

# Healthy Sexuality

Richard Blonna & Jean Levitan

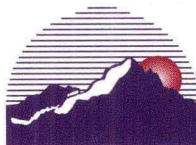




# *Healthy Sexuality*

Richard Blonna, Ed.D, CHES  
William Paterson University

Jean Levitan, Ph.D.  
William Paterson University



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## Book Team

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Managing Editor: Ruth Horton  
Editorial Assistant: Dona Mendoza  
Production Manager: Joanne Saliger, Ash Street Typecrafters, Inc.  
Illustrator: Kevin Kertz  
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# Preface

As an introductory text in human sexuality, *Healthy Sexuality* is based on the fundamental information and concepts that have evolved from the body of research in this field. We firmly believe in a psychosocial model of human sexuality. In this view, humans become sexual beings and evolve as a result of a continual interaction between biological and psychosocial forces.

We also believe that human sexuality is intimately tied to overall health and wellness. *Healthy Sexuality* examines how the components of wellness — physical, intellectual, emotional, social, spiritual, and environmental — influence sexual health. The book points out how the healthy expression of sexuality can improve one's level of health and well-being.

Essential to being healthy, people have to come to grips with themselves as human beings, to make sound sexual decisions and self-actualize their sexual selves. Although we do cover sexual health concerns and risks (unintended pregnancy, STDs, date rape, and so on), *Healthy Sexuality* takes a pro-sex rather than a problem-oriented approach to sexual issues.

*Healthy Sexuality* is intended to be practical and usable. Unlike some of the dry, technical introductory books in the field, readers will find this one to be friendly and enjoyable to read. We hope to engage the reader in this topic as the fascinating, relevant subject it truly is.

## Features of the Text

- To orient the reader to the content of each chapter, a brief outline of the **Major Topics** is presented on the chapter introductory page.
- Also on the chapter opening page is a set of **Student Learning Objectives** to put the chapter's content into a meaningful framework.
- Throughout the text, **Key Terms** are highlighted and defined to clarify the content and give the student easy access to the meanings of vocabulary essential to their understanding.
- The **Health Hints** within each chapter are practical, step-by-step suggestions for achieving optimal sexual health and well-being related to the accompanying discussion.
- The **Perspectives** scattered throughout the text present unusual, interesting, and sometimes controversial material related to the discussion. They add interest and expand upon the basic topic.
- **Critical Thinking** features call the reader's mind into play, bringing up questions that readers have to answer for themselves. These questions have no right or wrong answers; they are an exercise in mental gymnastics — and represent possible topics for the instructor to consider for group discussion.
- Each chapter includes several **Case Studies**, bringing the book to life through real situations. Most of these are taken from the authors' own files. Although the names have been changed, the cases are authentic and point out dilemmas for which the counselees have sought professional assistance.



- Each chapter concludes with a **Wellness Synthesis**, tying the chapter content to the six dimensions of health and wellness — physical, intellectual, emotional, social, spiritual, and environmental.
- The **Student Study Questions** at the end of the chapter offer readers an opportunity to ask themselves what they have learned and to reinforce this knowledge by putting it in written form.
- To further personalize learning, the **Student Assessment** in each chapter is a tool by which readers can apply what they have learned to their own lives — and thereby improve their health and well-being.
- **World Wide Web sites**, with annotations, at the end of the chapter direct the reader to further, specific information related to the chapter topic. These entries are current and have been verified for authenticity.
- The **Note System** of documentation is used in preference to the tedious author/date citation method, which detracts from readability. This results in a more reader-friendly book while retaining the source data to which the reader may wish to refer.
- In the spirit of **diversity**, we have included information relative to differences between races and ethnic groups, as in the most current data generated by the Centers for Disease Control. We use the federally sanctioned usage in referring to these groups.
- We integrate issues of **sexual orientation** throughout the book wherever appropriate rather than presenting this as a stand-alone topic in a single chapter. In this way, we hope to project the view of sexual orientation as a mainstream issue rather than a separate topic.
- We incorporate data to support the textual presentation through **illustrative tables and figures** from the most current sources available, complemented by the classic studies by Kinsey, Masters and Johnson, Laumann and colleagues, and other respected researchers in this field.
- The judicious use of **photographs** illustrates important information under the principle that a picture is worth a thousand words.
- At the end of the book you will find a **Glossary** of the important terminology used in the book, along with a concise, clear definition of each term.
- A **Select Bibliography** lists the most important references underlying the book's development. It is not intended to include every resource we used but, rather, to highlight the sources of which the reader should be most aware pertaining to the field of human sexuality and related issues.
- An **Appendix** listing current resources to which the reader may refer for further information or assistance.

### Ancillaries

To assist the instructor in presenting the course in an interesting and comprehensive way and for the student to get the most out of the class, the following ancillaries are provided without charge to qualified adopters. All are incorporated on one CD-ROM for easy access in Windows and Macintosh.

- An *Instructor Manual* contains the following information for each chapter:
  - Detailed outline of the text

- Suggested activities
- Quizzes
- Black-and-white pointer transparency masters
- WorldWideWeb sites
- *Microtest*, a computerized testbank with the following features:
  - More than 800 multiple-choice, true/false, and essay questions
  - Capability to add or edit test questions in any format
  - Explanations for why a question is true, false, correct, or incorrect
  - Ability to save and recall previously generated test to create a new version of the test, as the multiple-choice answers will rotate each time a test is printed
  - Allows tests to be generated using a LaserJet printer
  - Available in Windows and Macintosh
- Overhead color transparency masters of the book's most important graphics to facilitate class instruction and assist in explaining key concepts (within the Instructor Manual).
- Image Bank and PowerPoint presentation on CD-ROM:
  - Available in Windows and Macintosh
  - Includes PowerPoint viewer on CD-ROM, which allows instructors to use without PowerPoint program
  - Enables instructors who have PowerPoint to edit presentation to fit their lecture
  - Allows the instructor to go back to past chapters and to start at any chapter

## Student Supplement

- *Student Interactive Study Guide*, to help the student study for tests and retain information learned in the course.
  - A fun CD-ROM to reinforce the content of each chapter
  - Key terms matched to the description
  - Review of chapter objectives
  - Quizzes that are different each time they are called up, as the questions rotate
  - A brief outline of the chapter that can be printed for notetaking during class
  - A game utilizing the full Glossary
  - Available in Windows and Macintosh
- *Issues in Human Sexuality: Current & Controversial Readings* with Links to Relevant WebSites that can be value-packaged with the text. This educational resource contains 34 current and controversial readings on topics in human sexuality with WebSites relevant to the issue discussed in the readings.

The features and ancillaries outlined here have resulted in a comprehensive course presentation that covers the content in a most expansive way. We developed this book with the student at the forefront. We hope readers will apply the information to their own lives in a positive way, leading to their optimal sexual health and overall wellness.



## About the Authors

**Richard Blonna, Ed.D., CHES**, has been teaching the Human Sexuality course for more than 20 years. His initial work in the field was in education and control of sexually transmitted diseases. He served as an STD investigator, counselor, supervisor, and trainer for the New Jersey State Department of Health (NJSDH) STD Control Program. He also worked for the NJSDH as a Health Education Consultant for the AIDS and Family Planning Programs. He has taught Human Sexuality at Temple University and, most recently, William Paterson University, where he also teaches Health Counseling, Epidemiology, and Stress Management.

**Jean Levitan, Ph.D.**, has been teaching Human Sexuality at the university level for more than 25 years. At William Paterson University she has taught in both the Community Health and the Women's Studies departments. Past activities include teacher training for human sexuality and evaluation of the Family Life Education Program for the City of New York. In addition to teaching Human Sexuality, she teaches Women's Health, supervises community health interns, teaches Racism and Sexism in the United States, and currently is developing a course on reproductive rights.

*To our loving families:  
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locked in our offices working on the manuscript.*

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I'd like to thank my mentor and role model, Dr. Marvin Levy of Temple University, for standing out as the epitome of what I consider a "healthy sexuality professional." With his rugged, athletic masculinity, scholarly wisdom, and health background, Marv created an image in my mind of someone able to place sexuality squarely in the framework of health rather than a series of problems to be addressed and feared. I was lucky to come under his influence at a crucial time in my life as a young husband and developing professional. I'm thankful for his guidance in both areas of my life.

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— RB

★ ★ ★

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— JL

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— RB

— JL



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# Introduction

# 1

## Major Topics

Our Sexual Climate

Factors That Contribute to Our Sexuality

Family

Friends

Culture

School

Evaluating Sources of Information

Who Are the Experts?

A Holistic Approach to Understanding Sexuality

Health and Wellness Defined

The Six Dimensions of Wellness

Wellness and Human Sexuality

Healthy Environments

## Student Learning Objectives

*After reading this chapter, students will be able to:*

- ☛ Define *human sexuality*.
- ☛ Define *health and wellness*.
- ☛ Describe the key components of healthy sexuality.
- ☛ Explain how the six dimensions of health and wellness impact one's sexuality.
- ☛ Compare and contrast behaviors that enhance or inhibit healthy sexuality.
- ☛ Describe the key sources of sexual information.
- ☛ Evaluate sources of sexuality information.
- ☛ Describe the major findings of the key researchers of sexuality over the past 100 years.
- ☛ Describe the components of informed decision making.
- ☛ Compare the characteristics of healthy and unhealthy relationships.



**Self-esteem**

a way of looking at oneself;  
may be high or low

As we begin the 21st century, students may be struggling to sort out the conflicting messages about “healthy sexuality.” Sexuality remains a critical force shaping our lives. It is part of how we see ourselves and impacts our **self-esteem**. It is ever-present as we relate to others on both romantic and platonic levels. Students, as well as the population at large, are constantly confronted with media messages on enhancing sexuality through the use of various products. Sexual themes remain prominent in all forms of entertainment, including books, film, television, and music.

As health educators, we hold to the position that good decision making is grounded in having accurate information, an opportunity to develop a personal value system, and discussion of possible and probable outcomes of behavior. We advocate the accompanying opportunity to become aware of the variety of sexual lifestyles and concerns of those who are unlike oneself.

## **OUR SEXUAL CLIMATE**

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To try to figure out how best to make healthy personal decisions in a climate of contrasts is confusing and problematic. Americans talk about sex and sexuality all the time. It is a favorite subject of the media. Some conservative media pundits criticize our culture for its overemphasis on sex. They claim that sexual themes dominate our culture and the media and that the government has gone too far in allowing the free expression of sexuality. Some liberal commentators say exactly the opposite. They claim that our culture is sexually restrictive and downright puritanical. As examples of a restrictive culture, they cite the lack of uniform standards for sex education in the schools, conservative agendas for prohibiting the availability of RU486 (the “abortion pill”), and the prohibition of gay marriage. Still others claim that our culture sends mixed messages about sexuality. It is used to market and sell almost everything, yet most schools are not allowed to teach about it.

The reality is that both government and society have limited influence on our sexuality. We are sexual beings from conception to death. Our sexuality evolves and grows regardless of official sanctions or restrictions. We learn about sex whether we do or do not have sex education in our schools. It is not a question of whether we learn. Its more a matter of the *quality* of what we learn. A key to understanding sexual learning is to realize that we learn about sexuality and what it means to be a man or woman even if no one ever sits us down and has a heart-to-heart talk about the “birds and the bees.” And that classic explanation of where we came from is only a small part of understanding ourselves.

Quality sexuality programs result from well thought out curricula, with goals and objectives for student learning. Curricula are based on accurate information, in which the pursuit of knowledge is encouraged rather than restricted. Students have a chance to examine their values and the factors that contribute to healthy and appropriate personal decisions. States that mandate sexuality education are Alabama, Arkansas, Delaware, the District

of Columbia, Georgia, Hawaii, Iowa, Kansas, Maryland, Minnesota, Nevada, New Jersey, North Carolina, Rhode Island, South Carolina, Tennessee, Utah, Vermont, and West Virginia.<sup>1</sup> Mandates notwithstanding, what transpires within a classroom varies tremendously across the United States.

In many ways the sexual learning that takes place outside any classroom is far more influential, as it is constant, both verbal and nonverbal, and often insidious. Students can easily relate the types of misinformation they acquired from friends throughout their childhood and simultaneously often report that their parents didn't talk with them about sexuality issues. In reality, though, parents convey information, impart values, and serve as **role models** whether a formal, face-to-face, serious conversation ever takes place between parent and child. A frown or a raised eyebrow can convey disapproval just as a nod, smile, or laugh indicates support. To be silent on an issue, to omit sexuality from the daily discourse in our lives, to never bring up sexuality as part of the conversation around the dinner table sends a strong message about its being a taboo subject.

Some of what we see and learn, unfortunately, does not present the healthiest picture of sexuality. Sometimes our parents, caregivers, friends, teachers, and media figures do not provide us with the best role models or information for healthy sexuality. The sexual scripts we receive may not promote healthy relationships and in some cases may actually jeopardize our lives. For example, if women are taught that they must be thin to be sexually attractive, what connection might that “lesson” have to eating disorders such as anorexia and bulimia? If men are taught that they are entitled to sex and that women want to be dominated, what connection does that “lesson” have to dating violence and rape? Sometimes the very people and institutions charged with teaching us and nurturing us fail or, worse yet, sexually abuse us.

So what is human sexuality? **Sexuality** is a broad term that refers to all aspects of being sexual. Many people think human sexuality refers to sexual behavior — what people do, how often they do it, and so on. Although sexual behavior is an important part of being sexual, human sexuality encompasses much more than that. Sexuality involves our genetic inheritance, our anatomy and physiology, and the reality of being a sexual creature in a biological sense. It also encompasses our thoughts and feelings about our body and what it means to be a man or a woman. It involves our ethics, values, and the cultural mores we've assimilated through our family, ethnic group, and religious affiliation.

Our sexuality extends beyond the self to encompass our friendships, intimate relationships, and sexual relationships. Last, our sexuality does not exist in a vacuum. It is influenced by and influences our environment. Our institutions (schools, governments, and so on), neighborhoods, communities, campuses, states, and countries, and their policies, help shape the person we are and our options as a sexual being.

*We learn about sex through assimilation regardless of whether we receive formal instruction from parents, school, or others.*

**Role model**

a person whose behaviors are imitated by others

**Sexuality**

a broad term referring to all aspects of being sexual



## FACTORS THAT CONTRIBUTE TO OUR SEXUALITY

Our sexuality is influenced by many factors throughout our lives, each impacting our development in similar or unique ways. No researcher or theorist has the widely accepted, definitive explanation for how each of us becomes who we are. Some rely heavily on biology, looking to our genetic inheritance as a prescription for how we will develop. Others hold the culture and the socialization process to be the critical forces that shape our lives. Some believe the psyche processes information as a result of experiences perceived as positive or negative, which in the end cause the individual to become the person he or she is. Finally, some maintain that the person we are is a result of the interaction of heredity/genetics, family socialization, culture, and personal experience.

Without being able to clearly determine which factor is most influential, we do know that we all receive strong and perhaps conflicting messages about sexuality from family, friends, school, media, religion, and the culture. **Sexologists**, those who study sexuality through various rigorous research methodologies, provide input into our knowledge base. Developing a healthy sexuality involves processing that information and, as individuals, internalizing that which is useful.

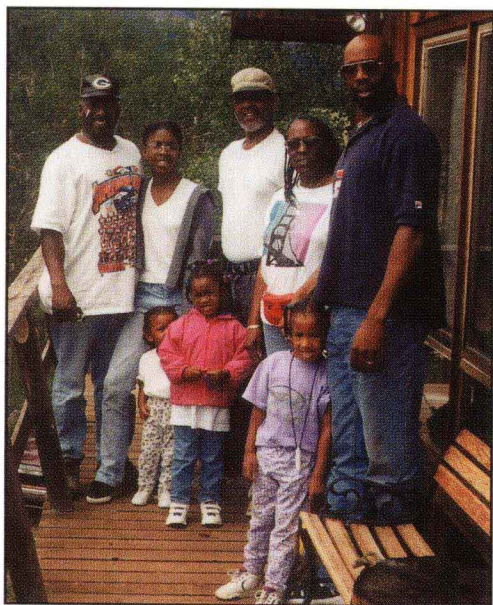
### Sexologists

specialized researchers of sexual subjects from a variety of disciplines including psychology, biology, medicine, nursing, and health

## Family

### Nuclear family

a family made up of the mother, father, and their children



*Children learn about sex  
without it ever being mentioned.*

The nature/nurture argument about development can be challenged by examining the family environment. Are we the individuals we are because of our genetic material? From a biological perspective, family represents those to whom one is related “by blood” and, consequently, we may be like our parents and siblings. Or are we the persons we are because of how we were reared? In a social sense, the term *family* has taken on broader connotations as people’s living arrangements take on a variety of forms. Divorce, remarriage, stepfamilies, blended families, and single families introduce other models. Reproductive technologies and adoption practices add still another dimension to the influence of parents.

The traditional **nuclear family**, consisting of a married man and woman and their biological children, represents less than half of all households in the United States today. The primary caregiver, thus, may assume a greater role in a child’s development than previously. The challenge comes in trying to evaluate the impacts of various family arrangements on its members.

The impact of parental influence on sexuality is still open to debate. For example, the societal concern with homosexuality has led courts, almost exclusively until more recent times, to award children to heterosexual parents in custody cases resulting from divorce. The concern is that gay or lesbian parents will influence their children to be gay or lesbian. That the