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Human Biology - Sexuality



Human Biology - Sexuality

The Program in Human Biology,
Stanford University, (HumBio)

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CHAPTER **1** **Introduction to Sexuality -
Student Edition (Human Biology)**

Chapter Outline

- 1.1 HUMAN BIOLOGY
 - 1.2 INTRODUCTION TO SEXUALITY
-

1.1 Human Biology

Originally developed by the Program in Human Biology at Stanford University and EVERYDAY LEARNING®

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1.2 Introduction to Sexuality

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- 1 Friends and Peers
- 2 Dating and Romantic Feelings
- 3 Sexual Function and Behavior
- 4 Adolescent Sexual Behavior
- 5 Sexual Abuse and Coercion
- 6 Sexually Transmitted Diseases
- 7 AIDS
- 8 Sexual Morality
- 9 Making Decisions
- Glossary

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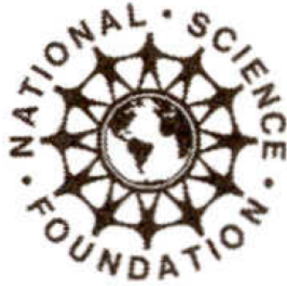
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CHAPTER **2** **Friends and Peers - Student Edition (Human Biology)**

Chapter Outline

2.1 FRIENDS AND PEERS

2.1 Friends and Peers



Who are they and how do they affect who you are?’S’

Throughout your life, and especially during **adolescence**, many people influence who you are and how you see yourself. As a child you probably spent most of your time with family members. They were your primary source of information about the world, relationships, and yourself. As an adolescent, you may begin to spend more time with **peers**-friends and classmates in your own age group. In addition, as your thinking skills further develop during this period of change and growth, you become more capable of comparing and contrasting differing points of view. As a result, friends’ values and beliefs may influence you as much and sometimes more than your parents’ values and beliefs.

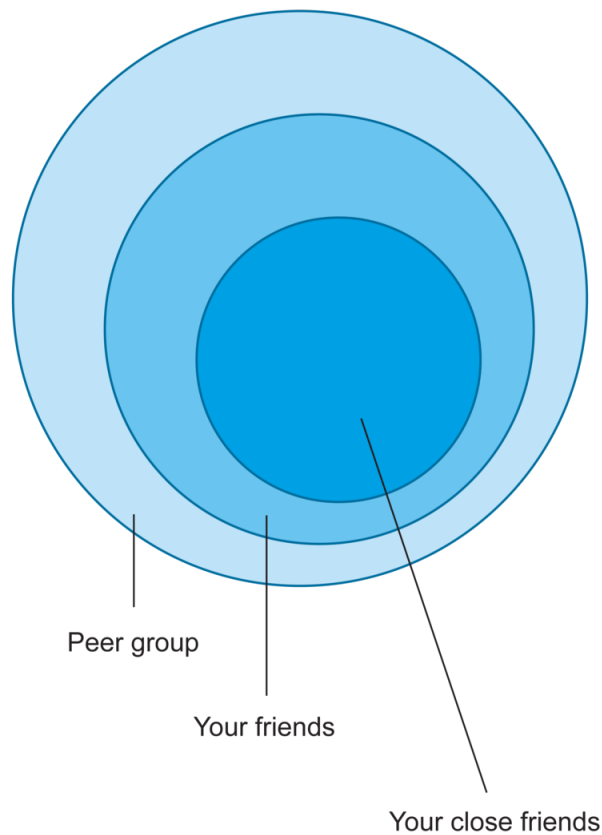


Figure 1.1 Your friends and peers give you lots of information about yourself and the world. You should learn how to effectively analyze all the information you receive.

“A friend is a person with whom you dare to be yourself.”

-Friendship

Frank Crane

Why is your choice of companions important? It matters because people give us lots of information about ourselves and about the world. People influence us every day. During adolescence, this influence can be particularly strong as you spend more time away from home and as you become more aware of different values and morals (beliefs about right and wrong). From the clearly spoken compliment to the unspoken and subtle looks of disapproval, you receive messages about yourself all day long. You learn about acceptable behaviors, ways of dressing, relationships, and where you fit by watching others. This **socialization** is an important part of growing up. You become part of society by exposure to other people, their behavior, and values.

Who are the people with whom you spend time? They probably fall into two categories-peers (classmates you may or may not know very well) and friends (those you choose to spend time with).

What characteristics make up the peer culture of your grade? Consider clothing, shared ideas, music, activities associated with school, and leisure-time activities.

What Do You Think?

Peers

Your peers are people like you in age or grade level. Whether you are good friends or not, peers influence or socialize you a great deal. You and your peers will have your own tastes, ideas, and ways of dressing and talking, as well as favorite music, food, and sports. These behaviors and preferences make up your **peer culture**. Some of the socialization this culture provides will reinforce that of a parent, especially if your families are similar. In other

cases, the values and behaviors of your peers will differ from those of your family.



Mini-Activity

Family and Friends Create a Venn diagram of the key characteristics in your peer culture (*What Do You Think?* this page) and corresponding elements in your family culture. Write a poem about the shared elements.

There are many varieties of peer cultures. Peer culture depends on your gender, your ethnicity, your local community, your friends, the activities you enjoy, the way you dress, the kinds of people with whom you mix, and many other factors.

Many adolescents are seen as belonging to a particular crowd or peer group. The kinds of groups do not change much over time or from school to school, but the names may change. In recent years, some crowds have been called jocks, brains, loners, druggies, populars, nerds, or rogues. Belonging to one of these groups is usually a result of your behaviors and interests. If you dress and behave like the people in a certain crowd, people are likely to see you as part of that crowd.

“It seems to me that it was what you did that made you part of the group. More than if you had a lot of friends.”

-Fast Sam, Cool Clyde, and Stuff

Walter Dean Myers

Peer Pressure

Can you think of a situation in which the people around you encouraged you to do something that you otherwise wouldn't have done? This something could be anything, such as getting your homework done, wanting to have an ear pierced, or being mean to someone you actually like. Wanting to be part of the crowd is a basic human instinct. Throughout history, humans have increased their chance for survival by being a part of a protective group. Being part of a group also helps us to define our **identity**-our sense of who we are. This desire to be part of a group makes **peer pressure** a powerful force. This force often works in very positive ways, but it can also create a lot of anxiety. Peer pressure can make you want to be someone you are not.



Mini-Activity

Peer Groups in Your Parents' Day Ask a parent, teacher, or older friend if they were part of a crowd at your age. How do they describe their crowd? What other groups existed at their school when they were your age? Do you have similar groups of friends in your school? What are they?

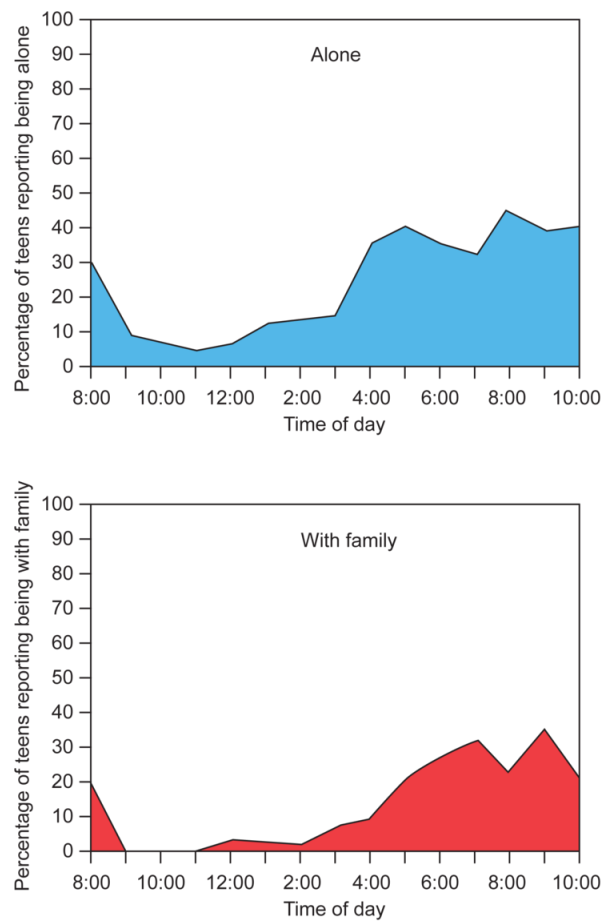


Figure 1.2 Percent of students spending time alone and with family throughout the day.



Mini-Activity

Time Spent Over the course of a couple of school days, and at least one weekend day, chart the time you spent alone, with friends, or with family. Calculate the percentage of time spent with each group. Bring the charts to school and share them with the class.

Peer pressure can be so indirect that people do not even realize it is happening. They may think they are making conscious choices that express their own individuality, but peers have influenced them by gossip, casual comments, or facial expressions. As an example, imagine someone who wants to get into a certain group of peers. At first, the group sees the adolescent as different and may act unfriendly toward him or her. When the adolescent dresses or behaves like those peers, he or she may be accepted. In this way, the teenager is responding to peer pressure without realizing it.

“There are some friends in school that push me to do some things that I don’t want to do. I tell myself, ‘I don’t have to do it if I don’t want to.’ They go, ‘Here do you want to smoke?’ I’m not going to smoke because my friends do. I say to myself, ‘Do what you think is right, not what other people say.’”

-Francia, 15, Salvadoran

New Kids on the Block

Janet Bode

Peers can be very good coaches. They can expose you to and teach you new activities, and they can be role models for appropriate dress, activities, and behavior in social situations. You can be a good coach and help them in the same ways.

It is often easier to learn something from someone close to your own age than from an older or younger person. If you see someone similar to yourself carrying out some activity, it is easier to use the person as a model and try to do what that person is doing. In some schools, teachers depend on this fact by using students in peer-tutoring programs. When one student teaches another one, both students benefit. They gain both academically and socially.

Activity 1-1: Peer Pressure

Introduction

One of the best ways to avoid peer pressure is to think ahead of time about the choices you would make on your own in difficult situations. Being prepared with an answer can make you feel more confident and better able to state your position clearly and strongly. In this activity you practice responding to peer pressure in several specific situations.

Materials

- Activity Report
- Index cards or paper

Procedure

Step 1 Your teacher will divide you into groups of about four people. You will take turns pressuring or being pressured in several different situations.

Step 2 Read the first role-play situation on the Activity Report and decide who will be the person pressured.

Step 3 The other members of the group will try to convince the fourth person (verbally, NOT physically) to do something that he or she isn't sure should be done.

Step 4 Before you begin the role-play, take two minutes to write down on your Activity Report the reasons that you will give for trying the activity if you are pressuring someone or the reasons you should not do the activity if you are the person being pressured.

Step 5 When you are acting out the scene, remember to let all persons be heard.

Step 6 After you have acted out the scene, talk about what happened as a group. Answer the questions on the Activity Report.

Step 7 Repeat this process for each of the four role-play scenarios, choosing a different person to be pressured in each one.

Step 8 When your group is done, write four different role-playing scenarios on the index cards or paper that you think would be good to practice. Hand these in to your teacher.

“A lot of people talk about it and want to do it [sex] for so many reasons that seem wrong. It don't prove nothing to me. It doesn't make me more grown, more mature, more hip, nothing.”

-B. B., on sexual intimacy, *Fast Sam, Cool Clyde, and Stuff*

Walter Dean Myers

Responding to Peer Pressure

Resisting peer pressure can be very hard, as you may have discovered from the last activity! In some cases, one person in a group may choose not to conform. For example, a boy or girl might feel unwilling to drink alcohol,

while the rest of the group is beginning to do so. The situation may become more and more uncomfortable, until the person leaves the group and chooses new friends with similar views on alcohol. In this case, the person successfully resists peer pressure but has to leave the group to do so.

Is it harder to get yourself out of an uncomfortable situation when you are with an individual, a small group, or a large group? Why?

What Do You Think?

Some people seem to find resisting easier than others do. Whether or not someone gives in to peer pressure usually depends on at least three characteristics—leadership skills, closeness to parents (or guardians), and maturity.

First, a person who is a leader, or someone who is looked up to by friends, is influenced less by peers than other people are. Leaders often exert peer pressure, rather than respond to it. For example, leaders exert pressure by giving followers rewards such as social status (entry into a social group).

Second, when a person feels secure about the consistent love or acceptance by parents or other significant adults, he or she is less likely to be dependent on peer acceptance. Adolescents rejected or ignored by their parents look more to their peers for acceptance and approval.

Third, as you mature, both in growing older and strengthening your beliefs and knowledge, you are less likely to accept others' opinions without question.

When you are young, you may see peers as experts on some topics, whether they are or not. When asked about whose opinions they trust, most young adolescents indicate they trust their friends' judgment more than their own. For example, psychologists have found that if an adolescent sees two sticks as the same length, but a friend pretends one of the sticks is longer, the adolescent's opinion may change! In this example, the person denies his or her own senses. In most real-life situations the issue of what is correct or incorrect is less clear than this study. If you are not sure what is true or right, another person may be able to influence you easily.



Mini-Activity

Recipe for Choosing a Friend Write a recipe about the ingredients you look for in a friend. (Keep in mind relative amounts of these ingredients.) Include your own most important secret ingredient.

The Heat of the Moment

What happens when a peer group gets together? Usually a lot of fun happens. But sometimes a good time is taken too far. When with friends, you may be having so much fun that you get very excited and don't think about the effects of your actions. Although excitement in itself is harmless, it should be balanced by self-control. A loss of self-control may result in vandalism or high-risk behavior. Substances that lower self-control, such as drugs or alcohol make risk-taking behavior, such as **sexual intimacy**, more likely. Peer pressure or group influence may increase excitement while decreasing self-control.

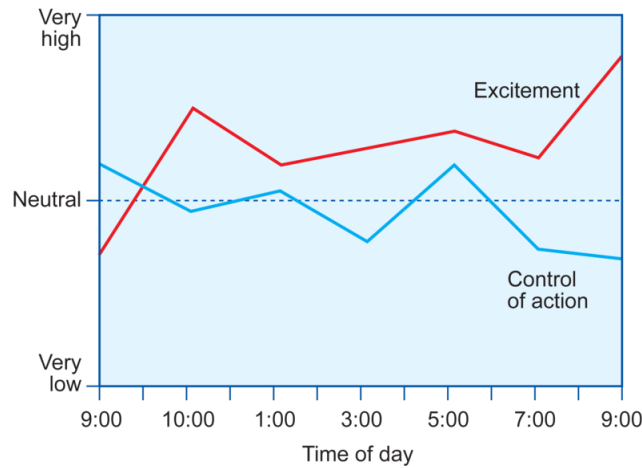


Figure 1.3 Excitement and control of action during the course of a day, as reported by adolescents from a midwestern city.

Figure 1.3 shows two curves, one for excitement level and the other for control of actions, for a group of high school students on Fridays and Saturdays. At what time of day or night were they most excited? At what time of day or night were they least excited? When did they have the greatest control over their actions? When did they have the least control over their actions? What might account for the peak in excitement at 11:00 A.M.? When do you think these adolescents were most likely to do something uncontrolled, deviant (not socially acceptable), or even dangerous?

Calculate the percentage of influence that each group has on you.



Mini-Activity

Who Says So? Answer the questions below. Then create a pie chart to show the relative influences in your life.

1. What aspects of your life are most influenced by your friends? (choice of clothes, choice of entertainment, choice of values, etc.)
2. What aspects are most influenced by your family?
3. Are there aspects of your life which you wish were *not* influenced by *anyone*?

Friends

As you get older and begin to depend less on your family, friends take on new importance. Friends give you some of the caring and support that your family gives you. As you enter adolescence and you want to be more independent, you may not want as much support from your family as they gave you when you were younger. But you need to feel you're not alone. In adolescence, you have to cope with many new situations, as well as many physical and emotional changes. Having a friend to share experiences with and to confide in makes these new situations less scary or threatening. Friends share the changes you are going through. This sharing may be one of the most important aspects of adolescent friendships. What are some common characteristics of friendship?

Identify three characteristics of a friendship with a boy. Identify three characteristics of a friendship with a girl. Are they the same or different? How and why are they the same or different? Draw some conclusions.

What Do You Think?

- In a study, 73% of a group of adolescents said they would tell everything about themselves to friends. Only 31% said they would tell that much to their parents. Who do you talk to about your family life, about your hopes and concerns for the future, or about other personal matters?
- You may have different friends for different purposes. You may have a best friend who meets most of your social and emotional needs outside the family. You also may have a larger circle of friends that help you develop your sense of identity (sense of who you are) by bringing out your varied interests and strengths.
- Good friends often share so many interests, values, and attitudes that they start to look alike—usually because they dress alike, have similar hairstyles, and participate in the same activities. Do you resemble your close friends in any way?
- Boys and girls, in general, tend to have different kinds of friendships. Boys are more likely to travel in packs, looking for activities. Girls are more likely to prefer being with fewer friends and, with them, to talk about the world, other people, and themselves.
- Throughout your life, friendships shift and change according to your interests and stage of development. For example, people who have not begun dating find that they have less in common with friends who are now dating. Or, friends who find themselves in different stages of puberty may separate for awhile, until they are back on common ground.
- Friendships may shift, but usually there are some feelings of tension, conflict, or sadness. Conflict is a normal and healthy part of any relationship. In fact, for a relationship to progress, it often has to go through stages of conflict and resolution to increase self and mutual understanding. During adolescence, you may find the nature of these conflicts changing to reflect the more difficult and complex situations of life, such as friends competing for a date or moral differences about high-risk behavior (drugs, alcohol, and sex).
- Prior to adolescence, most friends are of the same sex. During adolescence friendships with the opposite sex develop, particularly those that involve romantic attachment. It's harder to be “just friends” without wondering about some level of physical intimacy.

List three behaviors or values that both your peers and your family encourage. List three others that your peers encourage, but a parent discourages. Why is there a difference?

What Do You Think?

Who are your best friends? Is there a person you would like to be friends with but don't know how or where to start? Do you think friendships between you and members of the opposite sex are changing at this point in your life? Do you have friends of the opposite sex? Can you remain good friends or do you feel new tensions or questions coming between you?

Journal Writing

All of your encounters with friends and with your larger peer group affect how you see yourself, especially during adolescence when puberty changes not only you but also your relationships. Friends can be important sources of information. But as you develop your **sexual identity** (a sense of who you are sexually) and explore sexual behavior, it is important to learn more about the issues involved and to understand yourself so that you can make good decisions. The rest of this unit talks about healthy and unhealthy sexual behavior, and throughout you will be given opportunities to consider and develop your own opinions and to practice scripts, or what to say to friends in various situations. The need for friends and peer group approval has the power to shape us, but it shouldn't have the power to control us.

Review Questions

1. Why is your choice of companions important?

2. What is peer pressure?
3. Why is peer pressure more influential during adolescence than other times in your life?
4. What three factors help adolescents resist peer pressure?
5. Name five characteristics common to friendships.

CHAPTER

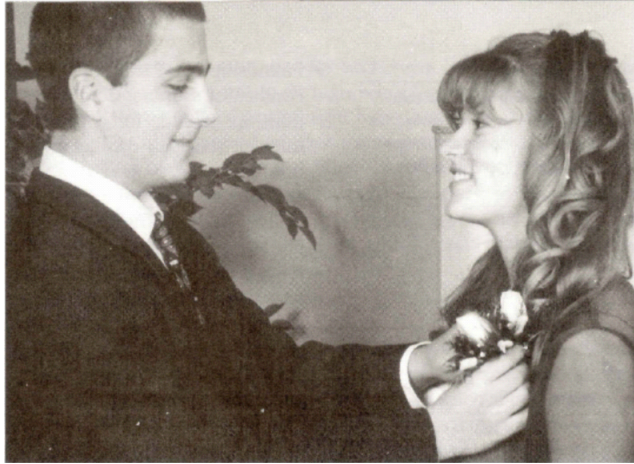
3

Dating and Romantic Feelings - Student Edition (Human Biology)

Chapter Outline

3.1 DATING AND ROMANTIC FEELINGS

3.1 Dating and Romantic Feelings



What is love all about?

During adolescence, the nature of friendship between boys and girls may change. It gets harder to pal around together. What is the difference between getting together with a friend and a date?

“I don’t date. My religion forbids it. My marriage will be arranged”

-Abdul, 17, Afghan

New Kids on the Block

Janet Bode

Dating

Dating gives us the chance to spend time with another person without making any serious commitment. Adolescent dating may take one of many different forms. Some couples go out just once or twice. Other couples may go steady, dating each other exclusively for a time. Most of the time, dates are short-term relationships, but sometimes they can be the first rung of a ladder that eventually leads to a committed relationship and even marriage.

This pattern of dating became common in the United States early in the 20th century among high-school-aged students. But it is unusual in much of the rest of the world. In some countries, young people are still not free to interact with members of the opposite sex without supervision and, often, marriages are still arranged or influenced by one’s parents.

“In a true Filipino family, the daughters can only go out when they are a ‘good age’ and then a brother goes-along.”

-Emiro, 19, Filipino

New Kids on the Block

Janet Bode

The age at which adolescents, as a group, begin to date is generally tied to the onset of puberty. However, the age at which a particular boy or girl starts dating has less to do with biology than with current custom and social factors, such as parental approval, peer expectations, and who they happen to meet.

There is a range of physical and emotional maturity among adolescents who date. Yet, it is the level of physical development that often plays a greater role in who dates whom and when among adolescents. For example, in middle school, girls are likely to date older boys who may be from other schools.

What do adolescents look for in the people they date? In various studies, both girls and boys say they look for a good personality, intelligence, considerateness, good manners, a sense of humor, and politeness, as well as physical attractiveness. While many are attracted to people who are good-looking, they may find that personality and a sense of humor are more important for wanting a second date with a person.

Who should do the asking for a date—the girl or the boy? Does it matter?

What Do You Think?

Dating also gives couples a chance to learn what characteristics they find unpleasant or irritating. Research shows that both boys and girls are turned off by profanity (bad language). Heavy drinking, drug use, and the inability to communicate feelings also turn off girls. The research also shows that boys dislike girls who are too possessive or who are boring.

Sometimes people date to raise their status among their peers. Of course, for both boys and girls there are other ways to gain status in the peer group as well. The status of boys with other boys is more often based on traits such as sports or academic ability.



Me Call? No Way! Calling about and going on a date can be a very nerve-racking experience. Think of some ways that make arranging and going on dates more fun and relaxing. Share your ideas with the class.

Dating is valuable for things other than defining characteristics you find desirable in a partner. Through dating, you increase your network of friends. As you go to the movies, listen to music, and get to know various people on dates, you learn about parts of the culture that may be new to you. You also learn how to get along with a variety of people.

Dating is generally a fun and pleasant experience. But it can also be stressful. It may involve competition and fears of rejection. As adolescents start dating, they may have doubts and fears about knowing how to act and what to do. Sometimes there is anxiety and self-consciousness about sexuality. Learning to cope with these stresses is important.

Activity 2-1: Scripts for Dating

Introduction

The thought of dating may either terrify you, excite you, or both. How do you ask for a date? How do you say yes or no? What would an ideal date be like? How do you deal with a bad date? In this activity you have a chance to role-play dating situations and practice what to say and how to say it.

Materials

- One Activity Report per group
- Props-brought in by the group (Optional)

Procedure

Step 1 Your teacher will divide you into groups and give each group an Activity Report.

Step 2 As a group, discuss the questions. Have one member act as a recorder to write down what you say, or rotate the job for each question.

Step 3 After you have answered the questions, write two short scripts, one for a good date and one for a bad date.

Step 4 Decide which two members of your group will act out the good date and which two members will act out the bad date. Practice your scene, remembering that it's okay to be funny but not to be silly. The laughter should come from the audience, not the performers!

Step 5 Present your scene to the other members of your group. Give each other constructive criticism. That means to point out things that are done well and to suggest things that might be done differently. Discuss whether or not any props might be useful. With your partner, make your scene even better. Decide who will bring in any materials for your presentation to the class the next day.

Step 6 On the second day your teacher will give you a few minutes to rehearse. Then take turns presenting your scenes to the class.

Step 7 After you have seen all the scenes, discuss the qualities of a good date and the things to avoid.

People often refer to a chemistry between people. Do you think chemistry in relationships is a function of biology, psychology, or culture? Why?

What Do You Think?

Sexual Feelings

As adolescents get older, their interest and curiosity about each other's bodies increases. They also may become more openly sexual. There is a desire to touch and be touched. This desire may, in turn, lead to activities such as kissing and caressing. Whether or not a teenager acts on these impulses depends on many factors. For some, interest in such activity remains at the level of fantasy and daydreaming rather than action. Others are willing to experiment and act out their interests. Most young adolescents fall somewhere in between.

How do we explain the development of sexual interest and activity during adolescence? As we will discuss in the next section, these may be part of the changes of puberty brought about by hormones.

Hormones may exert their effect directly on behavior or indirectly through the changes in the body brought about by puberty. For example, growth of **secondary sexual characteristics** is clearly an important part of becoming sexually attractive. In this respect, breast development among girls plays a special role since it takes place early and is obvious to other people. Facial hair and the changing of the voice play a similar role among boys.

"Being sexually attractive for sex is a different kind of feeling that I believe is wrong and dangerous."

-7th grader

However, the development of sexual feelings or behavior during adolescence cannot be explained only by hormones (chemical substances the body produces that bring on the changes of puberty) or other biological factors. **Psychological** (having to do with thoughts and feelings) or **cultural** (shared attitudes and values of a social group) **factors** are also very important in determining when, why, and how we behave sexually.

What does it mean to be sexually attracted to another person? We are all aware of how we look and often judge others in terms of how they look. People in most cultures seem to value looks, but what they consider attractive or unattractive varies a lot. The same is true for the various ways used to make a person more attractive. As members of the same society, we share many common standards of beauty but also have our own personal preferences as to what looks good.

"I do not believe I am attractive. As a child, I was told I was not and therefore the concept was never a reality for me."

-7th grader

Physical attractiveness has a lot to do with sexual attractiveness, but they are not the same. How an individual behaves and what sort of person they are also has a lot to do with whether or not they are attractive.

Many people go to great lengths to enhance sexual attractiveness by the way they dress and groom themselves.

Others exercise, keep healthy, and behave in ways that will make them appealing. Others go to even greater lengths and become preoccupied with their looks and clothes even to the point of hurting their health through dieting.

Standards of sexual attractiveness, or sexiness, vary a great deal among different cultures and in the same culture during different historical periods. Compare the way movie stars looked during your grandparents', your parents', and your own generations. Although there are many differences, there also are some common characteristics of physical attractiveness. For example, symmetrical features (both halves being similar) of the face and average dimensions of the body (not too large or small) are generally appealing.

Activity 2-2: Judging People by Their Looks

Introduction

Sometimes you will find yourself attracted to someone just because of the way he or she looks. Is this the best characteristic to use when choosing a relationship? In this activity you focus on this issue and try to decide what role looks do have and should have in choosing friends and dates.

Materials

- One copy of Activity Report per group
- Construction paper or poster paper
- Markers or crayons

Procedure

Step 1 Read Section 2 in your text.

Step 2 Your teacher will divide you into groups.

Step 3 Within each group, discuss the questions on the Activity Report and choose someone to record what you say.

Step 4 When you have finished the discussion, create two posters. Title one "What to Look for in a Friend." On it list the characteristics that most members of the group agree that they look for in a friend. Call the second "Making the Most of Who You Are," or "The Do's and Don'ts of Being Attractive." On it, write tips for presenting yourself in the best way possible. For example, positive comments might include-exercise, stay healthy, smile when you can. "Don'ts" might include don't be negative all the time, don't let yourself become exhausted.

Step 5 Compare your posters with other groups. Are there some things that the entire class agrees on?



Mini-Activity

What Is the Difference? Love comes in all kinds of forms and is called all kinds of names. Can you explain what the following terms mean? A good dictionary can help you.

- puppy love
- infatuation
- crush
- love

Romantic love

What is love? You may find it hard to explain love, but you know how it feels to love someone and to be loved in return. Take a moment and think about the people that you love-the special people in your life.

Love is a basic human emotion. Children come to love family members or their friends long before they reach puberty. Such affectionate bonds persist through life. But during adolescence another form of love may develop. We call this romantic love (or falling in love).

Have you ever been in love? A lot of people your age might not have had that experience yet, but you may have been in love or known someone else who has been. You have probably watched people in love on television or in the movies or read about them in books and magazines. A lot of our literature, art, and music focus on romantic love.

Some of the most famous lovers in history, such as Romeo and Juliet, were adolescents. However, during the 15th century (when this Shakespeare play is set), by the time people reached age 15 or so they were considered adults. Though biologically they were basically similar to today's 15-year-olds, the sexual role of 15-year-olds in today's society is not the same.

The majority of teenagers sooner or later have a romantic involvement with a member of the opposite sex. By age 13 or 14 over 80% say they have a boyfriend or girlfriend. But less than 20% consider it to be a serious relationship. And less than 5% say such relationships are important during their teens.

Activity 2-3: What Happens When You Are in Love?

Introduction

What are the differences between liking, loving, and being in love? How do you know the difference? How does your behavior change with each form of affection? In this activity you discuss these issues, then prepare skits which show the differences between these types of feelings.

Materials

- One copy of Activity Report per group
- Props for skits (Optional)

Procedure

Step 1 Your teacher will divide you into groups and give you an Activity Report.

Step 2 As a group, discuss the questions on the Activity Report. Choose someone to act as a recorder and write down what you say, or rotate the job for each set of questions.

Step 3 After you have answered all the questions, go back and think about how the different levels of affection are expressed. Divide your group into three pairs. Each pair will prepare and present a quick, two-minute example of what it is like to either *like* someone, *love* someone, or *be in love* with someone. (Don't get TOO carried away on that last one!)

Step 4 Decide which pair will take which feeling, Prepare separate skits and practice, remembering that it's okay to be funny but not to be silly! As was mentioned in an earlier activity, the laughter should come from the audience, not the performers!

Step 5 Share your skit with the other members of your group. Give each other *constructive criticism*. That means to point out things that are done well and to suggest things that might be done differently. Discuss whether or not any props might be useful. With your partner, make your scene even better. Decide who will bring in any materials for your presentation to the class the next day.

Step 6 On the second day, your teacher will give you a few minutes to rehearse. Then you will all take turns presenting your scenes to the class.

Step 7 After you have seen all of the skits, discuss the good points of each type of feeling. Are there any bad things about these feelings?

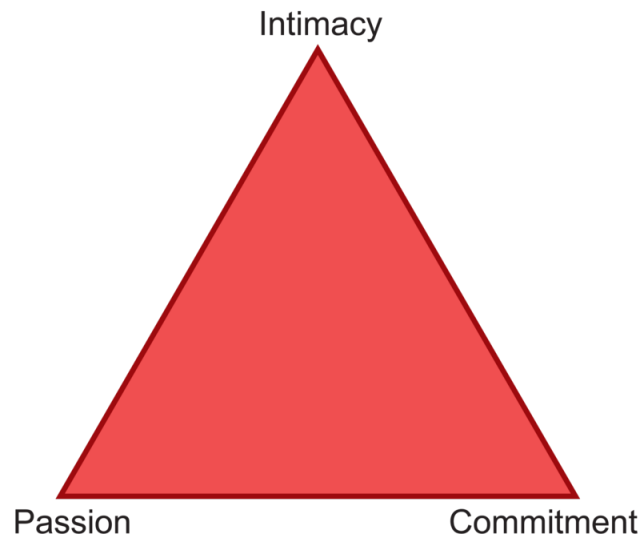


Figure 2.1 Love is not a single emotion, but one with several parts. The ideal form of love, consummate love, is a combination of these three elements.

Different Forms of love

To understand the many variations of love, some psychologists describe love not as a single emotion but as a variety of types of love. They are made of several parts.

- One part of love is **intimacy**. It involves being close to a person and sharing private thoughts and feelings.
- Another part of love is **passion**. Passion can be described as being sexually attracted to someone.
- The third part of love is **commitment**, which is a bit different because it is not an emotion as much as a thought process. It involves a decision to love someone and to make a firm promise to remain loyal to that person. Depending on which of these three components is strongest or how they are combined, we get different types of love.



Mini-Activity

Love Designs You are a successful card designer and have been commissioned to design a line of 5 cards about love. Use art, music lyrics, and/or poems of your own creation for your cards.

Romantic love is what most people think of as *being in love*. It is the combination of intimacy and passion. There are some couples who feel they have been in love with each other since they met. You may know couples who have been happily married for 50 years (maybe your grandparents are such a couple). However, while it is possible to love someone deeply over many years, the special experience of being in love is usually time-limited-it has a beginning and an end. In other words, it usually does not last forever. You may be disappointed to hear this. Or if you happen to be in love right now, you may be convinced that you will always be in love. But the experiences of countless other people make that unlikely. Adolescent love experiences, in particular, tend to be shorter lived. Why does the experience of being in love usually come to an end? One reason is that the feeling of love is so intense that it is difficult to sustain over time. When you are in love, you will have a very strong attachment to the other person. You want to be constantly with that person or think about him or her all the time. This makes it hard to pay attention to other important matters in life (such as school or work). Everything else seems to get pushed out of one's mind as if

nothing else mattered.



Love Is in the Air For two or three days, write down the names of songs you hear that deal with some aspect of love. Indicate whether they deal with intimacy, passion, and/or commitment.

Another reason the experience of being in love usually comes to an end is that you tend to think of the person you love in a highly idealized manner. You may think of him or her as perfect, not as he or she is in reality. As far as you are concerned, there are only good things about the person. Yet no one is perfect. What this means is that the person you love is someone you have largely created in your imagination, but who does not fully exist in reality. And reality, sooner or later, catches up with you.

The feeling of being in love changes or may come to an end in a number of ways. Sometimes there is a *lover's quarrel* and the couple breaks up. There are often a lot of bad feelings associated with such breakups.

Among other couples, people move away (such as after graduation from high school), meet new friends, or develop other interests. So gradually, they drift apart from one another. Sometimes their romantic relationship is transformed into a friendship that often is longer lasting.

What reasons might keep you in a relationship in which you otherwise might not be involved?

What Do You Think?

For many people, the best outcome of a love relationship is that the couple gets married and they live happily ever after. Some of these couples may remain in love for many years. Or, their feelings become transformed into a stable form of love, which is high in intimacy and commitment, but lower in passion. This is known as **companionate love**.

The most fortunate people (or those who work hardest at maintaining their love) develop the best, or ideal, form of love that combines all three elements-intimacy, passion, and commitment. This is called **consummate love**. It is the most satisfying and fulfilling form of love. It is hard to attain and takes work to maintain, but it is well worth the effort. Consummate love includes the passionate aspect of being in love, but since it also has intimacy and commitment, it is far more lasting.

"Why couldn't we just let each other go? It was a first love, and it was cooling. There'd be others for both of us. I can say that now, I couldn't then. I'd have bitten off my tongue first."

-Gail in *Are You in the House Alone?*

Richard Peck

Often, adolescent loves do not last into adulthood. Yet they are important for learning how to be intimate with another person and to share one's inner thoughts and feelings. Young love may be among the most cherished experiences in life.

Why is the divorce rate so high in this country? Take into account the three different kinds of love in your thinking.

What Do You Think?

Relating to a loved one makes one more concerned with others and more sensitive to the needs and feelings of others. The experience of loving someone helps define the sense of identity (who you are) of young people. The intimacy and closeness they feel make it possible to reveal their true selves and to be exposed to the inner selves of others. Loving someone is one of the best ways of becoming more caring and giving, which are the signs of maturity. Love

and intimacy do not require sex, and one need not engage in sex to prove that he or she loves another.



Mini-Activity

Debate! Humans should choose one mate for life. Debate this issue.

Love and Sex

What is the relationship of love and sex? We obviously love many people to whom we are not sexually attracted. But what about romantic love?

In many cases, romantic love has a strong sexual aspect to it. Those who are in love often want to express their love physically. However, some might be in love but not feel a sexual attraction. Some people may feel that physical expression or exploration of their love will *ruin* the experience. Similarly, many people may be sexually attracted to others and not feel in love.

The association of love and sex is important at many levels. The ideal for many people in our culture is that sex, love, and marriage should go together. Others are willing to settle for love and sex alone, especially when they are young. Actually, for many young people, love has now become the necessary condition for engaging in sex. Think about whether or not this is a good strategy.

Do you think males and females think about love and sex in different ways? Explain how and why.

What Do You Think?

Finally, there are those who think that sex is OK without love, as long as you have a willing partner. Love would be nice but it is not necessary. This type of sex without love, or outside of a committed relationship, is often referred to as *casual sex*.



Mini-Activity


Combining Sex and Love As a class, make a chart on a sheet of paper that shows the positive and negative aspects of the three different ways of combining sex and love. Your chart should look like the one in Figure 2.2. If there are strong disagreements, conduct a structured debate to discuss the issues.

TABLE 3.1:

	Positive	Negative
Sex & love & marriage	?	?
Sex & love	?	?
Sex alone	?	?

Figure 2.2 Create a chart like this on a sheet of paper for *Mini Activity: Combining Sex and Love*.

What do you think about dating? Let's say you were in charge of dating at your school, and you could create any system you wanted, what would you do? What would the purpose of dating be? What aspects of dating that currently exist would you promote? Eliminate?

 *Journal Writing*

Review Questions

1. What factors influence an adolescent's readiness to date?
2. What are three positive aspects of dating and three negative aspects of dating?
3. How can you explain the development of sexual interest during adolescence?
4. What are the three components of love?
5. What is the difference between romantic love and consummate love?
6. What are three relationships of love and sex?

CHAPTER

4

Sexual Function and Behavior - Student Edition (Human Biology)

Chapter Outline

4.1 SEXUAL FUNCTION AND BEHAVIOR

4.1 Sexual Function and Behavior



How does the body respond to sexual arousal and what are some normal sexual behaviors among humans?

Why are people interested in sex? Unlike food, sex is not essential to keep us alive as individuals (it is necessary to keep us alive as a species). So why do some people act as if they are sexually hungry?

“Sexuality is a taboo subject.”

-7th grader

In the past, scientists described sexual hunger as a sexual instinct. It was thought that this was a natural urge that somehow pushed people into sexual activity. But no one could tell where this instinct came from or how it worked. Currently, the term **sexual drive** is used to mean something similar, but less mysterious. A drive motivates or directs an individual toward a specific goal-it increases the chances that a person will behave a certain way. Thus, the sexual drive pushes or pulls us to become sexually interested and seek sexual fulfillment.

The ability to become sexually aroused is already present in childhood. But the intensity, or the strength, of the sexual drive increases at puberty, which is why we talk about the awakening of sexual interest during adolescence. Moreover, sex can now result in pregnancy because of the maturation of the reproductive system.

Why does the sexual drive increase in puberty? Some scientists believe that an increase in the level of sex hormones, especially testosterone, in both boys and girls, causes stronger sexual urges.

Much of what we know about the effects of hormones on sexual behavior is based on studies with animals. If you have observed animals on a farm or pets at home, you already may know that sexual activity happens only at certain times with those animals-when the female animal is *in heat*. During this time, the male animal is attracted to the female and she will respond to him. This period of sexual attractiveness and responsiveness in the female animal is called **estrus**. It coincides with ovulation, or the release of an egg from the ovary (gland producing female eggs and hormones), and is caused by the increased levels of female sex hormones. This is not just coincidence. The basic purpose of sex among animals is to produce young, which is called reproduction. Timing the increase in sexual drive with ovulation increases the chances of pregnancy.

Some organisms reproduce sexually and others asexually. Sexual reproduction involves the fertilization of female eggs by male sperm. This fertilization can occur internally (as with humans) or externally (as with fishes). Sexual reproduction allows for genetic diversity-combining the characteristics of the male and female into a new individual. Asexual reproduction requires only one of the species-it makes many identical copies of itself (as with bacteria).

Although this form of reproduction is simpler and faster, it does not allow for any genetic differences or ways to adapt to changing environments.

Did You Know?

Some of you may have pets whose gonads-ovaries or testes-have been removed by a veterinarian to prevent reproduction (referred to as being fixed, neutered, or spayed). Removing the gonads of an animal not only makes pregnancy impossible, but it also *turns off* the sexual drive by removing the sources of sex hormones.

What do we know about humans? Is our sexual drive and behavior similarly controlled by hormones? Hormones influence our sexual drive, but human sexual behavior is much more complex. For one thing, human sexual behavior is not a function of the female being in estrus. Though she goes through the ovarian cycle, the human female is not limited to a period of increased sexual interest during ovulation. Sexually mature girls and women may be sexually aroused at any time of the month. The sexual interest of the human male is not in response to any particular phase of the female cycle but also may occur at any time.



Mini-Activity

Causation Think of 3 events in your life, or historically, that show direct causation (cause and effect). Then think of 3 events that show correlation, but not causation.

You will note in Figure 3.1 that the sharp increase in the level of testosterone during puberty is accompanied by the onset of sexual activities, as well as of falling in love and dating. Based on this evidence, it would be correct to say that in boys, rising testosterone levels are correlated with the onset of sexual and romantic interest. Correlation means that two events tend to occur together. This is not the same as causation, or saying that one event is the cause of another event. Furthermore, the relationship between the events shown in Figure 3.1 and hormones may vary. For example, the onset of nocturnal emissions (discussed later in this unit) is a direct result of puberty, which in turn is brought about by hormones. Masturbation may occur before puberty, but it is more common during and following puberty. Therefore masturbation may be linked to hormones.

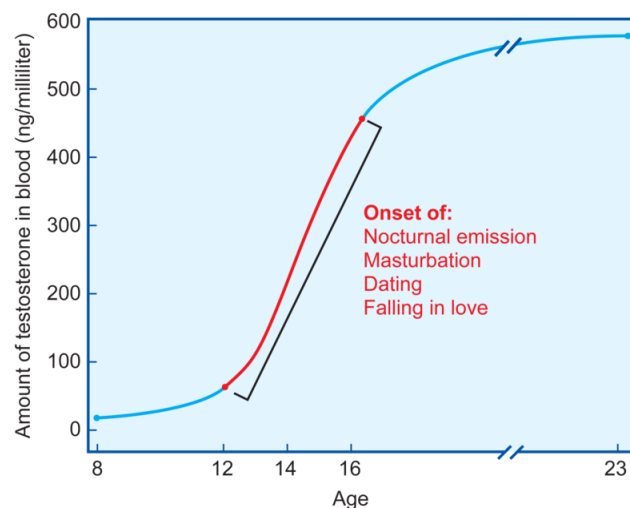


Figure 3.1 Testosterone levels and sexual and romantic experiences at puberty in boys.

Human sexual behavior is greatly influenced by our intimate relationships and our feelings for one another. How we behave sexually is determined not only by hormones but also by how we feel and think about sex. Our upbringing and our community largely shape our feelings and thoughts about sex. Therefore, a boy or girl may start dating at a

particularly young age because others are doing it, no matter what their level of biological development or level of hormones. Moreover, human beings are concerned not only about how they want to behave, but also about how they should behave sexually, which may mean sometimes not doing what they want to do. We will discuss these moral considerations concerning sex later in this unit.

“Sometimes it’s scary to have strong feelings and not know what to do with them.”

-7th grader

Some parents freely discuss sexual topics with their children. Others do not. Parents may sometimes see their child touching his or her genitals and say, “That’s not nice” or “Don’t do that,” without explaining why. Or if a child asks, “How did Mommy get pregnant,” he or she may be told, “Mommy and Daddy were in love.” The child is left no wiser about reproduction. In other cases, a child is given a wrong reason such as, “If you don’t stop playing with your penis, you will get germs.” Such attitudes leave children confused or may make them feel like there must be something *wrong* about sex.

Even when parents are willing to talk about sex, children may clam up and wait restlessly to get out of the room. So both parents and children may feel awkward talking about sex. Why is this so?

Activity 3-1: Help! I’m Falling In Love

Introduction

When hormones take over, reasoning seems to go out the window. *Before* you find yourself head over heels in love is the time to think about what qualities you want in a mate and how you should be treated. In this activity you create an *Emergency Card* to carry in your pocket. Then next time you find yourself falling in love, pull out the card and check to make sure that your emotions aren’t making you forget what is important to you.

Materials

- One copy of Activity Report per student
- Colored pencils or thin markers
- Heavy white paper or construction paper
- Scissors

Procedure

Step 1 Your teacher will give you an Activity Report.

Step 2 Before you write, spend some time thinking about what you would like your life to be like in the future and how you would like to be treated by a partner. If you are already involved with someone, try very hard to make sure you write down what you really want, not just what you see already exists in the other person.

Step 3 As you think, jot down your ideas on the Activity Report under the section headed *What I Want in a Mate*. Some examples might include-I should be treated with respect-I should not be subjected to put-downs-My partner should listen to my point of view-I would like occasional surprises. If you agree with any of these examples, you may use them, but come up with as many more as you can. Try to list at least 15. You may talk about ideas with a friend, but make sure what ever you write down is something that YOU truly believe.

Step 4 When you are satisfied with your list, think about what you consider to be the warning signs that someone is falling in love. On your Activity Report, under the heading *Warning Signs of Falling in Love*, write down your ideas. For example-staring into space-always thinking about the other person-wanting to always be with a particular someone. Try to come up with 15 examples or as many as you can. Think about the behavior you’ve observed in others.

Step 5 Next, look at the section of your Activity Report titled *Caution!* In this section you are to write down those

things that you think might be confused with love, or might persuade you to overlook some of your requirements in a mate when you really shouldn't. Examples might include-money-gorgeous eyes-a super car-lust (strong sexual attraction only).

Step 6 When you have finished your lists, show the Activity Report to your teacher. You will be given supplies for creating a pocket *Emergency Card*.

Step 7 Review what you have written. Add to your list, combine things that are alike, cross out things you've changed your mind about, and edit your lists until you have about 10 items you feel strongly about in each of the first two sections, and 5 items in the *Caution* section.

Step 8 Decide what size you would like your card to be and if you would like it to be a single sheet like a credit card or folded like a greeting card. Cut it out.

Step 9 Decide what the layout will be. You might want to put the list *What I Want in a Mate* on one side, and *Warning Signs of Falling in Love* on the other, but remember to save some space for the *Caution!* section. When you're done carefully putting your lists on the card, you may go back and draw boxes or borders or decorations on the card.

Step 10 Carry your card with you, and remember to check it when you find yourself falling in love!

Why is sex so awkward to talk about?

What Do You Think?

Sexual Stimulation

Sexual experience has two basic parts-sexual stimulation and sexual response. Each part has both a physical (body) and psychological (mental) component. Both typically act together.

What are some of the most common erotic cues in our culture? Do we react to such cues naturally or do we learn to do so?

What Do You Think?

Physical stimulation occurs through the senses. People may see, hear, touch, or smell something that arouses them sexually. Such sources of stimulation act as **erotic cues**, or sexual triggers, that "turn us on." Visual cues may include seeing bodies, photographs, movies, or the like. Auditory cues involve sounds, such as speech or music. Olfactory cues might be the smell of scents like perfume. Tactile stimulation consists of touching or being touched in the sensitive parts of the body.

Should advertisers exploit the attention getting power of erotic cues to sell their products? Give some examples of how advertisers exploit erotic cues to sell products.

What Do You Think?

Psychological stimulation takes two forms. It may be purely mental, such as thinking about sexual topics or making up erotic fantasies that lead to sexual arousal. But in addition, psychological factors strongly influence which physical cues from the outside world will be perceived as sexually arousing. This is why a specific sight or sound may be perceived as erotic by one person, but not by another.

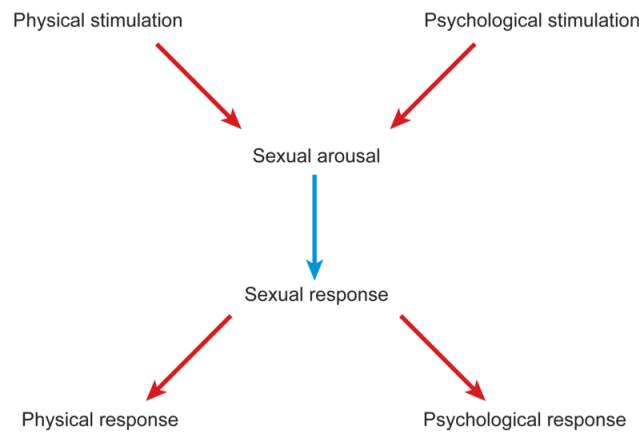


Figure 3.2 Sexual stimulation and response both have physical and psychological components.

Sexual Response

Sexual response is the reaction to sexual stimulation. Like sexual stimulation, response can be physical and/or psychological.

The physical signs of sexual response depend on two types of changes in the body. The first sign of sexual response is increased blood flow into the genital organs. The most obvious sign of increased blood flow in the male is an **erection** of the penis. The increased blood makes it larger and harder. Think of a garden hose. When the faucet is opened, water flows into the hose and the hose gets stiff. The same mechanism works for the penis. Erection is a function of more blood going into the penis than going out of it. The stiffness of the erect penis has nothing to do with muscles or bones.

The female genital organs go through exactly the same changes. However, because of differences in their anatomy, there is no obvious sign in the female such as a male's erection. Instead, the female genital organs become slightly swollen, and the inside of the vagina becomes wet. This is called **vaginal lubrication**. As with erection in men, it is the first sign that a woman is sexually aroused.

The second sign of sexual response is increased muscular tension. This is not like when you consciously move your muscles to lift an object. These are very small muscles in your genital area that tense without you thinking about it. When the tension gets high, these muscles contract rhythmically, resulting in **orgasm**. In males, this sensation is accompanied by **ejaculation** during which **semen**, made up of sperm and fluid, is forced out of the penis. The biological purpose of ejaculation is to release semen into the vagina. But most of the time, people reach orgasm not to reproduce but to experience sexual pleasure. Women have orgasms like men do, but they do not ejaculate the same way and they do not need to reach orgasm in order to get pregnant.

If sexual arousal is a natural reaction, why does it cause some people to feel embarrassment or guilt?

What Do You Think?

Sexual excitement and orgasm are accompanied by other changes in other parts of the body as well. Blood pressure, the pulse, and the rate of breathing all increase. After orgasm, the body returns to its normal state.

The psychological reactions of sexual excitement and orgasm are harder to describe. During arousal, sexual tension builds up and is released during orgasm. This experience is intensely pleasurable, which is why sex is considered to be one of the strongest desires. It is in response to this drive that people behave sexually. However, how they behave sexually and whether or not they engage in sex depend on many other psychological and social considerations.

The main biological purpose of sex is reproduction through sexual intercourse. But there are also important psychological, emotional, and moral considerations in sexual behavior. Although sexual intercourse is the only way couples can naturally have children, the wish to become parents is only one of the reasons why men and women have sex. And as important as sexual intercourse may be for many people, it is only one form of sexual behavior

and not everyone engages in it. In this section, you will learn about some of the different forms that sexual behavior takes.

In the traditional Western cultural and moral ideal, sexual intercourse between adult males and females, who are not too closely related and are married to each other, is considered the norm or the only healthy, moral, and legal sexual behavior. But this view may be inconsistent with what many people actually do.

Considerations of health, morality, and legality in sexual behaviors are important and will be discussed later in this unit. At this point, we need to have a clear understanding of what people actually do in their sexual lives, rather than what they should or should not do. And more specifically, we need to consider how young people behave sexually.

Sexual behaviors can be divided into two main groups—behaviors one engages in by oneself and behaviors one engages in with another person.

Solitary behaviors

The most common **solitary** sexual activity is **sexual fantasy**. Fantasies can be quick sexual thoughts that cross your mind or long, drawn-out erotic daydreams.

Even fairy tales talk about love, only their focus is more romantic than sexual. What romantic fantasy is typical in fairy tales like Sleeping Beauty or Cinderella? How do these compare with modern love stories? How do they compare with reality? Write a modern-day, romantic fairy tale.

Journal Writing

Most everyone has sexual fantasies at one time or another. But some people fantasize more than others do and in different ways. Fantasies can involve thoughts about any sort of sexual activity. Since you make up your own fantasies, they usually express your sexual needs and interests. Sometimes these needs or interests may be forbidden wishes, or interests you did not know you had. Therefore, although fantasies are usually fun, they can also be scary or make you feel guilty. Remember that fantasies are just thoughts. Most of them will not come true. This is because either you cannot make them come true or you do not want them to actually happen.

Sexual fantasies serve important functions. They give some expression to sexual wishes that cannot be satisfied. Since you are in charge of your fantasies, you can remain in control.

Fantasies also help as rehearsals for what you hope may happen. For instance, when thinking about a date, or a honeymoon, the person can practice in his or her imagination to prepare for the event.

Sexual fantasies can become a problem if they absorb too much of a person's time and attention. By withdrawing into fantasy, you are less likely to interact with others and make friends. Fantasies are healthy as long as they do not interfere with social development or healthy interaction.

Fantasies that are fearful or make you feel guilty may need to be talked over with a counselor or a trusted adult. This is especially true if you think a fantasy may lead you to behave in a way that is harmful to yourself or others.

“I woke up suddenly. It was morning. I felt wet and my pajamas were sticky. Oh, God! There was something wrong with me . . . Wait a minute. Wait just a minute. Maybe I had a wet dream. Yeah. . . . I’ll bet that’s it. How about that?”

-Then Again, Maybe I Won’t

Judy Blume

Sexual dreams are a form of fantasy that occurs during sleep. Like other dreams, they tend to be difficult to understand. Sometimes the person is sexually aroused even if the action in the dream does not seem sexual. The sexual excitement during dreams sometimes leads to orgasm. These are called **nocturnal orgasm** (nocturnal means nighttime). Both boys and girls experience nocturnal orgasms. They are more likely to be remembered by boys because ejaculation wets the bedding or underwear (hence wet dreams). Girls also may have orgasms in their sleep,

but they do not ejaculate. These are perfectly normal ways of the body releasing its sexual tension.

In 1994, the U.S. surgeon general was fired from her job after talking in public about masturbation as an alternative to sexual intercourse. The public acknowledgment or acceptance of masturbation as a normal human behavior has always been, and remains today, a controversial issue.

Did You Know?

Sexual fantasies can also occur through self-stimulation of the genitals, called **masturbation**. Many people masturbate, sometimes because they have no sexual partner, but also as another way of reaching orgasm. Masturbation is like fantasy in many ways. It is usually a solitary activity. Along with sexual fantasies, masturbation makes it possible for a person to get sexual satisfaction without having to rely on someone else and without engaging in risky behavior. Although many people masturbate, no one has to do it. It is a matter of choice.

In the past, masturbation was thought to be physically harmful. Doctors claimed that the practice weakened the body, especially when one is growing up. All sorts of fanciful dangers were attributed to it; the brain would go soft, the person would become crazy, the heart would fail, the breath would smell bad, and so on. None of this is true. Masturbation causes no physical ill effects.

Do you think masturbation should be promoted to adolescents as an alternative to sexual intercourse? Why or why not?

What Do You Think?

Masturbation is the safest way of experiencing orgasm. It does not cause pregnancy or sexually transmitted diseases. In this period of the AIDS epidemic, it is one of the safest forms of sex. Nonetheless, some people continue to object to masturbation on psychological or moral grounds.

For most people, masturbation alone cannot satisfy all of their sexual needs. It does not have the rich emotional satisfactions of having sexual intercourse with someone who is loved. A person cannot impregnate or become pregnant by masturbating. But even for many married people, masturbation may be an occasional source of sexual satisfaction.

Sociosexual Behaviors

The most important human activities involve other people. Sex is no exception. Sociosexual behaviors are those sexual acts done with other people. The most common form of sociosexual sex is sexual intercourse. It is also called having sex or sleeping together. There are also many slang terms used to describe the act of sexual intercourse.

Sexual intercourse is the one activity approved of by all societies. Yet it is also always subject to rules and restrictions about whom one can and cannot have sex with. These rules can be based on how old someone is or the partner is; how closely the partners are related; whether they are married to each other or not; and so on.

In physical terms, sexual intercourse involves the penis moving in and out of the vagina. However, sexual intercourse is not just a physical act. For many couples, it is a means of expressing intimacy and love as well as experiencing sexual pleasure. But sexual intercourse can be used in a harmful or negative way by deceiving or coercing others into it against their will. Also, unprotected intercourse carries serious risk of unwanted pregnancy and sexually transmitted diseases.

Sexual intercourse is usually initiated by activities like kissing, caressing, and similar forms of sexual stimulation, which are called foreplay. However, couples also engage in such behavior without going on to have sexual intercourse. In these cases, these behaviors are called petting, necking, sex play, and similar terms.


Same sex crushes during adolescence are very common and normal. Boys may feel curious about boys, and girls may be curious about girls. They may even touch each other's bodies or dream about one another. These usually do not imply homosexuality-typically, these feelings only reflect an emerging sense of sexuality.

Did You Know?

Those who are romantically or sexually attracted to members of the opposite sex have a **heterosexual orientation**. Those who are similarly attracted to members of the same sex have a **homosexual orientation**. The majority of men and women are heterosexual, but we do not have an accurate count of what proportion of the population is homosexual. The most reliable figures show that 2-3% of men and 1% of women are exclusively homosexual, although twice as many have actually engaged in homosexual acts or felt sexually attracted to someone of the same sex sometime during their lifetime.

Some scientists explain the development of sexual orientation by genetic and hormonal causes. Others point to psychological or social factors having to do with how one is brought up. Probably both types of factors play a role.

You have just found out that someone you know and respect is a homosexual. You have always seen this person as being very heterosexual. You are very surprised and need to sort through your feelings before you see this person again. Write a diary entry to yourself or a letter to your friend exploring your thoughts and attitudes.

 Journal Writing

In our culture, homosexual behavior has long been considered abnormal and condemned on moral and legal grounds. Currently, homosexuality is no longer considered to be a psychological abnormality by most psychiatrists or psychologists, and it is no longer against the law in the United States. However, there are still people who find it objectionable for moral or other reasons. Also, the law still does not permit homosexual marriages. Social attitudes in this respect have changed greatly during the recent past and continue to do so.

There are some sexual behaviors that are socially unacceptable. These include forcing someone to have sex or having sex with persons who are not adults. These topics will be discussed later in this unit in connection with other sexual problems.

Review Questions

1. Is the sexual drive correlated with or caused by hormones? Explain.
2. How does human sexual behavior differ from animal sexual behavior?
3. Draw a diagram showing the relationship of sexual arousal, sexual response, and the physical and psychological components. Explain what sexual response to arousal includes.
4. What are some examples of erotic cues?
5. Describe three solitary sexual behaviors and the role they play in a person's life.
6. How is sexual orientation determined?

CHAPTER **5** Adolescent Sexual Behavior - Student Edition (Human Biology)

Chapter Outline

5.1 ADOLESCENT SEXUAL BEHAVIOR

5.1 Adolescent Sexual Behavior



What guides your sexual behavior?

Adolescent sexuality forms a bridge between sexuality in childhood and adulthood. Children may engage in sex play (such as looking at each other's bodies or touching each other). Sexual interactions among adolescents retain a playful quality for a while (horsing around, teasing, showing off) but gradually develop into more adult-like behavior.

"I think what is happening to me is so wonderful, and not only what can be seen on my body, but all that is taking place inside. I never discuss myself or any of these things with anybody; that is why I have to talk to myself about them."

-Diary of a Young Girl

Anne Frank

The development of adolescent sexuality is no different than the development of other functions and behaviors. Normally, all boys and girls develop the physical capacity to engage in sex. However, whether they do engage in sex or not, or whether they should engage in sex or not, depends on many psychological, social, and moral considerations. Young people who become involved in sexual activities are more likely to engage in solitary behaviors like sexual fantasy and masturbation than behaviors that involve partners. Engaging in or abstaining from each type of sexual activity involves making important choices, but the most important choice is whether or not to cross the line into sexual intercourse because of the greater risks and consequences it entails.

"A longing filled him. Would a girl ever love him? The one devastating sorrow he carried within him was the fear that he would die before holding a girl's breast in his hand."

-The Chocolate War

Robert Cromier

Adolescent heterosexual activities range from holding hands to sexual intercourse. The less intimate the behavior, the more likely it is that girls and boys have tried it. For instance, many boys and girls have held hands. The percentages for necking (prolonged hugging and kissing) are lower, and the figure for sexual intercourse is lower still. By the 12th grade, the majority, but not all, boys and girls have held hands or kissed, while 76% of boys and 67% of girls report that they have become sexually active. Statistics in this area can be misleading because different ratios apply to boys and girls, as well as to different religious, social, economic, and ethnic groups.

How sure do you want to be when you try some sexual behavior new to you? What can you learn or think about in advance so you can trust your split-second, decision making ability when the situation arises?

What Do You Think?

There can be very large differences in the percent of adolescents having sex in different geographic areas. In one high school, the percentage of those who engage in sex may be 10%. In another, it might be 90%. Moreover, remember that you as a person are not a statistic. Even in a school where 90% of students have sex, you may not be one of them.

While most young people are heterosexual, some adolescents become romantically or sexually attracted to members of the same sex. But most of them don't actually engage in homosexual behaviors, and many of them who do have such experiences in adolescence do not develop a homosexual orientation as adults. Like so many other experiences during adolescence, such activities may be motivated by curiosity or experimentation.



Mini-Activity

Questions-Questions You are trying to help a friend figure out his or her feelings about whether or not a relationship should become more sexual. You decide that asking your friend and his or her partner some questions about the relationship might result in some insights. What questions might you ask?

On the other hand, most adult homosexuals trace back their awareness of their sexual orientation to the time of their adolescence. This usually takes the form of being romantically attracted to someone of the same sex rather than actually engaging in some sexual activity with that person.

Why Do Adolescents Engage in Sex?

People may think that adolescents engage in sex simply because it's fun. However, sexual pleasure is not the only or the most important reason. Like adults, sexually active adolescents engage in sex for a variety of reasons. The most important reason young people become sexually active is because of affection for a partner. This is the most important reason for females. The next most common reason is opportunity or readiness. The opportunity to experience sexual intercourse with someone he likes is the most important reason for males. One out of five women have intercourse for the first time on their wedding night. This is true for less than one in ten men.

"I am sick of being the only virgin in our class. Everybody but me is sexually experienced."

-Adrian, in *The Secret Diary of Adrian Mole*

Sue Townsend

TABLE 5.1: The Big Decision

	Total (%)	Boys		Girls	
		Sexually Active (%)	Not (%)	Sexually Active (%)	Not (%)
He or she has met someone he or she really loves	31	23	27	54	31
He or she is engaged or married	19	2	21	8	31

TABLE 5.1: (continued)

	Total	Boys		Girls	
He or she has the opportunity to do it with someone he or she likes	19	43	21	11	7
He or she has reached a certain age or maturity level	14	15	16	11	14
He or she feels pressure to do it because everyone else is	10	15	12	6	8
His or her girlfriend or boyfriend is pressuring him or her	5	1	1	6	9
Don't know	2	1	2	4	0
	100	100	100	100	100

Figure 4.1 A sample of 13-18-year-olds were asked what motivates young people to make the big decision to become sexually active. Notice that boys and girls gave somewhat different answers.

Since sex is such an important activity and can have so many serious consequences, should others (even if they are good friends) decide for you what to do? Or should you be making the choice yourself?

Learning about sexual behavior isn't easy. It's a lot riskier than learning to ride a bike, and it is a much more difficult topic about which to get accurate information. How can you best learn about sexual behavior and maintain your self-respect?

What Do You Think?

Choosing Abstinence

The word **abstain** means to refrain from an activity by one's own choice. The activity can be any activity. It does not have to be sex. In earlier times, the term referred to refraining from alcoholic beverages. Now it is more commonly used to refer to refraining from engaging in sexual intercourse.

Abstaining does not mean giving up sex for life. It simply means postponing it until the time is right. Abstaining also doesn't mean you can't fall in love, or express your feelings by touching or kissing. Abstinence means that you choose, for this period in your life, to not engage in sexual intercourse.



Mini-Activity

Debate! Before engaging in sexual intercourse, individuals under age 18 should talk with an older peer or an adult. Debate this statement.

Abstinence is the only sure way to avoid unwanted pregnancies, and it greatly reduces the chances of getting a sexually transmitted disease. In addition, choosing abstinence can simplify your life and your relationships. Once you commit to abstinence, you can avoid much of the uncertainty and guesswork in a relationship and in social situations. But remember that abstinence does require a commitment-it is not a “here today, gone tomorrow” decision.

About 3,000 American teenage girls become pregnant every day-about 1,000,000 every year.

Did You Know?

Abstinence is a choice you can make, and at this point in your life, abstinence is a choice you probably should make. Pregnancy and/or disease can affect your life forever-are they risks you are ready for? Decisions of this kind can be complicated and challenging.

A recent study showed that approximately half of all adolescents report that their parents never talk about birth control, STDs, or pregnancy. When should children and teenagers be taught about sex? With whom should they talk and how?

What Do You Think?

When making a sexual decision, do you make choices based on what you think or what you feel? And to what extent do your own thoughts and feelings rather than those of others direct your behavior? Most of us would say that what we do is a result of all of the factors above-our own feelings and thoughts, as well as those of others. Many young people also abstain because they think to do otherwise would be morally wrong.

In a sample of 13- to 14-year-olds, 53% of boys and 68% of girls said they had made a conscious decision to delay intercourse, and over 75% said they have met with someone who had made this decision. Three out of four 13- to 14-year-olds say it is considered a good thing in their group to remain a virgin (67% of boys and 85% of girls).

“I figure if a guy can’t make it with me because I don’t go to bed with him, then he loves that more than he loves me, anyway.”

-Maria, in *Fast Sam, Cool Clyde, and Stuff*

Walter Dean Myers

Those in the study for whom religion is very important are more likely to want to abstain from sex until marriage. Some of these boys or girls were in a relationship with someone they liked. However, they said that they decided not to engage in sexual intercourse for the following reasons:

What was the main reason you decided not to have sexual intercourse at that time? Was it because . . .

TABLE 5.2:

	Total	Boys	Girls
You just didn’t feel ready	36	27	44
You had made a conscious decision not to have sex with anyone	27	23	29
You were worried about getting (the girl) pregnant	10	12	8
You didn’t feel in control of the situation	6	6	6
You were worried about getting a sexually transmitted disease	4	5	3
Some other reason	17	26	9

TABLE 5.2: (continued)

	Total	Boys	Girls
Don't know	0	0	0
Refused	0	0	0

Figure 4.2 Reasons given for declining sexual intercourse. Responses are based on those who declined sexual intercourse with someone they liked.

Activity 4-1: Red Light-Green Light

Introduction

The party is going just fine. You are laughing with your friends. You look up and there the person is! Not just a person, not just any person, but *the* person! You see the very person you wished to be with all week long. Your eyes meet. A hand is extended. You clasp it in yours and you are following. YIKES, what if . . .? What should you do? Wouldn't it be great to have advice when you need it? One wrong decision could change your life forever, and make you a candidate for a TV talk show! Well, maybe, and then again maybe not. How about some practice at decision making now before it gets real-later?

Materials

- None needed

Procedure

Here is the situation. You are all Family Life Counselors. These scenarios are some of the types of dilemmas that kids just like you have gotten themselves into. You have to help them make the right decision. So, you have to *honestly* choose which light to give to the people in these scenarios, and explain why you chose that light so that the people will be able to understand and make the right decisions for themselves the next time.

Step 1 Your teacher will read a series of scenarios. At the end of each reading your teacher will present some options listed under each of three headings:

- RED LIGHT: No! Stop!
- YELLOW LIGHT: Be very cautious.
- GREEN LIGHT: Yes, go ahead.

Step 2 Listen to both the scenarios and the options carefully. You are expected to make the best decisions for your clients.

Step 3 When the teacher says “Go” you go to the table labeled “Red Light,” “Yellow Light,” or “Green Light.”

Step 4 Explain why you made that decision based on the scenario you just heard.

Sexual intercourse can be best understood as part of an important relationship between two people. It is not something to get involved in casually. Unlike masturbation, which involves no one else, sexual intercourse has very important consequences to one's own and one's partner's lives.

There are many aspects to sexual relationships. One is physical attraction. But simply because we find someone sexually attractive is not enough reason to try to enter into a sexual relationship with that person.

Most people want sexual intimacy to take place with someone about whom they care or with whom they are in love. Yet that may not be sufficient. Traditionally, couples have been expected to be married first before engaging in sex. Though that is no longer the rule for everyone, there are many who still think that one should have a sexual

relationship only with someone to whom they are married. There are moral considerations in this respect that we will discuss later in this unit.

Why do people enter into sexual relationships? This question is broader than the question, “Why do people have sex?” However, some of the answers overlap.

One million teenage girls become pregnant each year. 70% of teenage mothers are single parents.

Did You Know?

Biologically, the most important reason for sex is reproduction. Without reproduction, human beings would disappear from Earth. And, becoming a parent is also a very important event psychologically. A child can bind the parents more closely to each other, provided, of course, that the couple is ready for parenthood. Many teenagers who become parents are not ready for parenthood and commitment. Under these circumstances, for a young couple to have a child often becomes a serious problem.

As important as sex is for reproduction, if couples had sex only to have babies, there would be very little sexual activity. But that is not the case. Sexual relationships have many other functions. One obvious reason people engage in sex is because it is highly pleasurable, both physically and psychologically.

Sexual relationships are also an important way of expressing affection or love. As we discussed earlier, passion, which involves sexual attraction, is an important component of love. But happy sexual relationships do not just happen. One needs to be ready for them and mature enough to deal with their requirements. The requirements include caring and affection, honesty, trust, and emotional intimacy (the ability and willingness to share your feelings and thoughts).

Write a poem about how you think relationships should be. Include any personal experiences that might have been emotionally painful but might have helped you better understand yourself, relationships, and how to make relationships work.

Journal Writing

Getting involved in a sexual relationship makes people vulnerable in many ways. Health, reputation, and feelings are at stake. For this reason, one should be able to trust one’s sexual partner. That is why commitments such as marriage have been a requirement for sexual intimacy in so many societies.

There are many other aspects of sexual relationships that we will discuss in the rest of this unit. We will consider the way that sexual relationships may affect your health. Also, we will consider the unacceptable ways of treating others sexually through abuse and coercion.

Maintaining Sexual Relationships

Sex is healthiest between willing and responsible partners who love and care for each other. Even between the members of a married couple who love one another, the desire for sex may not be there for both people at the same time or to the same degree. For example, one time the wife may be more interested in sex than the husband. Another time, the husband might be more eager for sex than the wife. Most adult couples manage to deal with these differences, but the problem is more difficult for a couple where it is unclear whether or not they should have sex in the first place.

Many people have power over other people but do not use that power to take advantage of them. What stops them from doing so? Have you ever been tempted to take advantage of other people’s trust, honesty, or innocence?

What Do You Think?

Sexual relationships have a lot in common with other kinds of human relationships and interactions. Think of how

you and a friend have dealt with a situation when you wanted to do something and he or she wanted to do something else. Pick a situation that doesn't involve anything sexual, such as choosing which TV program to watch. But the activity should involve something that requires that you do it together. How did you decide what to do?

In trying to deal with such situations, people commonly use a number of strategies.

The first strategy is abstinence, avoiding the activity—in the case of sex, not engaging in sexual intercourse. One way of not dealing with the requirements of sexual or other intimate relationships is not to get into them in the first place. There is much to be said for this approach for certain periods in one's life. However rewarding a sexual relationship may be, it may conflict with other worthwhile goals in life, particularly when one is young. School, sports, and friendships put a lot of demands on one's time and energy, let alone the business of growing up. So it makes good sense to postpone getting involved in sex until one is in a better position to handle it. Most young people are not ready to handle the serious consequences that may result from sexual intercourse, such as pregnancy. The same is true for adults when they are going through a particularly demanding time in their lives due to a variety of reasons, such as careers.



Mini-Activity

Lyrical Messages Bring in the words of a favorite song about relationships. What do they say about how males and females relate? Is there a sense of compliance, cooperation, or compromise?

However useful avoidance may be when young or during special circumstances, many people are eventually unsatisfied with avoidance. Because sexual relationships can be so rewarding, most people are not willing to give them up forever. Hence, the second approach is **compliance**. You do whatever your spouse, lover, or friend asks of you. This may save a lot of hassle, but it robs you of your sense of autonomy and independence. It may also put you in situations that you do not like, want, or need. Thus, you may feel powerless and taken advantage of.

The third approach is **cooperation**, which involves two persons working towards the same goal. Cooperating couples are relaxed and friendly. Neither person is trying to take advantage or impose his or her will on the other. Cooperating couples freely show their love. They think of sexual intercourse as something a person does *with* someone, not *to* someone. They do not keep score of sexual favors. Nor do they take advantage of each other or make unreasonable demands.

Cooperating couples reach agreement through discussion that allows each person to express and listen to the other's feelings, wishes, and needs. Where there are differences, they can be dealt with through persuasion (convincing the other) and negotiation (trying different ways of reaching an agreement). Often there is need for some **compromise**, where neither person gets everything he or she wants, but both get enough of what they want to accept the outcome.

What Do You Think?

1. Think about a time when you were negotiating with a friend about a difference in opinion, and rather than an equal compromise, your friend ended up giving in to your point of view. How did you feel about your friend? How did you feel about yourself?
2. Now think of a time when you gave in to a friend's point of view to settle a difference of opinion. How did you feel about yourself? How did you feel about your friend?

Unlike cooperation, which is a part of human interactions, **seduction** is specifically sexual. Seduction may take the form of one person arousing sexual interest in another by various means. It may involve expressions of admiration and affection or sweet-talking the partner into sex. Creating a romantic or erotic atmosphere (by music, soft lights, sexy clothing, and so on) may also be a part of the attempt to stimulate sexual arousal. These are generally harmless

ways in which to engage a partner (assuming the individuals should have sex together in the first place).



Mini-Activity

Learn the Signs In groups of four, create some scenarios about seduction or coercion. Write short scripts for each. Trade scenarios with other groups and role-play them for the class.

However, in its more harmful form, seduction involves manipulating or conning another person into sexual activity. It relies on a number of common strategies aimed at exploiting the person's psychological weaknesses. It may use flattery ("You are great"), deception ("I love you"), or false promises ("I'll marry you") to convince someone to say "yes" when they would otherwise say "no." Alcohol and drugs are often used to cloud the person's judgment and break down resistance. Finally, a person may use **coercion** to force another into sex. Coercion may depend on psychological pressure or the threat or use of physical force, in which case it becomes rape.

Why might resisting and saying no to seduction be hard to do?

What Do You Think?

Seduction falls short of psychological coercion because the person ultimately agrees to engage in the sexual activity. Sometimes, however, the line is hard to draw between seduction and coercion. The person seduced is likely to feel taken advantage of afterwards. We discuss sexual coercion in the next section.

Activity 4-2: If You Loved Me

Introduction

Sooner or later almost every young person in love will hear these thoughts, expressed in other words perhaps, but they always mean the same thing: He: "You'd say yes if you loved me." She: "You would not insist if you loved me." How should each person react? What should be said or done? What would you do?

Materials

- Pen or pencil
- Activity Report

Procedure

Step 1 Your teacher will divide the class into groups.

Step 2 Each group will be given a scenario to read and then rewrite as a dialogue.

Step 3 You will share your scenarios with the other groups and then discuss several questions with your group about the scenarios.

Step 4 To help make your discussion easier you should be familiar with these terms:

- abstinence
- compliance
- negotiation
- cooperation
- seduction

- coercion

Step 5 Review this section of your textbook again if you are not certain of the definitions of these words.

Understanding that sexual stimulation leads to sexual response may influence your thoughts about how you conduct yourself, especially if you have strong feelings about whether or not you are ready to become sexually active. What guidelines will you set for yourself?

Journal Writing

Review Questions

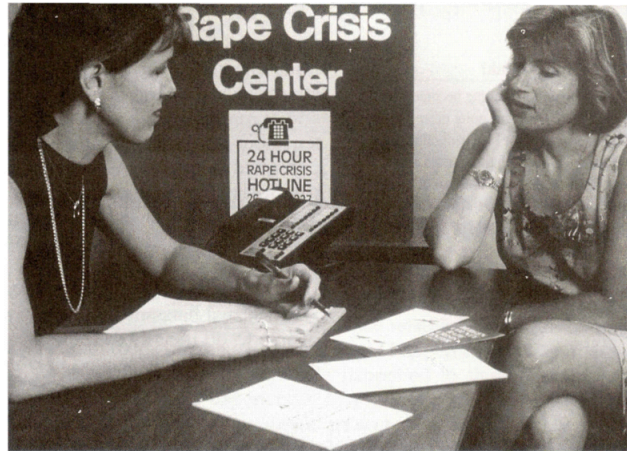
1. Why is making the decision to abstain or engage in sexual intercourse so much more difficult and important than deciding to engage in other sexual activity, such as kissing or exploring your partner's genitals?
2. What factors influence the development of sexual behavior?
3. What are the most common reasons that adolescents choose abstinence?
4. Why do people choose to enter into sexual relationships?
5. Compare and contrast the terms *compliance* and *cooperation*.
6. Are seduction and coercion parts of a healthy sexual relationship? Why or why not?

CHAPTER **6** **Sexual Abuse and Coercion**
- Student Edition (Human Biology)

Chapter Outline

6.1 SEXUAL ABUSE AND COERCION

6.1 Sexual Abuse and Coercion



How do people take sexual advantage of each other?

Some people sexually take advantage of others through exploitation and abuse. There are many forms of exploitation, sexual or otherwise, but the basic feature of exploitation is the use of another person for selfish purposes. It is a way of treating another person in order to gain something at his or her expense or against his or her wish.

One form of exploitation involves treating one's sexual partner not as a fellow human being who deserves respect, but as a sexual object for one's own gratification. This may take the form of enticing someone into sex by false promises. Money or gifts may be given in exchange for sex, as in **prostitution**. A few claim that prostitution is fair since sexual favors are being bought just like some other service, but the fact is that most prostitutes exchange sex for money or drugs because they are desperate. So even if they act like they are doing it willingly, they are not really exercising a free choice. This is especially true when young people who run away from home or live in the streets for other reasons are trapped into prostitution to stay alive.



Mini-Activity

Debate! Debate this statement: Checking out and commenting on another person's physique is sexual harassment.

Abuse means to use another person wrongly or in a harmful way. Exploitation is one form of abuse, but there are also others. A common form is **sexual harassment**. When two people are sexually attracted to each other, they are flattered by each other's expression of sexual interest through words and gestures (provided these are done the right way and at the right time and place). But when such expressions of sexual interest are unwanted or inappropriate, or they make a person feel uncomfortable, offended, or threatened, these expressions become a form of sexual harassment.

At what point does teasing become sexual harassment? Does this point differ for people, or should there be a general rule for everyone? Is sexual harassment a subjective experience or one that can be evaluated objectively? Why or why not?

What Do You Think?

Harassment may also take the form of being touched or grabbed, being intentionally brushed up against, having one's clothing pulled, having sexual rumors spread about a person, or having sexual messages written about them. Girls are more likely than boys to be subjected to these unwanted behaviors. As a result, some do not want to go to school or talk in class; some find it hard to pay attention and get poorer grades. Those who tease or harass others may not be aware of the harm they do. They may think that the behavior is no big deal or that the person likes it.

When sexual harassment occurs at work, it interferes with the ability of people to do their jobs. There are now laws that forbid such behavior and penalties for those who break them.

Activity 5-1: Sexual Harassment

Introduction

One does not have to rely on movies or the newspapers to find examples of sexual harassment. There are probably daily examples of sexual harassment on your campus and in your neighborhood, just as there are examples of sexual harassment all across the country. Have you ever been a victim of or a perpetrator of sexual harassment? What can be done to end this form of sexual exploitation?

Materials

- Activity Report

Procedure

Your teacher will give you instructions before you begin to write. Then, respond to each of the following questions as thoroughly as you can.

Step 1 Describe one example of sexual harassment that you have observed or been subject to in your school or in your community.

Step 2 In your opinion, why were the perpetrators doing it?

Step 3 What was the reaction of the victim? How was this person dealing with it?

Step 4 If there were witnesses to this harassment, what was their reaction?

Step 5 How should a victim behave under these circumstances?

Step 6 What can you, as a person or as a group, do to help stop such behavior?

“I thought for a long time that what was happening was OK because Dad said that it was a game all fathers played with their sons, a secret game that only the men knew about. He said that anyway no one would believe me if I did tell.”

-Jamie, 14, *Adolescence*

Elizabeth Fenwick and Dr. Tony Smith

Sexual Abuse of Children

It is common and healthy for parents, siblings, and relatives to express their affection for their children physically, such as by hugging and kissing them. These shows of affection are not sexual.

However, some adults may be sexually attracted to children and touch them physically in a sexual way. This is **sexual abuse**. Our society strongly disapproves of such behavior.

The most serious and damaging form of abuse is the sexual exploitation of children by adults, especially close relatives. Some of you may find it unthinkable that such a thing could happen to children. Others know it does because it may have happened to them. Painful and embarrassing as such experiences may be, you need to understand

them and, if necessary, you should protect yourself against them and seek help to overcome their effects. You need not feel alone and helpless in these situations.

Much of discipline involves getting a child to listen to, respond to, and respect adults. Yet in some situations, a child needs to say no. How do children know when it's OK to say no to an adult? How can parents teach children to listen and cooperate but also to say no when appropriate?

What Do You Think?

Children are not old enough or mature enough to give free and **informed consent**, which is agreement based upon a true understanding of the situation. Children are dependent upon adults. As a result, children can be exploited easily. Therefore, when an adult or adolescent sexually interacts with a child in any way, it is considered **child sexual abuse**. To protect children, such acts are severely punished.

Victims of child abuse may be girls or boys. Typically, they are about 10 years old. Most cases of child abuse are not reported to the police. Reliable statistics about child sexual abuse are hard to come by. In our survey, 27% of women and 16% of men said that prior to age 18 they had been subjected to some sexual experience, which could be considered sexual abuse. Most of the adults who sexually abuse children are men. Typically, the abuser knows the child. They may be family acquaintances, baby sitters, youth leaders, and even family members. Only in about one in ten cases is the abuser a stranger to the child. This is why most of such sexual contacts occur in the child's or in the adult's home. Others occur in public places and/or in cars.

The sexual abuse of children usually does not involve violence, although verbal threats or psychological pressure are common. The child may also be enticed into the sexual activity through gifts and favors and by shows of affection by the adult. The child abuser usually exposes his genitals or touches the child's genitals. Attempts at sexual intercourse occur much less often.

Apply
→ **KNOWLEDGE**
Your

Think back to the last section, what are verbal threats and psychological pressure called?

When the abuser of the child is a member of the family, such as a cousin, brother, sister, stepfather, parent, or some other relation, the sexual interaction is called **incest**. All societies forbid incest.

Sometimes it's hard to know if an adult's behavior is OK or not. If you experience any of the following, you should tell someone (parent, school counselor, or teen clinic).

Did You Know?

- If a person touches you in a way that makes you feel uncomfortable
- If a person touches you in ways you don't like
- If a person hurts you
- If a person says, "Don't tell"
- If a person ignores your "no's"
- If a person threatens you

Such experiences are usually very upsetting to the child, who may be frightened and confused by them. The sexual experience is usually not pleasurable, but even if it is, the child senses that the activity is wrong and will not know how to deal with it. Especially difficult are situations involving a parent, since the child cannot easily get away from that person.

The effects of child abuse include fear, anxiety, sadness, difficulties in school, running away from home, and inappropriate sexual behavior. These children often become overly interested or involved with sexual ideas and

acts, including engaging other children or even adults in inappropriate sexual activities. The normal and healthy curiosity of children can become changed to persistent and often joyless sexual thoughts. Sometimes they will abuse other children the way they have been abused themselves. Long-term effects include deeper emotional problems, self-destructive behavior, substance abuse, poor self-esteem, and sexual problems. However, these conditions can also result from other causes, so they do not always mean that a child has been sexually abused.

The effect of being abused depends on many factors. Age is one factor. A 7-year-old girl and a 17-year-old young woman are in very different situations regarding their abilities to deal with the sexual advances of an adult. Another factor is how the child is treated—whether threats or force are used. Sexual abuse that occurs over long periods of time, that involves coercion, or that is done by a trusted person results in more harmful effects. What happens after the abuse is discovered and how the abuse is dealt with are also important.



Mini-Activity

Help is Available What are some resources for abused children? Look in your local phone book under County Social Services in the White or Yellow Pages, and see what you can find. Make a list of names and numbers to call. Add to this list the names of any adults you could turn to for help.

In cases when a young person is being abused sexually through threats and force, he or she should seek help and protection. Even a child can tell the difference between a “good touch” that feels good and a “bad touch” that causes pain or embarrassment. But in other cases, a touch can be confusing. Or it may feel good, but the child feels ashamed or guilty because of it. It is also possible for a child to misunderstand or misinterpret a touch as sexual that was not meant to be so. Children in all these situations need appropriate help and guidance from an adult they can trust.

If you find yourself subject to sexual abuse, you must first of all be aware of what is happening. Frightened as you may be, you must not feel helpless, and you must not blame yourself. Instead, you need to speak to a trusted adult who can help you with the problem.

Occasionally, a child may misinterpret an affectionate gesture as a sexual advance. Or the child may be confused by an activity involving the genital region. For example, one little girl reported that her mother had put something in her vagina when, in fact, her mother had taken the child’s temperature by purring a thermometer in her rectum. Repeated questioning of children by legal workers also may lead to confusion. Sometimes this confusion can result in some children reporting events that never happened. Nonetheless, it is very important when children relate experiences of abuse, that what they say be taken seriously.

Sexual Coercion

In any act of coercion, you are more or less forced to do something you do not want to do. Psychological coercion or pressuring can take many forms. At its mildest it involves insisting, nagging, and begging, such as “Please, just this once.” More forceful means are shaming (“Don’t act like a baby”), bullying (“Do as I say”), and threatening (“You’ll pay for this”). Accusation (“You don’t love me”) and the threat of breaking up or withdrawal (“You won’t see me again”) are other ways of pressuring.

Rape is the most extreme form of coercion. It involves the threat or the actual use of violence to force another person into a sexual interaction.

Rape typically involves a man forcing a woman to have sexual intercourse against her will by using violence or the threat of harming her. However, sexual acts other than intercourse carried out under similar circumstances are also considered by the law to be rape. When rape occurs between two people who know each other or are friends, it is called **date rape**.

A second type of sexual coercion, called **statutory rape**, need not involve violence. It consists of taking sexual advantage of a person who is not able to give consent. This usually means the person is legally not yet an adult. As

we discussed, when children are involved in sexual activities with adults, we call it child sexual abuse. But even an adult may not be able to give informed consent because of her or his condition. For example, a person who is mentally handicapped or drunk is not in a position to make a choice. To have sex with someone under these circumstances is a form of rape. The idea of consent is the key to understanding not only rape but also all other forms of sexual coercion. To give consent requires, first of all, that you understand the nature of the activity.

How old were you when you first heard about rape? What did you think it was? How did knowing about it make you feel?

What Do You Think?

The second requirement for consent is that it should be given *freely*. If someone is threatened with a weapon, and sexual intercourse occurs, there is no free choice involved.

In other cases, the situation is far less clear. This is especially true when a boyfriend (or husband) coerces a woman to have sex. He may not use a weapon or even force. She may resist him but not very forcefully. She may feel confused and frightened by what is happening. After the sexual act is completed, the man and the woman may have very different ideas as to what happened.

The many uncertainties in such situations make it difficult to decide whether consent was present or not. The idea of consent, instead of being a clear yes or no, now begins to look like a continuum (a progression of possibilities). At one end, consent is fully present, at the other, completely absent. Other situations tend to fall in between.

Despite these ambiguities, it is clear that many teenagers may put themselves in uncomfortable situations in which they feel they are not in control of what they do. Or they may engage in activities they would rather not. In a sample of 13- to 18-year-olds who have been in an intimate relationship, almost half said they had done something sexual or felt pressure to do something sexual that they felt they were not ready to do. Girls are usually more likely than boys to be in these situations.

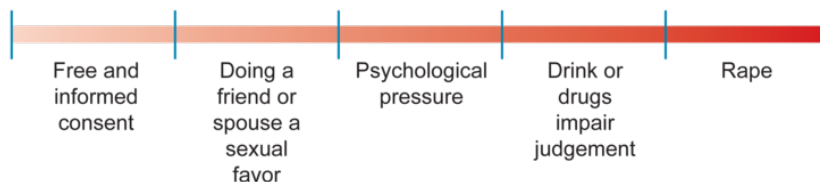


Figure 5.1 Degrees of informed consent in sexual relations.

*Apply
Your* → **KNOWLEDGE**

1. **Why might a person who has been raped not report it to the police?**
2. **Why should a person who has been raped report it to the police?**

Rapes that are reported to the police are more likely to have been committed by strangers. In general surveys, less than 5% of women who have been forced to do something sexual say that a stranger victimized them. Most of the rest of the cases are coercion by lovers, acquaintances, and friends. Acquaintance or date rape is more common in schools and colleges. But rape is not restricted to any particular group of people—it may happen to anyone.

“It was stupid of me to be in the barn alone. But,’ I added bitterly, ‘why should I have to be afraid to go places? It isn’t right! Why should I be the one to give up doing what I want, just because there are jerks like Slim around?’”

—Annie’s Promise

Sonia Levitin

Preventing Rape

Until fairly recently, most rapes were assumed to be carried out by strangers. The emphasis of rape prevention plans was on protecting women who were alone at home or in risky environments. Some of these safety precautions are the following.

- Lock doors and windows of cars and houses when alone.
- Do not walk alone. Walk in groups or accompanied by another person, especially at night.
- Refuse to open the door to, respond to, or give rides to strangers. Don't take rides alone.
- Carry a whistle or some other means of calling for aid.

Basically, you want to avoid being in situations where you could not get away if attacked or where help is not likely to be available. This doesn't mean that women must live in a constant state of fear. But it does mean taking reasonable precautions just as people do with regard to other dangers, such as being mugged.



Mini-Activity

Be Prepared Identify three resources available to you in case of a sexual assault emergency. Who would you call first and what is the number?

Helping Rape Victims

There are effective ways of helping rape victims. After an incident of sexual assault or rape, it is important to seek help immediately. It is also important to help catch and convict (punish legally) the rapist. This means not washing or changing clothes after the rape until the doctor and police have gathered the necessary evidence.

Rape crisis centers and hotlines typically offer 24-hour advice and can help in giving support and in getting immediate medical care and police response. Furthermore, they can help in dealing with the emotional reaction, which often includes denial, anger, depression, and confusion. The consequences of rape and sexual assault include everything from self-esteem and trust problems to physical pain, pregnancy, and infection. It is important to seek support from trained and knowledgeable people in addressing all of these consequences.

Activity 5-2: What Does “Stop” Mean?

Introduction

How many times have you said “Stop” to someone’s behavior only to discover that the person continues to annoy you or, in many cases, continues to hurt you? What is it about the word “Stop” that a person does not understand? In the following scenario you see that some people can misinterpret the word which can result in a felony crime.

Materials

- Resource
- Activity Report

Procedure

Step 1 Your teacher will divide the class into small groups and give each student an Activity Report to read.

Step 2 Read the scenario and respond to the questions.

Step 3 Your group will share its conclusions with the rest of the class.

Journal Writing

- You are a peer counselor at school, and you recently spent a lot of time with a student who keeps saying yes to people in a variety of situations when she really means no. You are beginning to worry about whether she is going to get sexually involved with someone against her will, just because she is afraid to say no. What is your advice to her? How might you help her develop some confidence and skills to say no?
- You have recently discovered that one of your friends has been sexually abused by a family friend. What should you do? Write an entry in your diary about your reactions to the situation and what you plan to say and do to help your friend.

Review Questions

1. What is sexual exploitation? Provide and explain an example.
2. What is sexual abuse by relatives called?
3. What are some common feelings felt by a child being abused, and what factors affect how well a child will handle and recover from abusive situations?
4. Give some examples of psychological coercion.
5. What is the difference between rape and statutory rape?
6. What does informed consent mean? Why is it important?
7. List five safety tips for preventing rape.

CHAPTER **7** **Sexually Transmitted Diseases - Student Edition (Human Biology)**

Chapter Outline

7.1 SEXUALLY TRANSMITTED DISEASES

7.1 Sexually Transmitted Diseases



What are they and how are they transmitted?

Sex can be a wonderful experience and a healthy part of life. But sometimes it can also be seriously harmful to your health and to your psychological well-being.

Did You Know?

Any sexually active person is at risk for getting an STD. Getting an STD does not have anything to do with *who* you are (your financial status, ethnic group, or whether you are male or female). It has to do with *your sexual* partner and the type of *activity* you engage in.

Sex can damage a young person's life if it results in unwanted pregnancy. Another way sex can endanger one's health is through **sexually transmitted diseases** (STDs). These are illnesses that are spread from one person to another through intimate sexual contact. Some STDs are no more than a nuisance and can be easily treated. Others have very serious consequences, including death. One in four sexually active teenagers will be infected with an STD in high school. Every 30 seconds, a teenager somewhere is getting infected.

12 million new cases of STDs occur each year. Young people are particularly vulnerable to picking up sexually transmitted diseases. Currently two-thirds of all reported cases come from the 15-29 age group, nearly one-third from teenagers alone.

Did You Know?

Perhaps neither you nor most of your friends will be exposed to sexually transmitted diseases. But others of your age will be. Hopefully, you will never suffer the consequences of these problems, but hundreds of thousands of others do. Knowing about these problems will help reduce the risk of them happening to you.

These are unpleasant topics, and they may make you uncomfortable. They can be especially difficult if you have had experience with them. You may also feel frightened by the possibility that any of this may happen to you. Be sure to discuss your fears with a parent, trusted adult, or counselor. Knowledge about these unpleasant topics is helpful for your personal safety, but it is not meant to bring you fear or distress.

Apply
Your → KNOWLEDGE

Why are young people so much more at risk for acquiring STDs than older age groups? (See *Did You Know?* this page.)

A Teen's Story

Let's consider the experience of a high school student we will call Chris and his girlfriend Neeley.

Chris was getting together with his girlfriend Neeley one evening. He was uneasy about seeing her because he had been feeling sick lately. He was feeling an ache in his lower abdomen and had a fever. He knew it wasn't the flu though, because he had some other strange symptoms. Whenever he urinated, he felt a burning pain. What really made him nervous was a yellow discharge from his penis. Chris was really worried that his girlfriend Neeley might find out about these symptoms and be disgusted.

Just two nights ago Chris had talked Neeley into having intercourse with him, and he had felt a lot of pain. He hadn't used a condom because he didn't have any with him, and Neeley didn't say anything. He didn't want to do it again on the date tonight, because Chris didn't want her to notice the discharge, and he was feeling pretty sick. He decided to cancel their date and say he was sick.

The next morning, Chris's symptoms weren't any better. He began to panic and decided to go to the doctor. He knew that he didn't want his parents or anyone to know about his symptoms yet. But he decided if it was something serious that he would talk to his parents about it. In the meantime, though, he wanted a fast, reliable medical opinion.

Chris could have also gone to see the nurse or the family doctor. But what if he didn't want to talk about this to anyone who knew him personally? The American Social Health Association (ASHA) provides free information and keeps lists of clinics and private doctors who provide treatment for people with sexually transmitted diseases. So Chris called ASHA at its national toll-free telephone number, 1-800-227-8922, and made an appointment with a local doctor.

After hearing about Chris's symptoms, Dr. Brown told him he thought Chris had a sexually transmitted disease (STD). Dr. Brown thought this was an infection caused by **microorganisms**, typically bacteria or viruses transmitted through the exchange of bodily fluids, typically through sexual contact. Microorganisms are relatively simple living organisms that are too small to be seen by the naked eye.

Bodily fluids are fluids that are produced by various organs. The bodily fluids most likely to spread STDs are semen, vaginal fluid, and blood, including menstrual blood. These body fluids make it possible for bacteria and viruses to stay alive. Otherwise dryness will kill the microorganisms. These fluids also act as the means of transmission through various forms of sexual behavior.

There were a few key points Dr. Brown wanted Chris to know about STDs.

1. STDs affect men and women of all backgrounds, ages, and ethnic groups. However, they are most frequently found among young adults. Two-thirds of cases involve people under the age of 25.
2. The number of STD cases is rising, perhaps because young people are becoming sexually active earlier, and sexually active people today are more likely to have more than one sex partner or to change partners frequently.
3. Some STDs cause no symptoms. When symptoms develop, people often confuse these symptoms with other illnesses that are not contracted through sexual contact. However, even when an STD shows no symptoms, it can be passed on to another person through sexual contact. An infected person who is not sick is called a **carrier**.
4. Health problems caused by STDs tend to be more severe and more frequent for women than for men (except for AIDS).
5. When diagnosed and treated early, many STDs can be treated effectively. While being treated for an STD, all sexual activity should be avoided.
6. STDs are among the most common infectious diseases in the United States today. At least 20 STDs have now been identified, and they affect more than 12 million men and women in this country each year. Over 30 million people are infected at any given time.

Before Dr. Brown could accurately **diagnose**, or name, Chris's infection correctly, he needed to run a test on a

sample of Chris’s yellowish discharge.

When the lab tests came back, the doctor explained to Chris that he had **gonorrhea**, a sexually transmitted disease caused by bacteria. He explained to Chris that gonorrhea is passed through intimate contact like intercourse. It is not passed through casual contact, like shaking hands, touching a toilet seat, or using dirty towels. (Gonorrhea is discussed in more detail in the next section.)

He explained that symptoms like the ones Chris was experiencing were typical. As soon as Dr. Brown explained that, Chris knew how he had picked up gonorrhea. About a week ago, he was really angry and frustrated that Neeley wouldn’t have sexual intercourse. He went to spend the night at his old girlfriend Terry’s house, because he wanted to prove to himself that some women did find him sexy. He knew that Terry had been with other men since him, but he really wanted to prove to himself-and maybe even to Neeley-that he was attractive.

Chris didn’t use a condom because Terry told him not to bother with it. He realized now how stupid that was. Neeley didn’t want to have intercourse because of her views on sex and relationships, not because of her feelings towards Chris. And now he was infected with an STD because he had been impatient and cheated on her. Perhaps he had also infected Neeley.

Apply
→ *Your* → **KNOWLEDGE**

- **Chris realizes he has to tell both his girlfriend, Neeley, and his old girlfriend, Terry, that he is infected. What are two reasons that he has to tell them?**
- **If a person has sex with more than one partner, and their sexual histories are not known, what method of contraception provides the best protection against STDs?**

In 1928, the discovery of penicillin changed the medical world. This drug enabled doctors to treat diseases and infections (ranging from earaches to sexually transmitted diseases) that used to leave people either dead or disabled in some way.

Did You Know?

Dr. Brown reassured Chris that because gonorrhea is a bacterial infection, it can be treated with antibiotics, such as penicillin. Treatment for gonorrhea includes five steps.

1. As long as any symptoms of infection exist (including itching, redness, pain, unusual discharge, or odor) and until the doctor says you are cured, do not have intercourse. Intercourse may transmit the disease to a partner.
2. All recent sexual partners must have a checkup and receive treatment. (This means Neeley should also see a doctor.)
3. All medication must be taken until the prescription is finished.
4. Treatment must be continued until two tests show that there is no more infection. Even after symptoms disappear, the bacteria can still maintain an infection.
5. If there is sexual contact, condoms must be used to prevent any exchange of bodily fluids.

Chris didn’t use a condom (though he had some) because Terry told him not to bother. She had had some vaginal discharge in the past, but it had gone away, so she thought she was fine. Over 50% of women show no symptoms when they are infected with gonorrhea. However, only 10% of men who are infected with gonorrhea show no symptoms of the disease after a while.

Dr. Brown stressed to Chris that **prevention** was as important as treatment. Preventing future infections should be part of his regular lifestyle. There are three key prevention steps Chris could follow:

1. **Abstinence:** Don’t have sex. Without the exchange of bodily fluids that occurs during sex, infection is nearly impossible.

2. Condoms: Use a condom to protect against any bodily fluid exchange while having sex.
3. Communication: Know your partner's sexual history. Has he or she ever been infected? How many partners does he or she have now, or has he or she had? Has he or she used condoms?

However, **spermicides**, typically used as a method of contraception, do not decrease the likelihood of a sexually transmitted disease or infection. Spermicides kill sperm. According to the US Centers for Disease Control and Prevention, the use of spermicides for STI/STD prevention may increase the likelihood of STI/STD transmission, including HIV.

Activity 6-1: What to Say and How?

Introduction

Have you ever been in a situation in which you had to tell a friend something so devastating that you were afraid it would end your friendship? What went through your mind as you agonized over what to say and how to say it? What if this person was not just your friend but the person you loved?

Materials

- Activity Report

Procedure

Step 1 Your teacher will divide the class into pairs and assign each group a dialogue based on the story of Chris and Neeley in your textbook.

Step 2 SHHH! The dialogues must be written silently. Your teacher will explain the procedure to you.

Step 3 When they are finished, the scripts will be read aloud.

Apply
→
Your → **KNOWLEDGE**

How might drugs and alcohol affect the spread of STDs?

Types of Sexually Transmitted Diseases

Sexually transmitted diseases have one thing in common. They are all transmitted through sexual contact. However, they are caused by a variety of microorganisms and cause different signs and symptoms. Signs such as **skin lesions** (open sores on the skin) can be seen by another person. Symptoms such as pain are experienced by the infected person. STDs are grouped by the types of microorganisms causing them. They generally belong to two categories—those caused by bacteria and those caused by viruses.



Mini-Activity

Campaign against STDs Design one button, one bumper sticker, and one sign promoting sexual health and the prevention of STDs. As a class, select a few and host an STD prevention week at school.

STDs Caused by Bacteria

Bacteria are single-cell organisms (singular bacterium). Gonorrhea is one example of an STD caused by bacteria. The disease has been known since the time of the ancient Egyptians and Greeks. It is typically transmitted during sexual intercourse. A woman has a 50% chance and a man has a 25% chance of catching the disease after a single act of unprotected intercourse with an infected person.

The symptoms of gonorrhea appear two to ten days after being infected. The primary symptom in the male is a discharge from the penis. This takes the form of a yellowish, pus-like liquid coming out of the tip of the penis and is accompanied by a burning sensation during urination. In women, the primary symptom is a vaginal discharge. However, women often have vaginal discharges due to other less serious infections. Therefore, simply because a woman has such a symptom does not mean that she has gonorrhea. Other symptoms in women tend to be mild, so much so that it is possible for a woman, even more so than a man, to be infected but not know it. But in either case, they can pass the disease on to a partner without being aware of it.

Gonorrhea is treatable with antibiotics, usually without lasting effects. However, it can lead to serious complications, including infertility (the inability to bear children), especially in women, if it spreads to other parts of the body and must be treated promptly.

Apply
→
Your → **KNOWLEDGE**

Why would women have a higher risk of getting gonorrhea than men? (Hint: Think back to what you learned in the previous section about STDs.)

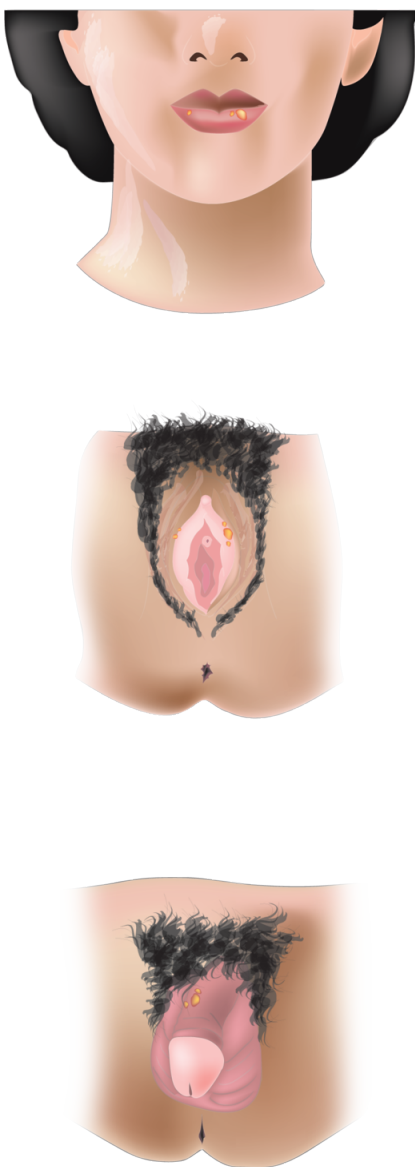


Figure 6.1 Sores caused by syphilis on the lips and genitals.

Chlamydia is the most common sexually transmitted disease in the United States and often occurs at the same time as gonorrhea. The symptoms of chlamydia are almost identical to the symptoms of gonorrhea for men-painful urination and discharge. Women suffer pain in the lower abdomen or during sexual intercourse. However, up to three out of four infected women have no symptoms. The same is true for some men, so they may unknowingly pass it on to their partner. Untreated, chlamydia and other infections cause **PID**, or pelvic inflammatory disease, among women. PID has many dangerous complications, including **sterility** (inability to reproduce).

Like gonorrhea, chlamydia can be successfully treated with antibiotics, but it is very important to get medical treatment as soon as symptoms appear so that complications are avoided.

The microorganism causing syphilis is actually not a bacterium but a corkscrew-shaped microorganism. Before the discovery of antibiotics, syphilis was the most serious STD. It caused very serious problems for a large number of people and could be fatal. But syphilis can now be treated successfully with antibiotics like penicillin.

The initial symptom of syphilis is a painless red sore that actually disappears in two to six weeks without treatment,

but this does not mean the person has gotten well. The sore usually appears on the genital organs. But it may also be present on the lips or wherever the bacteria entered the skin.

This primary stage of syphilis, if untreated, will develop into a more serious stage that includes a rash, sore throat, headaches, and nausea. If allowed to go untreated, syphilis affects the brain and other vital organs, eventually causing death.

STDs Caused by Viruses

Viruses have simpler structures and are much smaller than bacteria. They cannot be seen under an ordinary microscope. The most serious STD they cause is AIDS, or acquired immune deficiency syndrome, which will be discussed in the next section.

Genital herpes is caused by skin-to-skin contact and typically causes small, painful bumps or blisters that can develop into sores. They usually appear on the genital organs, resulting in painful urination and intercourse. It is more difficult for women to see the sores or blisters than it is for men. Currently, there is no complete cure for herpes. The sores can disappear and reappear after infection. Once infected the virus stays in the body.

There are medications that can reduce the chance of recurrence and can decrease the pain. When the lesions are not active there are no symptoms, so some people merely think of herpes as an inconvenience, although a constant part of a person's sexual life. A person infected with herpes will always be infected with herpes and must therefore take steps to protect against infecting someone else. Most important in this case is not to engage in sex or have physical contact when the blisters are present. At other times there is only a small chance of infection. Touching the blisters and the skin may in itself spread the virus without necessarily having any sexual activity.

Another viral STD is **genital warts**. These are growths in the skin that are familiar to a lot of people because they may be present on other parts of the body.

Genital warts grow on the genitalia. They are usually painless but may cause itching and irritation. There are various treatments for warts but as yet no way of comfortably getting rid of them. Like herpes, the virus that causes genital warts can be spread just by touching warts and then touching another part of the body.



Figure 6.2 Genital herpes blisters can be seen on the penis.



Figure 6.3 Genital warts occur around the female vagina.

Activity 6-2: STD Handshake

Introduction

When you have sex with someone, you are also being exposed to whatever that person's *other* sexual partners have come in contact with. It is important to remember that a person may carry an STD and still be symptom free. In this activity you see how one infected person can spread the disease to many other unsuspecting people.

Materials

- One index card per person for each round played

Procedure

Step 1 Your teacher will give you an index card. One index card has been marked on the back with an X. If your card has the X, **do not let anyone else know**.

Step 2 When your teacher says "Go," walk around the room and shake hands with five people. Whoever shakes hands with you will sign your card. Keep the signatures in order, and stop when you have five signatures.

Step 3 Your teacher will ask the person who had the X to step forward and will explain that this person was infected with an STD (such as AIDS or gonorrhea). That person will then slowly read the names of the five people that he or she had contact with. Those people have now been infected with the same virus.

Step 4 If your name is on the list, you will then step forward when your teacher calls on you. Read the names of those people that you shook hands with **AFTER** having contact with the infected person. In other words, read the names of those people who signed your card **AFTER** the person who infected you signed your card.

Step 5 Those people that you have called out have been infected too. Next, they will read the names of anyone that they had contact with **AFTER** being infected by you.

Step 6 All people who have been infected will take turns doing this until all infected people have been identified. Your name may be called more than once, but you only need to read your list the first time. The second time just

means that you were exposed again, but since you were already infected, it does not change the chain of people affected.

Step 7 Have all the infected people stand together on one side of the room. How many members of the class did the original person infect?

Step 8 Your teacher will give you a new set of index cards. One card will have an X, just like before. However, this time several cards will also be marked on the back with C + S. This stands for condom and spermicide and indicates that this person used precautions to reduce the risk of infection and pregnancy. Since no method other than abstinence can absolutely prevent infection, one card will be marked C + S failure, to indicate that although the person tried to prevent infection, he or she was unsuccessful. **Do not let anyone know how your card is marked.**

Step 9 Repeat the steps that you went through in the first round, shaking hands with five people and collecting their signatures.

Step 10 Identify the person with an X card and have that person read the list of people that he or she has infected.

Step 11 In turn, have the infected people read the names of those people that they had contact with AFTER being infected. If any of the people infected by the X card were wearing a condom and using a spermicide, they announce that they were NOT infected, and read the names of those people who were SAVED from infection by their actions. The person with the card marked C + S failure will announce that he or she is infected because the precautions failed. Everyone who came in contact with that person afterwards will be counted as infected, too.

Step 12 Keep track of those people who were infected. Keep track of those people who *would* have been infected but were saved from infection by using precautions. Remember that this includes anyone who would have been infected later on in the chain if effective precautions hadn't been taken. Compare the results of this round to the first one.

How would having a sexually transmitted disease affect your life and the lives of those around you?

Journal Writing

Review Questions

1. What are STDs and how do they spread?
2. What kinds of symptoms might lead a person to suspect an STD?
3. What is the general five-step procedure for treating STDs?
4. Dr. Brown offered Chris some important advice about avoiding STDs. What three pieces of advice were suggested?
5. What are two STDs caused by viruses?
6. How do you cure viral infections? How do you cure bacterial infections?

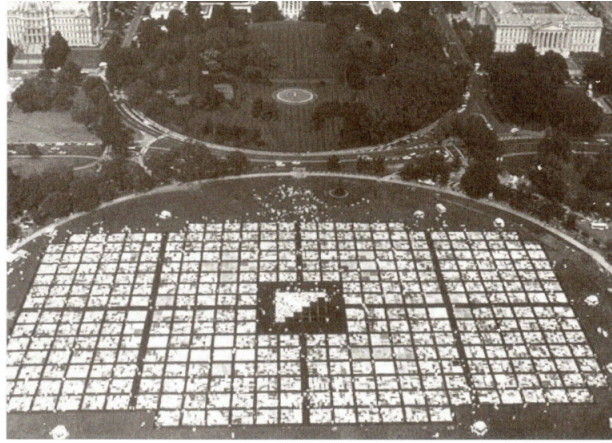
CHAPTER **8**

AIDS - Student Edition (Human Biology)

Chapter Outline

8.1 **AIDS**

8.1 AIDS



Aerial view of the AIDS Quilt in Washington, D.C.

How is AIDS spread? Can I hug a person with AIDS?

Acquired immune deficiency syndrome, or **AIDS**, is an STD caused by a virus called HIV (human immunodeficiency virus). It is the newest and most serious of all STDs. Given the tremendous amount of attention it has received in the public media (television, newspapers), chances are you have already heard quite a lot about it. HIV infection often presents no serious symptoms for the first three to eight years after infection. However, during this period, the virus can still be passed on to other people. In other words, a person with the HIV virus can infect another person without knowing it. This is why the disease has spread in the population like an **epidemic**.

“My life has been taken away. When I found out that I was HIV positive, the world caved in and I deeply regret what I did. But, now it’s too late for me, but I want to warn you. People can be so careless it makes me want to scream, ‘Don’t you people care about your lives?’ We have to realize that AIDS is everyone) disease, that everyone can get it, not only gays and lesbians.”

-8th grader

Cases of AIDS appeared about 1980. By 1998, 30 million people had been infected worldwide, the largest concentration being in Africa with 21 million. Currently there are about a million people infected with AIDS in the United States. It is estimated that by the year 2000, the United States will have over 1.5 million cases of AIDS. These figures will change, of course, if effective ways of treating AIDS become available. Death is typically caused by other infections, such as pneumonia and special types of cancer. Because the virus that causes AIDS destroys the body’s **immune system**, the body cannot fight other diseases. Since there is as yet no known cure, this frightening disease can only be fought through prevention. The only sure methods of prevention are abstinence and having sex only with a person who is not infected. There are some practices (like using condoms) that reduce, but do not eliminate, the risk. They make sex safer, but not entirely safe.



Mini-Activity

AIDS in the News Start a bulletin board about AIDS stories in newspapers and magazines. Highlight new developments in some way, such as making your own headlines for the bulletin board.

Caring for an AIDS patient can be very expensive, and many insurance companies refuse to cover AIDS infected patients. Who should pay for the care and treatment of AIDS patients? Is it fair that insurance companies refuse coverage to AIDS patients? Keep in mind that most AIDS patients die, usually within a few years of the onset of the full-blown disease, so medical interventions merely make a patient more comfortable. They do not provide a cure. Should financial assistance be limited to certain treatments?

What Do You Think?

The great majority, but not all persons infected with HIV, develop AIDS. About 5% of people infected with the virus do not develop AIDS for ten or more years. For some reason, the bodies of some people seem to be able to protect themselves.



Mini-Activity

What Do You Want to Know? Write down one to three questions you have about HIV and AIDS. Pass them in to your teacher (with or without your name) for a class discussion.

How Do You Know If a Person Has AIDS?

The various STDs you learned about have specific symptoms. AIDS does not. In fact, AIDS is not a single disease like the other STDs. Instead, its symptoms are those of whatever diseases have invaded the body because of the weakened immune system caused by the AIDS virus.

Nonetheless, there are some common conditions that many AIDS patients experience. For instance, early in the disease, the person may have flu-like symptoms (fever, chills, aches, and pains). However, most of the time, such symptoms are not caused by AIDS. Later in the disease, there is severe weight loss and weakness.

The diagnosis of AIDS is made by matching such symptoms with evidence that the person has been exposed to the AIDS virus. This is determined by a blood test. The test does not detect the virus directly but shows the presence of **antibodies** created by the body's immune system that have been formed against the AIDS virus. A positive test for AIDS shows that the person has been exposed to the virus-it does not mean that the person already has AIDS.

How Can You Get AIDS?

You can only get AIDS if any of the body fluids of a person who is infected with HIV enters your body. The three body fluids responsible for practically all known cases of AIDS infection are blood, semen, and, to a lesser extent, vaginal fluid (including menstrual blood).

AIDS is a worldwide epidemic, but no one knows for sure how bad the epidemic is because of how long it takes for the virus to become active in the body. Should everyone in the world be tested for HIV so that health officials can get a better idea of how widespread the disease is? What would the implications of universal testing be?

What Do You Think?

Infected blood is most often transmitted when people who inject drugs into their veins (**intravenously**) share dirty needles. This is usually done by drug addicts. Much less commonly, people who receive **transfusions**, or blood given to them for medical reasons, have received infected blood. Blood banks now screen blood for the virus, which greatly reduces the risk. No one can get AIDS by giving blood.

In addition to blood transfusions and intravenous drug use, the AIDS virus can be passed on by an infected mother to her unborn baby through the **placenta**, an organ in the uterus that allows the transfer of nutrients to and wastes from the developing fetus. A mother may also pass the virus to the baby through her infected milk during breastfeeding.

Society is often unkind to people, including children, who are known to have HIV. It is not uncommon for infected individuals to lose their jobs or be forced out of schools and neighborhoods.

Did You Know?

The AIDS virus is passed to another person sexually through infected semen or vaginal fluid. Infected semen can enter the body of the sexual partner through either anal or vaginal intercourse.

It is also important to know how AIDS is *not* transmitted. It is quite safe to interact with infected individuals socially, in everyday life (without sexual contact or exposure to their blood). Not a single case of AIDS has been shown to occur through casual contact, even among those who have lived in the same house with someone with AIDS. You do not get AIDS by shaking hands or hugging; from toilet seats or swimming pools; from eating in restaurants (even if the cook or the waiter has AIDS); from touching doorknobs, telephones, and so on.

“If I had known when I was sixteen what I know now,’ she says, ‘I’d have done everything in my power to avoid getting the virus even if it meant never having sex in my whole life. I mean that.’”

-Krista, 19, *Teens with AIDS Speak Out*,

Mary Kittredge, A Julian Messner Book

Who Gets AIDS?

The majority of AIDS cases in the United States and Europe are men (80%). AIDS cases are clustered in large cities (especially New York and San Francisco). Among males 48% get infected through homosexual sex, 23% through intravenous drug use, and 7% through heterosexual sex. Among women, heterosexual sex accounts for 40% and intravenous drug use 30%. In the United States, heterosexual transmission of AIDS outside of high-risk groups (bisexual men or drug addicts) has remained less common, although the numbers of these cases have been rising. But this situation may change. The worldwide pattern suggests that heterosexual transmission may become the predominant (most common) mode and women will account for increasing numbers of cases. Whether the United States will also show this pattern remains to be seen.

Apply
→ *Your* → **KNOWLEDGE**

What groups are at high risk for AIDS? What about their behavior makes them high risk?

There are new drugs like AZT that in combinations slow the growth of the virus in some patients but they do not entirely eliminate it.

Did You Know?

AIDS is caused by a virus, not by being a drug addict, being gay, engaging in anal intercourse, or anything else. Such factors merely increase the chances of getting the virus. This is important to keep in mind when we consider the problem of preventing AIDS.

So far, AIDS has not been a common condition among adolescents. However, its prevalence is increasing in this age group. It is also important to realize that young people who develop AIDS in their 20s may have been infected during their teenage years. This delay happens because it may take as many as 10 or more years after getting infected to become sick.

There are several reasons that put adolescents at considerable risk. Adolescents often do not take the risk of disease or pregnancy seriously, and they engage in unprotected sex at a higher rate than other groups. In addition, adolescents participate in other high-risk activities, such as drinking, which affect their judgment about sexual activity and intravenous drug use.

Activity 7-1: Dealing with AIDS

Introduction

AIDS is one of the most serious problems facing our society. It will become even more serious as it spreads among the adolescent population. Even if the disease does not touch your life directly, it will still affect you as a member of society as we try to take care of its victims and protect those not yet infected. If you were in a situation in which you had the authority to solve this problem what would you do?

Materials

- Activity Report

Procedure

Step 1 Your teacher will divide the class into four groups and give each group an Activity Report.

Step 2 All of the situations on this Activity Report are very real and very serious problems. There are no quick answers to them, so don't feel frustrated if you can't solve the problems.

Step 3 Your group will be assigned to role-play a group of people who must deal with one aspect of the AIDS epidemic.

Step 4 Your group will share your conclusions with the rest of the class.

A good family friend has just learned she has the AIDS virus but is not yet showing any symptoms. Your parents have invited her over for Thanksgiving. What are your thoughts and concerns? What questions do you have about her visit? About getting AIDS from her? Will it affect your relationship with her? How do you think she will want to have you deal with the fact that she has AIDS?

Journal Writing

Review Questions

1. What is the difference between AIDS and HIV?
2. How can you get AIDS? Give some examples.
3. How do you NOT get AIDS?
4. Respond to the following statements with either true or false:
 - a. Heterosexuals are not at risk for AIDS.
 - b. AIDS is not caused by being a drug addict, being gay, or engaging in anal intercourse.
 - c. Teenagers aren't at risk for AIDS.
5. How can you protect yourself from the AIDS virus?

CHAPTER **9**

Sexual Morality - Student Edition (Human Biology)

Chapter Outline

9.1 SEXUAL MORALITY

9.1 Sexual Morality



What makes sex right or wrong?

Our **moral beliefs** strongly influence the decisions we make. They tell us what is right or wrong in how we behave.

Moral or ethical principles are of two kinds-absolute and relative. **Absolute moral beliefs** do not change and will remain constant no matter what the situation. For instance, one of the Ten Commandments in the Bible says, “You shall not commit adultery.” This means a married person should not have sexual intercourse with someone other than his or her spouse. To a person who follows strictly the teachings of the Bible, this statement is an absolute moral judgment because it tells you how you should behave no matter what the circumstances.



Mini-Activity

Absolute or Relative? Both approaches to morality, absolute versus relative, have their advantages and disadvantages. Describe five pros and five cons for each approach, and discuss them with the class.

Relative moral principles refer to beliefs that don’t judge behavior as such, but look at it in the light of circumstances. For instance, whether or not a sexual behavior is motivated by love is considered more important than what the behavior consists of. In the case of adultery just described, the circumstances under which it occurred would be taken into account by someone with relative moral beliefs.

People often disagree in their views of various sexual behaviors as right or wrong because some use absolute rules and others go by relative rules of morality.

Other disagreements over moral standards arise because people cannot always agree on the source of moral wisdom. For example, Christians base their beliefs on what the Bible says about many issues. But even among Christians there may be different interpretations of what a particular Biblical passage means.

Similarly, if you are going to follow a rule of relative morality, what should be the deciding principle? For example, with regard to premarital sex, what are the conditions that make it right or wrong? Being in love? Mutual consent? Something else? As a result, moral decisions are not easy, but they are still essential. You must sooner or later decide what is right for you.

Apply *Your* → KNOWLEDGE

What kind of moral beliefs (absolute or relative) are most closely related to cultural/societal beliefs-beliefs of society as a whole?

Through much of human history, most moral principles have been based on religion. Religious morality means that the religion and its teachings directly define moral principles. Individuals may belong to one religion or another and each has its own set of religious moral teachings to guide behavior.

Are most of your beliefs absolute or relative? Can you think of some beliefs that fit under each category?

What Do You Think?

Most Americans are Christian, but many Americans belong to other religions, such as Judaism, Islam, Hinduism, or Buddhism. And some belong to no religion (or do not practice their religion). As a nation, the United States has no official religion. American moral values can therefore be either religious or secular (not specifically religious) depending on the individual. Many secular, or nonreligious, values are quite similar to religious values. For example, to respect the rights of others is a value held both by religious codes of morality as well as secular codes of morality.



Mini- Activity

Debate! There should be one age, nationwide, at which young adults assume the following adult responsibilities (instead of the varied state and federally determined ages).

- driver's license
- vote
- military draft
- drinking
- informed consent

When making choices about sexual behavior, each of us is ultimately responsible for his or her own decisions and his or her own actions. It feels almost unfair to have to be so responsible when there are so many different things to consider. Biology drives us from the inside. Society pulls us and pushes us from the outside. Doctors say, "Don't do this, it's not healthy." Ministers say, "Don't do that, it's not right." The law says, "Don't do this, it's not legal." But then our friends may say, "Why not? Do it!" To whom do you listen? And what do you do?

As we discussed before, your own moral judgments should play a big part in deciding your sexual practices. In addition to your personal belief system, you also need to consider two other issues:

1. Is what I want to do legal?
2. Is what I want to do healthy?

Whom do you look to for moral guidance?

What Do You Think?

Many laws about sexual behaviors exist to protect women and children from harmful sex or coercion. Sex is not legal unless both partners willingly give their informed consent. There are two parts to this. First, a person should be clearly saying yes and doing so freely. A person should not be under pressure to say yes (such as when somebody is holding a knife to a person's neck). Second, a person's consent must be informed. That is, a person should understand

what he or she is saying yes to. If a person is too young or drunk, they are not in a position to give informed consent. The law typically defines anyone under the age of 18 as unable to give informed consent, although the exact age may vary from state to state. Therefore, sex with a child is illegal, even if the child does not object. Also, if someone is coerced, or their consent is only given because of threat or Violence, the sexual behavior is also illegal.



Mini-Activity

Sexuality Puzzle Design a heart-shaped puzzle with as many pieces as you want. However, each piece should represent a source of influence on your sexual behavior. The size of each piece may vary to reflect the amount of influence the piece has on your sexual behavior.

Laws are based on principles, such as equality and freedom. In sexual relationships, this means to respect the feelings and rights of sexual partners and to treat them as you would want them to treat you. Coercion, for example, does not fit with the moral ideals of equality and freedom, and it is also considered illegal. However, unlike morals, laws are very specific and exact. Morality often expresses general principles, and you can use your own judgment in applying those principles. The law, however, does not accept your personal decisions but defines behavior as lawful or unlawful.

In terms of healthy sexual decisions, the goal is to behave in ways that do not make us sick or endanger the health of our sexual partners. One reason there are so many sexually transmitted diseases is that people behave sexually in unhealthy and risky ways. Knowledge, access to health services, and good judgment all contribute to healthy sexual decisions.



Mini-Activity

Decision-Making Practice Identify (or create) a decision you must make. Write out responses to the six-step decision process described on this page.

Every person possibly faces a number of sexual decisions: whether or not to have sexual intercourse; with whom, and at what age; whether to use contraception or not and what kind. In making these decisions about your sexual behavior, you can use a six-step decision process:

1. Identify and gather information about the nature of your decision.
2. Identify possible options.
3. Describe the consequences of each option.
4. Choose an option.
5. Communicate and implement your decision.
6. Evaluate your decision.

In applying each step of this process, you consider moral issues (what you believe in, what your religious teachings tell you), legal issues (what you are allowed to do or not), and health issues (the physical and psychological consequences of your actions). In order to make a decision that responds to all of these aspects, you need information about morality, about legal issues, and about your health.

Apply
→
Your → **KNOWLEDGE**

For the following statements, decide if the person has made the decisions for legal reasons, health reasons, absolute moral reasons, or relative moral reasons, or for more than one reason.

1. I'm not going to have sex with him because he won't wear a condom and I don't want to run the risk of getting an STD.
2. I will never have sex before I'm married.
3. I would love to have sex with her, but we're both under 16 years old.
4. I never thought I'd have sex before I was married, but I love her so much, and I know that we care so much about one another, so I feel that it's right.
5. I won't have sex because I can't take the risk of getting pregnant, and no contraceptive method is 100% effective.
6. I've always thought it would be OK to have sex if I loved the person, but in this relationship I just don't feel right about it.

*Apply
Your* → KNOWLEDGE

- Where would you get more information about morality and sexuality?
- Where would you be able to get more information about legal issues?
- Where would you be able to get more information about health and physical consequences of sexual behavior?

Activity 8-1: Deciding for Yourself

Introduction

Sometimes a person may think about becoming sexually active but feel that it is not the right time. Most people want to be responsible. Most want to do the right thing. But biology drives us from the inside. Society pulls us and pushes us from the outside. Doctors say, "Don't do this, it's not healthy." Ministers say, "Don't do that, it's not right." The law says, "Don't do this, it's not legal." But our friends may say, "Why not? Do it!" To whom do you listen? And what do you do?

Materials

- Activity Report

Procedure

Step 1 Your teacher will divide the class into groups and give each group an Activity Report.

Step 2 Let's assume that an adolescent is trying to choose between abstinence and becoming sexually active. There are three things one should consider in making this choice:


- Is it moral?
- Is it legal?
- Is it healthy?

Step 3 Your group will consider how this adolescent can make the best decision based on the pros and cons of these three points of view:

- marriage-based view

- love-based view
- pleasure-based view

Write a letter to an adult (parent, trusted adult, religious official) expressing your moral beliefs. If there are questions or concerns you still have not resolved for yourself, ask them for advice.

 Journal Writing

Review Questions

1. What is the difference between absolute and relative beliefs?
2. How are moral beliefs and religious beliefs linked?
3. What three questions do you need to consider when determining your own sexual practices?
4. What factors contribute to healthy sexual behavior?
5. What are the elements of good decision making?

CHAPTER **10** **Sexuality Making Decisions**
- Student Edition (Human Biology)

Chapter Outline

10.1 MAKING DECISIONS

10.1 Making Decisions



Discussion often helps effective decision making.

Making Decisions

People may disagree about many aspects of sexual behavior. But most agree that doing something that brings harm to self and others is irresponsible and not very smart. How can a sexually active person avoid the risk of doing harm? What sort of chances, if any, should one take?

OR



Mini-Activity

Risk Go to a word source book and look up *risk*. What kinds of risk exist in your life today and how would you categorize them? Make a risk chart and discuss them with the class.

Sample Risk Charts

Low: Play cards

Medium: Ride bike to school through traffic

High: Like to inline skate and snowboard

Mental: Fear of school failure

Physical: Sports (fear of injury)

Financial: Loaning someone \$20

Consider how you and your friends behave in general when engaging in activities that carry some risk of injury. The abstainers play it safest and they avoid the activity altogether. The cautious take some chances but are careful about it. The reckless throw caution to the wind and plunge in. The same approaches would apply to sexual behavior. However, with sex, abstainers can still be involved in fulfilling intimate relationships, without crossing the line as the cautious and reckless do.

As we discussed earlier in connection with contraception, abstinence is the one absolutely certain way to avoid catching an STD. An equally effective way is to be in a monogamous relationship where two partners, who are free of STDs to begin with, engage in sex with each other only and can be trusted to be true to one another. All other sexual interactions carry some measures of risk of catching an STD.

What kinds of jobs involve risk taking on a daily basis? Can you think of some examples?

What Do You Think?

You can look at behaviors according to the person's desire for taking chances, or his or her **risk-taking behavior**. Risk refers to the **probability**, or chance, of loss or injury; the level of risk can vary with the type of activity. Probability is not the same as certainty. If you drive a car at 80 miles per hour, you have a greater chance of getting in an accident than if you drive at 30 miles per hour. On any given occasion, it is possible (though less likely) that the person driving more slowly will get into an accident and the other person will not. However, the longer these two people go on behaving this way, the more likely it is that the odds will catch up with the higher-risk behavior.

When you think about it, everything you do carries some element of risk. Think of behaviors as if they are listed on a risk spectrum. At one end are behaviors with virtually no risk. At the other end are those behaviors that are extremely risky. What differentiates high-risk behavior from low-risk behavior? What one element allows you to sort behaviors according to risk?

What Do You Think?

Risk-taking behavior is closely tied to the costs and benefits of a given activity. The more desirable the activity, the higher the risks people are likely to take. And the higher the costs (negative aspects), the less likely it is that they will take a chance. So the following questions can be asked when deciding whether or not to try a behavior-What is to be gained? What is the cost? What is the risk? Is it worth it?

There are many ways of taking chances in sexual interactions. Two of the most important ones are unwanted pregnancy and STDs. In Activity 9.1 you will explore how these three potential risks have similarities or differences from each other.

Let's now apply the idea of risk taking to sexual behavior with regard to a specific danger. We'll apply the idea of risk taking to the most serious one-AIDS. Figure 9.1 summarizes the more important factors involved in the three basic approaches we discussed above-taking no risks, lower risks, and higher risks.

The "no risk" group is virtually safe from ever getting AIDS. These people either abstain from sexual intercourse (vaginal or anal) or engage in it only with the same partner (with neither of them being infected to begin with). Also, they do not use IV (intravenous) drugs.

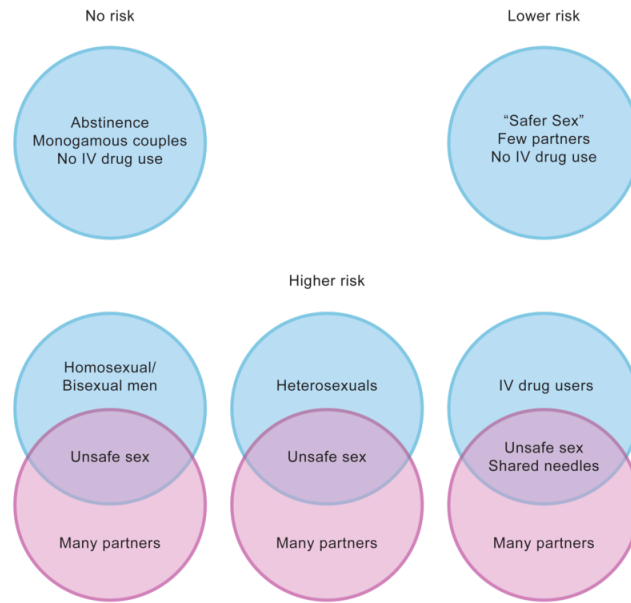


Figure 9.1 Levels of risk for AIDS. The shaded area indicates the highest-risk groups.

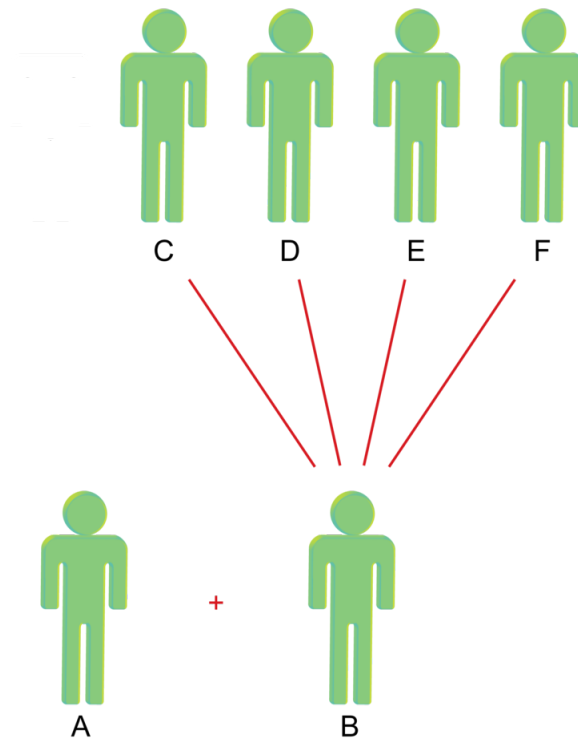


Figure 9.2 Person B has had sex with persons C, D, E, and F. If person A decides to have sex with B, it will be as if A is having sex with C, D, E, and F as well from a health perspective. If B does not tell A about past sexual contacts, A will not even know that B has been exposed to other sexual partners and is therefore at risk.

The “lower risk” group is at some risk hut less so than the “higher risk” group. These people engage in safer sex by using condoms, are involved only with a few partners, and use no IV drugs.

The “higher risk” group takes bigger chances in one of three ways. They engage in unsafe sex; they have many partners; or they share needles when they use IV drugs. The shaded area in each carries the greatest risk. But the

risks within these three groups also vary. Sharing infected needles is usually most dangerous because blood-to-blood transmission of the virus is the most direct.

Another important aspect of the “higher-risk” group is the danger to sex partners. You may not use IV drugs nor have multiple partners yourself, but if you have sex with someone who has had many partners or uses IV drugs, it is as if you were doing these things yourself. Most women in this country who get AIDS do so by having sex with infected bisexual men or drug users. Here is a good reminder to think of. Every time you have sex with someone, you also are indirectly having sex with all of the past and present partners of your partner (Figure 9.2).

Safer Sex

As far as STDs are concerned, the only forms of absolutely safe sex are abstinence or engaging in sex with an uninfected partner. But the popular use of the words safe sex today means having sex without the exchange of bodily fluids, typically through the use of condoms. It’s more correct to use the words *safer* sex to avoid giving the impression that such sexual practices are perfectly safe; *they are not*. But they are safer than unprotected, unsafe sex.

One important rule to remember is that who someone has sex with is more important than what they do. If neither partner is infected, neither person will get infected no matter what they do. But if one partner is infected, then what they do becomes very important.

The safer behaviors include masturbating, caressing, hugging, massage, and dry kissing with a partner. Rather than focusing on intercourse as the “goal” or the ultimate in sexual expression, the concept of “safer sex” has broadened the idea of sexual expression for people, allowing sensuality and intimacy to be more fully explored. One should be aware, however, that getting heavily engaged in such activities has the risk of getting carried away, and it may be difficult to stop short of sexual intercourse.

The second alternative in safer sex is not to exclude sexual behaviors like intercourse but to protect yourself from exposure to bodily fluids, namely semen and vaginal secretions. This basically means using condoms, which stop semen from entering the sexual partner’s body and protects the penis from being exposed to infected areas of the body. The use of spermicides (chemical contraceptives that kill sperm) during vaginal intercourse is an added protection (but not a substitute for condom use). The first alternative (avoiding certain sexual activities) is safer than the second alternative (using condoms). It is impossible to say exactly how safe “safer sex” is, in general. Much depends on other factors—who your partner is, how many partners you have, what you do, how often, and so on.

We discussed earlier how drugs and alcohol create high-risk situations leading to coercion or sexual abuse. Drugs and alcohol can also create high-risk situations in terms of sexually transmitted diseases. There are three main reasons to avoid drugs and alcohol in terms of sexual health, although they are not considered a direct cause of sexually transmitted diseases.

1. Safer sex and prevention require planning and communication, both of which are impaired by drugs and alcohol. Decision making and judgment are affected by drugs and alcohol.
2. Furthermore, alcohol, marijuana, speed, and other drugs may weaken the immune system. Therefore, these drugs can increase a person’s vulnerability to STDs. There are no medications that can kill a viral infection, so the immune system is the only way to fight them.
3. Lastly, some drugs are taken intravenously, or with a needle. Sharing intravenous needles creates a very high risk of transmitting an STD, particularly AIDS.

Figure 9.1 focuses on AIDS, but it could easily be modified to apply to the other STDs. If you eliminate IV drug users from the “higher risk” category and combine the areas for homosexuals and heterosexuals who have many partners, it will be a good model for any of the STDs other than AIDS.

Would this model also work for sexual coercion? Let us see if you can find out.

Activity 9-1: Risk Taking and Sexual Coercion

Introduction

Having sex is no game. It is not a matter of who wins or loses. Yet, how many times have you heard the term, he or she scored? Do you know if you are playing by the same rules as your date? Unwittingly, some people become victims of sexual coercion because they did not know that they were in a high-risk situation. Can you recognize high-risk situations? Are you a potential victim?

Materials

- Activity Report

Procedure

Step 1 Your teacher will divide the class into three groups and give each group an Activity Report.

Step 2 This activity asks if you can apply the STD model of risk taking to sexual coercion? What makes up no-risk, low-risk, and high-risk behavior? Knowing this information might save you from becoming a victim.

Step 3 Each group will respond to the questions and report their conclusions to the class.

“I really don’t know. Maybe it’s [sex] right and maybe its wrong but the way I feel, it’s too important to be just doing without thinking about.”

-Gloria, in *Fast Sam, Cool Clyde, and Stuff*

Walter Dean Myers

Pregnancy and STDs are only some of the dangers facing adolescents. Other problems like alcohol, drugs, and accidents also affect adolescents. All potential risks make adolescence seem like a dangerous period of life. This may be true for many young people, but it need not be for you. Understanding why adolescents are at higher risk for these problems will help you to protect yourself.

Psychologists claim that some of the ways adolescents think and feel make them particularly vulnerable to taking risks, often without realizing that they are doing this. Five tendencies common to adolescence lead to increased vulnerability.

1. **Feeling invulnerable:** Most adolescents are quite aware of the dangers to their well being, yet they often feel that although something bad may happen to others, it will not happen to them (“It can’t happen to me.”). Until the problem happens to a friend, relative, or someone they know, they are not likely to see its immediate danger to themselves.
2. **Concrete thinking in the present:** Adolescents live mostly in the present. They have no problem in perceiving the immediate and **concrete** consequences of an action, such as when a car hits you and you break a leg. However, adolescents have more trouble thinking about the **abstract** and future consequences of present behavior. For instance, it is easier for them to avoid touching someone with a rash so as not to get infected and harder to visualize how a virus (which they’ll never see) will kill them in 10 years (“Who knows what will happen in the future?”).
3. **Peer pressure:** As we have discussed before, adolescents are more likely to do things because of what their friends and peers are doing. They want to be accepted by them as one of them. They also feel there is security in numbers (“If everyone is doing it, then it must be all right.”).
4. **Wrong health beliefs:** Adolescents are handicapped by their lack of information about many aspects of pregnancy, STDs (“If I don’t have orgasm I won’t get infected.”) and other behavior consequences. Adolescents also think of illness as the absence of health, so if they are not feeling sick, they feel they must be well. The idea that they may be the carrier of a virus is hard to accept.

5. **Denial:** When faced with unpleasant or threatening situations, people tend to deny the problems they face, or to act as if the problems are not there. Adolescents may be more apt to do this than adults. The person becomes so overwhelmed that he or she cannot cope with it. A girl misses period after period and her abdomen begins to swell; yet she refuses to face the fact of her pregnancy. A boy develops a discharge from his penis yet he goes on believing all is going to be fine (“I am O.K. It will go away.”).

To some extent, all adolescents, indeed adults as well, use these strategies in coping with the problems in their lives. It is only when these approaches are used excessively or uncritically that situations get out of hand.

Write a letter to the editor of your school newspaper about risk taking. What kinds of risks should youth take? What kinds shouldn't they take?

Journal Writing

Perhaps adolescents cannot be expected to behave with the caution and foresight of adults. Daring is part of the joy of being young. Yet unless these potential dangers are understood and brought under control, the joy of being young will not last. Enjoying the phase of life you are in, with its problems, is the challenge for all of us, young and old.

Putting Sex in Perspective

Growing up and maturing can help people better understand and make decisions about their sexual behavior. At the right time, with the right person, for the right reasons, sex is a very safe activity, but in practical terms, sex always involves some risks to your health, to your feelings, to your relationships, and to your future. No one can play it entirely safe, but no one needs to play with danger. The experience of sex, its meaning and importance, changes through life. So in each period of life, one needs to put sex in its proper place. Sex does not exist by itself but always in relation to other people or other aspects of one's life. Thus, in order to keep sex in a proper balance with other issues of our lives, we must always keep sex in perspective-what it was, what it is, what it is not, and what it is likely to become. As you progress through life, the significance and importance of sex will change for you. There will be times and situations that sexual relationships will be completely healthy and completely appropriate, other times they will not.

As you make decisions about your sexual behavior now, remember that it is not a closed issue. If you decide not to have sex in a specific relationship, or at this particular time of your life, you are not taking a vow of chastity forever. Instead, you are making a decision based on all current factors in your life. But sexual decision-making is part of an ongoing process, and your concerns and your decisions will change throughout life.

Activity 9-2: Sexuality in the Life of Four Couples

Introduction

As difficult as it may seem, you are here today because your biological parents had sexual intercourse together. Sometimes young people have the mistaken impression that love and sex were invented for them only and adults who hug, kiss, and show physical affection for each other are acting strange. What should a couple's relationship be like as they grow older? Should sex be a part of it? Should their sexual experience be the same or different from that of younger people?

Materials

- Activity Report

Procedure

Step 1 Your teacher will divide the class into small groups and give each group an Activity Report.

Step 2 Each group will consider the sexual relationship of a couple in a specific age group. These broad headings will be considered:

- Define their relationship.
- Should sex be a part of it?
- In what ways is their sexual relationship the same and in what ways different?
- What biological, psychological, social, and moral functions are served?

Choose one role model and write a paragraph about each of the above.



Role Models Who are your role models? What do they tell you about the following?

- sexual behavior
- sexuality
- risk
- morality
- friends/peers

The meaning of sex is different at different times in your life cycle. In childhood, sex takes the form of play or solitary exploration. Through adolescence, a stronger drive develops, and sex may continue to be explored alone, or with a partner. During adolescence, sexuality may be meaningful as a personal discovery process about the body and its drives, it may be meaningful as an expression of strong emotion and affection, it may be meaningful because of social acceptance or rejection, and other reasons. In young adulthood, sexuality becomes an important part of married and other committed relationships. It may be meaningful for the expression of love, for reproduction, or for intimacy. In mid-life or older years, sex still remains a rewarding part of relations and intimacy, but it usually has no reproductive intent or consequence. The meaning of sex and its personal significance to your life changes dramatically throughout your life cycle, and is dependent upon your biological, emotional, and social changes. As discussed previously, the point along this continuum at which you decide to engage in sex or abstain depends upon a wide variety of factors.

How would you assess your risk-taking behavior? Are there some things you do take risks for and others not? How would others assess your risk-taking profile?

Journal Writing

Your sexual life is only one part of the many complex, fulfilling, engaging, productive aspects of your life. Sex is an important part of life for most people, but it should be kept in perspective.

Review Questions

1. What questions might you ask yourself when assessing the potential risk of a behavior?

2. To what two general concepts does the term safer sex refer?
3. Name three ways in which drugs and alcohol affect sexual health.
4. What five factors make adolescents particularly vulnerable to high-risk behavior and its consequences?
5. Identify the possible stages in a person's sexual life. What is the purpose and meaning of sexual behavior in these various stages of life?
 - Childhood
 - Adolescence
 - Young adulthood
 - Mid-life
 - Older years

CHAPTER

11

Sexuality Glossary - Student Edition (Human Biology)

Chapter Outline

11.1 SEXUALITY GLOSSARY

11.1 Sexuality Glossary

absolute moral beliefs

beliefs that do not change and will remain constant no matter what the situation.

abstain

to refrain from an activity by one's own choice.

abstract

difficult to understand.

adolescence

the period of life from puberty to maturity.

AIDS

(acquired immune deficiency syndrome) an STD caused by a virus called HIV (human immunodeficiency virus). AIDS is the newest and most serious of all STDs.

antibodies

chemicals in the body produced by the body's immune system to fight foreign objects such as bacteria and viruses.

bodily fluids

fluids that are produced by various organs.

carrier

a person infected with a disease who is not sick, or does not show symptoms, but can pass the disease on to someone else.

child sexual abuse

when an adult or adolescent sexually interacts with a child in any way. To protect children, such acts are severely punished.

chlamydia

the most common sexually transmitted disease in the United States, that often occurs at the same time as gonorrhea.

coercion

psychological pressure or the threat and use of physical force, in which case it becomes rape, to obtain sex.

commitment

a part of love that is more a thought process than an emotion, involving a decision to love someone, and to make a firm promise to remain loyal to that person.

companionate love

a type of love that is high in intimacy and commitment, but lower in passion than some other types of love.

compliance

doing whatever your spouse, lover, or friend asks of you regardless of your feelings.

compromise

a situation in which neither person gets everything he or she wants, but both get enough of what they want to accept the outcome.

concrete

something real.

consummate love

a form of love that combines all three elements-intimacy, passion, and commitment.

cooperation

people working together towards the same goal.

cultural factors

factors dealing with shared attitudes and values of a social group.

date rape

rape that occurs between two people who know each other or are friends.

diagnose

to name an illness, disease, or infection.

ejaculation

a discharge of semen from the penis.

epidemic

an outbreak of a disease.

erection

the hardening and enlarging of a penis caused by increased blood flow into the penis.

erotic cues

seeing, hearing, touching, or smelling something that arouses us sexually. Such sources of stimulation act as sexual triggers that “turn us on.”

estrus

a period of sexual attractiveness and responsiveness in the female animal that coincides with ovulation, or the release of an egg from the ovary, which is caused by the increased levels of female sex hormones.

genital herpes

blisters that can develop into sores usually appearing on the genital organs, caused by skin-to-skin contact.

genital warts

a viral STD that appear as growths in the skin on the genitalia.

gonorrhea

a sexually transmitted disease caused by bacteria, passed through intimate contact like intercourse.

heterosexual orientation

being romantically or sexually attracted to members of the opposite sex.

homosexual orientation

being romantically or sexually attracted to members of the same sex.

identity

our sense of who we are.

immune system

the body system that fights diseases.

incest

sexual interaction between members of the same family, such as a brother, sister, stepfather, aunt, uncle, grandparent, parent, or some other relation.

informed consent

an agreement based upon a true understanding of the situation.

intravenously

injecting a substance into veins.

masturbation

self-stimulation of the genitals.

microorganisms

relatively simple living organisms that are too small to be seen by the naked eye, typically bacteria or viruses.

moral beliefs

personal beliefs that tell us what is right or wrong in how we behave and strongly influence the decisions we make.

nocturnal orgasm

sexual excitement during dreams that leads to orgasm. (Nocturnal means nighttime.)

orgasm

the climax of sexual excitement.

passion

being sexually attracted to someone.

peer culture

behaviors and preferences of a group, such as ideas, ways of dressing and talking, as well as favorite music, food, and sports.

peer pressure

a powerful force placed on individuals by their peers. This force often works in very positive ways, but can also create a lot of anxiety. It can make you want to be someone you are not.

peers

friends and classmates in your own age group.

PID

(pelvic inflammatory disease) a disease among women that can cause sterility.

placenta

an organ in the uterus that allows the transfer of nutrients to and wastes from the developing fetus.

predominant

most common.

prevention

the act of keeping something from happening.

prostitution

the exchange of money or gifts for sex.

psychological factors

factors having to do with thoughts and feelings.

rape

the most extreme form of coercion that involves the threat or the actual use of violence to force another person into a sexual interaction.

relative moral principles

beliefs that don't judge behavior as such, but look at it in the light of circumstances.

secondary sexual characteristics

characteristics associated with puberty such as breast development among girls and facial hair and the changing of the voice among boys.

seduction

an act in which one person arouses sexual interest in another by various means. It may involve expressions of admiration and affection, or sweet talking the partner into sex. Creating a romantic or erotic atmosphere (by music, soft lights, sexy clothing, and so on) may also be a part of the attempt to stimulate sexual arousal.

semen

whitish fluid of the male reproductive tract consisting of sperm.

sexual abuse

sexual exploitation of an individual. The most serious and damaging form of abuse is the sexual exploitation of children by adults, especially close relatives.

sexual dreams

a form of fantasy that occurs during sleep.

sexual drive

a drive motivates or directs an individual towards a specific goal. Thus, the sexual drive pushes or pulls us to become sexually interested and seek sexual fulfillment.

sexual fantasy

quick sexual thoughts that cross your mind or long drawn-out erotic daydreams.

sexual harassment

expressions of sexual interest that are unwanted or inappropriate, or that make one feel uncomfortable, offended, or threatened.

sexual identity

a sense of who you are sexually.

sexual intercourse

the moving of the penis in and out of the vagina.

sexual intimacy

one part of love that involves being close to a person and sharing private thoughts and feelings.

sexually transmitted diseases

(STDs) illnesses that are spread from one person to another through intimate sexual contact.

skin lesions

open sores on the skin.

socialization

becoming part of society by observing others' behaviors and values, learning about acceptable behaviors, ways of dressing, relationships, and determining where you fit into society.

solitary

alone or by oneself.

spermicides

a chemical used as a method of contraception, killing the sperm by breaking up the cell wall.

statutory rape

taking sexual advantage of a person who is not able to give consent, such as a person who is legally not yet an adult, a person who is mentally handicapped, or a person who is drunk and not in a position to make a choice.

sterility

inability to reproduce.

transfusions

blood given to someone for medical reasons.

vaginal lubrication

the process in which the inside of the vagina becomes wet as a result of becoming sexually aroused.

viruses

microorganisms that cannot be seen under an ordinary microscope.