clifton Road,
 Atlanta, GA 30333;
 Phone: 800/311-3435; Fax: 770/488-3110;
 Website: <http://www.cdc.gov>*

Child Trends

This organization conducts research and provides science-based information to improve the decisions, programs, and policies that affect children and their families.

*4301 Connecticut Avenue, N.W.,
 Suite 100, Washington, DC 20008;
 Phone: 202/572-6000; Fax: 202/362-8420;
 Website: <http://www.childtrends.org>*

Child Welfare League of America (CWLA)

This organization is committed to engaging all Americans in promoting the well being of children, young people, and their families as well as in protecting every child from harm.

440 First Street, N.W., Third Floor,
Washington, DC 20001-2085;
Phone: 202/638-2952; Fax: 202/638-4004;
Website: <http://www.cwla.org>

Children's Defense Fund

This organization works toward reducing the numbers of neglected, sick, uneducated, and poor children in the United States through its research, publications, public education campaigns, budget and policy advocacy, and coalition building.

25 E Street, N.W.,
Washington, DC 20001;
Phone: 202/628-8787; Fax: 202/662-3510;
Website: <http://www.childrensdefense.org/>

Comprehensive Health Education Foundation (CHEF)

This organization promotes health and quality of life through innovative curricula, trainings, resources, and conferences.

22419 Pacific Highway South,
Seattle, WA 98198-5106;
Phone: 800/323-2433; Fax: 206/824-3072;
Website: <http://www.chef.org>

ETR Associates

This organization seeks to enhance the well being of individuals, families, and communities by providing leadership, educational resources, training, and research in health promotion with an emphasis on sexuality and health education.

4 Carbonero Way,
Scotts Valley, CA 95066;
Phone: 831/438-4060; Fax: 800/435-8433;
Website <http://www.etr.org>

Girls Incorporated

This national youth organization is dedicated to helping every girl become strong, smart, and bold through advocacy, research, and education.

120 Wall Street, Third Floor,
New York, NY 10005-3902;
Phone: 800/374-4475; Fax: 212/509-8708;

National Resource Center,
441 West Michigan Street,
Indianapolis, IN 46202-3233;
Phone: 317/634-7546; Fax: 317/634-3024;
Website: <http://www.girlsinc.org>

The Henry J. Kaiser Family Foundation

This foundation is an independent source of facts and analysis for policymakers, the media, the healthcare community, and the general public.

2400 Sand Hill Road,
Menlo Park, CA 94025;
Phone: 650/854-9400; Fax: 650/854-4800;
Website: <http://www.kff.org>

Hetrick-Martin Institute (HMI)

Through its efforts to support and nurture gay, lesbian, bisexual, transgendered, and questioning youth, as well as its work to train educators, child welfare professionals, government officials and medical providers, this organization is committed to making the world a safer, more encouraging place for all youth and remains devoted to finding a way for all youth to fulfill their greatest potential.

2 Astor Place, New York, NY 10003;
Phone: 212/674-2600; Fax: 212/674-8650;
Website: <http://www.hmi.org>

National Association of People with AIDS (NAPWA)

This organization advocates on behalf of all individuals living with HIV and AIDS.

1413 K Street, N.W., 7th Floor,
Washington, DC 20005;
Phone: 202/898-0414; Fax: 202/898-0435;
Website: <http://www.napwa.org>

The National Campaign to Prevent Teen Pregnancy

This organization's mission is to improve the well-being of children, youth, and families by reducing teen pregnancy. The Campaign's goal is to reduce the teen pregnancy rate by one-third between 1996 and 2005.

1776 Massachusetts Ave, N.W., Suite 200,
Washington, D.C. 20036;
Phone: 202/478-8500; Fax: 202/478-8588;
Website: <http://www.teenpregnancy.org>

National Education Association - Health Information Network (NEA-HIN)

This affiliate of the NEA works to improve the health and safety of school personnel and students by providing the school community with vital and timely health information.

1201 Sixteenth Street, N.W.,
Suite 521, Washington, DC 20036;
Phone: 202/822-7570; Fax: 202/822-7775;
Website: <http://www.neahealthinfo.org/home.htm>

National Middle School Association (NMSA)

This educational organization works to improve the developmental and educational needs of young adolescents.

4151 Executive Parkway,
Suite 300, Westerville, OH 43081;
Phone: 800/528-6672; Fax: 614/895-4750;
Website: <http://www.nmsa.org>

National Organization on Adolescent Pregnancy, Parenting, and Prevention (NOAPP)

This organization is dedicated to providing leadership, education, training, information, advocacy, resources, and support to individuals and organizations in the field of adolescent pregnancy, parenting, and prevention.

509 2nd Street, N.E.,
Washington, DC 20002;
Phone: 202/547-8814; Fax: 202/547-8815;
Website: <http://www.noapp.org>

National Network for Youth

This organization is dedicated to ensuring that young people can be safe and lead healthy and productive lives. The National Network for Youth informs public policy, educates the public, and strengthens the field of youth work.

*1319 F Street, N.W.,
Suite 401, Washington, DC 20004-1106;
Phone: 202/783-7949; Fax: 202/783-7955;
Website: <http://www.nn4youth.org>*

National Youth Advocacy Coalition (NYAC)

This coalition advocates for and with young people who are gay, lesbian, or transgendered in an effort to end discrimination against them and to ensure their physical and emotional well being.

*1638 R Street, N.W.,
Suite 300, Washington, DC 20009;
Phone: 202/319-7596; Fax: 202/319-7365;
Website: <http://www.nyacyouth.org>*

Network for Family Life Education

This organization helps teens acquire honest, medically accurate, and balanced information about human sexuality so that they can make responsible choices about their sexual health. They believe that teen-to-teen communication is one of the best ways to educate teens about human sexuality and sexual health.

*Rutgers University,
100 Joyce Kilmer Avenue, Piscataway, NJ 08854;
Phone: 732/445-7929; Fax: 732/445-4154;
Website: <http://www.sexetc.org>*

Parents, Families, and Friends of Lesbians and Gays (PFLAG)

This organization promotes the health and well being of gay, lesbian, bisexual, and transgendered persons as well as their families and friends through support, education, and advocacy.

*1726 M Street N.W.,
Suite 400, Washington, DC 200036;
Phone: 202/467-8180; Fax: 202/467-8194;
Website: <http://www.pflag.org>*

Planned Parenthood Federation of America (PPFA)

This organization believes in the fundamental right of individuals to manage their own fertility regardless of income, marital status, race, age, sexual orientation, and national origin. PPFA provides reproductive and complementary health care services, advocates public policies which guarantee these rights and ensure access to such services, provides educational programs, and promotes research and the advancement of technology in reproductive health.

*434 West 33rd Street,
New York, NY 10001;
Phone: 212/541-7800 or 800/230-PLAN for referrals to your local Planned Parenthood; Fax: 212/245-1845;
Website: <http://www.plannedparenthood.org>*

Rape, Abuse, and Incest National Network (RAINN)

This organization operates America's only 24-hour confidential national hotline for survivors of sexual assault.

*635-B Pennsylvania Avenue,
S.E., Washington, DC 20003;
Phone: 800/656-HOPE; Fax: 202/544-3556;
Website: <http://www.rainn.org>*

Search Institute

This organization works to provide leadership, knowledge, and resources to promote healthy children, youth, and communities. To accomplish this mission, the institute generates and communicates new knowledge and brings together community, state, and national leaders.

*The Banks Building,
615 First Avenue, N.E., Suite 125,
Minneapolis, MN 55413;
Phone: 612/376-8955, 800/888-7828; Fax: 612/376-8956;
Website: <http://www.search-institute.org>*

Sexuality Information and Education Council of the United States (SIECUS)

SIECUS affirms that sexuality is a natural and healthy part of living. SIECUS develops, collects, and disseminates information; promotes comprehensive education about sexuality; and advocates the right of individuals to make responsible sexual choices.

*130 West 42nd Street,
Suite 350, New York, NY 10036-7802;
Phone: 212/819-9770; Fax: 212/819-9776;*

*1706 "R" Street, N.W.,
Washington, DC 20009;
Phone: 202/265-2405; Fax: 202/462-2340;
Website: <http://www.siecus.org>*



If Not Now... When? Talk to your kids about sex.

EVERY YOUNG PERSON WILL ONE DAY BE FACED WITH QUESTIONS about whether or when to have sex and how to be safe. This may happen sooner than parents want or expect.

But delaying "The Talk" won't keep your kids from wondering about sex – or having it. So talk to your kids about sex. Today that means talking about much more than how babies are made. It's also about how to prevent pregnancy, HIV/AIDS, and other sexually transmitted diseases.

We can help. Call the **Sexuality Information and Education Council of the United States**. We know the tough questions kids ask, the different answers parents can give, and what it all means. We give you time to think – and a game plan to help your children make healthy choices.

Talk soon. Talk often. Talk again.



Please call 212.819.9770 or visit us at www.familiesaretalking.org
SEXUALITY INFORMATION AND EDUCATION COUNCIL OF THE UNITED STATES • 130 W. 42nd Street, Suite 350, New York, NY 10036 • phone: 212.819.9770 • www.siecus.org

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