INFANT SEXUALITY

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The radical shift away from the 19th century view of childhood as "innocent" of sexual experience has not made growing up any easier. (Prior to the Victorian era, children were assumed to be lusty and earthy.) However, we are becoming ever more sharply aware of the sensuousness of infants and the erotic qualities of many of their experiences.

Infantile sexuality was scientifically and clinically described in 1905 by Sigmund Freud. From then on there has been a good deal of interest, skepticism, concern, and curiosity aroused by this concept in terms of its illumination of the behavior of both infants and adults. Freud's observations of young children's behavior were informed by the reconstruction of childhood memories and the persistent influence of childhood attitudes and beliefs that he and his adult patients found clarifying and liberating during and after the psychoanalytic treatment process.

Subsequent to Freud's 1905 publication of the Three Essays on the Theory of Sexuality, many other observers became aware of how useful it could be to identify and understand the erotic feelings and behavior of children from infancy onward. Contrary to the fear that these ideas would reveal the "beast" in children or attribute to children what resided in the "dirty" minds of adults, the translation of these clinical and developmental insights provided an understanding of children that was helpful in raising them and in providing a tolerance for their normal behavior. Such insight fostered the positive socialization of children and strengthened the capacity for adults to feel more confidence in their parenting. This formulation implies that children have a need for sensuous experiences within limits.

Most children are endowed with a normal amount of erotic feelings and sexual drive; the adults who care for them must judge how much gratification or frustration the child will find tolerable and comfortable. What is crucial is whether adults respond to children's sensuous needs and behavior in a manner that is child-centered rather than for the gratification of the adults. Thus, there can be too little or too much sexual gratification in terms of what the child needs and in terms of what either deprives the child or overwhelms him. (We follow conventional use in referring to both male and female by the pronoun him.)

In the earliest phases of the infant's life the bond between caregiver and newborn is based largely upon the helpless child's need for protection and nurturance, as it is centered around the feeding experience and other bodily care situations. Through feeding and other kinds of care the caregiver and the infant form a close and at times exclusive unity. Infant sexuality certainly refers to the tension and pleasure that young children experience and express in association, for example, with the sensuous experiences that accompany feeding and being cuddled and comforted. Conceptually, however, infant sexuality refers to the psychological role that the child's erotic experiences play in organizing the infant's dawning awareness of his body and certain of its functions. This takes place in the context of the infant's being helpless and dependent upon the life-sustaining care of the parent. Thus, sensuous gratifications are associated with the organization of personal relationships that are developed as the affectionate parent feeds, bathes, cleans, comforts, and plays with the child.

Normally this interchange is enjoyed as much by the parent as by the infant. Thus, the mother's pleasure in breast feeding the child normatively may have a significant erotic component. In bottle feeding, equivalent mutual sensuous interactions are characteristic. Ingesting enough milk to feel full is not necessarily the same as sucking enough and being cuddled enough to feel physically and emotionally relaxed and satisfied, with a sense of the bodily pleasure and the comforting world being indivisible. Thus the infant's sensuous, i.e., sexual, needs indicate that children need emotional nurturing as well as physiological nutrition provided by the food. In a word, sucking and being held are a basis for emotional or psychological nurture just as swallowing and assimilating the milk are a basis for physiological nurture. Usually the two kinds of nurture are indivisible in that they go easily and well together. However, the use of thumb sucking and of pacifiers—even the overuse of the latter—is dramatic evidence of how the two needs may be viewed as separate, each essential in its own right.

In feeding, these stimulating, organizing, soothing, and boundary-setting activities enable the child to feel loved and wanted. They also allow the infant to feel at one with the parent and later, as a person in his own right, separate from the adults who take care of him and his body. The sense of trust in another person, the enjoyment of feelings of satiation and ease following
the tension of hunger or other discomforts, and the capacity to be both dependent on and independent of the other person, are all prototypes for later sexual partnership between two adults. There is both a moving away from and coming closer to the “other” person that, enjoyed by both partners, is initiated by the infant’s needs and actively carried out by the responsive, nurturing parent. Thus the young child gradually gains confidence in his world, and in the security of the pleasurable tension-reduction that becomes associated with the appetitive demands of his body; hence the apt phrase “stomach love.” And, in this mutuality of child and mother, the adult also gains satisfaction and confidence in her fulfillment as a parent.

As can easily be observed, the baby of under 18 months enjoys the use of the mouth, which becomes a very active means of gaining pleasure and satisfaction from the mother (or other caregiver) whose face and body are gradually explored also through sight, touch, etc. Features become familiar and gradually separate from other surroundings so that the infant gains a sense of his own body and the outside world, his impact upon it, and its responsiveness to him.

Psychoanalysis has suggested that such infant sexuality has a maturational and developmental organization. Earliest infant experiences are thus organized around the tension and satisfaction (pleasurable tension-reduction) that are best observed in connection with feeding, what is broadly termed orality. The child’s ingestion of the mother’s milk at the breast is the best model of the sensuous, nurturing gratifications in which caloric, fluid, and mineral intake become the physiological basis for what also has a life-sustaining, development-fostering emotional and psychological basis. Sucking and feeling soothed and loved as his body is securely held by the mother, the child gradually defines himself and his world through this skin-to-skin contact. In this way, the organization of the baby’s hunger and sensuous tension are pleurally relieved and gratified through sucking in of milk. Whether feeding from the breast or the bottle, the ordinary devoted mother provides this developmental experience by holding the infant close to assure body contact.

As these experiences become patterned and dependably expected, the child is enabled to feel secure, to tolerate frustration, and to accept waiting or substitutes for the full feeding situation. This way of describing and interpreting one aspect of the young child’s healthy development clearly indicates the role of appetite, both physiological and psychological. The oral psychosexuality refers to the tension, its increase and pleasurable reduction that is mediated most dramatically, but not exclusively, through the sucking, jawing, ingesting, and swallowing in the feeding situation. The psychological meaning of this sensuous, appetitive tension buildup and its pleasurable, patterned reduction in the context of a loving relationship with a competent, constant parent is what we mean when we refer to infant sexuality. This infant sexuality is gratified, curbed, and channeled under the guidance of a specific adult, the parent.

It is by this paradigm of human closeness that the infant is helped to become a unique person with the capacity to relate to another specific person with the sense of closeness and mutuality that characterizes healthy personal relationships in a wide range of cultures, societies, and historical epochs. The uniqueness and mutuality of the parent-child relationship should be emphasized. Indeed, it has been observed and proven that infants who are well cared for physically but by multiple, impersonal, efficient caregivers do not thrive: they may be emotionally deprived and become developmentally retarded and/or susceptible to multiple infections.

Normatively, there is much fondling, stroking, and caressing of infants by the constant caregiving adult. Gradually this alters as the child’s needs and wish for independence and a sense of separateness develop. With language and a capacity to stand and walk comes a shift in the kind of erotic experiences which take place as the child becomes a “person” with a “will of his own.”

Although this description is of only one of the psychosexual phases of development, it is clear that orality continues to play an abiding and sustaining role throughout human development. The shift of emphasis is gradually made to other psychosexual and psychosocial phases of development. The oral is but the first of several such phases. Each of them becomes orchestrated and expressed in a socialized and socializing manner as the infant becomes the toddler, who becomes the prekindergarten child, who becomes the school-age child, and adolescent and, finally, reaches the various periods of adulthood. Thus, infant sexuality unfolds with changing emphasis, from orality to anality to genitality to the oedipal (triadic) period and, finally, to fully developed adult genitality and generativity. It is crucial to understand that these are changing levels of organization and expression in which the earlier phases are not left behind but continue on as in a richly developing tapestry. The threads that were first laid down persist but become integrated into a creation in which the whole is more than the sum of its parts.

Thus, as the child becomes in turn aware of his body as a whole, of his body products, feces and urine, and of the sensations associated with such pleasurable excretory processes, he continues nonetheless to enjoy the orally organized satisfactions. These latter, however, become less intense and dominant though they may have much to do with the sense of zest and heartiness that become a part of the unique personality. Sometimes similar dynamic processes occur in the anal phase of sexuality as the child holds and expels, possesses and produces his body products, according to the expectations and demands made upon him by society in the person of his parents and their wishes. He can certainly experience a power and victory in

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SPEAKING OUT

Toward a Homocentric View of Sexuality

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Each of us grows up influenced by a unique constellation of parental, religious, and communal beliefs distilled into a personal set of “do’s” and “don’ts” related specifically to sexuality. As we grow older we learn that our sexual socialization is a highly individualized process and that other people have their own egocentric notions of what is proper concerning sex. As we come into contact with the educational, legal, medical, political, and communication systems in our society we realize that there are also official norms that shape our behavior and attitudes. When these ethnocentric sexual proscriptions conflict with our egocentric beliefs and experience, we may categorize societal norms as oppressive (we may or may not realize that our egocentric ideas are equally limiting and oppressive), and we may yearn for a more utopian set of standards as guidelines to the expression of our sexuality. Technology and communication rush us toward Marshall McLuhan’s image of the world as “global village” and we have become increasingly aware that there are many patterns, practices, and concepts related to sexuality in addition to our own. As individuals we may feel that the grass is greener in the sexual pastures of our neighbors. As professional educators we feel not only curiosity about other exotic climes but also a need to understand and appreciate the contribution other cultures can make to a homocentric view of sexuality.

To seek such a view of sexuality—one with a more universal center—was the objective in establishing the SIECUS/NYU International Colloquia. The first Colloquium, held in Sweden in 1979, invited an international group of authorities to refine a set of sex education principles that might be accepted by educators internationally (see SIECUS Report, January 1980, “SIECUS/NYU/Uppsala Principles Basic to Education for Sexuality”). The second Colloquium, held in Thailand last summer, was opened to registration of experienced educators from the United States who wished to observe different methods of delivering sex-related social services, i.e., sexual health care, family planning, sex education, sexual counseling and therapy; to study how such services are determined by a particular culture’s sexual beliefs and practices, and to weigh the implications for similar services in the U.S.

To carry out such an investigation required Colloquium participants to explore a number of basic questions: What are the official norms related to sexuality and how do they differ from actual practices? How do individuals determine sex roles and division of labor in families? What impact does religion have on sexual practices? How can individual needs be protected when social change is imposed? What is the proper balance between individual rights and the needs of the larger society?

Two weeks of intense study even for 12 hours a day is much too short a time to absorb a culture or its sexual customs and values, but with the wholehearted cooperation of government officials, university faculty, and public and private agency personnel, Colloquium members received an official overview of sexuality in Thailand. Travel throughout Thailand, field trips ranging from palace and temple tours to a special visit to the Cambodian refugee camps, invitations to individual homes, and the daily interaction with the wonderful Thai people in all walks of life, provided insights into the way private citizens perceived and practiced sexuality. Exploring Thai sexuality prompted a kaleidoscope of reactions within the Colloquium: admiration, shock, envy, fascination, joy, anger, compassion. The most basic and constant feeling was a strong sense of brotherhood and sisterhood despite differences. The cross-cultural experience was a profitable one for participants. These typical reactions, in the words of some members, express the significance of the experience:

“The study abroad has given me, both as a professional and from a personal perspective, a unique opportunity to ‘take a step back’ and get a more objective look at the marriage patterns, family life, and human sexual practices of my own culture.”

“Learning that many ‘givens’ in our culture are only true for our culture greatly expanded my way of studying sexual behavior—from what in the past was more culture-bound to what is now a cross-cultural perspective.”

“I am more alert to the wide variety of sexual values and customs that exist within our own country. And in our local communities, I continue to look for broader goals in sexuality that will be acceptable to a broader range of people.”

“I am not the same individual either personally or professionally who began the study of sexuality some years ago. As a result of the international study, I have a much broader view of sexuality in the world and I am able to confront biases built into my own culture. My goal now is to transmit this understanding to my students.”

An Asian proverb points out that as we begin to climb the mountain by various paths at the base, we realize how widely separated we are. As we climb toward the top we get closer to each other and are finally united at the peak. Egocentric and ethnocentric approaches to sexuality are bound to keep us separated. A homocentric goal—a sexually healthy individual in a sexually healthy society—can unite our professional efforts.

[The third annual SIECUS/NYU Colloquium will be held in China from July 23–August 11, 1981. Because it was necessary to limit the number of participants and to work within a narrow registration deadline, this colloquium was not included in the Summer Workshop listing on pages 7-8.—Ed.]
The Sexual Revolution and the Manner of Naming

The sexual revolution has had its impact on naming. The breakdown of the family, the breakdown of sex roles, the women’s liberation movement, the unisex philosophy, have all found expression in the name that one may bear (or give to another to bear). Quite often, the movement for equality of the sexes has been taken as sameness of the sexes, and boys and girls are named alike. An increasing number of the newborn are given neuter names—Stacey, Kim, Leslie, Neil, Terry—instead of such unequivocal ones as John or Mary. And it is fashionable now to call a woman by a traditional man’s name (or vice versa).

Might we not expect social or psychological repercussions arising out of the new naming? Johnny Cash has a song about a boy named Sue and the misunderstanding stemming from it. Some researchers who have looked at the records of large numbers of psychiatric patients found that those with unusual first names were more likely to be severely disturbed or psychotic. [See, e.g., A. Ellis and R. M. Beechley, Emotional Disturbance in Children with Peculiar Given Names, J. Genet. Psychol. 85:337, 1954; A. A. Hartman, R. C. Nicolay and J. Hurley, Unique Personal Names as a Social Adjustment Factor, J. Soc. Psychol. 75:107, 1968.] Another researcher found that those of his patients whose surnames were “Small,” “Little,” “Short,” or “Bent” were more likely to suffer from “feelings of inferiority” [W. F. Murphy, A Note on the Significance of Names, Psychoanal. Q. 26:91, 1957]. They consider name and condition to be not merely coincidental but causative.

Traditionally, Anglo-American law has allowed great individual prerogative in both initial attribution or change of name. That prerogative is rooted in the philosophy that government should play a minimal role in the affairs of people. In a change of name, which is usually by application to a court, the judges generally have no clear standard in reaching a decision but are vested with great discretion as to whether or not to allow the proposed change. Under prevailing law, applicants usually must avow that the change does not have any illegal motive. The request is most ordinarily granted when the given legal name is unsuitable as a result of its length or inconvenience, when it denotes the wrong sex, or when there is a change of sexual identity following a surgical procedure [R. Slovenko, On Naming, Am. J. Psychotherapy 34:206, 1980].

But other cases are not so clear, and have resulted in costly and burdensome litigation. The courts have often limited freedom of expression by change of name in cases where the judge regards the change as “ridiculous,” as in the recent case where Ellen Donna Cooperperson petitioned to change her name to Cooperperson in order to express her militant feminism. The judge called the petition “truly in the realm of nonsense,” and ridiculed the petitioner by reciting a number of possible name changes which he regarded as “inane”: Jackson to Jackchild, Manning to Peopling, Carmen to Carperson. The judge said that if he granted this request, “it would have serious repercussions perhaps through the entire country.” (Indeed, one woman upon divorce recently sought to change her married name from “Friedman” to “Freedwoman.”) The appellate court, however, reversed and allowed the requested name, Cooperperson.

Upon remarriage, a mother may wish to change the surname of minor children to that of her second husband. The cases which have considered this question have granted a change of name only when “the substantial welfare” of the child requires that the name be changed. The courts try to maintain and encourage continuing paternal relationship. “A change of name could further weaken, if not sever, such a bond” [Robinson v. Hansel, 302 Minn. 34, 223 N.W.2d 138 (1974)]. In one case of this type a psychologist testified that, based upon his observation of the children involved, it was his opinion that their special sensitivities required a stable home situation and identity, and that it would be detrimental to their personality growth and development for them to be called by a name other than that of the second husband. A psychiatrist testified that it would be in the best interests of the children that their legal name be made that of the second husband because the children considered that they were a part of this new family, and if they were called by some other name the effect was to suggest they were not a part of the family. The court, however, refused to grant the change of name, considering that the father was paying child support and had exercised his visitation rights [Matter of Spatz, 258 N.W. 2d 814 (Neb. 1977)].

Should the United States borrow from the foreign examples and enact legislation that would prohibit giving children shameful or embarrassing names? A number of countries prohibit “ridiculous” or “extravagant” names or those “contrary to good morals.” France, until recently, restricted names to those in the Christian tradition; it now allows parents freedom to name their children “unless the name would hurt the child.” In Spain, the civil registrar must refuse “extravagant” or “improper” names. One legal commentator has proposed name legislation that would “promote the individual’s interest in freedom of self-expression and the state’s interest in consistent application and record keeping,” and cited in justification of her proposals women’s increasing interest in retaining their birth names after marriage, parents’ increasingly individualistic tendencies in choosing children’s names, and the rising number of divorces [E. J. Dannin, Proposal for a Model Name Act, U. Mich. J. Law Reform 10:133, 1976]. (In actuality, divorced women in the U.S. today are unsure which last name to use.) Another commentator argues for reasonable legislation that would control, in the interest of the child’s future welfare, such instances of misplaced humor as prompted by a Texan by the name of Hogg (later destined to rise to political eminence) to call one daughter Ima Hogg and another Ura Hogg [P. J. Eder, The Right to Choose a Name, Am. J. Comparative Law 8:502, 1950]. One has to wonder what he might have named a son.
Three Current Studies

**Family Life Curriculum Development**

The Office of Family Planning is involved in a federally funded research contract to develop and implement a family life education curriculum at the junior and senior high school levels. The curriculum will be designed to provide adolescents with information and skills to deal more effectively with needs, concerns, and problems related to family life, growth and development, sexually transmitted diseases, pregnancy, and parenting. Contact: Ms. Elsie Sullivan, Project Officer, Office of Family Planning, Bureau of Community Health Services, Room 6-17 Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857.

**Expansion of Sexuality Education Through Youth Service Agencies**

The Center for Population Options (CPO) and 20 national youth service agencies are involved in a project to reduce the high incidence of adolescent pregnancy and childbearing. Through this program, CPO provides leadership training at the national and community level, assistance in program planning and implementation, and educational materials for participating youth service agencies. The goal is to expand sexuality education and counseling opportunities for teenagers nationally and in selected cities in order to enhance their health and their potential social, economic, and personal development.

The Pacific Institute for Research and Evaluation has recently conducted an evaluation of the project's demonstration component, and has produced a very favorable report. It is expected that the findings of this report, now available from CPO, will serve as a basis for the creation of national strategies for adolescent sex education development and replication. Contact: Jane Quinn, Project Director, Center for Population Options, 2031 Florida Avenue, NW, Washington, DC 20009.

**Research on Male Sexuality**

Douglas Beckstein has assembled a collection of studies on males entitled "Highlights from Research about Men and Contraception and Sex Education." The author points to the ominous statistics that, out of an overall $135 million dollar allocation, the office of Family Planning of the Health and Human Services Department (HHS) awarded only $950,000 in 1978, 1979, and 1980 to 16 men's sexual health demonstration programs. This represents roughly .2% for men's programs and 99.8% for women's programs.

Some of the other studies of interest reviewed include a two-year study of 2/3 high school sophomores and juniors in Bellingham, Washington, which showed that the average age of first intercourse was 14.8 years for boys and that this tended to be a genitaly oriented experience. Only 41% claimed to be "in love," 30% were considering marriage, and more than half stated that their sexual debut made them feel grown-up and experienced. In those instances in which contraception was used (in most cases, the condom), it was usually by boys who had experienced some teaching about sexual responsibility.

Another study reports that testicular cancer affects 2.3 males per 100,000 or 2,500 cases per year in the United States, and is the most common cancer in men 20-35 years old. In a survey of senior nursing students in the University of Vermont, 75% of the students had never heard of testicular cancer and not one knew how to examine testicles correctly.

In another study, at the Male's Place in San Jose, California for which 100 adolescent males (12-18 years old) were surveyed, it was discovered that 96% had never been to a family planning clinic although 54% were sexually active: 56% never used birth control; 62% thought that they knew enough about sex but, paradoxically, 74% wanted to know more; 95% would like to have a hotline available to answer their questions.

The crux of the problem, as presented in Beckstein's paper, is obvious: Much more research needs to be done in the area of male involvement from a positive perspective of mutual responsibility, rather than the now over-used one of "You'd be more careful if you could get pregnant." Contact: Douglas Beckstein, Center for Population Options, 2031 Florida Avenue, NW, Washington, DC 20009.

[Author's Note: As I have reported in past Research Notes, some very valuable studies in the field of sexuality have been done with the aid of government funding. There is now evidence of a definite shift to conservatism in the federal government. Government funding for valuable research in sexuality education, adolescent pregnancy, and related areas is in serious jeopardy. Some zealous congresspersons may look for scapegoats, and for sensationalized issues through which to attract attention. Every penny intended for research in sexuality education may receive biased scrutiny. This scrutiny may also have an effect on the availability of results of research now in progress. Paranoia brought about by fear of unwarranted congressional investigations has already had the effect of causing researchers to be overreactive, and excellent research may be doomed to be filed away on the top shelves in the Library of Congress. This is no time to play "Chicken Little" and wait for the skies to fall: it is time to be prepared. Let your representatives in Congress know that you (and the organization you may represent) support continued government funding for research in the human sexuality field. Don't wait until we are placed in the position of having to defend our work. Seize the offensive now and persuade others to do the same.]
Infant Sexuality, Continued from page 2

withholding, thus being as powerful as the adults but in his own way. This conflicts with the desire to please his parents and be like them, based to a great extent on the way he had experienced the earlier phase and the sense of mutuality and closeness.

Gradually, as a preschooler, he becomes increasingly interested in genitally organized activities, in which pushing and pulling, turning and jumping, and the aut erotic experiencing of organized masturbatory behavior are associated with longings for closeness with one of his beloved parents. He must also come to terms with the struggles this elicits vis-à-vis the other loved parent. The move into school life itself can accompany some turning away, with relief, from these important people as he finds enjoyment and excitement in activities with peers. His sexuality is now sublimated, i.e., experienced at a distance from erotic, sensual gratification, and transformed into curiosity, learning, and discovering. Thus the child’s excitability and intensity are now associated with the mastery of many skills, and the achievement of social approval and a sense of his own worth.

We are suggesting not only that this sequence of positive outcomes is natural to a successful first infantile experience, but also that subsequent phases build upon the strengths and residues of the previous ones. Thus retention of the spirit of pleasure and activity, and the hunger for experiences begin with the vigorous and exuberant infant. Other qualities appear and are elaborated in a social context in subsequent periods. In this presentation we have concentrated on translating and demonstrating the concept of infant sexuality especially in the first year of life, as a baseline for subsequent sexual development. A more complete description can be found in the scientific and clinical literature, one too extensive to be summarized here.

References


DO YOU KNOW THAT...

Sexuality and Disability

The Third Annual National Symposium on Sex and Disability will be held at New York University on June 19–21, 1981, presenting a program built around the theme of “Realizing full and equal participation in sexuality.” The organizing sponsors are the Coalition on Sexuality and Disability; the School of Education, Health, Nursing, and Arts Professions of New York University; and the Human Sexuality Program, Department of Psychiatry, of the University of California in San Francisco. Symposium coordinators, both from New York University, are Deryck Calderwood, PhD, Director, Human Sexuality Program, and Nancy Esiibill, PhD, Assistant Professor, Department of Rehabilitation Counseling. To receive the official brochure with program and registration information, write to Debra Beck, Assistant to Coordinators, Third Annual National Symposium on Sexuality and Disability, New York University, 25 West 4th Street, Room 506, New York, NY 10012.

Lifestyle Education Group

OPTIONS: An Institute for Lifestyle Education is a nonprofit organization of psychotherapists and educators who, over the last four years, have sponsored workshops and courses focusing on issues related to lesbian and gay male lifestyles and designed to aid health professionals in working more effectively with clients involved in these lifestyles. For a schedule of courses, write to OPTIONS, P.O. Box 31729, San Francisco, CA 94131.

AASECT National Meeting

The American Association of Sex Educators, Counselors, and Therapists will hold its 1981 National Meeting on April 2–5 in San Francisco, California. The theme of the program is “Toward a Future Reality.” For more details and for registration materials, write to: Carol Cassell, PhD, Chairperson, 1981 National Program, AASECT, One East Wacker Drive, Suite 2700, Chicago, IL 60601.

Resources to Write for . . .

Living and Loving with Arthritis by Jo-Ann W. Boggs is a sensitive-ly written 24-page booklet designed to help people with arthritis learn how to adapt to bodily changes which affect physical and emotional relationships. Topics dealt with include socializing with the opposite sex, planning and communication for better sex, finding comfortable positions, and alternate ways to have sex. Single copies cost $1.50; program directors needing multiple copies are asked to request permission to reprint. Write to: Multipurpose Arthritis Center, University of Hawaii at Manoa, 347 North Kuakini Street, Honolulu, HI 96817.

The Elementary Population Activities Kit, for children in grades K–6, was published by Zero Population Growth, Inc., in consulta-tion with the writers, designers, and artists of Earth People, Ltd. It includes 20 modules, each containing specific activities for students to explore such population and environmental concepts as consumption, exponential growth, and biotic potential. Also included are useful reprints, a teacher’s guide, and a glossary of demographic terms. The kit may be obtained for $10.00 from: Population Education Materials, P.O. Box 1346 Connecticut Avenue, NW, Washington, DC 20036.

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SUMMER 1981 GRADUATE WORKSHOPS IN HUMAN SEXUALITY AND SEX EDUCATION

Workshops are listed alphabetically by state. Announcements arriving too late for this listing will be published in the May 1981 SIECUS Report.

Arizona

University of Arizona, Tucson, Ariz.
- Sex Education. June 8–July 9, 3 units.
Write to: Dr. William King, Health Related Professions, University of Arizona, Tucson, AZ 85721.

California

National Sex Forum, San Francisco, Calif.
- SAR XVI (Sexual Attitude Restructuring). June 27–July 4, 70 hrs./4 units.*
- SAR XVII (same program as above). August 15–22, 70 hrs./4 units.*
*Credit is available through the Institute for Advanced Study of Human Sexuality.
Write to: Dr. Phyllis Lyon, Co-Director, National Sex Forum, 1523 Franklin Street, San Francisco, CA 94131.

Colorado

Rocky Mountain Planned Parenthood, Denver, Colo.
- Sex Education Strategies/Sex Therapy Issues/Sexual Medicine Today. June 18–20, 1 hr. graduate academic, 20 CEUs, 20 CMEs.
Write to: M. Deborah Casselman, Rocky Mountain Planned Parenthood, Center for Continuing Education, 1525 Josephine, Denver, CO 80206.

University of Northern Colorado, Greeley, Colo.
- Human Sexuality for the Teacher and Student. June 22–July 17, 3 quarter hours.
Write to: Dr. R. K. Plakke, Department of Biological Sciences, University of Northern Colorado, Greeley, CO 80639.

Connecticut

Southern Connecticut State College, New Haven, Conn.
- IDS 545. Sex Education Institute Summer Program. July 7–23, 6 credits. This includes a SAR weekend, July 10–12, which can be attended separately.
Write to: A. Schildroth, Sex Education Institute, 501 Crescent Street, New Haven, CT 06515.

University of Bridgeport, Bridgeport, Conn.
- Interpersonal Sexuality. June 22–26, 3 credits.
- Human Sexuality. August 10–14, 3 credits.
Write to: Lila Klemme (for Interpersonal Sexuality) or Robert Silverstone, PhD (for Human Sexuality), University of Bridgeport, South Hall, Bridgeport, CT 06602.

District of Columbia

The American University, Washington, D.C.
- Advanced Sex Education. July 12–17, 3 credits.

Kansas

Kansas State University, Manhattan, Kans.
- Methods of Teaching Human Sexuality. June 8–19, 3 credits.
Write to: Betsy Bergen, PhD, Associate Professor, Family and Child Development, Justin Hall, Kansas State University, Manhattan, KS 66506.

Kentucky

University of Kentucky, Lexington, Ky.
- Perspectives on Sexuality for Educators and Counselors. June 15–19, 3 semester hours.
Write to: O'Neal Weeks, PhD, Department of Family Studies, University of Kentucky, 315 Fanthouse Building, Lexington, KY 40506.

Maryland

University of Maryland, College Park, Md.
- Fundamentals of Sex Education. May 18–July 2, 3 credits.
Write to: Mrs. Doris Sands, Department of Health Education, University of Maryland, College Park, MD 20742.

Massachusetts

Boston University, Boston, Mass.
- Sex and Family Living Education. May 19–June 26, 4 credit hours.
Write to: Professor Carl E. Willgoose, Coordinator, Health Education Program, Boston University, 232 Bay State Road, Boston, MA 02215.

Missouri

University of Missouri, St. Louis, Mo.
- Education and Psychology in Human Sexuality. May 19–June 11, 3 credit hours.
- Sex Education and the Developmentally Disabled. Oct. 2–3, 1 credit hour.
Write to: Dr. Richard L. Thurman, Behavioral Studies Department, University of Missouri, 8001 Natural Bridge Road, St. Louis, MO 63121.

Nevada

University of Nevada, Reno, Nev.
Write to: Milton L. Nolin, PhD, School of Home Economics, University of Nevada, Reno, NV 89557.
New Jersey

Kean College of New Jersey, Union, N.J.
- Family Life Education Institute. July 6-23, 6 credits.
Write to: Ethel J. Madsen, Kean College of New Jersey, Morris Avenue, Union, N.J. 07083.

Trenton State College, Trenton, N.J.
- Family Life and Sex Education. June 29–July 11, 3 semester hours.
Write to: Dr. Donald D. Brown, Health and Physical Education Department, Trenton State College, Trenton, N.J. 08625.

New York

Columbia University, Teachers College, New York, N.Y.
Write to: Professor James L. Malfetti, Department of Health Education, Box 114, Teachers College, Columbia University, 525 West 120th Street, New York, N.Y. 10027.

Cornell University, Ithaca, N.Y.
Write to: Andrea Parrot Eggleston, N135 MVR Hall, Cornell University, Ithaca, N.Y. 14853.

New York University, New York, N.Y.
- Sweden Seminar in Sexuality. June 29–August 20, 12 credits.
Write to: Professor Deryck Calderswood, Director, Human Sexuality Program, New York University, 51 West 4th Street, New York, N.Y. 10003.

C. W. Post Center/Long Island University, Greenvale, N.Y.
- Summer Workshop on Human Sexuality. August 17–21, 3 credits.
Write to: Dr. Mary Ann Newman, C. W. Post Center, Summer Programs, Greenvale, NY 11548.

Syracuse University Division of Summer Sessions, in conjunction with the Institute for Family Research and Education, Syracuse, N.Y.
- Sex Education in the Schools—The 11th Annual Workshop on Human Sexuality. July 9–17, 3 credits.
Write to: Alison M. Deming, Workshop Coordinator/Instructor, Institute for Family Research and Education, 760 Ostrom Avenue, Syracuse, NY 13210.

Pennsylvania

- Concepts in Human Sexuality. August 10–14, 3 semester hours.
Write to: Dr. Kenneth D. George, Professor of Education, Human Sexuality Program, University of Pennsylvania Graduate School of Education, Philadelphia, PA 19104.

West Chester State College, West Chester, Pa.
Write to: Walter E. Funk, Chairman, Health Department, West Chester State College, West Chester, PA 19380.

Vermont

University of Vermont, Burlington, Vt.
Write to: Kay Frances Schepp, EdD, Counseling and Testing Center, University of Vermont, Burlington, VT 05401.

Washington

Planned Parenthood of Spokane, Spokane, Wash.
- Sex Education for Teachers and Youth Workers. April 1–May 27, 3 credits.
Write to: Lynn Baird, Education Director, Planned Parenthood of Spokane, N. 307 Howard, Spokane, WA 99201.

DO YOU KNOW THAT...

SSSS Eastern Region

A conference entitled "Research Advances in Sexology" will be held by the Society for the Scientific Study of Sex, Inc., Eastern Region, on April 10–12, 1981, in Philadelphia, Pennsylvania. Further information is available from: Daniel Herzog, MS, MSW, Executive Director, 16 Evergreen Court, Glen Ridge, N.J. 07028.

Canadian Sexuality Conference

The University of Guelph's 3rd annual conference on sexuality and sex education, "In Search of Healthy Sexuality," will be held June 8–10, 1981. The conference will examine current issues and educational and counseling approaches used by teachers, health professionals, social workers, and clergy. For information contact: Continuing Education, University of Guelph, Guelph, Ontario, Canada N1G 2W1.

Resources to Write for...

Teenage Pregnancy: A Challenge to Do Right by Each Other, by Bill Stackhouse, was published as the conclusion to the two-year teenage pregnancy project conducted in the United Church of Christ through its Board for Homeland Ministries. Within an informal framework, the study/action guide provides diverse exercises and information from which to build a program to help young people understand themselves as sexual beings. Questionnaires, exercises in decision making, scripture background, a bibliography, and community and legal resources are included. Single copies cost $3.95, and may be ordered from: Teenage Pregnancy Project, United Church Board for Homeland Ministries, 17th Floor, 132 West 31st Street, New York, NY 10001.

The Journal of School Health, April 1981, will be a double issue of approximately 140 pages on the topic "Sex Education in the Public Schools," guest-edited by Guy Parcel and Sol Gordon. Over 20 authors from public schools, universities, community agencies, and national organizations will discuss, for example, how to deal with the opposition, how to implement programs, how to gain community support, and what training sex education teachers should have. Examples will be given of current programs and strategies, and an annotated resource list will be included. For a copy of this comprehensive look at sex education in the public schools, send $4.50 to: April Issue, Journal of School Health, P.O. Box 708, Kent, OH 44240.

The Sex and Disability Training Project, 1976–1979, Final Report, prepared by David G. Bullard, Susan E. Knight, Mary M. Rodocker, and Douglas H. Wallace, details the work done over a three-year period by the staff of the Sex and Disability Unit of the Human Sexuality Program at the University of California in training disabled and nondisabled professionals and paraprofessionals to fulfill the role of sociosexual educator-counselors for physically disabled persons, health care providers, and rehabilitation and habilitation agencies. For price and ordering information, write to: Sex and Disability Unit, Department of Psychiatry, University of California, 814 Mission Street, Second Floor, San Francisco, CA 94103.

SIECUS Report, March 1981

Reviewed by Daniel H. Labby, MD, Professor of Psychiatry and Medicine, University of Oregon Health Sciences Center, Portland, Ore.

This book must be considered a significant milestone. For over 30 years, professionals in many disciplines working in what is the presently recognized field of sexology have been attempting to raise the awareness of the medical and allied professions to the area of sexual health and its problems. There is increasing evidence now that these educational efforts, particularly with doctors and medical students, have been paying off. Clinicians are beginning to integrate the management of problems of sexual health into their practice as they recognize the importance of good sexual function as a way of preserving the integrity of the patient and the needs for intimacy in periods of both health and sickness. Not surprisingly, younger physicians seem to be the leaders since they have profited by expansion of sex education curricula in medical schools. There are also more practitioners of sexual therapies in the general mental health field to which this book also addresses itself, and a generally better informed public now occupies the waiting rooms in health care facilities.

Specific information on sexual health problems, particularly during illness, has been scattered through the medical literature in a variety of journals. One of the great services this textbook performs is the collation of data from widely distributed sources as well as the provision of information derived from the rich clinical experiences of the Masters and Johnson Institute, in which Robert Kolodny, as its associate director and director of training, works closely with codirectors Masters and Johnson. What this textbook offers is a highly readable account of experiences with specific disease entities, with the majority of data extracted from clinical information on humans, with little reference to animal research, or sociologic or cultural aspects of sexuality. In that sense, it is a true textbook of human sexual medicine.

The book is roughly divided into three sections. The first covers basic background information involving sexual anatomy, physiology, and development. The treatment is clear and thorough, reinforced with contemporary information, and is well illustrated. The chapter on geriatric sexuality is exceptionally attractive since it explores the relatively neglected notion that men and women late in life have sexual feelings and needs, and are enjoying sexual relationships. Much information is provided from current investigative efforts in the field of geriatrics and presented in such a way that practitioners will find it of easy application to clinical experiences within their practices. As would be expected, the chapter on endocrine factors in sexual dysfunction, which occupies 45 pages of text and is reinforced with 108 references, is one that is extensively explored and will be particularly valuable in the identification and diagnosis of the endocrinopathies including diabetes, thyroid, and adrenal disorders.

The second section offers seven chapters on the sexual implications of specific illnesses and covers cardiovascular disease, gynecologic disorders, urologic disease, chronic illness, cancer, and psychiatric illness. The coverage is extensive and the well-selected references offer broad coverage for further research. This reviewer found the chapter on the cancer patient and sexual activity especially useful because of the suggestions for patient management that are provided. Special mention should also be made of the section on drugs and sex, since little is available in the general literature on the influences of specific drugs on sexuality. Its 23 pages of text, which are impressively broad in their coverage, are followed by 139 references, all of which will alert the reader to the potential sexual effects of drug use. The variability of effects of pharmacologic agents from person to person is emphasized. It is also indicated that much of drug research relating to sexual response has been focused on the male since this is easy to assess because of the male's visibly erectile capacity and ejaculation. Nevertheless, throughout the chapter there are rich references to observation of the effects of drugs on vaginal lubrication and orgasmic capacity in the female.

Special issues occupy the third section of the book. Here a large miscellany is discussed covering sexual function in the handicapped, the problems of family planning, rape, homosexuality, and transsexualism. The final six chapters review in detail the concepts of sexual therapy and the treatment of male and female sexual dysfunction, the problems of sexual desire, and the paraphilias. A final chapter focuses on the clinical needs of the office practitioner who is not a specialist in sexual therapies. The authors emphasize that "most patients with sexual problems do not require sex therapy. Despite this observation, it is important to distinguish between patients who need such a specialized approach and those likely to respond to simpler intervention." The authors then select a number of pivotal themes that include suggestions about history taking, differential diagnosis, discriminating organic from psychogenic etiology of sexual disorders, a definition of time-limited treatment formats, and finally, guidance that should help the practitioner decide how and when to make a referral.

Although this book is, as noted, a medical textbook, it is obviously not written for physicians alone. Therefore, if one were to wish to purchase a single book of those presently available in sexual medicine, this would be an outstanding choice. It is equally applicable to the needs of the psychologist, the social worker, nurse, counselor, or health care professional, as a guide and resource. I have already found it extremely useful as a reference text for medical school courses in sexual medicine. PR

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.
In addition, and regrettably, Boswell does not, in my opinion, prove much of his thesis. It is not at all certain, for example, that the first 12 centuries were as happy for homosexuals as suggested here. Similarly, it is not clear that there was much change in the actual enforcement of the homophobic Christian ethic in the centuries which followed. The whitewash which Boswell attempts to pour on the biblical anti-homosexual statements is perhaps best left for such attorney-scholars as Walter Barnett, whose Pendle Hill pamphlet, *Homosexuality and the Bible* (1979), provides a better and more concise brief. It is one thing for a lawyer to argue that, on the given evidence, a particular charge cannot be pinned on the client, and quite another for a scholar to state that, at a given epoch, there was general social acceptance for sex-variant practices. If the Bible does not condemn "deep-throat" oral-genital recreational sex, for example, internal evidence most assuredly suggests that it would have done so if the practice had become at all common. Particularly unsettling for feminists will be Boswell's tacit support for, and deference to, conservatism in sociobiologists. He also prefers not to believe that the only safety in hard times lies in real power; that the rich and powerful support homosexuals only when and for as long as it suits their purposes. In the long run, movement toward Keynesian economics and social and sexual egalitarianism has more to offer to persecuted minorities than has any fundamentally inequitarian religion.

But as Keynes noted, in the long run we are all dead. Most Americans are more than nominally "Christians" and, in addition, more than just a few suffer from (or enjoy?) a lingering sense of religiously zealous antipathy to homosexuality. Presently, moreover, Moral Majority, Christian Voice, and Religious Roundtable are doing a rather successful job of capitalizing on the residues of such sentiments and are "hot on the trail" of gay liberation and related movements. Christian homophobes are making a very loud "last hurrah." Thus Boswell's work should now be of very considerable use, both as a source book for countering arguments that the Christian hostility was complete or everlasting, and quite frankly, as a resource for use in therapy. Boswell's eloquent translations of medieval gay love poems and his demonstration of alternatives to Christian mainstream homophobia will undoubtedly provide comfort for Christianity's victims. Indeed, the work might profitably be used by proponents of adjustment therapy who may wish to read passages from the gay love poems to such of their gay patients as are troubled with religious guilt. If such an accomplishment is more modest than that which the book's title promises, Boswell still deserves prolonged (if restrained) applause. A, PR

**THE NEW YOU**

by Sol Gordon

Is Back in Print


It's an autobiography in the form of poetry, essays and one-liners. *THE NEW YOU* is a spiritual journey with the message that each person's uniqueness is a miracle.

Available only from:

Ed-U Press, Inc.
Box 583
Fayetteville, N.Y. 13066

Send $3.50 for single copy, $6.50 for two copies (prices include postage & handling).


The authors of this volume are active members of Parents of Gays, nation-wide organization offering educational and support services. In addition to describing their own personal experiences as parents of gay children, they offer additional accounts of other people's experiences in order to provide a spectrum of family relationships and coping patterns which develop when the homosexuality of a child becomes known. The viewpoints of both parent and child are
shared, giving the reader an overall perspective of reactions.

Chapters on the meaning of gayness, gay couples, and gays and religion provide a well-rounded overview of the contemporary gay experience within the framework of the family. Neither the parents nor the children are portrayed as saints or sinners, but rather as mere mortal beings trying to live through something that requires adjustment and change in thought and perspective. However, unlike other books of this genre, written primarily to offer “caring and sharing” support to readers being faced with crisis, this volume also provides solid background material that is indicative of solid research.

The tone of the book is low-key and nonthreatening, and the language is clear and nontechnical, making it an exceptional referral resource for gay men, lesbians, and their families. In contrast to other gay literature, the primary focus here is on family rather than intra- or interpersonal relationships. It would easily lend itself as text material for course work in that area. An excellent, if brief, bibliography provides direction for further reading.

Awarded the 1979 Gay Book Award by the American Library Association Task Force on Gay Liberation, Now That You Know is a valuable contribution to the growing body of literature in this area.


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

My reactions to Charlotte Wolff’s book, Bisexuality: A Study, are definitely mixed. On the positive side, Dr. Wolff presents a wealth of information, both historical and clinical. There is a good review of historical concepts regarding bisexuality. Her own study of 75 men and 75 women who are bisexual is interesting and filled mostly with anecdotal material. She obtained her data through the use of a questionnaire, an autobiographical sketch, and an interview lasting from an hour and a half to three hours. She has a lot of demographic data, information on family background, professions, and family relationships. She questioned the individuals about their bisexual feelings and practices at different periods in their life cycles (both lasting and casual contacts), including whether or not they considered bisexuality to have advantages.

She looked also at their sexual dreams and fantasies as well as at their attitudes toward minority groups.

The book is replete with theories, quotes, and examples of bisexuality throughout history. The author consistently supports the stance that bisexuality is the natural state and is apparent in all of nature. She tries to clarify certain concepts through intricate definitions, especially concepts relating to sexual identity, gender identity, sexual orientation, and androgyne. “Sexual identity is the awareness of belonging to either the male or female sex. . . . Gender identity reflects a person’s erotic and sexual self-image.” This should not be confused with sexual orientation which refers to a person’s psychosexual relationships. Gender identity thus may direct sexual orientation, but must not be confused with it. Androgyne refers to physical appearance, and is to be applied to humans only.

Wolff discusses how society, “motivated by the need for self-preservation and the extension of territory, required a clear-cut dichotomy between men and women which made bi- and homosexuality undesirable.” Without the repression of the other-sexed side of oneself, gender identity would always be male/female.” Gender identity and sexual orientation can diverge in a society because of current strong mores and the pressure to conform, fear of guilt, alienation from family and friends, and isolation from one’s community. The result is that the above factors can weaken the potential intimate relationships of bisexuality. It is important to point out also that she sees bisexuality as being different from Kinsey’s concept of ambisexuality. Ambisexuality means that one can change over rather easily from a hetero- to a homosexual relationship; thus the important characteristic is changeability which conveys instability in desire and behavior. The bisexual concept is that hetero- and homosexual relationships are not interchangeable but rather exist side by side. They are different from each other, yet complement and strengthen one another. Both homosexuality and heterosexuality exist in everyone, “be it acknowledged, repressed, despised or denied.”

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On the negative side, Wolff is often edged, repressed, despised or denying. Wolff's concept of ambisexuality. Ambisexuality exist in everyone, "be it acknowledged, repressed, despised or denied."
account is consistently fascinating. This is no mere documentation of events but an effective history of the relationship between the sexes (and she is objective in this regard to the point that the more militant feminists will likely be hostile to her presentation). It also shows us how sexual customs and feelings about sex have influenced the course of human developments. At certain points, she is not clear about the distinction between freely chosen behavior and compulsive behavior. For example, she uses the terms bestiality and zoophilia interchangeably. Her material on the role of the eunuch may be challenged by some, but these dissatisfaction are on a nit-picking level. The book represents a significant accomplishment and is a delight to read. A, PR


*Reviewed by Laura J. Singer, EdD, President, Save A Marriage, Inc.; author, Stages: The Crises That Shape Your Marriage (Grosset & Dunlap, 1980).*

An Australian couple, spinning off from Masters and Johnson, embark on an affectionate and thorough exploration of sexual activities, covering most aspects from early masturbation to sex after a heart attack. “The discovery that so many people can be helped with so little professional guidance,” the authors posit, “will have us write this book.” In it we have tried to set out a self-help guide for couples who are obliged to rely on their own resources. Of course some couples must have personalized counseling. No relationship can survive without communication, and if that has been badly broken down, only an experienced counselor can help to restore it.

The information in this handbook is well organized in an easy-to-comprehend fashion, illustrated by case studies, diagrams, and an 18-page insert of soft-focus photographs in sepia. The tone is thoughtful, caring, comforting, ranging from the scientific to the lighthearted. The Claraxes take a clear look at the myths and possibilities of sex, glancing backward at the old inhibitions and forward to the new freedom—which, they caution, should be treated with respect. A three-week intensive self-help program is outlined in three stages: nongenital pleasuring, genital pleasuring, and coital sensations and variety. While the program is derivative, it is presented in an especially warm and acceptable way.

A major contribution of the book is the stress on the importance of masturbation, and the authors urge that “the comfortable acceptance and enjoyment of masturbation by the adolescent should be among the goals of any health education program designed for young people.” They discuss the damaging consequences of cultural taboos in preventing sexual awakening via early masturbation, and note that “It comes as a shock to a woman to be told she must learn to masturbate if she is to become sexually mature.” Those women who lost out in youth are explicitly gentled into catching up.

Some notes of caution: Perhaps due to cultural differences in Australia, the authors place more emphasis on female sexuality than on male, although the latter is dealt with to some degree. Men, too, are often shy of expressing their desires. Also, the developmental chapter, which tends to be over-simplified, does not do justice to the complexities of psychosexual development, and the discussion about contraceptives is somewhat outdated. This book would be useful as an adjunct with, rather than substitute for, counseling.

While Sexual Joy in Marriage certainly does not offer any important ground-breaking ideas, it is a down-to-earth, sensible book which stresses the individuality of humankind, dismisses notions of “patterns,” dispels the guilt left over from childhood myths, and encourages couples to try to find their way out of certain sexual dilemmas. A, PR


*Reviewed by Gary F. Kelly, MEd, Director, Student Development Center, Clarkson College, Potsdam, N.Y.*

This text constitutes yet another addition to the library of available volumes suitable for use in college level sexuality courses. It is a very readable book whose organization is comparable to a variety of other similar texts. The book has many strong points worth mentioning. Its topics are covered concisely and with careful attention paid to a wide selection of references. There is a particularly interesting summary chapter designed to give students an overview of cross-cultural and cross-species comparisons. There is also an excellent summary of the findings of several recent sex surveys. Each chapter has a few inserts that offer some hit of relevant information in more detail, although I usually feel that such efforts could just as easily have been included in the body of the text. The chapters on Sexual Health and Sexuality in Special Populations contain an abundance of good information.

Human Sexuality: Current Perspectives nevertheless has its share of problems, too. I particularly take issue with the manner in which the book deals with sexual behaviors and orientations that differ from the standard heterosexual mold. The organization of these chapters lends a built-in bias by its compartmentalization of sexual variances. The only topics treated in the chapter on Variation in Sexual Orientation are homosexuality, bisexuality, and transsexuality, the last not just inappropriately but incorrectly grouped with the first two instead of being treated as a gender identity phenomenon. Many professionals would argue with the discussions of a variety of behaviors listed in the chapter on problems, although the authors do attempt a definition of criteria used for classifying behaviors as problems. And it is very unfortunate that various aversion therapy approaches, described as “treatments” for behaviors in several sections of the text, are based on outdated references and have largely been discarded by therapists as ineffective and actually barbaric. The three-page chapter on Sex and the Law is so sparse, it might better have been included as a section in one of the other chapters.

I had mixed reactions to the drawings which illustrate the book, finding some of them tasteful and appealing, while others were rather crudely executed. Indeed, Masters and Johnson would not have been recognizable without the caption. Some drawings are actually misleading from a factual standpoint, such as the one claimed as portraying transvestism that shows a nude male viewing his body in a mirror and seeing the body of a nude female. I found it interesting that the chapter on Sexuality: Personal Perspectives really provided no structured opportunities for self-evaluation. It was instead a rather over-simplified discussion of some interesting hypotheses, some of which were presented as fact, e.g., “The ‘American way of sex’ is preoccupied with orgasms.” Many such hypotheses
human sexuality, although it is comparably of which often fades with time and represent social commentary, the accuracy of which often fades with time and closer scrutiny.

In summary, Human Sexuality: Current Perspectives could be one of several texts considered for use in shorter courses in human sexuality, although it is comparatively expensive. It is adequate, though not remarkable. A, PR


Reviewed by Mary S. Calderone, MD, President, SIECUS.

In an age that is visually rather than verbally oriented, this book can very usefully fill the role of a one-volume family encyclopedia. Although it is subtitled "A Comprehensive, Illustrated Guide to the Body and Its Functions," it actually contains more than such specific descriptions, for there are sections on a wide variety of topics such as illness, fitness and nutrition, drugs, life and death, human development, first aid, and the community. But everywhere the emphasis is on diagrams and simple illustrations rather than on words.

The sections on sexual behavior are based on the Kinsey studies, while those on human sexual response are based on the work of Masters and Johnson. Family problems are included in the discussions, and social problems are briefly covered. Growing children of every age would benefit from the book because with every stage of their development they would find something new to interest them, whether in information or in maturation of concepts.

All in all, this would be a useful book for families to have for quick and easy reference, even though there is no bibliography for further study. A


Reviewed by Nancy L. Esibill, PhD, Assistant Professor, Department of Rehabilitation Counseling, New York University; member, SIECUS Board of Directors.

This book, written by an English social scientist and sex counselor, is an easily readable, handy reference for those beginning to study the sexual world of people with disabilities of various natures.

The first part of the book provides a social context and details the effects that both congenital and acquired conditions can have on social/sexual relationships. (A fortunate note is that the author does not assume that all disabled persons are heterosexual.) Other chapters in this section deal somewhat superficially with the problems of sensory and mental handicap. One chapter provides a helpful model sex education program for disabled children. While aimed at a British audience, the chapters on the institutional setting and on the legal aspects of sex and the disabled address issues relevant to any society. The author points out the ambiguity society faces in trying to legislate acceptable sexual practice and shows how the needs and problems of the disabled often compound the situation. The last chapters in Part I deal with the qualities and qualifications desirable in sex counselors, and the need for in-service training in all the helping professions.

Part II discusses several specific disabling conditions, arranged under chapter headings covering disorders of the brain, the central nervous system, and the circulatory, digestive, endocrine, metabolic, and respiratory systems. Some musculoskeletal, surgically-induced, and reproductive disorders are also detailed. Each chapter describes very briefly the direct and indirect sexual effects of the disability as well as its impact on mental/ emotional and social areas, and on parenthood.

While the second half of the book is of more practical value to health practitioners, the first part does raise many of the current issues in the field of sexuality and disability, and could generate discussion. The book is not technical—medically or psychologically—and this is an asset; but for this reason it needs a more comprehensive reference section. It is, however, a welcome addition to the growing literature in the field. PR


Reviewed by Kenneth D. George, EdD, Professor of Education, Human Sexuality Program, University of Pennsylvania; and Andrew E. Behrendt, PhD Candidate, Assistant Instructor, Human Sexuality Program, University of Pennsylvania.

For college students who are in the process of questioning and affirming their values and attitudes, a human sexuality course is ideal since it gives them the opportunity to examine their own sexuality as well as that of others. Unlike many other academic courses, those in human sexuality are usually of personal interest, involving as they may issues that are often sensitive and controversial. Therefore, it is imperative that the textbook chosen for such classes be not only informative and scholarly, but also personal and sensitive to the issues presented.

The stated purpose of Sexual Decisions is one that we wholeheartedly endorse: "We [Diamond and Karlen] hope to present a background for better decision making, and information that helps one become a more satisfied and satisfying sexual individual and partner, sensitive to the needs of oneself, of others, and of society." It is ironic and sad—a tragedy—that the book fails in its purpose and therefore cannot be recommended. The tragedy is that Sexual Decisions actually hinders the decision-making process in three ways: (1) the authors have treated inferences, assumptions, and observations as if they were "facts," e.g., "Gender roles, however, are not entirely learned";
coitus (penis in vagina) should be the preferred adult sexual behavior, rather than leaving the choice to the individual; and (3) they treat homosexuality as a paraphilia and as a dysfunction—an opinion no longer generally held by responsible professionals.

In fairness, the book does have many strengths. It gives much information and asks good questions, particularly in the following areas: Part I (Foundation) where sexual learning, history of sexology, and modern sexology research are discussed; the theories of psychosexual development in Part II (The Person); Part IV (The Couple), especially the sections on the variety and kinds of human love, relationships and marriage, and pairing; Part V (Reproduction); and Part VI (Society). The discussion on reproduction was weakened by the inclusion of certain assumptions, such as, “Every sexually active person must deal with conception or conception control, and most must deal with pregnancy, childbirth, and child-rearing.” Obviously elderly couples and lesbian and gay couples do not have to deal with these issues. Also, although the couple in Part IV is defined only as heterosexual, the extensive review of the literature could equally apply to homosexual couples.

The book’s many weaknesses, however, outweigh its strengths. We will focus on only two of them: the treatment of inferences, assumptions, and observations as if they were “facts”; and the discussion of homosexuality. Most of what we know about human sexual behavior consists of observations, assumptions, and inferences, with relatively few scientifically examined and established “facts.” Most college students will not be able to make this distinction. They will read this book and believe they are reading the “facts” about human sexual behavior, and may behave accordingly. How will the following affect sexual decision-making? During sex “the woman may trash about and cry or scream, even laugh or sob uncontrollably; she may look and sound as if she were in pain.” “Females’ breasts and skin are more sexually responsive than [those of] males.” “... it is usually the male who starts sexual contact and becomes more aroused and demanding.” How will college students be influenced by these “facts”?

Contrary to the statement in the book’s foreword, Sexual Decisions is neither informed nor sensitive on the topic of homosexuality. The unspoken gesture and the unwritten word are powerful forms of communication. What messages are given to college students when homosexual behavior is discussed, in the chapter “Other Sexual Behaviors,” along with incest, bestiality, pedophilia, sadism, masochism, and voyeurism, and is not discussed in the chapters on “Adult Genital Behavior,” “Love,” or “Relationships and Marriage”?

Although Diamond and Karlen are supportive in their conclusion that “homosexuality is not a measure of human worth, and that society usually loses by segregating homosexuals, let alone punishing them,” they then go on to state: “There is a myth that no homosexual can change his or her behavior.” They have failed to point out that homosexuality is more than a behavior. Much more is involved here than merely the question of with whom one has sex. It is a lifestyle. A person’s homosexuality is a factor in many of his/her decisions, e.g., where to live, where to go to school, whether to have children, the choice of love partner, how to communicate with parents and friends, and even in what career to choose.

In the 1980s there will be a greater emphasis in human sexuality on investigating old and new concepts of family, love and pair-bonding, and relationships. Students and researchers in human sexuality will be questioning both traditional and newer values and attitudes. In order to make intelligent sexual decisions, these students will need a comprehensive and an objective discussion which Sexual Decisions does not provide.

Love, Sex, and Marriage: A Jewish View.

Reviewed by Rabbi Jeshaiha Schnitzer, EdD, Congregation Shomrei Emunah, Montclair, IV.

It is seldom that one finds a textbook which is fascinating reading from beginning to end, but that was my experience with Rabbi Gittelsohn’s new edition of Love, Sex, and Marriage: A Jewish View. I highly recommend this book to my colleagues in the rabbinate and in the fields of marriage and family therapy, as a reference book and as a guide for small discussion groups. It is written for high school students and young people with a definite Jewish viewpoint on all aspects of male-female relationships, from dating to love, sex, marriage, and the family. It is a combined revision of the author’s works on these subjects, Consecrated Unto Me (1965) and its supplement Love, Sex, and Marriage (1976). The book’s usefulness is not limited to those working with Jews, for this new text responds to the vast changes during the last decade in the mores of sex and marriage, the changing roles of women, variant sexual behavior, and alternatives to marriage.

Rabbi Gittelsohn presents a religious viewpoint concerning sex and marriage that also includes a worldly outlook on these areas. He is not an advocate of premarital sex. In Chapter 13, entitled “To Wait,” he counsels that “the wisest and happiest course is to restrict sexual intercourse, certainly to the level of love, quite possibly to that of marriage.” Nevertheless, he is aware that there is another side to the issue and so includes another viewpoint. In Chapter 12, he provides a forum for Judith Fales, a sociologist, to discuss the positive aspects of premarital sex which she strongly advocates. But she does caution her readers: “I urge, at this point, however, that you keep one important point in mind. It isn’t likely that intimacy, sexual or otherwise, between immature couples will help you choose your mate more wisely. ... We must remember that living together before marriage does not, according to recent research, mean greater chances of your marriage being successful. The divorce rate for couples who have lived together, sometimes for years, and then married, is as high as for those who did not live together.”

“Marriage, heaven or hell”; “What is love?; “A family is more than two”; “Sex is here to stay”; “The stakes are high”. These examples from the table of contents illustrate the wide gamut of subjects included in the book. Each of the 16 chapters is introduced with a comic strip or cartoon which adds a refreshing sense of humor to some of the most serious problems of life; and each chapter ends with case illustrations, which are excellent for promoting discussion, and with bibliographical references. In this new edition, Rabbi Gittelsohn has presented valuable and pertinent information in a clear, lucid style, to help teachers, counselors, and young people engage in dialogue and discussion on important and sensitive issues—dialogue which can lead to thoughtfully considered and responsible choices.
The situations in these films are realistically and believably presented. The production values are excellent and for the most part the acting is exceptional. They will stimulate serious discussion among adolescents and would provide equal stimulation to parent groups. They are available from Viscount Films, Suite 831, 3400 Peachtree Road, NE, Atlanta, GA 30326, on a single reel for $265. If purchased singly, the first film ordered is $65, and each additional one purchased is $50.

An excellent and comprehensive guide, Problem-Solving Curriculum for Adolescents (Ages 15-19), based on the above films and providing exercises, quizzes, discussion questions, and procedures for facilitators, is available from Planned Parenthood Center of Memphis, Mid Memphis Tower, 1407 Union Avenue, Memphis, TN 38104. Priced at $15, it is a valuable resource for educators working with adolescents.

The following short “trigger” films, as they have come to be called, were developed by the Planned Parenthood Center of Memphis, Tennessee, and each sets up a situation in five minutes or less and leaves the resolution up to the audience.


While looking through a family picture album, a teenage boy and girl reveal through their comments many examples of sex role stereotyping which show how subtle and not so subtle influences determine what behaviors are felt to be appropriate for each sex.


A protective older brother follows his 15-year-old sister on her way to a date with a man in his 20s, and points out some issues involved that Adrianne has not thought about. They argue over whether or not she should continue dating Larry.


A teenage couple, alone for an evening in the boy’s home, are unable to communicate their real feelings and intentions. They say one thing while off-camera voices express their true desires: He is eager for his first intercourse and she is struggling with how to cope with what this will do to it. Will it even be possible for them to continue to be friends? The situation is presented in a sensitive manner and can lead to serious discussion of the limits of same-sex friendships, and of homosexual sex roles. For both males and females in high school, college, and adult audiences, After the Game can prompt productive consideration of the difficulty both sexes have in accepting and expressing feelings for same-sex friends in our society.

After the Game. 16 mm, black/white, sound, 19 min. Price, $325; rental, $50. Focus International, Inc., 1776 Broadway, New York, NY 10019.

The action in this film takes place in the space of several hours after a women’s baseball game, as two young women in their early twenties go for pizza and then to the apartment of one of the women to shower and change. In the course of their discussion of a male friend with whom both have previously shared a relationship, we gradually understand the depth of the friendship that exists between these two. Diana playfully comments to Nicole, “We’re so compatible that, if you were a man, I’d marry you!” This remark prompts Nicole to share that she thinks that there is, in fact, a sexual aspect in the attraction she feels to Diana. Suddenly, the lighthearted interaction is halted and the ease and comfort both felt with each other turns into discomfort and tension. The film ends as both realize that they have reached a crisis in their relationship, and each is struggling with how to cope with what this will do to it. Will it even be possible for them to continue to be friends? The situation is presented in a sensitive manner and can lead to serious discussion of the limits of same-sex friendships, and of homosexual sex roles. For both males and females in high school, college, and adult audiences, After the Game can prompt productive consideration of the difficulty both sexes have in accepting and expressing feelings for same-sex friends in our society.

Brian McNaught on Homosexuality.

This is a presentation recorded before an undergraduate audience. McNaught, a young man in his early 30s, is an articulate and knowledgeable gay male who shares his own story of growing up in a large Irish-Catholic family, his difficulties in achieving a sexual identity, his suicide attempt leading to his “coming out” to his colleagues, his clergy, and his family. He relates all this in a light but objective manner. The second half of his presentation deals with myths about homosexu-
ality and includes a brief history of the gay rights movement. McNaught is especially good at helping his audience understand and interpret biblical references to homosexuality. He closes with a creative fable he has written for children about "Grog, the Frog." This is a worthwhile educational opportunity for high school and college groups.

**The Politics of Sexuality.** Audio Cassette, 60 min. Price, $5.75. Ed-U Press, Box 583, Fayetteville, N.Y. 13066.

This is a "recorded live" presentation by Dr. Sol Gordon to a Richmond, Virginia, audience. It is an entertainment-oriented, audience-pleasing, somewhat rambling talk in Dr. Gordon's inimitable style. He looks at our society today and urges that educators be more emphatic about the messages that need to be conveyed to teenagers. He is commendably supportive of the adolescent girl's plight today, but his views of the male in constant pursuit of sex do not show a similar concern for or recognition of boys' problems. He belittles research in an unprofessional manner although he is dependent on it for the statistics and information he uses throughout his talk. The tape is a wonderful model, however, of how humor can carry an audience along while serious and important points are made. His enthusiastic audience is with him all the way.

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**Grand Opening.** Two-part program in film strip or slides, with audio cassettes; Part I, 8 min.; Part II, 10 min.; color. Film strips: price, $100; rental, $25. Slides: price, $190; rental, $30. Focus International, Inc., 17/6 Broadway, New York, NY 10019.

Reviewed by Konstance McCaffree, PhD, Sex Educator, Newtown, Pennsylvania.

For those professionals who found Exhibition (Focus International's presentation on male genitalia) a useful teaching and counseling resource, Grand Opening is an excellent companion piece. It follows a similar style, presenting female genitals to the viewer in a light, humorous fashion. The background music enhances the humor, and relieves the tension which can be generated when confronting this type of explicit material. This area of the female anatomy is rarely seen in instructional films.

The great variety in sizes and shapes of the female genitalia is emphasized and association is made between the slang and correct terms for the various organs and areas. Also illustrated are the insertion of tampons, and the use of the speculum and contraceptive devices. The sequence making comparisons of the vulva to the shapes of many flowers and fruits, and the inclusion of a birth at the end of the program serve as startling reminders of the reproductive function of a woman's body.

Counselors and therapists may find this presentation a more gentle desensitizer than other visuals which show the female body being touched or involved in intercourse. Men's and women's groups can learn a great deal from it about the "hidden" anatomy of the female body. Teachers of anatomy will find that the visuals presented here show not only variety, but a realistic and therefore useful view of the vulva, clitoris, and vaginal and urethral openings. Explicit sequences illustrate masturbation and the use of vibrators for sexual stimulation.

**Grand Opening** is a tastefully done, direct, fast-paced, and highly informative new visual.

[Update on January listing: The Acquaintance Rape Curriculum Series reviewed in the January 1981 SIECUS Report is now priced at $540, and the new address of the producer is O.D.N. Productions, Inc., 74 Varick Street, Room 304, New York, NY 10013.—Ed.]