SEX EDUCATION MUST BE STOPPED!

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Since sex education causes sexual expression, or in the words of Phyllis Schlafly and friends "promiscuity," this group feels that it must be prevented at all costs. According to Schlafly teenage sexual activity, which is encouraged by sex education and available contraception, results in "incurable VD, emotional trauma, and a forfeiture of opportunities for a lifetime marriage to a faithful spouse and for career and economic advancement" [Editor's emphasis] (The Phyllis Schlafly Report, June, 1986).

The logic, or lack thereof, of those last few effects of teenage sexual activity is most perplexing. Isn't it unwanted and unplanned pregnancy that would prevent career development and economic advancement, and then doesn't it follow that available information and contraception would prevent this result, perhaps even by encouraging the decision to delay sexual activity?

The evidence for this group's theories seems to be determined in the Meese tradition: personal opinion and projection based on personal attitude. The Netherlands, which has available birth control in the high schools, has the lowest teenage pregnancy rate in the world, along with a very low rape and child sexual abuse rate. And Sweden, where sex education has been taught in the schools since 1956, rivals the low pregnancy rate of The Netherlands (Dryfoos, 1985). There has not been any evidence of a breakdown of family values in these countries, nor a lack of career development.

Researchers at Johns Hopkins University, who designed and evaluated a school-based pregnancy prevention program for inner-city high school girls found a dramatic decrease in pregnancies. And, in direct opposition to the Schlafly theory of sex education promoting "promiscuity," they also found that girls participating in the program postponed intercourse longer than non-participating girls (Alan Guttmacher Institute, 1986). So as we can see, Schlafly's concern for the economic advancement of Americans is not only insincere, but also based on her personal opinion of who should be having sex when and with whom rather than on research generated from evaluation of sex education programs.

This issue of the SIECUS Report addresses the important need of developing and evaluating sex education programs, including curricula and teacher selection, which meet the learning needs of young people and are acceptable to parents, professionals, and communities. Never has the need for sex education been greater than now. Adolescent pregnancy, AIDS, child sexual abuse, rape, pornography, and censorship are sexual health issues in 1986 that affect all of us—children, adolescents, parents, and professionals.

One result of the concern about these issues has been increased efforts to control, limit, and eventually eliminate, through legislation, public school family life and sex education curriculums, programs and materials which are viewed as threatening to young people and their parents. This effort has emerged in the form of a "parent-pupil protection act" promoted by Schlafly's group.

As we look at how to improve the frequency and quality of sex education programs, it is vitally important to be aware of and to assess the current social and political environment. The examples below vividly illuminate the extent of fear and concern many have about sex education today.

New York

Since last spring, legislation has been in the works in the State of New York that would amend the civil rights law to create a "parent and pupil protection act." Several years ago, this approach was taken at the federal level when Senator Orrin Hatch of Utah initiated a federal law that forbade public school students from participating in any program, course, or activity that included psychiatric or psychological examination, testing, or
treatment without prior written consent of the parent or guardian. The definition of such “testing or treatment” includes any group activity “designed to elicit information about attitudes, habits, traits, opinions, beliefs or feelings” on a range of subjects, including sex behavior and attitudes, critical appraisals of others with whom the student has close family relations, mental or psychological problems potentially embarrassing to the student or family, values clarification, role-playing, moral reasoning, and sex education. It slipped by Congress under the guise of permission to do purely psychological testing, while in fact its broad application to all types of school-related activities removes local determination of both programming and excusal procedures. The legislation currently being proposed on the state level is viewed as a last ditch effort on the part of right wing groups, especially Phyllis Schlafly’s Eagle Forum, to exert parental control over school curricula (Family Planning Advocates of New York State).

Mobile, Alabama
Another innovative approach is to use legislation to label “secular humanism” (i.e., sex education) a religion and, thus, prohibit it from being taught in the schools. Since the First Amendment has been interpreted by the Supreme Court to prohibit a state from establishing a religion, zealous Christians in Mobile, Alabama are complaining that if school prayer is not allowed, then teaching of other forms of religion, such as “secular humanism” should also be eliminated.

A major political and legal battle is being waged. Should it be determined that “secular humanism” is a religion, any evidence of this type of content would have to be purged from school materials. As a result, every school board in the country will be confronted with this issue (Newsletter of Intellectual Freedom, 1986).

Sallisaw, Oklahoma
Even without legislation, passed or pending, many educators find themselves making their own decisions about what and how to teach young people in anticipation of fear of parental censorship concerns. One example of this is a biology teacher in Sallisaw, Oklahoma who cut out several pages of a biology textbook that contained information on reproduction and birth control. Both the school superintendent and principal agreed to this action, believing that the pages were “irrelevant” to the school’s curriculum requirements. Students requesting to see the pages would be allowed to do so within the classroom. The teacher involved stated that he was trying to circumvent a problem, rather than create one, when students were “forced to take the books parents might find objectionable into their homes.”

The teacher did not see his action as censorship, but rather, a practice common to teachers (Newsletter of Intellectual Freedom, July 1986).

School-Based Clinics
In the past two years, the concept of school-based clinics has gained great interest and attention. Providing health care, sex education, and contraceptive assistance for students in schools has resulted in impressive outcomes in the reduction of adolescent pregnancy rates. While this approach is not appropriate or acceptable in every community, many concerned community members see it as a very desirable alternative.

As might be expected, groups opposed to sex education in the schools and available contraception for adolescents are extremely opposed to school-based clinics. As Phyllis Schlafly, Director of the Eagle Forum, stated in her June (1986) newsletter, “The promoters of sex clinics for school children are imposing on a captive audience their peculiar concepts, namely, that promiscuity is good but pregnancy is bad. They are saying, ‘Step right up, teenager, and get your contraceptives here; have fun with your sex partner; the only thing that’s wrong is having a baby.’ In addition to promoting promiscuity, Schlafly also accuses the school-based clinics as being a profit-making scheme for social service organizations and an invasion of the privacy of young people by asking personal questions when providing health care.

The alternative Schlafly proposes for young people is abstinence, as exemplified in a curriculum called Sex Respect. To promote this program, members of the Eagle Forum are being strongly encouraged to scrutinize “the promotion of promiscuity by the public schools.” A sample letter that this group advocates sending to the schools reads:
Dear principal:

The news media have reported that there is a nationwide plan to put sex clinics in public schools to dispense contraceptives. I would appreciate a reply to the following questions:

1. Do you have any plan to start a clinic in your school that would dispense contraceptives or prescriptions for contraceptives?
2. If so, who bears the financial liability for medical malpractice, complications from contraceptives and from abortions, and Sexually Transmitted Diseases?
3. Please send me a copy of the Parental Consent Form and any psychological questionnaires to be used by this clinic.
4. Regardless of your answers to the above, please tell me when I may come and see the textbooks and other materials (including films) used by your school that pertain to sexual activity, contraceptives, abortion, and homosexuality.

Thank you for your cooperation.

Sincerely,

(Phyllis Schlafly Report, 1986)

The basic tactic is obvious: this group is trying to scare the schools from establishing clinics by threatening medical liability for any problems that might arise.

The depth of emotion and concern about how to help our young people negotiate their sexuality in 1986 is great. Those who have worked with adolescents and parents and know personally the real tragedy of sexual ignorance and confusion believe strongly that more sex information and education and contraceptive services are needed, not less. And those who fear a breakdown of morality and traditional family life in this country feel just as passionately that information and education about sexuality are significant factors in making the problems we face even worse. They fear that our schools and services are ignoring their concerns and values.

If only there were easy solutions to these crucial problems. Clearly, the need for solid, extensive evaluations of existing sex education programs is extremely important. It is also clear that we must continue to educate ourselves about the social and political issues that are such an important part of the work of sex educators. We must also keep other informed about what is happening in our communities so that we can work together to provide sex education programs that are acceptable to all concerned.

Amidst the controversy, no one ever seems to ask, "What do the kids think, need, feel? And has the opposition to sex education ever considered the fact that deeming sex information hidden gives the indirect but powerful message that sex is bad, dirty, and unnatural? Will today's adolescents be able to switch modes automatically after they have married and have healthy and happy sexual relations... or is sex simply a mechanical act to be performed only for the purpose of procreation? Our efforts as sex educators will determine the course this controversy will take.

DO YOU KNOW THAT...

CPO New National Training Institute

The Center for Population Options is expanding its efforts to reduce the incidence of unintended adolescent pregnancy by providing training workshops for professionals in six areas of adolescent sexuality, reproductive health, and family planning. For further information regarding scheduling, fees, and registration, contact: National Training Institute, Center for Population Options, 1012 14th St., NW, Suite 1200, Washington, DC 20005.

Parent Education/Program Planning Workshops

The Center for Early Adolescence will sponsor six training-for-trainers workshops on its curricula, "Living With 10- to 15-Year Olds: A Parent Education Curriculum" and "3:00 to 6:00 PM: Planning Programs for Young Adolescents." The workshops will be held throughout the remainder of 1986 and 1987 and are designed to prepare participants to lead training sessions in their own organizations. For further information contact: Iris Stanley, Center for Early Adolescence, University of North Carolina at Chapel Hill, Suite 223, Carr Mill Mall, Carrboro, NC 27510; (919) 966-1148.

References


Several years ago if we wanted to implement a sexuality curriculum, we would have had to design our own. Today, there are so many curricula available from a variety of sources that the educator needs a new skill: selecting the appropriate curriculum for the population. This is more true for adolescent sexuality programs than elementary. The available elementary programs may center around specific topics, such as child sexual abuse, rather than a full sexuality spectrum. Choosing a curriculum, and adapting it to our situation may keep us from reinventing the wheel, but it also has the potential for creating quite a stir in the community, and within the ranks of the educators involved, and still may not be good for the students it was meant to help.

Despite the fact we may be adapting a curriculum to our situation, it is still important to lay the groundwork. It is imperative to establish the need. Many sexuality educators assume that everyone feels the same way about what young people need to know, and how they should learn it. We need to do our homework. Not only do we need to be aware of the community’s values in relationship to what needs to be taught, but we need to examine our own biases as well. Those biases will be reflected throughout the selection process, and we should have a sound rationale to defend the selections. Suppose I feel that the major emphasis in any curriculum should be to enhance parent/child communication. This goal will determine which statistics I gather, whom I contact, how I talk about the issues, whom I choose to involve, and how I define community support. And it is important to do each of these even when selecting from a number of curricula.

Many programs for adolescents are based on the available statistics on adolescent pregnancies. That is only one way to establish need, and it does not work well in establishing a program for six-year-olds. We need to talk to as many people as we can: parents, children, and community organizations/religions that may share the same concerns. We need to become familiar with the research. In addition, collecting anecdotal material from stories, letters, and comments from young people about their needs is extremely helpful. This process can facilitate bringing together support for the program and form the basis for an Advisory Committee. The time and energy it takes to plan thoroughly can be shared by many, and the initial planning will be greatly enhanced by those with different viewpoints.

Before a curriculum can be selected, the model and target population need to be clearly identified. Will the program be offered in a school setting, where the restraints of scheduling and course development need to be considered? Will the curriculum be a separate entity or blended with the ongoing education? Will it be a short-term program, or extended over several months/years? Will it involve support services, such as those offered in a clinic setting or parent-child program?

The other crucial element in curriculum selection is to identify the target population, not just by chronological age but also by maturation and need. Knowing these factors helps in the decision on what goals to emphasize, given the time frame the educator has to work with. Educators are very aware that a 12-year-old girl who has developed early and is interested in dating may have quite different needs from another girl of the same age who may still express the feelings of a child. The difference between boys and girls at this age can also be monumental. Yet, most curriculum experts in sexuality urge coed classes, which will improve the communication between the sexes. (Note that the goal is centered around communication in the decision to have coed groupings.)

Assessing Participants’ Needs

Though we may have assessed needs of the community in our earlier preparation for curriculum selection, it is important to assess the more specific needs of the participants as well. The following checklist, described in Sexuality Education: A Guide to Developing and Implementing Programs (1984), by Cook, Kirby, Wilson and Alter, is useful to follow when selecting a curriculum.

Your reasons to offer a course to a particular population will not necessarily inform you about what they need in an actual course. Therefore, you will need to look closely at those you plan to serve to determine what they actually need:

1. what they already know and don’t know
2. how much they have developed physically (growth spurt, other pubertal changes)
3. how concretely they are thinking, whether they have begun to conceptualize abstract issues such as values, ethics, principles
4. what questions they have
5. what kind of social and sexual decisions they are facing.

You can learn a great deal by simply observing the children's behavior: their attention span, cognitive ability, attitude toward parents and other adults, appearance, and their apparent interest in dating and sexual behavior.

Another volume by Kirby, Sexuality Education: A Handbook for Evaluating Programs, explains how to conduct an even more thorough needs assessment.

**Developmental Level**

Another key component is to identify the developmental characteristics of the population we are choosing the curriculum for.

**ELEMENTARY.** In examining a curriculum for lower elementary children, the educator might look for:

1. short lessons, integrated into the planned daily program
2. activities and materials which include brightly colored visuals, games, and sensory involvement
3. lessons involving concrete aspects of the child's life
4. opportunities for individual and affective expression
5. the use of correct terminology in the discussion of family, sex-related issues, and personal development
6. inclusion of all types of family and personal life styles (i.e. single parenting, single children, etc.)
7. an honest, direct approach to discussing sex-related situations.

**JUNIOR HIGH.** The upper elementary or junior high age group is characterized by changes in both the social world and the ability to begin thinking abstractly. Children begin to move toward their peers and have a growing need to understand what is happening to their own bodies. A curriculum needs to focus on those concerns, allowing children to ask questions in an open and honest atmosphere. There can be a shift to longer lessons, though active involvement in class activities is still important. Since this is the time when children can be cruel, the curriculum should lend itself to providing confidentiality in personal discussions, while encouraging children to listen to one another, their families, and other significant adults. Very few children are sexually active at this age, but their thoughts and questions often involve the sexual aspects of life. The curriculum must provide for direct access to information.

**SECONDARY SCHOOL.** Secondary school youngsters are as varied as any age group. Characteristics to look for within the curriculum for this age group might be:

1. activities and discussions which focus on the potential for use of exploitive behavior, since this is the time when children work hard to establish independence, sometimes at the expense of others.
2. allowing for honest, confidential dialogue, since this is the time for exploration of the adult world with some very real consequences.
3. provide accurate information even though it may be facts we are sure this age group should know by now
4. present issues which stimulate abstract thinking on values, morals, and behaviors confronting young adults
5. a positive approach to many aspects of sexuality (not just concerned with pregnancy and diseases).

**Establishing Purpose**

With the preliminary work completed, the next step involves determining what effect this program you are selecting will have on the participants. Does it establish goals and behavioral objectives which can be achieved and measured in some way? It is important to select goals which can be accomplished. Sometimes program developers confuse statements of goals with statements of process. For example, “developing comfort” would probably not be a goal, but an important factor in reaching the goal. An achievable goal might be: “as a result of this class, students will enhance their interpersonal communication about sexuality with their peers and parents,” or “... students will reduce the risk of getting pregnant.” Each of the major goals of the program should be broken down into behavioral objectives which “... should be clear, unidimensional, equally specific, reasonably achievable, and measurable” (Cook et al.). For example, “Some students will avoid exploitation by learning to say ‘no’ to situations which make them uncomfortable,” is an objective which must then identify what the participants need to know, what attitudes they must develop, and what skills would be necessary to behave in such a way. “Frequently in sexuality education, you will not be able to directly measure the behavioral objectives; you will have to infer from changes in knowledge, attitudes, and skills that your objectives were met. Therefore, defining the knowledge, attitude, and skill components precisely is especially important” (Cook, et al.).

Keeping the goals and objectives in mind, look through existing curricula to get acquainted with what has already been developed. Some curricula offer a collection of activities relating to specific objectives; others outline a complete course. At every age level, the course should provide activities which will allow participants to:

1. learn factual information
2. examine their own attitudes, as well as others
3. learn new skills
4. reinforce learned skills.

What the educator decides to do depends on the situation, the target population, the time frame allowed, and the goals and objectives selected.

Before more decisions can be made, it is important to identify the educators who will implement this curriculum. Their involvement in developing the program is crucial. If the goals and objectives are going to be met, there must be a commitment to them. It is wise to have a committee of the educators involved to select the curriculum. This allows the sharing of ideas, airing of conflicts, and hopefully, a positive learning experience for
those involved. In addition, it can provide a forum for people to
determine if they want to teach in this sensitive subject area, or
if more training is needed. Potential teachers can identify areas
of weakness, and elect to train more in this area.

Evaluation

Built into the curriculum selected should be the evaluation
component. Frequently educators wait until the program has
been taught to determine if it has had the desired effect on the
students. At the end, the best that can be accomplished is a
description from the participants and teachers on their impres-
sions of how the curriculum affected them. If we want to be able
to compare what the students knew at the beginning with what
they knew at the end, information needs to be collected before
the program begins. Evaluation is often the most difficult part,
and many of us would like to go on our "gut" reaction that the
curriculum is valuable, but it is necessary to document in some
ways that what we are providing is making some changes in a
positive direction. We may never have to document it to ad-
ministrators in our organizations, but it is the responsibility of
sexuality educators to have a sound basis on which to offer a
program for young people. It is especially important in the
schools, where the emphasis is back to the basics of reading,
writing, and arithmetic. Those skills are being measured more
and more today; therefore the demand will be on all educators
to document, in some form, the importance of time spent on
sexuality.

References

to Developing and Implementing Programs. Santa Cruz, CA:
Kirby, D. Sexuality Education: A Handbook for Evaluating Programs:

Resource to Write for. . .

Positive Images: A New Approach to Contraceptive Educa-
tion (1986), by Peggy Brick and Carolyn Cooperman, is an ex-
citing new curriculum for educators working with adolescents.
The 16 lessons provide creative learning experiences that em-
power young people to take control over their reproductive lives and that integrate contraceptive use into the ideology of
love, relationships, and sexuality. Specific lesson plans include
exploring the communications gap with parents, examining
common negative attitudes about birth control, creating
positive advertisements for contraception, and practicing get-
ting information about birth control. This 83-page curriculum,
which definitely makes learning about contraception fun, is
highly recommended for use as a total program or to incor-
porate into existing programs. It is available for $15 + $2 p/h
from: Planned Parenthood of Bergen County, 575 Main Street,
Hackensack, NJ 07601.

Bellybuttons are Navels (1983), the award-winning film for
teaching young children the proper names for the parts of their
bodies (including the sexual parts), is now available in Spanish
in video format. Available for purchase for $210 from: Focus In-
ternational, 14 Oregon Ave., Huntington Station, NY 11746.

The Far Right: What They Say About Your Rights (1985) is
published by the Planned Parenthood Federation of America.
This 8-page brochure presents quotes from the right wing on
birth control, sexuality education, women's rights, and funding
for family planning. Order publication No. 1679 from:
Marketing Department, Planned Parenthood Federation of
America, 810 Seventh Avenue, New York, NY 10019. Available
in multiples of 100 only: $25.00 for 100; $200.00 for 1,000
(+15% p/h).

Family Life Education Program Ideas (1985) is a 37-page pro-
gram supplement of the National Council of Jewish Women's
Impact Material for Pro-choice: Advocacy, Community Ser-
dices and Training. It is designed to provide ideas on which to
build educational forums that address contemporary issues and
problems which affect individuals and their families. Topics
included are adolescent sexuality, family planning, talk-
ing to children about sex, domestic violence and sexual abuse,
contemporary family problems, and intergenerational and
family relationships. Order from: National Council of Jewish
Women, 15 East 26 Street, New York, NY 10010. Price is $3.00
incl. p/h.

Interviewing the Sexually Abused Child (1985) is a 42-page
book by David P.H. Jones and Mary McQuiston of the C. Henry
Kempe National Center for the Prevention and Treatment of
Child Abuse and Neglect. The chapters address the pressures
on the child victim, the dynamics of victimization, recent
research, legal implications in conducting and recording inter-
views, and a clinical approach to validation. Order from: C.
Henry Kempe National Center, University of Colorado School
of Medicine, 1205 Onelia Street, Denver, CO 80220 for $3.75
(incl. p/h); bulk rates available.

Network Publications has produced a series of six pamphlets
(1985) on communication about sexuality. They are collectively
entitled "Talking With Your:" Young Child About Sex (#129);
Daughter About Her First Pelvic Exam (#121); Parents About
Birth Control (#105); Partner About Birth Control (#118); Part-
ner About Herpes (#119). Order from: Network Publications,
P.O. Box 1830, Santa Cruz, CA 95060 1830. Prices for #129,
#128 and #121 are $.25 each; #105 and #118 are $.15 each; and
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Evaluation of Family Living Sex Education Programs

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Being asked to head the team hired to evaluate the recently implemented family living/sex education program for the public school system in a large northeastern city was a challenging and exciting opportunity. I had done extensive graduate work in the field of sexuality and had been teaching on the college level for thirteen years. What I had not done, up to that point, was immerse myself in the ways in which family living/sex education was implemented in the public school system. I was fully aware that being on the frontlines of implementing a program in an environment that has to be responsive to both political and parental pressures is a difficult task. Conducting the evaluation allowed me to see how family living/sex education was implemented within a large educational bureaucracy. It also allowed me to juxtapose the theory of evaluation with the practice.

Theory

The answer to the question "Why conduct an evaluation?" is implicit to the educational process. The true educator wants to know that goals are being met and that students are learning. While it may be presumed that learning is taking place, program evaluation allows that dynamic to be documented. Kirby (1984) states:

Any social activity, program, or policy designed to alleviate social problems should be carefully evaluated whenever:
1. the program or practice and decisions about it are important,
2. the outcomes cannot be assessed without an evaluation, and
3. informal and nonsystematic observations and information cannot provide sufficient data for decisionmaking. . . .

Without careful evaluation, ineffective practices or programs may be maintained, and effective practices or programs may be cancelled.

There are additional reasons for conducting an evaluation. For example, continued funding of a program is frequently determined by evaluation results. Documentation for the development of additional or newer programs and support for teaching lines is usually necessary; such documentation can be found within evaluation data.

FOCUS. What focus an evaluation takes varies from program to program. Student achievement is often of paramount importance. In the area of family living/sex education, evaluation often addresses changes in students' knowledge, attitudes, and behavior. Kirby (1984) points out that educators hope sexuality education will have the following effects:

Improve interpersonal communication, decisionmaking, responsibility, social relationships, and self esteem, and that it will reduce unwanted sexual activity, unprotected intercourse, unwanted pregnancies, sexually transmitted diseases, rape, and some sexual dysfunctions.

These are the desired outcomes of many sexuality programs; assessing whether or not they are met may be part of the evaluation process. Behavioral changes in many of these areas are also difficult to measure, particularly within the time frame of the typical evaluation.

Evaluation may also address a variety of other issues critical to the successful implementation of a family living/sex education program. These include: the structure and development of the curriculum; the model used for the training of teachers; teacher reactions to their preparation; administrator response to the program; effectiveness of teaching strategies used in the classroom; appropriateness of films, videos, books, etc., used in the program; how the class is structured, student reactions to the program, classroom, and teacher; parents' reactions to the program, changes in parents' relationships with their children, particularly in the area of improved communication; and problems that arose in the process of implementing the program.

Wagman and Cooper (1981) outline the steps to be taken when planning an evaluation. First, it is necessary to determine what is to be evaluated and why. Within that determination are programmatic objectives, for whom the evaluation is being conducted, and what information is needed. Moreover, the evaluation should obtain responses to questions which are then analyzed. Second, the design of the evaluation itself must be developed. This includes the form in which information will be reported, the methods used to collect the information, and the form of analysis used to examine the data. Finally, questions assessing the feasibility of the plan itself must be addressed. For example, is the evaluation adequately budgeted, are there political considerations, and/or will people be offended by certain questions asked.

While there are generic issues related to the evaluation of educational programs, there are some specific issues and con-

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cerns that arise when the educational program is family living/sex education. Many evaluation designs attempt to yield quantitative data. The value of qualitative data, however, can be great in comparison to quantitative data, particularly when programs are new. For example, it can be premature to measure a change in students' self esteem after their first exposure to the program, yet very useful to allow students to describe the three most important things they've learned from the lessons experienced. Collecting qualitative data may also allow an evaluation to proceed with participants from all levels able to share their experiences in a less threatening environment. Quantitative data has the potential to be threatening.

**QUANTITATIVE DATA.** When quantitative data is desired, questionnaires with a high degree of validity and reliability must be developed. An increasing number of questionnaires do exist for family living/sex education, and need not be designed from scratch (see references). With evaluations in this field, however, validity and reliability of the instruments is not sufficient. An added factor of "acceptable" becomes part of the design process. Can the questions be asked that seem critical and phrased such that individuals and/or groups are not offended? When the evaluation is conducted, being able to generalize from the results is desirable; this can be accomplished by having broad access to the subjects under study, often through the use of a random sample. Because family living/sex education is perceived as a curriculum that is sensitive, political, and controversial, even those with strong programs may be hesitant to go "on record" with a description of their program. It may seem wiser to proceed quietly than be held up as a model of success. Consequently, the evaluator may not be able to have the kind of access to the field that is desired.

Finally, another area that relates to the evaluation of family living/sex education is the accuracy of the data collected. Unfortunately, defensiveness, a desire to give the "correct" answer or impression, and a concern for public image may bias the information provided. Information obtained through interviews may be exaggerated toward the positive; anonymity may not seem adequate to insure privacy on quantitative instruments.

Kirby, Alter, and Scales (1979) provide an excellent review of the various options available for conducting evaluations, with their respective advantages and disadvantages. In addition, they make recommendations which are particularly useful when the limitations imposed by a particular setting are clear.

**A Case Study**

**SETTING.** The city where the evaluation to be described took place functions with a centralized board of education, which has varied degrees of control over the work of the public schools. Within the educational system, the elementary and junior high schools are grouped into numerous school districts, each with their own school boards and superintendents. The local school districts then work collectively with one division from the central board of education. The high schools function more independently, and work with a division of high schools within the central board of education.

**SUPERVISION.** The supervision for the implementation of the newly revised family living/sex education curriculum, for grades K-12, was the responsibility of a central board of education office for health and physical education. The earlier version of this curriculum had been taught extensively for years at the high school level, to varying degrees at the junior high level, and very little at the elementary level. The primary efforts during the first two years of implementation were directed toward the training of large numbers of teachers and obtaining community support for the program. Since there was no centralized mandate for the curriculum, each school district could choose whether or not to implement the curriculum, and if so, to offer it as published or to modify it to meet local concerns. While such variations reflected the philosophy of local autonomy, they affected the evaluation design and complicated the ability to generalize.

**EVALUATION PLAN.** I joined the evaluation project after an evaluation plan for the first year of implementation had been developed and approved by the central board of education offices involved with evaluation. The plan proposed using a pretest/posttest format for assessing: changes in teachers' knowledge and comfort with family living/sex education as a result of training received; changes in students' knowledge and attitudes as a result of the program; and changes in parents' concerns as a result of their familiarity with the program and having their children participate. The second year's evaluation plan kept the pretest/postest format for testing student progress, yet as a result of the modifications in the plan for the first year, included more qualitative information about the process of implementation at the local level.

During the two years of evaluation, it seemed appropriate to rely on more qualitative data for the evaluation of the program. Except for the high schools, implementation of family living/sex education was a new phenomena and both teacher training and community preparation were quite time-intensive. Interviews with administrators, teachers, and parents in the field replaced a pretest/posttest design. The evaluation team sought to be able to describe the various strategies used to implement the program, and note the variety of concerns and obstacles to success.

**INSTRUMENT DESIGN.** The development of student questionnaire was a lengthy and frustrating process. Questions were to be developed for three grades—5th, 8th, and 11th—to match curriculum material taught at those grades. Those three grades had been selected by the health and physical education unit as most appropriate for testing.

One basic problem was that a knowledge and attitude test had to be developed to be distributed citywide, yet there was no assurance that all the students who would be taking the test had been taught the same content. (The curriculum recommends issues to be dealt with at various grade levels, and suggests teaching strategies and materials to use; each district, school, and/or teacher however, is free to modify what is in the document.) More specifically, the overall validity of using a centrally-developed instrument for testing where implementation varied, was questionable. It was not feasible, however, to develop tests specific to each school and/or classroom.

A problem unique to this effort, was that the questions asked...
had to be “safe.” Since the ultimate goal for the program was to get the curriculum in all schools within the city system, any test used should not risk inciting the opposition. For example, it was deemed inappropriate to ask students about their attitudes toward the sensitive topics of abortion, homosexuality, and masturbation. Students could be asked attitudinal questions about relationships, family, decision making, and sex roles as long as the items were non-controversial in tone. Knowledge items focused almost exclusively on anatomy and physiology, reproduction, and sexually transmitted diseases.

After piloting the various student questionnaires and removing items which were not discriminating, the questionnaires were presented to a citywide advisory committee composed of community representatives, agency representatives, clergy, parents, and teachers for approval. Their concerns were addressed before the test was used.

What is most frustrating in evaluating student outcomes for family living/sex education, is that what the educator really wants to know is how students change their behavior, yet that area of inquiry is usually off-limits. It is unquestionably important to examine student knowledge about their bodies, attitudes held about male and female sex roles, and how they value independent thinking in making choices for themselves. The critical measure of long-term success of the program would be to assess how students integrate the material into their own lives. In other words, what are students doing? How are students living? Such questions have been asked in some evaluation projects, to do so here was out of the question, particularly since there were such tremendous efforts being made to get parental support for the program.

Fortunately, the evaluation team was able to develop a questionnaire for students allowing them to provide their reactions to the program. They were asked about change in their communication patterns with family and friends as a result of experiencing the curriculum. Their responses provided some of the most interesting data we obtained.

DATA COLLECTION. In order to gain access to school districts and schools, permission had to be obtained from superintendents and principals. The process could take up to one month to complete, yet once personnel understood what information was desired, the majority were willing to be interviewed.

Testing, however, posed other problems. First of all, it was not possible to obtain any kind of control group for comparison. Only those students who were receiving the program would be tested. Since the number of high schools was enormous, recommendations of schools where the program was known to be well-established were made by the office administering the program. Consequently, while the results were interesting, the ability to generalize to the system at large was limited. Additionally, both student misunderstanding of the directions and a high degree of absenteeism affected the size of the sample that could ultimately be matched on the pretest and posttest.

Reflections and Recommendations

While many educational evaluators rely heavily on quantitative data, family living/sex education programs benefit from evaluations that contain qualitative data. Qualitative data can provide a useful description of successful implementation strategies and give an opportunity to administrators, teachers, parents, and students to share their concerns about a curriculum that is more heavily scrutinized than any other offered in schools. Family living/sex education is unlike other programs, and consequently should not be bound by traditional evaluative models.

I remain concerned about the measuring of student outcomes. Longitudinal studies are what the field really needs, yet most evaluations take place at the end of one course; testing may take place over a very short period of time. It seems critical to remember that many of the outcomes such programs are designed to encourage cannot be measured. Student behavior assessment may not be permissible; the changes that take place in students’ lives may not occur for years after a course has been completed. Nonetheless, educational programs should trust that bringing important issues into consciousness is better than not discussing them at all.

Finally, resources do exist (see below) that can be used and modified for evaluation. Researchers do need to develop more successful methodologies for obtaining valid data.

References


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Teacher Selection for Sex Education

Jacqueline Manley
Senior Program Associate, Center for Population Options
Washington, DC

What helps make sexuality education worthwhile, valuable, and acceptable to students, parents, administrators, and a community? The main ingredient is a good sexuality education instructor. What, then, makes a good sexuality education instructor? The answer is a sensitive, knowledgeable, highly-trained individual who, above all, has a thorough understanding of adolescents and who respects and values them for the human beings they are.

Teaching sexuality education is much more difficult and more involved than teaching other subjects, such as history or math, simply because of the sensitivity of personal issues that a sexuality education teacher deals with on a continuing basis. For this reason, teacher selection for sexuality education classes should be made very carefully and with a lot of thought. It is crucial that all professionals who are involved with issues of sexuality be aware of the importance of qualified, capable sexuality educators, both for the maintenance of high standards within our field, and to convey the importance of such standards to decision-making school administrators.

A sexuality educator must be enthusiastic about and comfortable with the subject, knowledgeable and well-trained in human sexuality, truly like and respect adolescents, possess clarity of own values and be accepting of differing value systems, and have well-developed group facilitation skills. What follows is a discussion of each of these areas, including what qualities to look for when selecting an effective sexuality educator.

**Enthusiasm**

*Is the individual sincerely enthusiastic and comfortable enough to teach sexuality education?*

In school settings, I have seen administrators assign individuals the duty of teaching sexuality education based solely on their availability—having a free period or free time. I have seen administrators place sexuality education in subject areas such as social studies or physical education, where well-meaning teachers struggle to teach it without ever having had a course in human sexuality. How can we expect teachers in situations such as these to be comfortable or enthusiastic? They may have no desire to teach the subject, have never clarified their own values concerning sexuality, may not possess the skills needed, and perhaps have had very little or no training in the area of sexuality. I am reminded of a teacher I knew who was assigned the task of a semester-long sexuality education course and was so uncomfortable about it that he showed films, filmstrips, and videos during every class! A selection process that does not take into account the instructor’s willingness and comfort level is doomed to fail.

**Knowledge**

*Is the individual knowledgeable and well-trained in the areas of human sexuality?*

Knowledge, of course, includes factual information about sexuality—the male and female bodies, their biological and psychological development, reproductive systems, pregnancy, and contraception. But, just as important, knowledge must include the recognition of the adolescents’ world with all their problems, frustrations, feelings, and needs. A successful sexuality educator will also be constantly aware of social and environmental changes, and the effects they may have on the sexual attitudes of adolescents.

Knowledge also must include knowing oneself. A good sexuality education instructor is one who recognizes his/her own value system, and does not impose it upon others, knows his/her own prejudices, and has evaluated his/her own feelings about teens and sex. A successful sexuality educator is non-judgemental about conflicting views, and knowledgeable and responsive to the basic values of the community and of society.

Training for sexuality educators is absolutely essential, whether the teacher is just beginning or has been teaching the subject for years. Initially, 30–40 hours of sexuality education is suggested as a minimum, with update trainings periodically throughout the year. In such a rapidly changing field, continuous education for all teachers is absolutely necessary. In the interim, keeping up to date through reading journals and articles is an additional way to keep abreast of new developments and research in the field.

Comprehensive training for sexuality educators is very often overlooked and/or deemed unnecessary by administrators. It is unthinkable to believe that a six hour training for a beginning sexuality educator is sufficient, and yet this does occur more often than we would like to think. It is the job of all of us in the
field to educate these decision-making administrators on the importance of extended, quality, ongoing training for sexuality educators.

Trust

Does the teacher sincerely like and respect adolescents?

The instructor's attitude toward adolescents is probably the most important single ingredient to having a successful sexuality education program. Commitment to and caring about adolescents must be a part of the teacher's personality to ensure success. By respecting adolescents, one places a value on them, learns from them, recognizes their worth as individuals, and discovers the potential within them. A perceptive teacher will know, however, that there will be varying degrees of success with adolescents and will accept that some adolescents will, at times, resort to non-conforming behavior. We must accept the fact that mistakes will occur which disappoint or frustrate us as adults. Expecting and accepting these negative incidents in the development of adolescents, and helping them to recognize their uncertainties and learn how to cope with them will build a bond of respect and trust that cannot be easily broken. An atmosphere of trust, understanding, and respect will enhance a sexuality education program by providing a setting that is "safe" and conducive to sharing experiences, thoughts, and feelings.

Values

Is the instructor able to clarify his or her own values, teach without imposing these values, and recognize and support differing value systems of students and their families?

Values are basic to a sexuality education program and are an area which can provide constant concern for a sexuality educator. Therefore, it is vitally important for a sexuality education instructor to recognize the variations in value systems within a community and be able to work with adolescents in helping them to identify their own personal values and beliefs. For adolescents to take control of their lives, they must develop high self esteem, and a sense of self worth. By identifying and being comfortable with their own value system, they can begin to develop the self confidence needed for healthy development and responsible decision-making. A solid sense of values will also help an adolescent resist pressure by peers to engage in an activity which is in conflict with their own beliefs. A good sexuality educator can aid students in becoming non-judgemental and respectful of others whose values might be different.

Skill

Does the teacher have the skills needed to work with adolescents?

A sense of rapport with adolescents is a necessity to be able to teach sexuality education successfully. Because of the sensitivity of the subject matter, and because adolescents may be lacking self-confidence, be overly sensitive, and perhaps even vulnerable, the ability to give of oneself, communicate, and relate are the important skills needed to reach adolescents.

To give of oneself simply means to become an active participant—to share oneself in appropriate ways, yet maintain the role of the instructor. If comfortable, one can decide to respond openly to select personal questions, but at the same time use the opportunity to point out the differences between information that is private vs. that which is public. Many sexuality education teachers participate by simply removing themselves from the front of the room, and become an integral part of the group by sharing in the discussions and participating in the exercises.

A sexuality educator must possess good communication skills, including giving and receiving both verbal and non-verbal messages. Appropriate material must be presented in a clear and straightforward manner, without signs of embarrassment, being careful not to give mixed messages. A good teacher will encourage honest discussion, "read" body language, and really hear what is being said by active listening techniques. Some teachers are very special and have the intuitive ability to sense moods, interests, frustrations, and excitement of the group or individuals. This "art of communication" enables them to readily identify adolescents' feelings and concerns.

Some adults may have wonderful communication skills but are just unable to relate to adolescents. Relating to adolescents means communicating on their level of understanding and establishing a mutual respect, trust, and honesty between teacher and student. As one can understand, any course involving sensitive issues, emotions, and attitudes, such as sexuality education, would require an individual with the ability to relate to adolescents.

Conclusion

To find a person with all of the qualities discussed may seem impossible. But remember that some of the characteristics can be developed through training—group and communication skills, knowledge, clarifying one's values—and others cannot. If a person does not want to teach sexuality education, or has no rapport with or ability to relate to adolescents, no amount of training will qualify this individual for sexuality education.

To ensure a successful sexuality education program, one must have a very special and qualified teacher who is committed to, respected by, and supportive of young people. The following poem, author unknown, summarizes the qualities of a good teacher.

What a Teacher Needs

The education of a college president,
The executive ability of a financier,
The humility of a deacon,
The adaptability of a chameleon,
The hope of an optimist,
The courage of a hero,
The wisdom of a serpent,
The gentleness of a dove,
The patience of Job,
The grace of God, and
The persistence of the Devil.

—Anonymous
IN MEMORIAM
deryck calderwood, Ph.D.

deryck calderwood, Ph.D., Professor and Director of the Human Sexuality Program at New York University and a member of the Board of Directors of SIECUS for 13 years, died of cancer on August 7th in Summit, New Jersey. He was 63 years old.

Dr. calderwood, one of the outstanding educators in the field of sex education, was recognized nationally and internationally. He was a pioneer in developing curricula and audiovisuals for young people and their parents. Dr. calderwood worked collaboratively with the Unitarian Church for many years developing a curriculum to be used with church youth groups.

Dr. calderwood began his professional career working with the YMCA. It was this experience that lead to his interest in helping young people better understand their sexual health. From 1967 to 1969 he was an educational consultant with the Sex Information and Education Council of the U.S. (SIECUS). In 1970 he joined the faculty of New York University in the Department of Health Education and started the first graduate program in human sexuality education. In addition to being the first of its kind, the program is also unique because of its strong emphasis on cross-cultural aspects of sexual attitudes and behaviors, a special interest of Dr. calderwood. He conducted international study programs in Japan, Kenya, Sri Lanka, Sweden, the Netherlands, and Thailand. Dr. calderwood held the position of Professor and Director of the program until his death.

An active member of many professional groups, Dr. calderwood served on the Board of Directors of the Society for the Scientific Study of Sex, Community Sex Information, Coalition on Sexuality and Disability, and the Sex Information and Education Council of the U.S. (SIECUS). Dr. calderwood was the Chairperson of the SIECUS Board, 1983–1984. He was also a long-time member and committee chairperson for the National Council on Family Relations.

Dr. calderwood is survived by his wife, Martha and three children, Dana Calderwood, Tracy Marmorato, Dean Calderwood; his mother, Mrs. David Calderwood, in Carlsbad, California, and a sister, Maureen Kavalec, in Vista, California.

A private memorial service was held on August 11th in Summit, New Jersey. A public memorial service for colleagues, students, family, and friends was held on September 26th at the Judson Memorial Church in New York City. It is the wish of deryck and his family that contributions be made, in his name, to the Sex Information and Education Council of the U.S., 80 Fifth Avenue, New York, New York 10011.

Thank you, deryck. Your wisdom, wit, and determination are gifts that will live on with all of us.

—Ann Welbourne-Moglia
Executive Director, SIECUS
SEXUALITY EDUCATION PAMPHLETS

A Selected Annotated Bibliography of Resources for Sale

This annotated bibliography was prepared by Brenda Kaufman-Dressler, Ph.D. intern, New York University Human Sexuality Program, and Leigh Hallingby, MSW, MS, manager, Mary S. Calderone Library. Titles were chosen on the basis of providing reliable information and sound guidance about human sexuality for use by educators working with elementary, junior, and senior high school students; parents; teachers and other professionals; men; women; disabled persons, etc. The pamphlets listed are available for use at the Mary S. Calderone Library, 715 Broadway, Room 213, New York University, New York, NY 10003; (212) 673-3850.

These pamphlets, with few exceptions, were published after 1980. Those items published before 1980 were included because the information they present remains valid and in step with current knowledge and/or they are the only resources available for particular subjects. Pamphlets available in Spanish or free are designated by: *S or *F respectively, to the right of the title.

ABORTION

FIVE WAYS TO PREVENT ABORTION (AND ONE WAY THAT WON'T)

NINE REASONS WHY ABORTIONS ARE LEGAL

The first title discusses ways to reduce the need for abortion and the second presents arguments to keep abortion legal, safe, and accessible.

WHAT YOU SHOULD KNOW ABOUT TEENAGE PREGNANCY

WHAT YOU SHOULD KNOW ABOUT TEENAGE PARENTHOOD

With the aid of simple line drawings, these Scriptographic booklets provide basic information teens need to make responsible decisions.

ADOLESCENT PREGNANCY AND PARENTHOOD

CONSIDERING WHAT TO DO

CARING FOR TWO

DETERMINING ON ABORTION

These three illustrated resources for teens on pregnancy provide an overview of the options.

Planned Parenthood Federation of America (PPFA) (both 1983), 810 Seventh Avenue, New York, NY 10009; rates vary from $.15-.50 each depending on quantity ordered, + 15% p/h.

Channing L. Bete (1983, 1982), 200 State Road, South Deerfield, MA 01373-0200; prices vary from $15-$69 each depending on quantity ordered (incl. p/h).

ACOG (both 1980), 600 Maryland Avenue, SW, Washington, D.C. 20024; sold in lots of 100 for $8.00 + $2.00 p/h.

Planned Parenthood Association of Miami Valley (1983), 224 N. Wilkinson Street, Dayton, OH 45402; prices vary from $08-$2.00 each depending on quantity ordered, + 10% p/h.

Planned Parenthood Federation of America (PPFA) (both 1980, 1981, and 1984 rev.), 810 Seventh Avenue, New York, NY 10009; prices vary from $1.12-$5.00 each depending on quantity ordered, + 15% p/h.

FOR YOUR INFORMATION:

TEENAGE PREGNANCY

Linda Leftoff-Kramer

This pamphlet summarizes data for teens concerning sexual activity, contraceptive use, and outcomes and consequences of pregnancy.

All of the resources cited may be ordered from the publishers and distributors listed below. Please note that, except for the items published by SIECUS itself, SIECUS does not sell or distribute any of these pamphlets. If postage and handling (p/h) are not included, it is best to add 15% to cover these costs. Wherever possible, a range of prices is indicated for multiple copies. Check with the publishers and distributors for further details. Most of them have complete publications lists and catalogs which are available at no charge.

Planned Parenthood Association of Miami Valley, 50 copies, $11.00 + $2.00 p/h; sold in lots of 50.

ACOG (1985), 600 Maryland Avenue, SW, Washington, D.C. 20024; sold in lots of 100 for $800 + $2.00 p/h.

Planned Parenthood Federation of America (PPFA) (both 1980), 1164 Bishop Street, Suite 1220, Honolulu, HI 96813; first title, $65; second title, $50, + 15% p/h; sold in lots of 50.

HOW CAN YOU TELL IF YOU'RE REALLY IN LOVE

Sol Gordon and Kathleen Every

This educational comic book for teenagers depicts love in immature and mature relationships.

SIECUS Report, November–December 1986
I NEVER THOUGHT IT COULD HAPPEN TO ME

This pamphlet encourages teen males to share and care in the responsibility for preventing unplanned pregnancies (6 pp.).

Planned Parenthood of Santa Barbara (1984), 518 Carden Street, Santa Barbara, CA 93101; prices vary from $1.25-$J.50 each depending on quantity ordered, + 15% p/h.

MAKE A LIFE FOR YOURSELF: A BOOKLET FOR TEENS ABOUT LIFE PLANNING
Debra Halfiner and Sean Casey

This booklet provides teens with information about goal setting, high school completion, delayed sexual activity and childbearing, and employment preparation.

Center for Population Options (1986), 1012 14th Street, NW, Suite 1200, Washington, DC 20005; prices vary from $0.80-$1.00 each depending on quantity ordered.

A MAN’S GUIDE TO SEXUALITY

Sexuality Alphabet

Directed toward sexually active male teens, the first pamphlet deals with roles, values clarification, and decision-making as it relates to sexual behavior and relationships.

The second resource includes over fifty definitions relating to sexuality and sexual parts of the body. Illustrations depict male and female reproductive physiology and birth control methods (24 pp. each).

Center for Population Options (1986), 1012 14th Street, NW, Suite 1200, Washington, DC 20005; prices vary from $0.80-$1.00 each depending on quantity ordered.

TEEN QUESTIONS ABOUT SEX...AND ANSWERS
Marilyn Lyman

This booklet provides illustrated answers to the concerns that teenagers have about sex (30 pp.).

Planned Parenthood Center of Syracuse (1983 rev.), 1120 East Genesee Street, Syracuse, NY 13220; prices vary from $1.95-$2.50 each depending on quantity ordered, + 15% p/h.

ADULT SEXUALITY

FEELING FIT IN THE FORTIES AND FIFTIES
Marilyn Lyman

Using a self-help approach, this booklet provides basic information about body changes, health, and sex problems during the middle years (29 pp.).

Planned Parenthood Center of Syracuse (1983), 1120 East Genesee Street, Syracuse, NY 13220; prices vary from $1.95-$2.50 depending on quantity ordered, + $1.00-$6.50 p/h.

THE GREAT ORGASM ROBBERY

This pamphlet takes a humorous approach to lovemaking and its problems, normal vs. abnormal, guilt, pleasure, communication, masturbation, courtship, and love (14 pp.).

RAI Publications (1980), PO Box 15720, Lakewood, CO 80228; prices vary from $1.35-$1.50 each depending on quantity ordered (incl. p/h).

MEN AND WOMEN—WHAT WE KNOW ABOUT LOVE (#592)
Norman M. Lobenszt

This pamphlet explores the meanings of love and how adults learn to love, and makes suggestions for more effective loving (24 pp.).

Public Affairs Committee (1981), 381 Park Avenue South, New York, NY 10016; prices vary from $4.00-$12.00 each depending on quantity ordered (incl. p/h).

CHILD SEXUAL ABUSE/INCEST

ABOUT INCEST
WHAT EVERYONE SHOULD KNOW ABOUT THE SEXUAL ABUSE OF CHILDREN

These simply written and illustrated Scriptographic booklets discuss who sexually abuses children and why, the effects, and how to help and protect children from incest and sexual abuse (15 pp. each).

Channing L. Bete (1985, 1982), 200 State Road, South Deerfield, MA 13723; prices vary from $1.35-$6.00 each depending on quantity ordered (incl. p/h).

CHILD ABUSE PREVENTION SERIES
Eric Berg and Kay Clark

This pocket size book for children presents basic sexual abuse protection principles. Designed to be progressively more sophisticated at each level, the booklets are: Touch Talk! (grades K-2), Stop It! (grades 3-4) and Tell Someone! (grades 5-6). Three companion pamphlets for adults make specific suggestions for discussion appropriate to each grade level (children’s, 16 pp.; adults, 8 pp.).

Network Publications (1985), 1700 Mission Street, Suite 203, PO Box 1830, Santa Cruz, CA 95061-1830; prices vary from $.24-$5.00 (children’s) and from $1.25-$5.00 (adults) depending on quantity ordered, + 15% p/h.

INCEST: FAMILY PROBLEM, COMMUNITY CONCERN
Evelyn Stroste

This pamphlet provides basic information on incest (24 pp.).

Public Affairs Committee (1985), 381 Park Avenue South, New York, NY 10016; prices vary from $4.00-$10.00 depending on quantity ordered (incl. p/h).

TALKING ABOUT CHILD SEXUAL ABUSE
Conetta Semchuk

Written in question and answer format, this resource gives the basic facts about child sexual abuse and how to talk to children about it. Available in Spanish under the title Hablemos Acerca Del Abuso Sexual Del Menor (16 pp.).


TOUCH AND SEXUAL ABUSE: HOW TO TALK TO YOUR CHILDREN
Cordelia Kent

Basic information for parents and professionals on talking with children about sexual assault is provided (4 pp.).

Network Publications (1984 rev.), 1700 Mission Street, Suite 203, PO Box 1830, Santa Cruz, CA 95061-1830; prices vary from $1.25-$5.25 depending on quantity ordered, + 15% p/h.

AIDS

ACQUIRED IMMUNE DEFICIENCY SYNDROME: 100 QUESTIONS AND ANSWERS

* Questions are organized into sections regarding risk groups, transmission, incidence, diagnosis, treatment, prevention, care, risk reduction, human rights issues, and AIDS in children (20 pp.).

AIDS Institute (1985), New York State Health Department, Empire State Plaza, Corning Tower, Room 1931, Albany, N.Y. 12237; free to New York residents; single copies free to non-residents.

AIDS: FEARS AND FACTS. PUBLIC AFFAIRS PAMPHLET #639
Michael H. K. Irwin

This pamphlet focuses on what is known and, without minimizing the seriousness of the disease, dispels many misconceptions about it (28 pp.).

Public Affairs Committee (1986), 381 Park Avenue South, New York, NY 10016; prices vary from $4.00-$10.00 each depending on quantity ordered (incl. p/h).

AIDS HOTLINE
* 5

WOMEN AND AIDS

The first title answers the eleven most frequently
asked questions about AIDS. One side is in English and the other in Spanish. The second title discusses AIDS risk reduction for women, as well as AIDS and pregnancy, artificial insemination, home care, etc. (2 pp. each).

MEDICAL ANSWERS ABOUT AIDS *F
Lawrence Mass

This booklet spells out basic questions and answers about AIDS, as well as gives referrals and resources (42 pp.).

Cay Men's Health Crisis (1986 rev.), Box 274, 132 West 24th Street, New York, NY 10011; single copies free.

WHAT DO WE KNOW ABOUT AIDS?, Revised Edition
Mary Nelson

WHAT WOMEN SHOULD KNOW ABOUT AIDS
Julia Chiapella

First title focuses on what AIDS is, how people get it, symptoms, prevention, and the possibility of a future vaccine and/or cure.

Second title focuses on which women are most at risk, when women should be tested, and how women can keep from getting AIDS (6 pp. each).

Network Publications, (1986), PO. Box 1830, Santa Cruz, CA 95061-1830; price vary from $1.15-$2.25 each depending on quantity ordered, + 15% p/h.

WHAT EVERYONE SHOULD KNOW ABOUT AIDS *S

WHAT GAY AND BISEXUAL MEN SHOULD KNOW ABOUT AIDS

WHY YOU SHOULD BE INFORMED ABOUT AIDS: INFORMATION FOR HEALTH-CARE PERSONNEL AND OTHER CARE PROVIDERS

These are part of the Scriptographic booklet series, noted for easy reading and lively graphics. The one for the general public is also available in Spanish under the title Sobre A/D5 (16 pp. each).

Channing L. Bete Co. (1985), 200 State Road, South Deerfield, MA 01373; prices vary from $1.15-$6.99 each depending on quantity ordered.

CONTRACEPTION

ALL ABOUT BIRTH CONTROL
Linda Leftoff-Kramer

This easy-to-understand handbook provides basic information about contraception (16 pp.).

Planned Parenthood Association of Miami Valley (1984), 224 North Wilkinson Street, Dayton OH 45402; prices vary from $12-$35 each depending on quantity ordered, + 10% p/h.

BASICS OF BIRTH CONTROL
CAN SMOKERS TAKE THE PILL?
GUIDE TO BIRTH CONTROL: SEVEN ACCEPTED METHODS OF CONTRACEPTION
VAGINAL CONTRACEPTIVE SPONGE
YOU AND THE PILL

These illustrated resources on contraception are for both women and men (8 pp., 8 pp., 24 pp., 12 pp., and 8 pp.).

CHOICES: STOP KIDDING YOURSELF

The first title is a pamphlet about contraceptive methods, and the second is a single-fold leaflet for young women focusing on the choice between contraception and pregnancy (28 pp., 1 pp.).

RAJ Publications (1981, undated), PO. Box 18399, Denver, CO 80218; prices vary from $1.00-$1.50 each depending on title and quantity ordered (incl. p/h).

COMPARING CONTRACEPTIVES *F
Judith Willis

The benefits, risks, and effectiveness of the IUD, diaphragm, oral contraceptive, cervical cap, natural family planning, and sterilization are examined in this pamphlet (8 pp.).

National Clearinghouse for Family Planning Information (1985), PO. Box 12923, Arlington, VA 22209; free.

DO YOU HAVE WHAT IT TAKES? MÉTODOS ANTICONCEPTIVOS *S

The first title provides basic information for adults on the advantages, disadvantages, and effectiveness of various birth control methods and also includes a quiz about contraception.

The second title encourages adults to plan their families and contains a chart outlining birth control methods (16 pp., 8 pp.).

Planned Parenthood of Houston and Southeast Texas (1985, undated), 3601 Fannin, Houston TX 77004; prices vary from $2.25-$3.50 each depending on title and quantity ordered, + 15% p/h.

FOAMS AND CONDOMS
THANK GOODNESS YOU'RE NOT PREGNANT THIS TIME
VOYAGE THROUGH A FAMILY PLANNING CLINIC

The first resource describes foam and condoms, including their effectiveness rates, convenience, and advantages.

The second, a valuable tool for clinic staff to use with clients, is a concise brochure on the basics of birth control.

The third resource is designed to give teenagers information about the medical and other procedures in a birth control clinic (8 pp., 8 pp., and 4 pp.).

Hawaii Planned Parenthood (1981, undated), 1164 Bishop Street, Suite 1220, Honolulu, HI 96813; first and second titles, $2.25; third title, $1.15; sold in lots of 50 + 15% p/h.

PREG-NOT: A MODERN GUIDE TO THE PILL AND OTHER CONTRACEPTIVES
Jennifer James

This pamphlet provides basic information about birth control for women, emphasizing following instructions for each method and gaining control over one's life (19 pp.).

DIN Publications (1985), PO. Box 21126, Phoenix AZ 85036; prices vary from $0.75-$1.50 each depending on quantity ordered, + 10% p/h.

DES

DAUGHTERS AND SONS OF DES MOTHERS

Questions and answers for DES women and men who may be family planning patients are presented (8 pp.).

PPFA (1985 rev.), 810 Seventh Avenue, New York, NY 10019; prices vary from $1.00-$5.00 each depending on quantity ordered, + 15% p/h.

DES EXPOSURE: QUESTIONS & ANSWERS FOR MOTHERS, DAUGHTERS & SONS

This pamphlet answers questions of the women who received DES during pregnancy and of the children born to them, describes the differences between a DES exam and a regular gynecological exam, and provides a list of names under which DES has been sold (16 pp.).

DES Action (1984), 2845 24th Street, San Francisco, CA 94110; single copies, $2.00; 10 or more copies, $1.50 (incl. p/h).

DISABLED PERSONS AND SEXUALITY

ABOUT SEXUALITY AND PEOPLE WITH DISABILITIES

This Scriptographic booklet helps disabled people learn to express their sexuality (16 pp.).

Channing L. Bette (1985), 200 State Road, South Deerfield, MA 01373-0200; prices vary from $.40-$1.00 each depending on quantity ordered (incl. p/h).

SEX EDUCATION FOR DISABLED PERSONS
Irving R. Dickman

This pamphlet outlines the sexual concerns of the disabled (28 pp.).

Public Affairs Committee (1975), 381 Park Avenue South, New York, NY 10016; prices vary from $4.00-$7.00 each depending on quantity ordered (incl. p/h).

FEMALE SEXUAL HEALTH

BREAST CANCER: WE'RE MAKING PROGRESS EVERY DAY *F
QUESTIONS & ANSWERS ABOUT BREAST LUMPS *F

The myths, risks, signs, treatment, and prevention of breast cancer are covered in these two pamphlets (12 pp., 14 pp.).

Office of Cancer Communications (both 1983 rev.), Building 31, Room 1014B, National Cancer Institute, Bethesda, MD 20205; no charge for up to 50 copies of first title and up to 25 copies of the second title.
CYSTITIS ENDOMETRIOSIS NGU

The first resource describes the symptoms, causes, prevention, and treatment of this painful bladder infection affecting many women.

The second pamphlet describes the same aspects of endometriosis, a common cause of infertility.

The third provides basic information about non-gonococcal urethritis (6 pp. each).

Network Publications (1984, 1985, and 1985), 1700 Mission Street, Suite 203, P.O. Box 1830, Santa Cruz, CA 95060; prices vary from $1.25-$1.50 each depending on the quantity ordered + 10% p/h; minimum order, $100

FOR YOUR INFORMATION: THE PELVIC EXAM Linda Leikoff-Kramer

This brochure acquaints women with the pelvic exam and provides questions to ask the clinician (6 pp.).

Planned Parenthood Association of Miami Valley (1983), 224 North Wilkinson Street, Dayton, OH 45402; prices vary from $0.66-$0.26 each depending on quantity ordered, + 10% p/h.

MAMMOGRAPHY SAVING MORE LIVES *F

This brochure contains diagnostic tests, treatment, and prevention of breast cancer for women (6 pp. each).


NOT EVERYTHING WRONG DOWN THERE IS 0

Pamela Pawlik

SEX AFTER SOBRIETY Gayle Rosellini

The first resource provides basic information on vaginitis, urinary tract infections, scabies, and lice. Gained to the recovering woman alcoholic, the second pamphlet deals with sexuality and intimacy needs in treatment programs (12 pp., 8 pp.).

DIN Publications (1985, 1983), P.O. Box 515, Phoenix, AZ 85010; single copies, $.25 with a stamped, self-addressed #10 envelope; bulk prices vary from $.08-$25 each depending on quantity ordered, + 10% p/h.

PELVIC EXAM: YOUR KEY TO GOOD HEALTH *S

This pamphlet is written in a warm, supportive tone for "first timers" or any woman who may be apprehensive about this preventive health procedure. It is available in Spanish under title Examen de la Pelvis: Clave de La Salud Femenina (20 pp.).

PPFA (1984), 810 Seventh Avenue, New York, NY 10019; prices vary from $1.50-$3.00 each depending on quantity ordered, + 10% p/h.

WHAT EVERY WOMEN SHOULD KNOW ABOUT VAGINAL INFECTIONS

This Scriptographic graphic brochure provides basic facts about vaginal infections for women (6 pp.).

Channing L. Bete (1983), 200 State Road, South Deerfield, MA 01373; prices vary from $.69-$1.50 each depending on quantity ordered, + 15% p/h.

$1.50-$69 each depending on quantity ordered (incl. p/h).

YOUR PAP TEST *S

Nancy Raines Day

Information is presented on colposcopy, biopsy, curettage, cryosurgery, and cone biopsy. Patients are reassured that after treatment, most PAP test results are normal. It is also available in Spanish (8 pp.).

Krames Communications (1985), 312 90th Street, Daly City, CA 94015-2621; prices vary from $3.50-$1.10 each depending on quantity ordered, minimum order, $100 + 15% p/h.

FERTILITY

UNDERSTANDING FERTILITY PROBLEMS

Rebecca Taylor

Reasons for infertility and the treatments that can be used to increase a couple's chances of conceived are explored in this pamphlet (16 pp.).

Krames Communications (1983), 312 90th Street, Daly City, CA 94015-1898; prices vary from $6.50-$1.25 each depending on quantity ordered, + 15% p/h.

HERPES

ABOUT HERPES

This Scriptographic booklet contains the facts to stop the spread of herpes and help people cope with the disease (16 pp.).

Channing L. Bete (1983), 200 State Road, South Deerfield, MA 01373; prices vary from $1.50-$6.90 each depending on quantity ordered (incl. p/h).

GENITAL HERPES: QUESTIONS AND ANSWERS

This pamphlet covers the subject matter in a concise, effective manner (28 pp.).

PPFA (1984), 810 Seventh Avenue, New York, NY 10019; prices vary from $3.25-$5.00 each depending on quantity ordered, + 15% p/h.

THE HERPES PERPLEX

Comprehensive information about herpes is presented, including answers on causes, complications, symptoms, recurrence, problems, treatment, prevention, and the progress made in ending herpes (8 pp.).

DIN Publications (1985), P.O. Box 515, Phoenix, AZ 85010; prices vary from $1.08-$2.50 each depending on quantity ordered, + 10% p/h.

A SELF-DEFENSE MANUAL ON HERPES

This pamphlet uses a humorous approach to explore the physical, psychological, social, and medical aspects of herpes (16 pp.).

Krames Communications (1983), P.O. Box 1839, Denver, CO 80218; prices vary from $.35-$1.50 each depending on quantity ordered (incl. p/h).

SOME QUESTIONS AND ANSWERS ABOUT HERPES

This sensitive brochure for persons who have herpes provides scientific information and addresses the social and personal issues involved (10 pp.).

American Social Health Association (1985), Box 100, Palo Alto, CA 94306; prices vary from $.08-$1.50 each depending on quantity ordered.

HOMOSEXUALITY

ABOUT OUR CHILDREN *F *S READ THIS BEFORE COMING OUT TO YOUR PARENTS *F

Designed for parents, the first booklet addresses myths and stereotypes about homosexuals and includes translations of the text into Chinese, French, Japanese and Spanish.

The second resource focuses on the questions gay youth should consider before sharing their sexual orientation with their parents (15 pp., 14 pp.).

Federation of Parents FALG (1982, 1984), P.O. Box 25465, Los Angeles, CA 90024; or Parents of Gays, P.O. Box 1571, Philadelphia, PA 19103; single copies live with a #10 stamped, self-addressed envelope; bulk prices vary from $.20-$2.50 each depending on quantity ordered (incl. p/h).

CAN WE UNDERSTAND? A GUIDE FOR PARENTS

The questions and concerns addressed are those most frequently heard from parents who have recently found out that their children are homosexual (14 pp.).

New York City Parents of Lesbians and Gay Men (1983), P.O. Box 553 Lenox Hill Station, New York, NY 10021; $50 (incl. p/h)

CHANGING VIEWS OF HOMOSEXUALITY (8563)

Elizabeth Ogg

This pamphlet covers the subject matter in a concise, effective manner (28 pp.).

Public Affairs Committee (1978), 381 Park Avenue South, New York NY 10016; prices vary from $40-$100 depending on quantity ordered (incl. p/h).

MALE SEXUAL HEALTH

THE COMBINATION

Written for men, this booklet explores friendship between the sexes, dating, sex, sexual stereotypes, performance, and sexual role playing (19 pp.).

RAJ Publications (1977), P.O. Box 18599, Denver, CO 80218; prices vary from $.36-$1.50 each depending on quantity ordered (incl. p/h).

FOR MEN ABOUT BIRTH CONTROL

Roger C. Wade, Ph.D.

The author provides basic information on con-
The gift of menopause

This pamphlet informs women of changes that occur with menopause and makes suggestions regarding lifestyle, health habits, and diet. (6 pp.)

Planned Parenthood of Atlanta (undated), 100 Edgewood Avenue N.E., Suite 1604, Atlanta, GA 30303; prices vary from $10–$50 depending on quantity ordered, + 15% p/h.

Menopause

Physical and emotional changes and ways to relieve problems if they arise during this period of a woman’s life are discussed (8 pp.).

Krames Communications (1980), 312 90th Street, Daly City, CA 94015–1898; prices vary from $6.50–$12.25 each depending on quantity ordered, + 50% p/h.

Menopause

Designed to help men communicate with their partners about birth control methods, this pamphlet is also available in Spanish (6 pp.).

Planned Parenthood of Metropolitan Washington (1985), 1808 16th Street, N.W., Washington D.C. 20036; single copies free; prices vary from $0.38–$2.00 each depending on quantity ordered, + 15% p/h.

The Prostate Book

This illustrated colorful pamphlet is designed to help male patients understand the need for prostate surgery.

Krames Publications (1984), 312 90th Street, Daly City, CA 94015–1898; prices vary from $6.50–$12.25 each depending on quantity ordered, + 5% p/h.

MENSTRUATION

The title is for women of all ages, and the second is geared to pre-teens and teens (8 pp., 20 pp.).

PPFA (1985 rev.), 810 Seventh Avenue, New York, NY 10019; prices vary from $12–$30 each depending on quantity ordered, + 15% p/h.

The Cycle of Life: Understanding Menstruation

This pamphlet presents the facts about menstruation, dispels the myths, and describes the discomforts and treatments for them (12 pp.).

Life Skills Education (1983), Dept. 33, 541 Columbia Street, Weymouth, MA 02190; prices range from $5.00–$13.35 depending on quantity ordered, + 6% p/h; minimum order, $23.50.

Growing Up and Liking It

Collection of letters, written by three adolescent girls who learn that menstruation is a natural, happy part of growing up, includes a vocabulary list and diagrams of the menstrual cycle. Available in Braille, and in Spanish under the title Estas Creciendo, . . . Diviertete! (26 pp.).

Personal Products (1985 rev.), Educational Services, Box H51–375, Milltown, NJ 08850; single copies free; set of 75, $7.75.

OLDER PEOPLE AND SEXUALITY

American Cancer Society.

Available at no charge from local chapters of the American Cancer Society.

Mainly for Men: Information at a Glance

This single-fold leaflet addresses adult male concerns about sexual self-care, DES, STD's, birth control, and sexual dysfunction (1 p.).

National Office of American Cancer Society (1982), 90 Park Avenue, New York, NY 10016; available at no charge from local chapters of the American Cancer Society.

Men are encouraged to use reliable birth control—i.e., either a condom if they may wish to father a child in the future, or vasectomy if they wish no (more) children (8 pp.).

DIN Publications (1986), P.O. Box 21126, Phoenix, AZ 85036; prices vary from $.10–$3.50 each depending on quantity ordered, + 15% p/h.

Men and Contraception: A Shared Responsibility

Designed to help men communicate with their partners about birth control methods, this pamphlet is also available in Spanish (6 pp.).

Planned Parenthood of Southern Arizona (1984), 127 Soulli Fifth Avenue, Tucson, AZ 85701–2091; prices vary from $1.00–$3.50 each depending on quantity ordered, + 50% p/h.

Planned Parenthood of Metropolitan Washington (1985), 1808 16th Street, N.W., Washington D.C. 20036; single copies free; prices vary from $0.38–$2.00 each depending on quantity ordered, + 15% p/h.

The Prostate Book

Physicians Art Service

This illustrated colorful pamphlet is designed to help male patients understand the need for prostate surgery.

Krames Publications (1980), 312 90th Street, Daly City, CA 94015-1898; prices vary from $6.50–$12.25 each depending on quantity ordered, + 5% p/h.

Menopause

Mainly for men: Information at a glance

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National Office of American Cancer Society (1982), 90 Park Avenue, New York, NY 10016; available at no charge from local chapters of the American Cancer Society.
(1983), 224 North Wilkinson, Dayton, OH 45402; prices vary from $0.80–$2.00 each depending on quantity ordered, + 10% p/h.

HOW SHALL I TELL MY DAUGHTER? *F

This pamphlet is designed to help parents decide when, how and what to tell their daughters about menstruation (14 pp.).

Personal Products (1984 rev.), Educational Services, Box HSI–375, Milltown, NJ 08850; single copies free; set of 25, $2.50.

HOW TO DISCUSS SEX

Basic information to assist parents in communicating with their teenage children about sex includes the ten questions most frequently asked by teens (12 pp.).

Hawaii Planned Parenthood (1986), 1164 Bishop Street, Suite 1220, Honolulu, HI 96813; single copy, $0.65; minimum order, 50 + 15% p/h.

HOW TO TALK TO YOUR CHILD ABOUT SEX

This pamphlet provides specific advice for parents on why, at what age, how, and when to talk to children about sexual concerns (7 pp.).

The National PTA (undated), 700 North Rush Street, Chicago, IL 60611–2571; prices vary from $0.80–$3.00 each depending on quantity ordered (incl. p/h).

HOW TO TALK TO YOUR TEENAGERS ABOUT THE FACTS OF LIFE

This guide for parents describes adolescent physiological changes, reproduction, pregnancy, contraceptive techniques and sexuality (24 pp.).

PPPA (1984 rev.), 810 Seventh Avenue, New York, NY 10019; prices vary from $1.40–$3.00 each depending on quantity ordered, + 15% p/h.

OH NO! WHAT DO I DO NOW? *S

SIECUS and CHOICE

This pamphlet's subtitle is Messages About Sexuality: How To Give Yours To Your Child. It describes an approach for parents of children under six to use in determining possible responses to eight situations and questions commonly encountered. It is also available in Spanish under the title Ay No! ¿Qué Hago Ahora? (24 pp.).

SIECUS (1983), 80 Fifth Avenue, Suite 801, New York, NY 10011; prices vary from $0.75–$1.50 each depending on quantity ordered, + 20% p/h.

OUR CHILDREN'S SELF-ESTEEM: THOUGHTS FOR PARENTS AND TEACHERS

Mary Nelson

This pamphlet describes the role of the feeling of self-worth in teenagers (8 pp.).

Network Publications (1983), 1700 Mission Street, Suite 203, P.O. Box 1830, Santa Cruz, CA 95061–1830; prices vary from $1.00–$1.25 each depending on quantity ordered, + 15% p/h; minimum order, $10.00.

PARENTS: YES YOU CAN! *F

Sally McCormick and Maggi Boyer

This pamphlet offers suggestions for starting discussions on sexuality at home (16 pp.).

Planned Parenthood Association of Bucks County (1981), 721 New Rodgers Road, Bristol, PA 19007; single copies free; bulk prices vary from $0.60–$0.80 each depending on quantity ordered (incl. p/h).

SCHOOLS AND PARENTS: PARTNERS IN SEX EDUCATION (#581)
Sol Gordon and Irving R. Dickman

SEXUALITY, FERTILITY AND INFERTILITY: EPIDEMICS AMONG TEENAGERS (#572)
Lutes Saltman

TEENAGE PREGNANCY: WHAT CAN BE DONE (#594)
Irving R. Dickman

These pamphlets are designed to give advice and accurate information to parents and other audiences (28 pp. each).

Public Affairs Committee (1980, 1977, 1982 and 1981), 381 Park Avenue South, New York, NY 10016; prices vary from $0.40–$1.00 each depending on quantity ordered (incl. p/h).

SEX ON TV
David Lloyd Green

This booklet provides practical, non-threatening examples of how television can be used as a positive springboard for parent/child communication about sexuality (22 pp.).

Network Publications (1982), 1700 Mission Street, P.O. Box 1830, Santa Cruz, CA 95061–1830; prices vary from $1.25–$1.55 each depending on quantity ordered, + 15% p/h.

SHARING THE MYSTERY: HOW AND WHAT TO TEACH YOUR CHILDREN ABOUT SEXUALITY

This pamphlet, using a religious approach, encourages parents to teach their teenagers sexual values (12 pp.).

Forward Moving Publications (1980), 412 Sycamore Street, Cincinnati, OH 45220; single copies, $0.15; minimum order, $10.00.

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR MOTHERS INTERVIEWING PRE-TEEN GIRLS

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR MOTHERS INTERVIEWING PRE-TEEN BOYS

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR FATHERS INTERVIEWING PRE-TEEN GIRLS

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR FATHERS INTERVIEWING PRE-TEEN BOYS

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR TEENAGE MEN INTERVIEWING TEENAGE MEN

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR TEENAGE MEN INTERVIEWING FATHERS

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR TEENAGE WOMEN INTERVIEWING MOTHERS

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR MOTHERS INTERVIEWING TEENAGE WOMEN

TALK TO ME ABOUT SEX, LOVE, AND LIFE: A GUIDE FOR FATHERS INTERVIEWING TEENAGE WOMEN

Three easy-to-understand illustrated booklets, focusing on when babies are born, for young children to read with their parents (7 pp.).

Planned Parenthood of Southern Arizona (1983), 127 South Fifth Avenue, Tucson, AZ 85701–2091; prices vary from $0.30–$0.75 each depending on quantity ordered, + 15% p/h.

Planned Parenthood of Seattle—King County (1983), 221 East Madison, Seattle, WA 98102; prices vary from $2.00–$3.50 per set depending on quantity ordered, + 20% p/h.

TALKING WITH YOUR SON ABOUT BIRTH CONTROL
Kay Clark

This pamphlet assists parents in communicating information and responsibilities concerning birth control to their teenage sons, and also includes materials for boys to help them make informed choices about birth control (17 pp.).

Network Publications (1983), 1700 Mission Street, P.O. Box 1830, Suite 203, Santa Cruz, CA 95061–1830; prices vary from $1.00–$2.50 each depending on quantity ordered; minimum order, $3.00 + 15% p/h.

TALKING WITH YOUR YOUNG CHILD ABOUT SEX
Jane Hiatt

Oriented toward parents of children under age 6, this pamphlet deals with questions this age group may have about sexuality (7 pp.).

Network Publications (1983), 1/40 Mission Street, P.O. Box 1830, Santa Cruz, CA 95061–1830; prices vary from $1.00–$2.50 each depending on quantity ordered; minimum order, $3.00 + 15% p/h.

TEACHING YOUR CHILDREN ABOUT SEXUALITY

This pamphlet outlines the stages of a child's sexual development and focuses on the parent's role as a sex educator (10 pp.).

ACOC (1983), 500 Maryland Avenue, SW, Suite 300 East, Washington, DC 20024–2588; set of 50, $11.00 + $2.00 p/h; sold in lots of 50.

WHAT ARE THEY TEACHING OUR CHILDREN?

Concerns that parents have about sex education classes are outlined in this pamphlet (6 pp.).

Planned Parenthood of Santa Barbara County (1984), 518 Garden Street, Santa Barbara, CA 93101; prices vary from $1.00–$1.50 each depending on quantity ordered, + 15% p/h.

PRE-ADOLESCENT SEXUALITY

A BOOK ABOUT ME

This easy-to-understand illustrated booklet, focusing on how babies are born, is for young children to read with their parents (7 pp.).

Planned Parenthood of South Central Indiana (1980), 421 South College Avenue, Bloomington, IN 47401; prices vary from $0.50–$1.00 each depending on quantity ordered (incl. p/h).

GROWING UP BOYS
Tim Wernette, Brenda Hansen and Kathleen Taylor

Basic facts to help boys go through the changes of puberty are provided (26 pp.).

Planned Parenthood of Southern Arizona (1983), 127 South Fifth Avenue, Tucson, AZ 85701–2091; prices vary from $0.30–$0.75 each depending on quantity ordered, + 15% p/h.
PREGNANCY

CESAREAN BIRTH—A SPECIAL DELIVERY
Kathy Keolker

PLANNING YOUR BABY’S BIRTH
Penny Simkin and Carla Reinke

SEX AFTER THE BABY COMES
Sheila Kitzinger

SEX DURING PREGNANCY
Sheila Kitzinger

VAGINAL BIRTH AFTER CESAREAN
Kathy Keolker

These resources present information and suggestions about childbirth and the post-partum period (4 pp. each).

Pennypress (1981 rev., 1980, 1981, 1982), 1000 23rd Avenue East, Seattle, WA 98112; prices vary from $.20-$1.50 each depending on quantity ordered, + 5% plh.

CHILDHOOD TODAY: WHERE AND HOW TO HAVE YOUR BABY (628)
A PREGNANCY PRIMER: THE IMPORTANCE OF PRENATAL CARE (#636)
Bevery Jacobson

This guide is designed to give basic information to expectant mothers and fathers (28 pp.).

Public Affairs Committee (1984, 1985), 381 Park Avenue South, New York, NY 10016; prices vary from $.50-$1.00 each depending on quantity ordered (incl. plh).

HOW TO HAVE A HEALTHY PREGNANCY
This Scriptographic booklet presents practical advice for expectant mothers about nutrition, exercise, medical care, and avoiding hazards. It is also available in Spanish under the title Cómo Tener un Embarazos Saludables (16 pp.).

Channing L. Bete (1981), 200 State Road, South Deerfield, MA 01373-0200; prices vary from $.50-$6.99 each depending on quantity ordered (incl. plh).

PRENATAL LOVE: CARING BEFORE BIRTH
Janet Rejohnson and Diane Pankow

This pamphlet encourages women to increase their chances of producing a healthy, normal baby (4 pp.).

LSI Life Skills Education (1984), Dept. 33, 541 Columbia Street, Weymouth, MA 02190; prices vary from $.15-$6.99 each depending on quantity ordered (incl. plh).

PREGNANCY OPTIONS
For Your Information: Options in PREGNANCY
Linda Leftoff-Kramer

Alternatives to help pregnant women make decisions about abortion are presented (6 pp.).

Planned Parenthood Association of Miami Valley (1983), 224 North Wilkinson Street, Dayton, OH 45402; prices vary from $0.08-$0.20 each depending on quantity ordered, + 10% plh.

IF SHE’S PREGNANT
Stephen McCallister

This pamphlet was developed for men to consider options to an unplanned pregnancy (8 pp.).

Planned Parenthood of Snohomish County (1982), 2730 Hoyt, Everett, WA 98201; prices vary from $0.25-$0.50 each depending on quantity ordered (incl. plh).

FOR BOYS: A BOOK ABOUT GIRLS
Tim Wermette, Brenda Hansen and Kathleen Taylor

Basic facts to help boys understand the changes of puberty are provided (26 pp.).

Prepared Parenthood of Southern Arizona (1983), 127 South Fifth Avenue, Tucson, AZ 85701-2091; prices vary from $.30-$7.50 each depending on quantity ordered, + 15% plh.

THE PERILS OF PUBERTY THIS IS YOU
These entertaining booklets are about physical changes during puberty. The first is for boys and the last two are for girls (20 pp., 16 pp. and 15 pp.).

RAI Publications (all 1981), PO. Box 15599, Denver, CO 80218; prices vary from $.29-$5.00 each depending on quantity ordered (incl. plh).

PREPARE FOR PREGNANCY
Janet Perfect

This illustrated pamphlet can help women plan pregnancy, teach them about the stages of pregnancy, and give them information about nutrition and exercise (26 pp.).

J. B. Lippincott Company (1981), 127 South Fifth Avenue, Tucson, AZ 85701-2091; prices vary from $.30-$7.50 each depending on quantity ordered, + 15% plh.

THE PROBLEM WITH PUBERTY
This is a series of three brochures that deal with the changes happening to boys and girls during puberty. The brochures provide a description of the changes that are occurring, suggestions for handling the changes, and examples of how to deal with the changes of puberty (9 pp. each).

Persona/Products (1985 rev.), Educational Services, 2730 Hoyt, Everett, WA 98201; prices vary from $.25-$.50 each depending on quantity ordered, + 10% plh.

THE PERILS OF PUBERTY
This is a series of three brochures that deal with the changes happening to boys and girls during puberty. The brochures provide a description of the changes that are occurring, suggestions for handling the changes, and examples of how to deal with the changes of puberty (9 pp. each).

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Persona/Products (1985 rev.), Educational Services, 2730 Hoyt, Everett, WA 98201; prices vary from $.25-$.50 each depending on quantity ordered, + 10% plh.

RAPE
RAPE: AWARENESS & PREVENTION
Jill Strand and K.A.P.E. Program

This pamphlet covers general rape information, myths and facts, date rape, acquaintance rape, family reactions, communication, and rape prevention (8 pp.).

Tecumseh Area Planned Parenthood (1986), 1061 East Main Street, PO. Box 1559, Lafayette, IN 47902; prices vary from $.40-$3.50 each depending on quantity ordered.

SEX ROLES
WOMEN’S RIGHTS—UNFINISHED BUSINESS
Eleanor Flexner

These pamphlets provide an explanation of the changes occurring at puberty and explains menstruation to boys with the aid of diagrams of the female reproductive system (10 pp.).

Person/Products (1985 rev.), Educational Services, 2730 Hoyt, Everett, WA 98201; prices vary from $.25-$.50 each depending on quantity ordered, + 10% plh.

COMMON SEXUALLY TRANSMITTED DISEASES
This brochure describes in chart form the symptoms, transmission, diagnosis, and complications of AIDS, gonorrhea, syphilis, herpes simplex, vaginitis, non-specific urethritis, venereal warts, and ecto-parasites (8 pp.).

American Social Health Association (1979), 439 Main Street, Orange, NJ 07075; $1.50.

THE SEXUALLY ACTIVE AND VD
SOME QUESTIONS AND ANSWERS ABOUT CHLAMYDIA
SOME QUESTIONS AND ANSWERS ABOUT GAYS AND STD’S
SOME QUESTIONS AND ANSWERS ABOUT NGU
SOME QUESTIONS AND ANSWERS ABOUT PID
SOME QUESTIONS AND ANSWERS ABOUT VD FOR TEENAGERS
SOME QUESTIONS AND ANSWERS ABOUT VENEREAL WARTS
V.D. . . (HAS THE MOST SERIOUS CONSEQUENCES FOR) WOMEN AND BABIES
WOMEN AND VD
This series of brochures provides reliable information and sound advice about sexually transmitted diseases (4 pp. each).

American Social Health Association (1983-1985), 260 Sheridan Avenue, Suite 307, Palo Alto, CA 94306; prices vary from $0.08-$1.00 each depending on quantity ordered.
transmission, treatment and prevention (16 pp. each).

PPFA (1985 rev.), 810 Seventh Avenue, New York, NY 10019; prices vary from $12-$50 each depending on quantity ordered, +15% p/h.

SEXUALLY TRANSMITTED DISEASE PREVENTION FOR EVERYONE "S"

This pamphlet covers basic information about STD's, emphasizing prevention and personal hygiene. It is available in French under the title La Prevention Des Maladies Venereennes and in Spanish under the title La Prevenccion De Las Enfermedades Venereo Para Todos (24 pp.).

American Foundation For The Prevention Of Venereal Disease (1996), 278 Broadway, Suite 658, New York, NY 10003; prices vary from $20-$100 each depending on quantity ordered.

SEXUALLY TRANSMITTED DISEASES (STD) AND HOW TO AVOID THEM "F"

Directed to adults who have questions about STD's, this pamphlet covers treatment, follow-up, complications if not treated, and prevention (8 pp.).

Boston Women's Health Book Collective (1990), 47 Nichols Avenue, Watertown, MA 02172; single copies free; bulk rate, $1.50 each + 15% p/h.

VD BLUES

Judy Ismach

This pamphlet focuses on why STD's are increasing and encourages readers to call a doctor or clinic if they suspect they have an STD (6 pp.).

DIN Publications (1984), P.O. Box 5115, Phoenix, AZ 85062, single copies, $2.25 with a stamped address #10 envelope; bulk prices vary from $0.68-$2.25 each depending on quantity ordered, +10% p/h.

WHAT EVERYONE SHOULD KNOW ABOUT CHLAMYDIA

WHAT EVERYONE SHOULD KNOW ABOUT STD'S "S"

These are part of the Scriptographic series noted for easy reading and lively graphics. The second resource is available in Spanish under the title Sobre Las ETS (16 pp. each).

Channing L. Bete (1986, 1980), 200 State Road, South Deerfield, MA 01373-0200; prices vary from $3.50-$5.60 each depending on quantity ordered (incl. p/h).

STERILIZATION

BIRTH CONTROL FOR MEN: RESPONSIBLE LOVING FOR THE MAN WHO CARES "S"

PERMANENT BIRTH CONTROL FOR WOMEN "S"

VASECTOMY: PERMANENT BIRTH CONTROL FOR MEN "S"

Developed for men, the first resource introduces the concept of family planning.

The second pamphlet presents basic information on laparoscopy and minilaparotomy for low-literacy audiences.

The third is for men who are considering vasectomy. These pamphlets are available in Spanish under the titles Amor y Responsabilidad: Para El Hombre De Conciende, Prevenccion Permanenlo De Embarazo Para La Mujer, and Para El Hombre Vasectomia (6 pp. each).

Association for Voluntary Surgical Contraception (1983), 122 East 42nd Street, New York, NY 10168; (212) 614-1386.

FEMALE STERILIZATION

MALE STERILIZATION

These pamphlets—written in clear, non-technical terms—provide up-to-date information on medical, surgical, and legal aspects of sterilization (16 pp. each).

Association for Voluntary Surgical Contraception (both 1986), 22 East 42nd Street, New York, NY 10168; minimum order, $40 for 100 + 15% p/h.

TUBAL OCCLUSION

Filen Ovuality

This illustrated resource presents basic information about this irreversible procedure for women (8 pp., 6 pp.).

Krames Communications (1986, 1985), 312 90th Street, Daly City, CA 94020-2621; prices vary from $2.25-$5.00 (first title) and $5.00-$18.00 (second title) each depending on quantity ordered; minimum order, $10 + 5% p/h.

DO YOU KNOW THAT...?

Calls for Papers

On May 18-19, 1987, the University of Minnesota Medical School, Program in Human Sexuality is co-sponsoring a conference with the Society for the Scientific Study of Sex (SSSS) on Sexual Compulsivity. The Program Committee, chaired by Eli Coleman, PhD, encourages submission of research papers, workshop presentations, and roundtable discussions. Deadline for proposals is January 15, 1987. For further information, please call Ms. Diane Campbell, Conference Coordinator, at (612) 376-7520.

The Colombian Sexological Society (Sociedad Colombiana de Sexologia), which is preparing the IV Colombian Congress of Sexology to be held in Medellin, Colombia on October 9-12, 1987, is seeking papers for presentation. The official theme is Sexual Development in a Sexophobic Society, but papers on other topics may also be presented. Send proposals, including topic, curriculum vitae, and references to: A. Acorea 3441, Cali, Colombia, South America.

Resources to Write for... . .

The Hot 'n Healthy Times: A Gay Man's Guide to Condom Usage (1986), published by Eroticicus, is a newspaper that was researched and developed under the guidance of the San Francisco AIDS Foundation by sexologist Clark Taylor, Phd. The articles cover condom and lubricant usage, and are illustrated with photographs. To order send $2.00 per copy plus $5.50 p/h to: Eroticicus, Box 410503, San Francisco, CA 94141. Bulk rates available.

Miracle Babies and Other Happy Endings for Couples With Fertility Problems (1986), by Mark Perloe and Linda Gail Christie, is a 273-page book that explores the new tests and treatments for infertility. It also debunks myths about infertility and describes how to find the right doctor. Strategies are suggested for coping with the emotional issues also. This cloth edition may be ordered for $17.95 from: Rawson Associates, 115 Fifth Ave., New York, NY 10003; (212) 614-1386.
**BOOK REVIEWS**


Reviewed by Carol Cassell, PhD, past president, ASSECT; author, Swept Away: Why Women Fear Their Own Sexuality.

A major strength of this book is that Perper does not go gently into the twilight of social biology’s musings over human behavior. He stresses that the Nature/Nurture dichotomy is false and makes clear he is no genetic determinist. Yet, he does not suffer lightly the social scientists who disregard the biological core of human behavior. He states, “The social sciences must recognize biology as centrally important for understanding love, intimacy, courtship, and even our symbols of love.” A tall order, but Perper fills it.

He articulately builds a strong case for his argument that “many behavior patterns, beliefs, institutions, and traditions that social scientists see as purely cultural, nonetheless serve profound, if not always obvious, biological functions.” Then, he presents a stimulating array of evidence supporting his discussion of how “people see love: how lovers see each other, and how scientists, scholars, and laypeople have seen intimacy and its relationships to our cultural, social, and biological lives.” As Perper puts it, “the warp and weft” of his purpose — “to describe how love, intimacy and courtship grow from a biological core to affect our entire lives” — are two themes: the courtship sequence (involves talk and body movement integrated into a single form of loving, intimate communication), and biosocial functionality (the ways cultural rituals and behavior patterns meet the requirements of biology).

Other subsidiary themes he deals with are: templates (they represent people’s indwelling visual images of potential sexual partners); the errors of “biological determinism”; and, the concept of the Sacred — a term used by sociologist Durkheim for analyzing non-Western beliefs about higher powers. In the latter, Perper argues that historically sexuality has been surrounded with an immense set of symbols of purity and impurity that affect nearly every aspect of our lives. Other chapters deal with courtship rituals and strategies: women’s proceptivity (the active role women play in initiating and maintaining the courtship sequence); men and their confusion about women’s signals, intentions, and behavior; “male oblique discourse,” which refers to the opaque and metaphoric way men talk about women and sex; “search polygamy” (today’s inclusion of sexual intercourse into the traditional system of mate selection); and, the differences in how men and women treat intercourse, with an examination of the intense loves and hatreds men feel for women.

The appendix may bring some readers up short when they discover Perper’s methodology of field research (supported by the Guggenheim Foundation between 1979–1981 and continued thereafter): observing and interpreting the courtship sequence as played out by couples’ reactions in singles bars. He is quick to explain, “To be sure, I supplemented my observations in bars with field work in other places — train stations, parties, and, in fact, anywhere men and women meet.” He states, “My techniques are ethological and ethno-graphic; the objective observation of behavior in its natural setting. . . . For observation itself, I borrowed two techniques from ethology and animal behavior: focal subject observation and scanning. . . . Together, observation and interviews produce very rich data. No one could claim to summarize these data adequately.”

Throughout the book, Perper argues that science must deal with the details of the real world rather than with hypotheses about the world, a position called “realism.” True, but Perper appears a mite testy in verifying the realist mode versus the neoclassical mode as research methods. I gather he suspected, and rightly so, that some people would take issue with his premise that single bars are a “natural setting” to observe the biological and cultural basis of intimacy. However, that’s quibbling. No matter whether one supports, or not, his field research methods, the issue pales in comparison to the thought-provoking ideas Perper presents in the other hefty nine chapters. Sex Signals is a well written, complex, and intriguing book. It is recommended for professionals and university students, as well. A, PR


Reviewed by Catherine S. Chilman, MSW, PhD, professor, School of Social Welfare, University of Wisconsin-Milwaukee; author, Adolescent Sexuality in a Changing American Society: Social and Psychological Perspectives; Adolescent Pregnancy and Childbearing: Findings from Research (editor); and Adolescent Sexuality in a Changing American Society: Perspectives for the Human Services Professions.

An attorney and two social scientists combine their expertise in this competent (though brief) overview of the sexual

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*Audience Level Indicators: C—Children (elementary grades), ET—Early teens (junior high), LT—Late teens (senior high), A—College, general adult public, P—Parents, PR—Professionals.*
rights of adolescents. The emphasis is on the controversy over parents' rights versus those of their minor children in respect to confidential diagnostic, contraceptive, and abortion services available to teenagers without the necessity of parental consent. Valuable legal information is presented concerning parents' and children's rights in general, including recent court decisions regarding the "reproductive rights" of adolescents. For example, as of 1984, Supreme Court decisions had established fairly clear guidelines that reproductive decisions are a special area for relative autonomy for adolescents who, in consultation with their physicians, have the right of privacy in matters having to do with their own bodies.

The legal concept of "emancipated minor" is also discussed. This term refers to a minor who, through her or his own behavior (such as coital activities), has indicated that she or his family has already broken down, and thus the minor has rights to independent reproductive decisions.

Information drawn from social and behavioral sciences about adolescent development and sexual behavior seems too brief and superficial. An emphasis is placed on the role of cognitive factors in sexual and contraceptive behaviors. This overly rational approach is a common error. However, related research findings reveal that a complex of biological, motivational, emotional, experiential, social, economic, and situational factors interact to affect coital, contraceptive, and abortion behaviors.

A number of important contributing factors that are treated far too lightly include the strong links that have been found between the effects of racism, poverty, and unemployment of youth on the occurrence of early coitus and inadequate use of contraceptives. Basic policy recommendations should have been addressed to these fundamental structural issues as well as to the more immediate ones of the sexual rights and needs of adolescents.

The latter topic is emphasized by the authors. The most original, and probably controversial, recommendation is that the right to independent reproductive decision making be established at age 15. This is recommended partly because, the authors say, adolescents of that age have presumably reached a cognitive level that allows for their intellectual understanding and rational planning regarding coitus, contraception, and abortion. A difficulty with this argument is that, as mentioned above, a number of pertinent studies show that pertinent decision making is often not centrally guided by rational processes.

Any general rule about the "correct" age for independent "reproductive choices" is open to arguments, both pro and con. One alternative that calls for individual case-by-case recommendations by professional counselors has many attractions to the clinically-minded, but as a guideline offers too many loopholes for poor judgement, and it is virtually impossible to administer in an equitable manner, as the authors recognize.

The authors make two other major recommendations: (1) policies that encourage the development of "effective, multi-faceted educational programs in human sexuality that are sensitive to all value positions" (p. 144) and (2) greater federal support to make reproductive health services available to adolescents on a voluntary basis. Both of these recommendations are well conceptualized though rather sketchily discussed. Missing from these program recommendations are sections on the need for expert individual and family counseling regarding adolescent sexuality and recognition of the roles of adolescent males in respect to "reproductive decision making."

In summary, the authors provide a helpful review of many aspects of adolescent sexuality, including the legal. The excellent scholarly bibliography adds to the book's value as a resource in the continuing controversy over adolescents' versus parents' rights in regard to birth-control services and related issues. The bibliography might well have been extended further with references that would be of direct usefulness to policy developers and program personnel. A, P, PR

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**Choices: In Sexuality with Physical Disability**

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

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

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

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

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

Reviewed by Karin C. Meiselman, psychologist in private practice, Pasadena, California; and author, Incest: A Psychological Study of Causes and Effects with Treatment Recommendations.

Until the publication of sociologist Diana Russell's book earlier this year, the prevalence and effects of incest have had to be estimated from unrepresentative samples such as patients undergoing psychotherapy. In The Secret Trauma Russell provides us with very detailed data from the incest histories found in her 1978 probability sample of 930 women residents of San Francisco.

The importance of Russell's study cannot be underestimated. She is the first to obtain exact information about a wide range of sexual experiences from women who were randomly chosen from the general population. Her careful method of structured interviews using neutrally phrased questions, e.g., respondents were asked to tell about all incidents of sexual contact with relatives, whether wanted or not, is fully presented for the scrutiny of other researchers. Unless a case can be made that the female population of San Francisco is radically different from other areas of our country, there is little room to doubt that this study contains the most definitive information we are likely to have on the prevalence and effects of incest for many years to come.

Russell has found that 16% of adult women report having had some sort of sexual contact with a relative prior to the age of 18. While this may seem like a staggering figure to those who recall the "one-in-a-million" estimates abounding in the older incest literature, the author speculates that any error is likely to be in the direction of underestimation, owing to outright repression of traumatic events and reticence to divulge emotionally painful memories. Incest is therefore established as a relatively common event in the lives of female children and adolescents, and furthermore as an event that is rather evenly represented across the major ethnic and socio-economic groups.

Russell's study also lays to rest the theory that there may be a substantial number of positive types of incest experiences that are never discovered because of the biased clinical samples that researchers have utilized in the past. Only 2% of the incidents of incest discovered in the survey were described as being positive or neutral by the women who had experienced them. In a further 7%, the women recalled having had both positive and negative feelings at the time of the incest, but it is important to note that these ambivalent women actually felt that they were more traumatized than the group who reported that the incest experience was entirely unwanted. It would thus appear that, even in a sample that quite adequately represents the general population, incidents of positive and nontraumatic incest are as rare as the proverbial hen's teeth.

As a reading experience, Russell's book can be tough going for the layperson since it is replete with tabular presentations of her results and exhaustive descriptions of methodology and measurement techniques that are of interest only to serious researchers. Nevertheless, there is much in this book to maintain the interest of a more general audience, especially since the author has wisely chosen to intersperse her numerical tables with case history presentations that illustrate the results in intensely human terms. She also presents analyses of critical and puzzling issues, such as revictimization and the roles of other family members in preventing or allowing incest. Throughout the book, Russell's feminist zeal shines through but does not prevent her from examining many different perspectives in the best social science tradition, and the result is an exciting and controversial presentation. A, PR


Reviewed by William R. Stayton, ThD, Assistant Professor of Psychiatry and Human Behavior, Thomas Jefferson University Medical College, Philadelphia, Penn.; chairman, SIECUS Board of Directors.

It amazes me how little is written on the topic of bisexuality, since many theorists and researchers, from Freud to Masters and Johnson, believe that all people are born with bisexual potential. This book, edited by Klein and Wolf, is the first scholarly, research oriented book that I have read on the subject. The editors have brought together some outstanding leaders in the field of human sexuality to present their works. The Journal of Homosexuality, that originally published the material in two editions, should receive accolade for their efforts. Indeed, it was the Journal of Homosexuality, that has devoted five issues to the subject of bisexuality since 1983. The sad fact is that like the publisher, Haworth Press, most people treat bisexuality as "an important variation and aspect of homosexuality" and think of bisexuals as a sexual minority. It seems to me that
this is a misunderstanding of the whole
nature of the issue. While a bisexual
lifestyle may be a minority lifestyle, it
might be more correct to say that ex-
clusive heterosexuality and exclusive
homosexuality are "important variations
and aspects of the bisexual nature of
human beings."

The writers in this book have helped
in the process of looking at the real
issues around bisexuality and the effects
of bisexuality as it is expressed in rela-
tionships. The first section of the book
tackles the difficult theoretical issues
around bisexuality. The contributors
challenge some old concepts and pre-
sent new theoretical models for con-
sideration. I see these contributions as a
beginning dialogue, rather than the last
word, regarding the subject. We have a
long way to go in understanding the true
nature of bisexuality, if indeed all
humans are born bisexual regarding
erotic orientation toward other human
beings.

The sections on psychological aspects
of bisexuality and one cross-cultural per-
spective regarding a particular group of
Mexican males was helpful in consider-
ing some of the psychosocial issues
relating to counseling bisexuals and
looking at one group of Mestizo Mex-
ican males and how they practice biex-
ual behavior. There is a need for so much
more research on both the psychologi-
cal aspects of bisexuality as well as ex-
tensive cross-cultural surveys.

The sections on women and men in
marriages have very provocative and
helpful chapters in working toward an
understanding of the impact of bisex-
uality in marriage. As a marital and
family therapist, I find the issue of biex-
uality becoming more and more appar-
ent. Since most training programs in
marriage counseling do not address the
issues of bisexuality (or alternative sex-
ual lifestyles for that matter), it is incum-
bent upon the marital and family ther-
apist to get their own education and per-
spective on this issue. The chapters in
these two sections were written by some
of the most outstanding leaders and
teachers in the area of sexual orientation
in our country today.

Finally, the section on bisexual organi-
zations in New York City, Chicago, and
San Francisco is interesting, but not ter-
ribly helpful. Anyone interested in look-
ing at what has been written on the sub-
ject will find the bibliography at the end
by Charles Steir quite helpful, although
incomplete, as it does not include my ar-
ticle "A Theory of Sexual Orientation:
The Universe as a Turn-On".