

Preface

Human sexuality refers to the many dimensions that impact how we experience, understand, and express ourselves as sexual human beings throughout our lives. This text focuses specifically on how sexuality is intertwined with well-being, which comprises not just physical health and illness prevention but flourishing mentally, emotionally, and socially. To this end, sex positivity is a particularly useful framework that integrates the numerous aspects of sexual practice and sexual being in positive, enriching ways (Belous & Schulz, 2024). Sex positivity is also a term used to describe individuals and communities who emphasize openness, nonjudgmental attitudes, freedom, and liberation from anti-sex (or sex-negative) attitudes (Burnes et al., 2017).

A comprehensive review of learning resources in human sexuality education (e.g., Arczynski & Burnes, 2025) has revealed many resources using illness-focused models to teach human sexuality courses. The need for sex-positive models encouraging sexual well-being has received increasing attention by many professional organizations dedicated to human health and functioning (e.g., World Health Organization, 2006). In particular, the American Psychological Association's Sex Positive Guidelines: Sex & Reproduction in Psychological Practice (2027) stresses the need for comprehensive and rights-based sexuality education that focuses on consent, health, and pleasure. In response to dated approaches that focus on terminology that problematizes the diversity of sexual experiences, sex positivity sees all sexual behaviors as healthy that are consensual, pleasurable, and connected to communication with all involved. Sex positivity also centers humans' multiple intersecting identities and values diversity as a central component in human experiences.

As a sexologist, I have engaged in research with sexuality topics for 15 years, writing peer-reviewed articles from a sex-positive lens and wondering, "Could a textbook include this type of research?" As a mental health clinician, I heard repeatedly from clients that they "wished they had learned about sexual identities and well-being in their human sexuality classes." Data suggests that comprehensive education that includes sexual well-being leads to better decision-making and more consent in young adults' initial sexual experiences. Despite the benefits of a sex-positive approach, human sexuality education has lagged, often teaching sexuality from a White, Western context that focuses narrowly on STI and STD prevention (Burnes, 2017).

As a human sexuality educator, I found that the texts available did not include the topics I wanted to cover in my class and that the language used in texts did not reflect my students' experiences. Whether I was teaching about sexual orientation using antiquated terms or addressing topics about selling sex from illness-based models, my students often asked me, "Why doesn't this book have stories about people like me. How come my experiences are not here?" In my work as a researcher and writer in sexuality studies, a licensed mental health clinician who provides affirming care to people engaged in numerous forms of sexuality, and a sexuality educator, I was surprised to find that most major textbooks were not addressing basic questions that students brought to class. As a sexuality educator, I have taught undergraduate and graduate courses in human sexuality for over 20 years. For all that time, I wanted a book for my students that addressed human sexuality with an explicit focus on well-being, but it didn't exist.

Human Sexuality: A Well-Being Approach is an evidence-based approach that focuses on rigorous science in the study of human sexuality. And so, inspired by my students and driven by the desire to address these critical needs, I created a textbook that comprehensively incorporates perspectives on sex positivity and well-being. Welcome!

Thematic Framework

The framework of this text includes five themes across content and andragogy: (1) sex-positive perspectives; (2) intersecting, multiple identities; (3) synthesizing multiple research areas within psychology; (4) a focus on strength-based, empowerment-focused learning; and (5) a focus on experiential, engaged learning.

1. **Sex-positive perspectives that emphasize openness, pleasure, consent, diversity, freedom, and liberation.** As outlined in the Sex Positive Guidelines: Sex & Reproduction in Psychological Practice (APA, 2026), this book explores ways that sex positivity can be beneficial to students' lives. By helping students engage in critical reflexivity, historical and contemporary movements are deconstructed to empower students who are engaging with human sexuality. Experiences of contemporary scholars and practitioners are showcased throughout the text to highlight ways that students can apply sex positivity in their learning.
2. **Intersecting, multiple identities.** A key theme of this text is that students feel as though their identities and experiences are represented in the course materials and learning activities. The book highlights the multiple cultural identities—that is, race, class, gender identity, and sexual orientation, to name a few—that intersect with a person's sexuality or sexual expression. Further, the book uses an interdisciplinary lens, including psychology, sociology, biology, literature, public health, ethnic studies, and queer studies, which are all relevant to teaching human sexuality. All chapters intentionally address the diversity of sexualities and genders to support this intersectional theme.
3. **Synthesizing multiple research areas within psychology.** This text synthesizes research from multiple research areas of psychology, including clinical, cross-cultural, social, neuroscience, sensation, and community psychology. A focus on disseminating research that is peer reviewed and utilizes rigorous and diverse methods is used throughout the book. Such analyses ensure that instructors are introducing the most up-to-date information to students.
4. **Strength-based, empowerment-focused learning.** The book explores ways that instructors can incorporate the developmental level and existing strengths of students who are engaging with human sexuality. Throughout the book, there are a variety of activities, such as reflective exercises (in the “Apply It to Yourself” sections) and discussion questions (geared toward small group learning found at the end of each chapter), to focus the learning process on the strengths and resilience that enable people to develop the skills necessary for self-empowerment.
5. **Focus on experiential, engaged learning.** Human sexuality education is an active inquiry in which learners will consistently reflect on their internal experiences and their engagement with the external world. A passive approach to learning in which students just read a textbook and lecture slides would be insufficient. As such, this book includes a series of learning resources (such as self-assessment questions at the beginning of each chapter that are answered at the end of the corresponding chapter to promote learning assessment) to support classroom instruction and supplemental learning. Other learning resources are outlined in the next section.

Pedagogical Framework and Features

Recognizing that people are at various developmental levels and have different learning needs and preferences, I have presented information using multiple instructional techniques, including opportunities for intrapersonal and field-based learning. I hope this textbook will empower educators who are teaching in multiple settings—such as traditional undergraduate classroom teaching or psychoeducational instruction in community settings—to take a new, well-being approach to the subject.

I designed three major features in this book to help learners engage with the latest issues and opportunities that are a part of the field of human sexuality. First, each chapter includes a “Spotlight”

section that highlights current significant topics within the field of sexuality. This section in each chapter will expose learners to real-world trends. Each chapter also features a section entitled “Pathways and Careers,” which describes a distinguished researcher or practitioner in the field of sexuality and highlights a recent major finding from their work. Each of these sections includes information about this professional’s career development in the field of sexuality research, an in-depth look into their career path, and a discussion of why the research finding is important. Third, “Apply It to Yourself” is an activity in each chapter that supports students to engage in experiential learning. The activities range from individual writing prompts to small group discussions and/or tasks to help students apply the material in practical ways.

In addition to these three features, the book includes the following pedagogical features:

- Learning objectives at the beginning of each chapter help to focus students’ learning on core concepts and important information.
- Self-checks at the beginning of each chapter encourage readers to evaluate their current understanding of the chapter’s topics.
- In-depth vignettes throughout each chapter provide opportunities for critical thinking and function as applied examples about the core concepts in each chapter.
- Descriptions of empirical studies to support theories and models in human sexuality prompt students to analyze the findings of research.
- Learning activities in each chapter engage active learning strategies with students.
- The “Reviewing Key Concepts” sections at the end of each chapter are linked to the chapter learning objectives and summarize key theories and concepts.
- Key terms at the end of each chapter refer to a glossary at the end of the text with helpful definitions for more comprehensive learning.
- “Fact or Fiction?” self-check questions help students assess their learning in each chapter and prepare for other learning assessments, like exams. In each chapter, these questions are directly connected to the learning objectives to assist instructors in assessing the meeting of the learning objectives for each chapter.
- Discussion questions at the end of each chapter help to engage active learning and community building within the classroom.

Organization and Coverage

Like most traditional textbooks, *Human Sexuality: A Well-Being Approach* is organized to guide learners from foundational concepts toward more complex and applied topics. The book begins with an exploration of core concepts of sex positivity in human sexuality so that learners understand historical and empirical grounding in the field. Learners then engage with essential frameworks for understanding sexual and gender development from biological, psychological, and cultural lenses. It then moves into discussions of sexual behavior, sexual identity, attraction, and relationships, followed by chapters on sexual health, reproduction, and contemporary sexual issues. Each chapter integrates current research, real-world examples, and diverse perspectives to help students connect theory to lived experience. This progression from basic principles to contemporary, more complex aspects of human sexuality mirrors the structure of traditional texts, while encouraging critical thinking and showcasing positive sexuality.

Chapter 1, “Human Sexuality and Well-Being,” begins by discussing why a sex-positive lens is important to the study of human sexuality. Equally important is understanding sexuality from a multicultural perspective, and the chapter outlines concepts of power, privilege, and cultural humility. The chapter closes by introducing the reader to sex and gender as different and linked constructs.

Chapter 2, “Historical Influences on Sexuality,” begins by discussing why there are so many influences on human sexuality. The chapter then introduces sexual historicism and perspectives on sexuality and gender from pre-1600 through the 20th century. The chapter also analyzes the connection between sexuality and slavery for African people during the Middle Passage. The chapter closes with the emergence of innovative practices for the study of sexuality in the 21st century, as well as influences and trends in human sexuality education.

Chapter 3, “Research Methodologies in Human Sexuality,” identifies traditional research methods in human sexuality and reviews major research programs (for example, Kinsey and Masters and Johnson) in the field. The chapter contrasts traditional research methods with needed paradigm shifts and best practices in research. The chapter discusses mixed methods and action research methods as contemporary research methods. The chapter also features an in-depth look at participatory action research with sex workers who have survived brutality.

Chapter 4, “Sexual Anatomy and Physiology,” begins by explaining why the book does not utilize terminology between “men’s bodies” and “women’s bodies.” This concept is particularly relevant when discussing our bodies and their parts. Therefore, the author will use these two phrases—people with a vulva and ovaries and people with a penis and testes—when referring to concepts that focus on sex assignment and that are more biological in nature. The author will use man and woman to refer to people who identify with each of those gender identities, including when their gender identity differs from their sex assignment. The author will use male and female when referring to gender concepts that focus on social roles and gender roles in nature. These changes aim to encourage and develop inclusivity instead of divisiveness. Biological processes of various sexes and trends in sexual bodies across various groups are reviewed, as is content related to arousal and orgasm. The chapter also presents an in-depth look at clitoral circumcision and current social movements on this topic.

Chapter 5, “Gender, Gender Roles, and Gender Expression,” continues the book’s innovative approach with a review of the difference between sexuality and gender. The chapter defines gender roles, gender expression, and the gender binary, including the concept of gender fluidity. A comprehensive view of transgender identity is presented, which includes an analysis of gender expression in transgender-identified children.

Chapter 6, “Sexual Orientation and Sexual Expression,” reviews how human beings express themselves sexually, including sexual behaviors and fantasies, sexual communication (for example, understanding love languages), diversity in sexual orientation, understanding asexual identities, kink, BD/SM, and polyamory. Information on different types of sexual expression, including autoeroticism, is reviewed.

Chapter 7, “Love, Relationships, and Communication,” provides an overview of current research and language related to relational intimacy. This chapter includes sections on romance, dating, passion, love, and communication theories in intimate relationships. The chapter also includes sections on the presence or absence of satisfaction in intimate relationships, conflict in relationships (including jealousy), and divorce. Information related to nonmonogamy and polyamory is woven throughout the chapter. Finally, the differentiation between the job titles of clinical sexologist and sex therapist is presented, as well as career development information for people interested in the field of sex and relationship therapy.

Chapter 8, “Pregnancy and Childbirth,” presents a brief review of human development with a particular focus on human sexuality, including pregnancy from a well-being perspective (e.g., Baltes, 1987). The chapter reviews interdisciplinary concepts related to pregnancy and the birthing process. This chapter also includes career development information for people interested in the field of childbirth assistance and support.

Chapter 9, “Sexuality During Childhood, Adolescence, and Young Adulthood,” includes social and cultural factors impacting sexuality for this age group. Puberty is discussed from a sex-positive, multicultural perspective. Discussions of the impact of emerging trends in technology and social media on sexuality and sexual expression in adolescents are woven throughout. Readers will also review data related to sexuality education within the United States.

Chapter 10, “Sexuality During Middle and Late Adulthood,” underscores the need to understand that fluidity in identity markers increases in adulthood. Topics include critiquing sexual dysfunction in adults, sexuality and relationships in midlife, and understanding sexuality in older adults. This chapter includes a review of the literature about comprehensive sexuality education in assisted living facilities.

Chapter 11, “Contraception and Abortion,” focuses on the impact of medication (physical medication, psychotropic medication, and so on) on sexuality and the need for medical providers to have a comprehensive understanding of sexual well-being. This chapter identifies intersections between sexuality and mental health, including what a sex therapist is and what they do, how sexual abuse impacts sexual health, and intersections between chronic illness and sexuality. The chapter features practical research and strategies for the aftercare of people who have had an abortion procedure. The discussion includes history and themes of reproductive justice and information about abortion. Chapter 11 also includes career development information for people interested in becoming sexual health outreach workers.

Chapter 12, “Sexual Functioning,” focuses on common challenges with sexual functioning. The chapter considers needed paradigm shifts in how we understand sexual dysfunction, including the impact of relational variables. This chapter focuses on moving away from understanding sexual dysfunction in the context of orgasm to looking at non-penetrative understandings of sexual behavior—including a review of the consumption of online pornography as a predictor of early-onset sexual dysfunction.

Chapter 13, “Sexually Transmitted Infections and Diseases,” reviews prevention and resilience in the face of sexually transmitted infections and diseases. The chapter includes a chart of common STDs and STIs with symptoms and prognoses. The coverage reviews common trends in data related to STI and STD prevention from a cultural perspective. The chapter features a review of prevention and education methods of HIV/AIDS over the last 25 years. The chapter also includes a synthesis of new research in sexual expression for individuals living with STIs and STDs.

Chapter 14, “Sexual Coersion and Violence,” reviews theoretical perspectives about sexual assault and sexual violence. Biological, psychological, and social processes of survivors of sexual violence are outlined, as well as prevention initiatives against sexual violence. The chapter differentiates between intervention and prevention and between primary, secondary, and tertiary prevention. The chapter features information about national programming aimed at supporting survivors of sexual violence within government institutions.

Chapter 15, “Sex Work and the Business of Sexuality,” introduces readers to sex as a commodity. The chapter differentiates types of sex work by social location and practice organization and differentiates between sex trafficking and sex work. The chapter includes discussions of why individuals think careers in selling sex are problematic, resilience for sex workers, and how sex workers stay safe in adverse working conditions. The chapter’s “Spotlight” features the history of the sex toy industry from a global perspective.

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Analytic Skill-Building

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Video Activities for Human Sexuality

- Chapter 1: Demystifying Sexuality: What Is Sex?; Defining Intersectionality; Difference Between Sex and Gender
- Chapter 2: Demystifying Sexuality: Is Virginity Real?
- Chapter 3: Demystifying Sexuality: The Tuskegee Experiment; Masters and Jonson Phases of the Sexual Response Cycle
- Chapter 4: Demystifying Sexuality: The Penis Explained
- Chapter 5: Demystifying Sexuality: Gender Identity and Sexual Orientation; Demystifying Sexuality: Living Authentically: A Transgender Child’s Journey
- Chapter 6: Demystifying Sexuality: What Is Kink?
- Chapter 7: Demystifying Sexuality: Marriage Throughout History
- Chapter 8: Demystifying Sexuality: Pregnancy and Childbirth
- Chapter 9: Demystifying Sexuality: Why Isn’t There Consensus on Sex Education?
- Chapter 10: Demystifying Sexuality: Who Has the Best Sex Life?
- Chapter 11: Demystifying Sexuality: Birth Control Explained
- Chapter 12: Demystifying Sexuality: What To Know About Orgasms
- Chapter 13: Demystifying Sexuality: Getting Real About STIs
- Chapter 14: Demystifying Sexuality: What Is Consent?
- Chapter 15: Demystifying Sexuality: Why We Should Decriminalize Sex Work

Reading Activities for Human Sexuality

- Chapter 1: Pathways and Careers in Human Sexuality with a Sex Therapist
- Chapter 2: Pathways and Careers in Human Sexuality with a Sexuality Researcher
- Chapter 3: Pathways and Careers in Human Sexuality with a Professor and Researcher
- Chapter 4: Pathways and Careers in Human Sexuality in Sexual Medicine and Genital Reconstructive Surgery
- Chapter 5: Pathways and Careers in Human Sexuality with an Actor and Activist
- Chapter 6: Pathways and Careers in Human Sexuality with a Sex Educator
- Chapter 7: Pathways and Careers in Human Sexuality with a Professor and Therapist
- Chapter 8: Pathways and Careers in Human Sexuality with a Gynecologist and Obstetrician
- Chapter 9: Pathways and Careers in Human Sexuality with a Researcher and Diversity Officer
- Chapter 10: Pathways and Careers in Human Sexuality with a Clinical Sexologist, Sexuality Educator, and Sex Researcher
- Chapter 11: Pathways and Careers in Human Sexuality with a Licensed Professional Counselor and Certified Sex Therapist
- Chapter 12: Pathways and Careers in Human Sexuality with a Urologist and Sexual Medical Director
- Chapter 13: Pathways and Careers in Human Sexuality with a Urologist
- Chapter 14: Pathways and Careers in Human Sexuality with a Social Worker and Child Advocate
- Chapter 15: Pathways and Careers in Human Sexuality with an Author, Educator, and Coach

Additional Teaching Resources

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PowerPoint® slides that offer a flexible, accessible, and customizable solution for creating multimedia lectures; and

Tables and figures from the book are available to support lecture preparation and class discussions.

A Note to Students Reading This Book

Learning about human sexuality brings with it the potential to disclose personal thoughts, feelings, and information. Keep in mind that self-disclosure is always at your discretion. Taking a course in human sexuality is different from taking a course in accounting or chemistry in which you may be learning only course content. In contrast, many students in human sexuality courses begin to develop a greater self-awareness about their own sexuality, gender identity, and sexual history. Biases related to sexuality span a broad territory, and the course can open your eyes to those, as well. Discoveries can include the

ability to understand human sexuality from a sociocultural perspective and to focus on oppression and liberation issues and history, such as feminism, gay liberation, gender, diversity, archetypal psychology, and shame.

As you begin to explore the world of human sexuality, a few different strategies can help you engage with the learning process:

1. **Know your boundaries.** You may want to challenge yourself to increase your ability to communicate openly—to a level with which you feel comfortable—about sexuality while maintaining safe personal boundaries. The role of boundaries is to help you avoid feeling overexposed or unable to process your thoughts, feelings, and emotions. Personal boundaries are the emotional, mental, and physical limits that individuals establish to protect themselves from being overcommitted, manipulated, used, or violated by others. These boundaries enable people to separate who they are, what they think, and what they feel from the thoughts and feelings of other people. Many people spend their whole lives learning about and maintaining their personal boundaries. Having and committing to boundaries is a lifelong process. During the process of learning about human sexuality, different people need different boundaries at different times. Keep in mind that your boundaries, comfort levels, or feelings of safety may not be the same as the boundaries of your friends, classmates, study partners, or the person sitting next to you. And that's okay.
2. **Keep a journal.** Although your course may not require it, some people find it helpful to keep a journal in which they process their thoughts, feelings, and reactions. Many students find that processing and reflecting on what they learn helps them to learn more effectively; research supports this claim. In addition, sometimes we have an initial reaction to a topic taught in a lecture or a class discussion, but we do not understand why until we think and reflect. A journal provides a helpful way to process your reactions to course material or how the material is presented during class. A journal can provide a place to reflect once you complete the assigned readings. Whether using a journal for one or both purposes, writing your thoughts provides benefits during the learning process.
3. **Be patient with yourself.** You may have unexpected reactions to course material, especially if you have not focused on such topics before. Sometimes, students in a human sexuality course think they might be more open to a topic than they prove to be. For example, maybe you have no experience with kink-related sexual activity. During a lecture on kink and BDSM concepts, you may have uncomfortable reactions and not know why. After checking in with the instructor during office hours, you may realize that you have never before thought about connections between sexual pleasure and pain.
4. **Consult with your instructor, therapist, or someone you trust.** As you begin to uncover knowledge about human sexuality and simultaneously learn about your own biases and reactions, you may want to process your learning and talk to someone, in parallel to writing a journal or as an alternative to it. When processing externally, it is important to identify someone you trust. Options include personal counseling with a licensed or certified therapist or counselor; meeting with an instructor or teaching assistant during office hours or a prescheduled appointment; consultation with a religious official, such as a pastor, rabbi, or member of the clergy; or talking with a trusted family member or close personal friend.

Chapter 1

Human Sexuality and Well-Being



Catherine Falls Commercial/Moment/Getty Images

Learning Objectives

By the end of this chapter, you will be able to do the following:

- 1.1 Distinguish between sex, sexuality, and human sexuality.
- 1.2 Identify and discuss the benefits of a sex-positive approach.
- 1.3 Compare and contrast the concepts of intersectionality, privilege and power, marginalization, and oppression.
- 1.4 Illustrate how multiculturalism and diversity impact sexuality.
- 1.5 Discuss the impact of sex positivity on human well-being.
- 1.6 Explain common terms related to sex, gender, sexual orientation, and affectional orientation.

Ask Yourself . . .

Before you start reading the chapter, think about and answer these questions:

1. What are the differences between sex, sexuality, and human sexuality?

2. Where does the majority of our information about sexuality come from?
3. What is the difference between gender identity and sexual orientation?

Fact or Fiction?

Consider whether these statements are fact or fiction. You will find the answers as you read through the chapter and can assess yourself at the end of the chapter to see what you have learned.

1. Fact or Fiction? The term *sex* refers primarily to one's physiology, whereas sexuality is how organisms express themselves as physical beings in a variety of ways.
2. Fact or Fiction? Most of our information about sexuality comes from one primary source in our lives, such as a trusted family member or a specific media outlet.
3. Fact or Fiction? Our gender identity refers to the gender that each of us knows ourselves to be, which is different from our sexual orientation, which is the emotional, physical, and psychological connection that we may have to someone else.

The Complexity of Human Sexuality

1.1 Distinguish between sex, sexuality, and human sexuality.

Daria is a 2nd-year college student pursuing her degree in nursing. She is interested in human sexuality, so she's decided to take a class on the subject. As a 31-year-old second-generation Mexican-American female student, she has learned some useful information about human sexuality from friends and colleagues, the Internet, and a few short-term relationships, which were unsatisfying. She has cultural and community-related reservations about having sex before being in a long-term relationship, so she has had only three sexual experiences. She still has a lot of questions. As Daria walks into her human sexuality class on the first day, she suddenly feels nervous. What if she says the wrong thing? What if the information is too overwhelming?

Daria—and anyone who identifies with her experiences and feelings—should know that these experiences are quite common. Studying human sexuality can be exciting and enlightening, but sexuality is a difficult topic for many people to discuss, so feeling nervous is expected. There is no shame in it. Whatever you think and feel as you start this course in human sexuality, know that you'll learn a lot from the ideas presented here. You'll also learn a lot about yourself.

With human sexuality, we may use seemingly interchangeable terms that actually have different definitions, often without realizing it. To this end, we will start by defining some key terms. **Sex** refers to categories (such as male, female, and intersex) to which people are typically assigned at birth based on physical characteristics, such as genitals. Some people may be assigned intersex when their biological characteristics don't fit the traditional definitions of male or female. Although the word *sex* often suggests *sexual activity* or *sexual intercourse*, it more accurately refers to an organism's biological composition and capacity for reproduction.

When it comes to sexual intercourse between two people, including the ability to experience physiological sensations such as arousal or orgasm, biology plays a crucial role. There are many other factors involved, however. Consider people's previous sexual experiences, which may influence the way they think of themselves. What about the social aspect of sexuality, including the stereotypes and myths that people may internalize about sexuality? When comparing humans to other animals, what about mating rituals that animals (including humans) might use before engaging in intercourse as a means of reproduction? These are all elements of **sexuality**, specifically the way in which living organisms (such as animals) express themselves as sexual beings.

These aspects of sexuality aren't part of an organism's biology, but they are examples of social and environmental factors that affect reproduction and physiological experiences related to sex. They are all elements of sexuality, or the state of an organism as a sexual being (Akibar et al., 2019). For any



Given the many ways that we are diverse as human beings, our sexuality is different for each of us. These differences sometimes make sexuality difficult to talk about and can bring up feelings of discomfort or shame. These are unfortunately typical, but learning about sexuality can help resolve those feelings!

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organism, sexuality can include development, culture, and environment. This means that an organism's sexuality develops alongside an organism's sex. Sexuality and sexual behavior play common roles in human life—and, importantly, they can create life.

Human sexuality refers to the many dimensions that impact how we experience, understand, and express ourselves as sexual human beings throughout our lives (Ornstein, 2020). In addition to **sexual pleasure**—the feeling of safety, happiness, satisfaction, and enjoyment associated with sexuality—human sexuality encompasses all of the following dimensions (you will learn more about these later in the chapter):

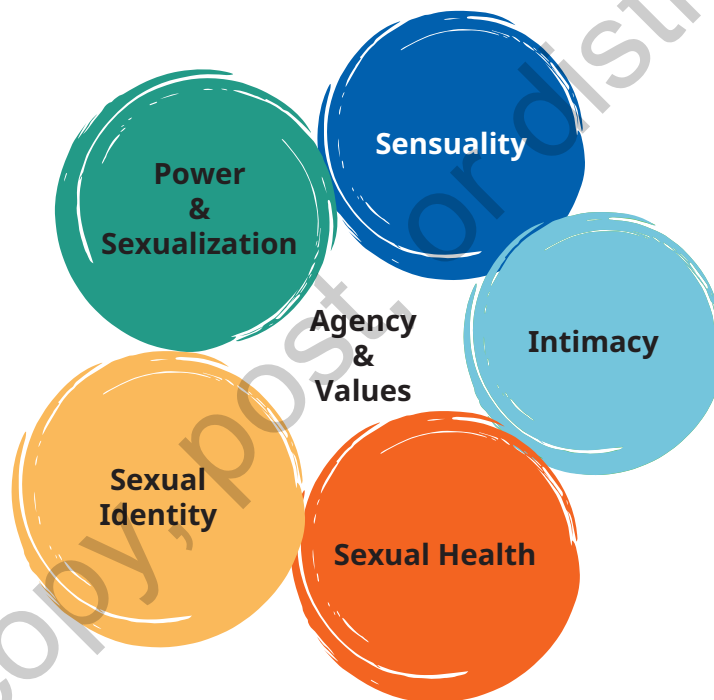
- gender-focused traits
- the biological sex that is assigned at birth
- romantic attraction and sexual attraction
- sexual orientation
- sexual identity, or the name(s) we have for our own sexuality
- sexual education or lack thereof
- arousal and desire
- sex work (sex as a commodity)
- biological well-being related to sex (including sexually transmitted infections/diseases and reproductive health)

Human sexuality can include all of these dimensions, but not all of them are always experienced or expressed. Each dimension has its own definition, history, and importance. In fact, several sexuality scholars have developed theories about the role of sexuality in the lives of human beings. A **theory** is a set of statements, as simple as possible, that describe general principles about how variables relate to one another.

In one example, Dennis Dailey, a sexologist, created a visual theory (Figure 1.1) that helps people understand their sexual expression (Dailey, 1981). In the **Circles of Sexuality Model**, there are five interlocking circles: (1) sexual health, (2) power and sexualization, (3) sexual identity, (4) sensuality, and (5) intimacy. The first circle, *sexual health*, represents the physical components of sexual expression. Dailey noted that we receive the most education about the sexual health circle.

Figure 1.1 ■ Circles of Sexuality Model

Dr. Dailey's Circles of Sexuality Model helped the general public to comprehend the multiple aspects of sexuality beyond physical intercourse and centralize our sexual values as a central part of our development as sexual beings.



Dailey, 1981

The second circle, power and sexualization, represents both positive power and negative power in sexual relationships. Sexual exchanges that involve negative power include abuses of power when one or more persons do not (or cannot) give consent or using sex as a tool to gain power over another person. The third circle, sexual identity, represents the sexual person we are and how we express ourselves sexually to other people, including our gender identity, the people we find attractive, and the type of sexual practices that excite and bring us pleasure.

The fourth circle, sensuality, represents the various ways we experience pleasure, including through all five senses. This circle includes themes such as **body image**, or how a person feels about their own body, which influences how and where a person likes to be touched. The sensuality circle also includes the sexual response cycle, or how we experience the changes that our bodies undergo when aroused through sex. Dailey noted that people receive the least education about the sensuality circle and often figure out on their own what gives them pleasure. The fifth circle, intimacy, concerns becoming close emotionally to another person, a critical component in most close relationships. To create intimacy with others, we need to be vulnerable, establish trust, and communicate effectively (Dailey, 1981). Liking and/or loving

another person is an essential component in establishing intimacy, but people rarely receive formal education on how to establish intimacy. Together, the five interlocking Circles of Sexuality Model can help differentiate the components needed to express and enjoy your sexuality, create and sustain feelings of pleasure and well-being, and deepen your connection to sexual partners and needs for intimacy and belonging. Our sexuality evolves as human beings develop and does not end until we die.

Clearly, sexuality for human beings goes beyond reproduction: The study of human sexuality is an interdisciplinary effort to understand a person's biological, social, erotic, cognitive, interpersonal, intrapersonal, organizational, relational, cultural, and familial engagement with sex. Therefore, when studying human sexuality, we must study many different disciplines—including psychology, sociology, anthropology, feminist studies, ethnic studies, art, theater, history, and public health (to name a few!). Sexuality can create bonds between couples (as a result of a fulfilling sex life) or damage bonds between couples (for example, through infidelity). Further, sexuality can cause some of the most intense feelings of physical and emotional sexual pleasure that many of us will ever experience.

Below, you will find an activity that will help you think more about human sexuality as a broad concept. Most chapters in this book have one or more activities to help you think more comprehensively about some of the topics in the chapter and to help you link each chapter to your own life.

Apply It to Yourself: Analyzing Stereotypes and Myths

Our knowledge of human sexuality comes from a variety of sources that we rarely question or think about critically. This activity will help you to reflect on stereotypes and myths related to human sexuality.

1. Make a list of five beliefs that you have heard about sexuality. Examples could be anything from “Sexual behavior is best when it’s between a man and a woman” to “Sexual intercourse does not need to happen only when two people are in a committed relationship” to “Sexuality is unique to each person.”
2. For each belief that you have identified, consider whether it is always true or whether there may be one or more situations in which it is not true.
3. Next to each belief, write down some thoughts about where you learned that belief. Did you learn it from your family? Did you learn it at school or in your place of worship? Does it come from popular culture, the media, or your circle of friends?

Human Sexuality and Differing Cultural Values

Human sexuality can mean different things to different people. It is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical, religious, and spiritual factors. Honoring these different perspectives and components with care and compassion is critical in studying human sexuality. For example, some people do not prioritize labels or identities when finding themselves attracted to other people, either emotionally or physically—but other people do. In addition, at some other point in our lives, our desire to prioritize labels might change. For example, Radeekha, a woman of South Asian descent, might realize around the age of 18 that she is attracted primarily to women. She may initially decline to use labels to define her identity, partly because she isn't certain whether terms such as *lesbian* or *queer* fit her. As she explores her attraction to women throughout her 20s, Radeekha notices that she's also attracted to some men. As she approaches her 30s, she reflects on her stronger understanding of whom she was attracted to—not just in terms of sex or gender but also in terms of personality. Just as the components of sexuality differ from person to person, they can also change over time—and look different depending on specific cultural contexts, environments, and historical moments.

For another example, consider the cultural norms and values of certain communities within the United Arab Emirates (UAE), a country with conservative laws around expressing human sexuality. For example, expressions of same-sex sexual attraction have been strictly forbidden and can be punishable by law: Travelers to the UAE have undergone short prison sentencing for kissing in a public restroom

(Moore, 2017). There is a current movement to change these laws, but many experts continue to note that the country will need to address how it diminishes sexuality in many different aspects of its daily life, including how sexuality is not talked about or silenced in social, business, and cultural norms (Sherlock, 2022).

Now compare some of the conservative cultural norms of the UAE with a city like Rio de Janeiro, Brazil. An anthropological analysis of aspects of Brazilian culture suggests that sexuality in these urban settings is very progressive, creating space for speeches about sexual celebration, exploration, and expression in a variety of rituals, customs, and traditions (Parker, 2009). These anthropologists also suggest that these urban values, cultures, and patterns influence the sexual experiences in the surrounding suburban and rural populations of these cities. In certain parts of Brazil, sex is a main interest and activity, existing for both enjoyment and tourism. Sexuality has been used as a tool by some Brazilians to organize communities based on different sexual orientations and identities so that each community can provide itself support and a space for freedom of expression. One example is Carnival, an annual cultural celebration that occurs for 5 days before Ash Wednesday (the start of the period of Lent in the Catholic religious calendar). During Carnival, many aspects of sexuality (as seen in Figure 1.2a) are explored and displayed prominently, including a range of sexually explicit costumes and large street parties (as seen in Figure 1.2b) that are known for public kissing.

Figure 1.2 ■ Sexual Expression During Carnival

Norms and values about sexuality—such as expressions of sexual orientation (a) and dance parties during Carnival (b)—directly relate to our culture, context, and environment. These different norms and values make it important to always study sexuality in context.

(a)



(b)



Pollyanna Ventura/E+/Getty Images; Brazil Photos/LightRocket/Getty Images

The different approaches to human sexuality between the UAE and Brazil clearly show that morals, values, and attitudes can affect the way human beings embody their sexualities and the way they choose to behave with others. Throughout this course, keep in mind the similarities and differences that occur between people, societies, and cultures as you encounter the many dimensions of sexuality.

Something to Think About . . .

How might the attitudes and cultures of your community have impacted your understanding of human sexuality before this course? What values might you have learned from the world around you about human sexuality before taking this course?

Parts of a Sex-Positive Approach

1.2 Identify and discuss the benefits of a sex-positive approach.

Jack, a 1st-year student in physics, is excited to attend the first day of his human sexuality class, which he chose to take for general education requirements. Jack—a 20-year-old Vietnamese American heterosexual male-identified student—has heard good things about this course. Although he is curious to learn more about sexuality, he feels cautious. He connects strongly with his family and is part of a cultural community that has very distinct views about sexuality. In fact, many of his family members do not talk about sex, and Jack has learned from his community that sex should be kept private. These messages often result in Jack feeling embarrassed and ashamed about his sexual curiosity, so he has not shared these feelings with anyone.

The concept of sex positivity is a useful entry point when learning about the multiple components of human sexuality. A **sex-positive** approach describes openness, nonjudgmental attitudes, freedom, and liberation from anti-sex or sex-negative attitudes (Belous & Schulz, 2024). This approach encourages people to imagine what it would feel like to live free from sexual blame, judgment, or guilt. Sex positivity is a framework that integrates the physical, emotional, cultural, intellectual, social, and spiritual aspects of sexual practice and sexual identity in positive, enriching ways (Syme et al., 2013). Its prominence in human sexuality research continues to grow, highlighting the strong connection between sexuality and a person's diverse cultural identities.

There are some differences in how researchers define sex positivity, though there are many common core elements as well. An online survey by researchers Ivanski and Kohut (2017) asked 52 experts in the field of human sexuality survey questions about how they define sex positivity and sex negativity. Overall, these researchers found that sex-positive definitions promote being open-minded, nonjudgmental, and respectful of sexual autonomy when there is regard for consent, health, and safety. Other researchers highlight that sex positivity fosters the sense of entitlement for bodily autonomy, leading to a human sexuality that prioritizes confidence and joy (Nagoski, 2024, p. 104).

Countering Sex-Negative Attitudes

Sex positivity also explores how people may develop attitudes that are sex-negative. **Sex-negative** actions are those that suggest sex as abnormal, wrong, or shameful. An example of being sex-negative is telling a friend they “may have a problem” if they have consensual sex with many people. A second example is watching a movie on Netflix that shows someone feeling shameful about a consensual sexual experience and agreeing with that character.

One kind of sex negativity, **erotophobia**, is a fear, disdain, disgust, or devaluing of sensual sexual pleasure. Examples include internalizing our cultural and religious anti-sexuality messages, fearing the erotic capacities of the mind and body, and denouncing nonprocreative sexual practices that prioritize pleasure (Dawson & Burnes, 2018). For instance, can you think of a media message you've seen depicting sexual desire as wrong? Or religious messages insisting that sex should be for procreation and not pleasure? Some researchers suggest that erotophobia is an irrational reaction to the erotic, which makes many of us vulnerable to social control (Patton, 1985). For instance, much of the research about gay men living with HIV/AIDS—especially gay men of color—focuses on the health risks related to anal sex. This perspective aims at preventing the spread of HIV, but it fails to explore the roles of pleasure and desire associated with anal sex. From a sex-positive perspective, pleasure and desire become primary ways of understanding anal sex rather than focusing on it as a source of risk for HIV/AIDS.

Learning about our own sexuality through a sex-positive lens can lead to healthier interpersonal relationships. Researchers continue to explore how sex positivity can help us understand ourselves as sexual and reproductive beings (Belous & Schulz, 2024). In addition, researchers continue to find connections between sex positivity and our abilities to prevent harmful interpersonal behaviors (such as how we talk to and treat our sexual partners) that often accompany shameful messages about sex (Wiginton et al., 2022). These research trends indicate that sex positivity is associated with higher interpersonal functioning in our intimate relationships as well as stronger relationships with ourselves.

In short, a sex-positive approach to sexuality can help us understand how sex negativity limits people's understanding of themselves, their relationships with other people, and their own sexuality. Neglecting our sexual life and sexual identity can lead to detachment in our relationships, as well as a misunderstanding of our own sexuality or that of others. This disconnection can in turn lead us to look at sex in a narrow way that minimizes it or problematizes it.

Spotlight: Sex Positivity as a Global Movement

Discussions about human sexuality historically focused on shame rather than on well-being, so teachers often teach sex education with a focus on problems. For example, women who have “too much sex” are labeled with negative slurs such as *slut* or *whore*, while some women who may not have “enough sex” are labeled *prudes*. In sexuality education, these shame-focused perspectives mean that some of us learn about sex only as it relates to guilt and abstinence. These people may hear nothing about pleasure-based sex, the use of contraception, or the importance of consent. Sex negativity may leave us feeling shamed, confused, nervous, afraid, guilty, or sad. For example, think about how you might feel if you are continually told that sex is shameful or bad but know you feel good when you engage in sexual activity or explore yourself as a sexual being. The comparison of those two experiences may well result in confusion.

Fortunately, sex-positive understandings of human sexuality have begun to counteract these shame-based narratives on a global scale. Since the early 2000s, for example, the rise of social media platforms for sex-positive advocates has made the movement more accessible to a wider audience. As the movement grows, sex positivity becomes increasingly inclusive of many different sex and sexuality communities, movements, and ideas. The movement is particularly interested in ending shaming and creating more acceptance of different sexual experiences. The sex-positive movement challenges slut-shaming, prude-shaming, and kink-shaming, and the larger cultural norms that contribute to them.



This SlutWalk in New York City is now an annual event. This sex-positive event aims to decrease shame and stigma related to sex by providing community and support to people who express their sexuality in various ways.

Chelsea Guglielmino/Getty Images

Sex positivity also honors the need for diversity within sexuality by acknowledging how people's sexual experiences and desire for pleasure intersect with other cultural identities and developmental identities (Queen, 2002). For instance, pleasure contains differing amounts of safety, enjoyment, and satisfaction for each person during each sexual encounter (Nagoski, 2024). This means that a sex-positive approach must account for context as a factor in pleasure. For example, a sex-positive approach recognizes that people identifying with certain ethnic backgrounds are considered exotic and/or erotic, so sexual partners must acknowledge these oppressive messages if they are from different

ethnic backgrounds. For example, if my sexual partner identifies with an ethnic background that is thought of as “sexually exotic,” I want to make sure to self-examine my own biases so that such exoticism is removed from our sexual encounters, my partner feels safe, and our sexual encounters are void of racist stereotypes. Similarly, privilege and oppression may influence women’s and men’s ability to be sex positive, which can contribute to sexual objectification and sexual abuse (Wright & Bae, 2016). These intersecting oppressions can create communities that think of sexuality as taboo and threatening, which can result in not talking about it (Collins, 2004). A sex-positive approach can be combined with research and information about race, ethnicity, and culture to provide a deeper understanding of how many factors play into the information people receive about sexuality—including culture, context, and our sexual identities.

The sex-positivity movement has moved into the mainstream with the help of pop culture. Celebrities including Lady Gaga, Doja Cat, Megan Thee Stallion, and many others have spoken publicly about their experiences with slut-shaming, sexuality, sexual assault, body acceptance, and overall sexual health and responsibility (Wallace, 2022). In 2011, Canadian sexuality activists protested after a Toronto-based police officer suggested that women “stop dressing like sluts” to reduce incidents of sexual assault. “SlutWalks” were organized in London, Iran, and Ukraine to mirror the Canadian activists’ work. In 2015, podcast talk show host and U.S. celebrity Sonya Barnett began hosting the Los Angeles–based SlutWalk. The SlutWalk has become a transnational movement happening in over 50 cities worldwide each year: Participants walk, protest, attend workshops, and engage with live music, food, and sex-positive art and culture.



As sex positivity has gained increased visibility as a global movement, SlutWalks (such as the one pictured in Israel) have gained increased prominence, in part due to celebrities such as American sexuality influencer Sonya Barnett.

Gali Tibbon/Contributor/AFP/Getty Images; Tara Walton/Getty Images

Where will the movement go next? As more people adopt sex positivity, large facilities that serve humans in a variety of capacities—such as schools, doctors’ offices, hospitals, and assisted living facilities—are incorporating this concept into their provision of health and human services care. Researchers are incorporating sex-positive research designs and instruments into their data collection, data analysis, and scholarship. In short, the hope is that the sex-positive movement will eventually go everywhere.

Why Study Sex-Positive Sexuality?

Nowadays, there are countless ways to learn about and engage with sexuality, from the Internet and social media to movies, television, and podcasts. So why study human sexuality in a classroom with a textbook? There are two answers to this question.

First, no matter how much we think we may know about human sexuality, there is always more to learn—and a deeper understanding of these topics will help you better understand your family,

your friends, and the world around you. Engaging in sexual activities and having a satisfying sex life aren't quite the same as being **sexually intelligent**, which is understanding yourself as a sexual being, situating your sexuality within a larger historic-social-political context, and recognizing how you can achieve greater connection with your sexual partners. In this course, you will improve your understanding of sexuality, learn more about yourself as a sexual being, improve your interpersonal skills, better understand different cultures and viewpoints, and think critically about the cultural and political contexts surrounding sex. In addition, you will develop your ability to think about your own biases and attitudes regarding human sexuality. It is likely this improved sexual intelligence will help you feel better about your own desires for connection and intimacy.

Second, this course focuses on scientific research and data, unlike many sources in the mainstream media. Most mainstream media sources that feature sexual content—such as movies, blogs, and advertising—are mainly geared toward White heterosexual audiences of a certain age. They feature White actors and models disproportionately, leaving out people from other cultures and different backgrounds. What exactly does *multicultural* mean? The term **multicultural** recognizes the human dimensions of race, ethnicity, language, sexual orientation, gender, age, disability, class status, education, religious or spiritual orientation, and other dimensions of culture (Zhang et al., 2022). Multiculturalism is a part of **diversity**, which encompasses the various cultural, social, and historical backgrounds of a group of people. Cultural dimensions are unique and important aspects of a person's personal identity, and sexuality is related to all of them.

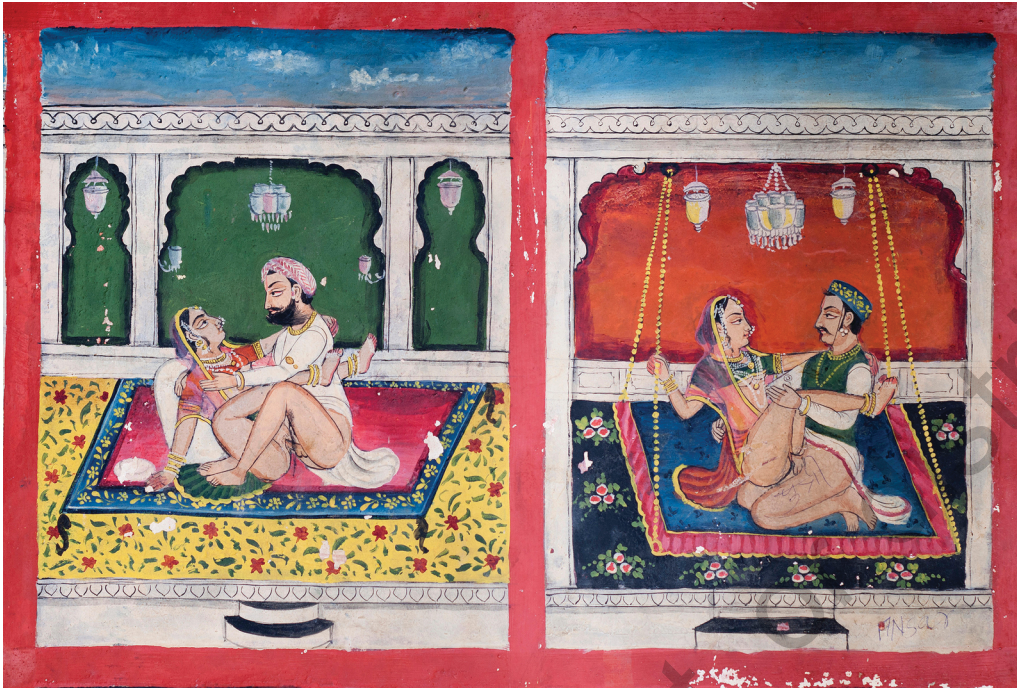
For example, consider Kevin, who identifies as a 31-year-old Black man. When growing up, Kevin may have connected to his Black identity in specific ways, such as food that he likes or the church that he attends. Some of these ways are shared by other members of his Black community, and some are unique to him based on what he values, likes, and dislikes. Kevin may have also learned specific community norms that sexuality is private and that sex should not be discussed. Kevin's values may be different from those of his girlfriend, Leah, who identifies as a 31-year-old White woman and who learned from her family and cultural community that sex is to be openly discussed and celebrated. Kevin's and Leah's racial and cultural identities may impact the values they learned from their family or community about sex. Attitudes about sexuality can become quite complicated for those who identify themselves with multiple different marginalized identities, such as identifying as both Mexican and as a lesbian. As you discover the range of human sexuality, you will also learn more about what humans have in common as sexual beings, what makes them unique, and how their sexualities fit with the sexualities of those around them.

The growing body of research about human sexuality shows that sexual practices and desires are grounded in many overlapping cultural perspectives, fostering a variety of identities, behaviors, desires, and values (Taormino, 2008; Williams et al., 2013). We often think about healthy sexuality within the parameters of our own cultural norms and values, even though sexual norms vary widely throughout the world, across cultures, and over time (Popovic, 2006). For example, the Kama Sutra is an ancient Indian Sanskrit text on sexuality that expresses one set of values by focusing on emotional fulfillment and connection between people as key values in reaching sexual pleasure (Carpentier & Mazandarani, 2021). The Kama Sutra, as seen in Figure 1.3, promotes achieving pleasure between all partners involved in sexual activities and values different sexual practices (such as sexual positions for intercourse). In contrast, sexuality in many European cultures conveys a different set of values. Historical documents indicate that many European communities valued purity and believed that sexuality should focus on reproduction instead of pleasure.

Values and norms extend beyond sexual intercourse. For example, some cultures believe in sex education in schools, while others do not. Some communities offer family planning services; others do not. Some cultures believe that people should get married to the person they've chosen when they wish to get married, but other cultures—such as certain cultures in Africa and Eastern Asia—believe marriage should happen in late adolescence or early adulthood. Interestingly, research has shown that the poorer the country, the earlier people get married, as marriage is highly correlated with wealth (Sayi & Sibanda, 2018).

Figure 1.3 • Kama Sutra

The writings and lessons contained within the Kama Sutra provide diverse examples of sexual expressions that are directly embedded within South Asian cultures.



imageBROKER/Alamy

Multiculturalism is a major part of a sex-positive approach, as is the acknowledgment of a variety of sex identities (Williams et al., 2013). Understanding the intersections between sexual and cultural identities is fundamental to sex positivity. Those who self-identify as lesbian, gay, bisexual, or pansexual may also self-identify as having diverse relationship structures (such as having more than one intimate partner). In addition, many media representations focus mostly on the sexual relationships of White heterosexual-identified people, and realistic portrayals of diverse relationships are less common than they should be. For example, there are relatively few media portrayals of relationships in which at least one person is a person of color, is transgender and/or gender nonconforming, or is involved in a same-sex relationship.

Intersecting Sexual Identities and Cultural Identities

1.3 Compare and contrast the concepts of intersectionality, privilege and power, marginalization, and oppression.

A multicultural view of human sexuality can help us think more specifically about the ways that sexuality intersects with experiences of race, ethnicity, gender, sexual orientation, disability, class, and other identities. Until recently, many sexuality studies accepted heterosexual, White, male sexuality as the standard. Today, sexuality studies affirm many different sexual identities. They celebrate diverse genders and ethnicities, and they attempt to incorporate the perspectives and experiences of everyone. Sexuality researchers aim to be anti-racist and strive to embrace a feminism that liberates sexuality from ideas that are intended to make people feel ashamed about their sexuality. In order to do so, a sex-positive approach must incorporate concepts of intersectionality, privilege and power, marginalization, and oppression.

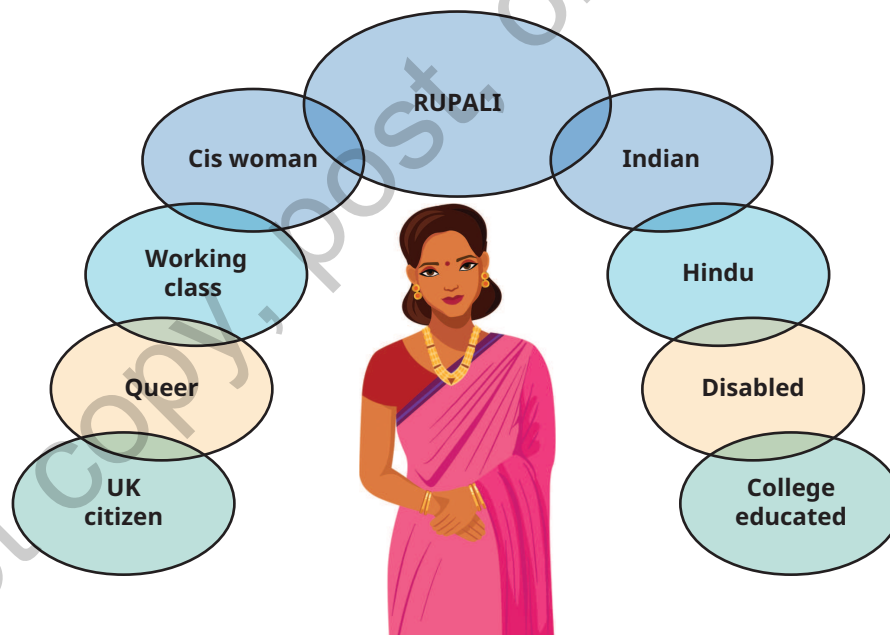
Intersectionality and Inclusion

As part of being anti-racist, sexuality researchers who are sex positive also embrace the many ways that a person's race intersects with other aspects of their cultural identity. The term **intersectionality** was coined in 1989 by Kimberlé Crenshaw, a professor and labor rights activist, to describe how race, class, gender, and other individual characteristics “intersect” with one another to create unique forms of stress for those with multiple marginalized identities (Crenshaw, 1993, 1994). Drawing from the growing body of research, investigating the many different intersections between human sexuality and culture can help us more closely examine and understand unique combinations of multicultural identities.

According to Crenshaw (1993, 1994), different marginalized identities intersect in different ways, as shown in Figure 1.4. The intersection of these marginalized identities may create unique experiences of marginalization, and these unique intersections affect membership in larger communities or social groups. These multiple marginalized identities are not additive for each person. That is, we do not stack them on top of one another and claim that the person with the most marginalized identities is the “most oppressed.” Rather, these identities intersect in critical ways that shape a person's experiences (Moffitt et al., 2023).

Figure 1.4 ■ Intersectionality

Crenshaw's (1993) landmark concept of intersectionality examines how different identities and characteristics that each of us has create unique forms of stress for those with multiple marginalized identities. In the case of the person shown here, her identities as queer, female, and living with a disability may cause unique sources of stress based on the intersections of these identities.



Crenshaw, 1993

A multicultural approach to sexuality also helps us understand that sexuality research and practice traditionally excluded people with certain cultural identities. For example, sexuality studies long ignored girls and women, people of color, and people with diverse sexual expressions. Current research needs to include all these groups (and the intersections between them). In the context of human sexuality, the term **inclusion** refers to people's representation, feeling welcome, or being a part of sexuality. Inclusive research efforts do not mean that research will exclude the experiences of White men or men in general, just that these groups may not be prioritized in the same way they once were.

We also need to keep up with ever-changing understandings of sexuality. By centering cultural identities and values rather than treating them as an afterthought, we not only accurately represent



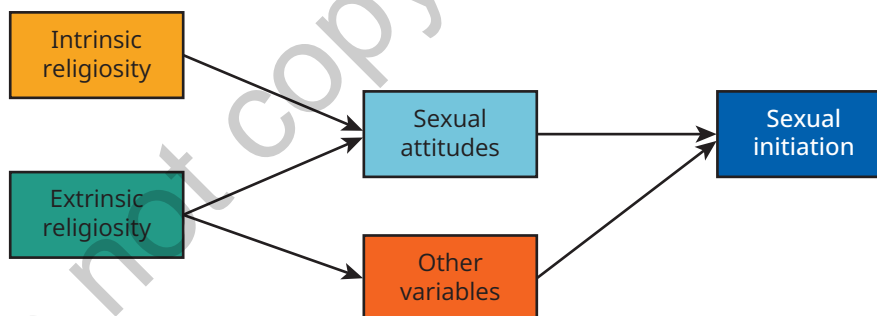
Contemporary sexuality researchers recognize the need to center people with identities that have often been left or forgotten in sexuality research, such as this group of African first ladies, meeting as part of the RAND African First Ladies Initiative of 2012.

Diane Bondareff/Associated Press

sexuality for a larger population of people but also change outdated notions of sexuality. For example, sexuality education around the world has changed over the last 3 decades as it became clear that teaching sexuality education in traditional settings was not working in diverse settings, as is seen in the research study in Figure 1.5. The ways we teach adolescents and young adults about sex and sexuality have shifted from focusing on avoiding disease and unwanted pregnancy to including issues related to consent, values, and sexual ethics.

Figure 1.5 • Impact of Ethnicity and Religion on Hispanic Adolescents

Researchers continue to produce studies that depict a complex relationship between sexuality and culture. In this figure, researchers Maria Calatrava and her colleagues (2021) present findings from their research on the relationship between ethnicity and religion on attitudes toward sexuality in Hispanic adolescents. They found that adolescents who engaged in active Catholic religious workshops (e.g., going to church) may be less likely to engage in sexual intercourse.



Calatrava et al., 2021

Suppose you are a person of African descent living in South Africa today. Your experiences will be very different from that of a person of African descent living in South Africa in 1955. Some of these differences can be linked to apartheid, a system of institutional racial segregation in South Africa from 1948 until the early 1990s. Apartheid and its lingering effects have had an impact on South Africans' cultural identity, which in turn has impacted their sexuality. For maximum inclusivity, historical and contemporary research into human sexuality must also consider how cultural identities engage with specific issues of privilege, power, marginalization, and oppression.

Privilege and Power

Often, sexual identity intersects with other aspects of a person's identity. And sometimes parts of people's identities are favored in the environments in which they live, work, or have sex. People with these favored identities often receive unearned advantages based on these identities. **Privilege**, or **cultural privilege**, is a system of advantage based on identification with a cultural majority group (DiAngelo, 2018). Privilege is often based on race, gender, and/or social class. For example, Rob, a 20-year-old White gay man living in Berlin, Germany, may have both White privilege (systemic, structural advantages based on being White) and male privilege (systemic, structural advantages based on being male) because both these identities make him part of a cultural majority. However, he may also be marginalized and oppressed because of his gay male identity. Rob's intersecting identities demonstrate how many people have a unique constellation of both privileged and oppressed identities.

Cultural privilege affects human sexuality through the exercise of **power**, which refers to a person's capacity to influence others' behavior or future events. People with power might use their influence to make people act or do something in a particular way (Riemer et al., 2020). For example, Rob (from the previous paragraph) may suggest a certain type of sexual behavior with his partner, Tom, assuming that Tom will make his own decisions about the behavior and speak up if he does not want to do it. However, if Rob is a White, gay man and Tom is a biracial, bisexual man, the dynamic in their sexual relationship may have a cultural component to consider. Specifically, given Rob's cultural privilege as the White man in the relationship, he may assume that he can make these decisions, whereas Tom may not feel comfortable saying no to these sexual practices. Power dynamics should be explicitly discussed in sexual and emotionally intimate relationships. Negotiating power is an inherent part of learning about sexuality. This book will explicitly discuss the issue in all chapters.

Black studies and education scholar Beverly Daniel Tatum (2003) brings these concepts of privilege and power together, with implications for sexuality. Tatum notes that privilege can be thought of as "prejudice plus power" and that it takes the form of unearned advantages based on cultural majority identities. When studying power in the context of culture and cultural privilege, we should understand how misuse of power in combination with privilege can occur specifically within sexuality. For example, lawmakers who identify as White may make certain laws about which neighborhoods and communities receive access to sexual health materials such as vaccinations, testing centers, and treatment regimens. These lawmakers may use their power to help create safe spaces for healthy sexuality; at the same time, they may not realize that they are providing these resources to specific communities that have predominantly White-identified residents. The lack of awareness about such a discrepancy (a product of White privilege) is an example of how a lawmaker's cultural privilege may intersect with their power to make decisions about access to health care and resources.

Marginalization and Oppression

When people use their cultural privilege and power to cut others off from resources, disconnecting those people from the economic and social mainstream of their society, they are engaging in **marginalization** (Riemer et al., 2020). Examples of marginalization vary from not having our identities reflected in sexuality research studies (as many researchers study mostly White men and may not work to have inclusive research samples) to having our sexual pleasures, desires, and fantasies insulted or explained in denigrating language. Marginalization can also take the form of **unconscious bias**, the social stereotypes about certain groups of people that can form outside a person's conscious awareness and influence their behaviors in ways they do not realize (deFur, 2020). In one example, we unknowingly enact unconscious bias if we always gravitate toward sexually explicit material that features people of specific racial or ethnic identities.

Marginalization based on sexuality is not a new phenomenon. In fact, it has happened at different points in history at larger, systemic levels (Mosher, 2017). For example, historical analyses of Black women's sexuality include sexual violence and rape during the U.S. colonial period and the eroticizing of Black bodies throughout the 19th and 20th centuries.

Marginalization is related to but different from **oppression**, which is unjust treatment or control of an entire social group by another social group that is privileged. Oppression often happens at a group, community, or organizational level, which in turn impacts people individually. Oppression is maintained by a variety of different mechanisms, not always deliberately, including social norms, stereotypes, institutional rules, and implicit biases (Taylor, 2016). Like marginalization, oppression carries over into human sexuality in terms of who is centered in discussions about sexuality and who is absent from these conversations. For example, White actors are overrepresented in comparison to actors of color in pornographic films, and studies find that producers of these films often pay female-identifying performers less than male-identifying performers (Fritz et al., 2021).

Racial oppression at various levels can lead to **White supremacy**, a particular type of oppression in cultural, economic, and political systems that sustains White people's dominance over almost all sectors of society. White supremacy prioritizes both the needs and the experiences of White people first in an attempt to make or keep White people dominant in all aspects of society. Through White privilege and White supremacy, people create false ideas about the dominance of White people in a wide variety of social settings (Ansley, 1997). These false ideas are connected to elements of sexuality. For example, a lack of awareness about White supremacy may cause some people to eroticize or fetishize certain people of color, creating false stereotypes about certain people's sexualities.

In recent years, researchers have increasingly studied oppression dynamics. For example, one study analyzed sexual images of women in magazine advertisements (Baker, 2005). The researchers compared more than 600 images of women based on aspects such as a person's role, body position, size, and physical characteristics. The results suggest that advertisers portrayed sexual images of women as dependent and submissive for White audiences. Alternately, advertisers portrayed sexual images of women as independent and dominant for Black audiences. The takeaway point here is that culturally informed representations of women's sexuality are different, and these differences may impact viewers' development of inadvertent bias or marginalizing behaviors.

Embracing Multicultural Sexuality

1.4 Illustrate how multiculturalism and diversity impact sexuality.

A multicultural approach to human sexuality is not only about recognizing privilege and oppression. It is also about identifying the positive ways of understanding sexuality that some cultures promote. For example, some Asian countries have specific cultural rituals around love and marriage that are quite different from those in most Western countries. In some Japanese families, for example, a future bride will have her immediate family living with her for a period of time in the run-up to her wedding ceremony. Such connection during this time allows one's family to provide support and positive affirmation of intimate relationships. A person's connection to their racial and ethnic communities may also provide important social support that can act as a buffer against sexual risk factors, such as sexually transmitted diseases (STDs), sexually transmitted infections (STIs), and sexual dysfunction. For example, researchers have suggested that certain young Black people who have strong ties to their ethnic communities through churches, community groups, or after-school programs are less likely to contract STDs and STIs (Munoz-Velazquez et al., 2020). The intersections between diversity and sexuality can offer multiple benefits simultaneously by shedding light on privilege, marginalization, and oppression.

Intersectionality, Oppression, and Marginalization

As we consider people's intersecting identities, we need to explore how they create experiences of oppression and marginalization for some people. Researchers (e.g., Aguayo-Romero, 2021) have used intersectionality to identify patterns of oppression and marginalization that are based on connections between identities. Such identities include race, ethnicity, gender, ability, geographic origin, sexual

orientation, gender identity, acculturation status, and age. These intersections can create additional threats and more vulnerability to oppression.



Contemporary research in sexuality aims to understand the unique ways that specific groups of people, such as women like those in these print magazines, have been portrayed in ways that suggest submissiveness and dependency that can contribute to cultural and unconscious bias.

RICHARD B. LEVINE/Newscom



Each person's intersecting identities, such as those of both members of the Caribbean couple pictured here, will impact their experience of sexuality differently, which will connect to and influence their experiences of marginalization and oppression.

Klaus Vedfelt/DigitalVision/Getty Images

For example, suppose that Cristina is a Puerto Rican American woman who has begun to think more deeply about her sexual orientation. As part of her identity discovery, she decides to seek support in her local community. However, when she goes to a local event for lesbian and bisexual women, she finds that most of the attendees are White, and she does not feel comfortable expressing her cultural and ethnic heritage due to racist comments from some of the attendees. Cristina feels unsupported and has to deal with the impact of these racist comments. When she goes to another local event hosted by members of her Puerto Rican community, she hears some homophobic comments that marginalize

lesbian, gay, and bisexual people, leaving her feeling uncomfortable about different parts of who she is. Cristina's experiences at these two events show us how the intersection of her identities as Puerto Rican and someone exploring her sexual orientation makes her feel uncomfortable in multiple spaces.

The oppression experienced via intersectionality may greatly affect the way that we engage with sexuality. For example, consider a heterosexual Caribbean American woman and a heterosexual Caribbean American man watching a popular film that includes a sex scene. Although they may share the same Caribbean cultural values, they might have internalized them differently. They may even share a racial and ethnic identity, yet their differing genders may have informed their experiences in different ways. Perhaps the Caribbean man has learned from his environment that men can talk openly about sex, whereas the Caribbean woman has learned that women should not be too sexual lest they be labeled as “promiscuous.” These differing gender expressions, intersecting with characteristics such as sexual orientation and gender, may greatly influence the way each of the two engages with this film scene.

As we think about multicultural sexuality, we will consider a professional sex educator and sex therapist whose work focuses on multicultural sexuality. In each chapter of this book, we will highlight the work of different professionals whose work focuses on sexuality. These different “pathways and careers” may help you focus on your own career development and career trajectory as it relates to sexuality.



In a sex-positive approach to understanding sexuality, we must understand how various cultures may shame and silence sexuality. For example, this multiracial couple may come to understand how each of their cultures has shamed sex previously.

Anchiy/iStock

Pathways and Careers in Human Sexuality with a Sex Therapist

Jamila Dawson, MA, LMFT, is a licensed marriage and family therapist practicing in Los Angeles, California. Dawson is a sex therapist with specific training related to human sexuality. She has a private practice in which she conducts therapy with single clients, people in relationships, and families. She also provides workshops and teaches in the areas of sexual well-being, multicultural-inclusive sex therapy, and sexual practices involving BDSM and power exchange. Dawson celebrates the experiences of Black diasporic identities within her sexuality research and practice.

She began her career by working at the Pleasure Chest, a store selling sex toys and accessories with a mission of empowering customers to learn about themselves as sexual beings. “As I was working at the Pleasure Chest,” she says, “I began to realize that I liked helping customers to understand how they could have enjoyable sex while acting in the safest and most pleasurable way.” Simultaneously, she began to recognize that Black Americans are underrepresented in the field of



Ms. Jamila Dawson, MA, LMFT, specializes in providing sexuality education and mental health services that are rooted in intersectionality. She received specialized training in using a sex-positive approach.

Jamila Dawson

sexuality expertise. “I wanted to know that there were other Black people who felt like I did,” she said. She also began to expand the boundaries of her own sexual identities and pleasures—learning about sexual practices such as kink, bondage, and authority exchange.

She attended graduate school, completing her MA in clinical psychology with a specialization in marriage and family therapy. As part of her degree program, she was required to take coursework and gain real-world experience in providing therapy under the supervision of another licensed therapist. Dawson completed this training at a community mental health center in Los Angeles, where she actively sought opportunities to work with individual people and couples in the area of sexuality. “As I was doing my training,” she recalls, “I began to understand that, by being a marriage and family therapist, it was about relationships in a sociocultural context.”

While completing her training, Dawson began to realize that “sex is a deeply personal topic for many people. At the same time, there is a rewarding and deeply subversive part of my job in health care [related to sexuality]. I get to help people shed layers of shame and toxic messaging from the outside world, and perhaps watch a client stop feeling afraid or alone and start to feel strong as a sexual being. Sometimes, I have the unique pleasure of putting language to what a couple may not talk about or may not see.”

Her identity as a Black woman within the sexuality field has been a consistent point of both celebration and marginalization for Dawson. “I tend to get tokenized a lot. Sometimes, many of my [colleagues, clients, or people that I train] may think that I do not have expertise or something to say about a specific topic related to sexuality.” Dawson advises undergraduate students interested in sexuality studies to “fall passionately in love with sexual variety. Learn about aspects of sexuality that aren’t always talked about or common, and seek out information about groups of people or people with identities that are not talked about.” She also suggests talking with other sex therapists. “Students interested in sexuality should have conversations with people in the field, either in person or via email.” She notes that learning about sexual diversity was helpful in her own learning. “As someone in the field of human sexuality,” she says, “I want to know what’s there.”

As she continues her journey in the field of human sexuality, Dawson continues to engage with a variety of professional and sexual experiences. “As someone in the sexuality field, I have to know my own sexuality as it changes over time so that I can know how I am relating to clients. Also, by knowing myself as a sexual being, I can be both safe in the room with my clients but also help them to lead toward a path of transformation.”

Something to Think About . . .

What about Jamila Dawson’s professional development is interesting to you? What specific aspects of her journey are ones that you want to learn more about and/or do more research about outside of this course?

Benefits of Sex Positivity

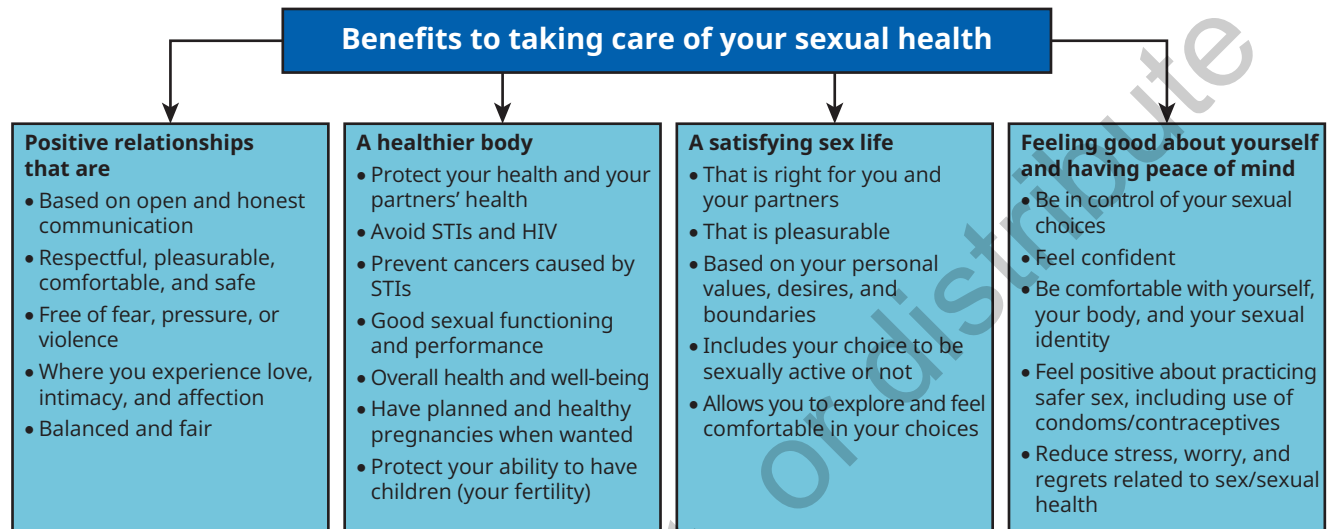
1.5 Discuss the impact of sex positivity on human well-being.

As you begin to learn a sex-positive, multicultural approach to human sexuality, you will soon discover that this approach has many different benefits. The World Health Organization (WHO) has noted that sex-positive attitudes can enhance our sexual intimacy and eroticism (as noted in Figure 1.6), which can in turn enhance our connection, communication with others, and love (WHO, 2006). This open perspective offers a powerful, alternative point from which to assist those of us who may struggle with shame-based or negative understandings of sexuality. Sex positivity is all about accepting all sexualities as long as their sexual expressions are communicative, safe, and consensual. A multicultural, sex-positive approach expands our ideas of sexuality from a place of strength, affirmation, a lack of judgment, and a lack of fear. As we consider a sex-positive approach, we must think of “how” and “why” to apply it that most benefits other people. When thinking about “how,” we must center different methods of

prevention and promotion. When we think about “why,” we must center concepts of human resilience and well-being.

Figure 1.6 • Detailed Benefits of Sexual Health

Researchers continually suggest that a sex-positive approach is beneficial to our overall health. In this research summary, taken from a 2022 study with 1,256 adults aged 18–26, researchers found that many young people needed support in embracing positive sexuality due to low comfort levels in talking about sex and a range of topics that they wanted to talk about but felt as though they didn’t know how.



National Coalition for Sexual Health, 2022

Sex positivity in a multicultural context is a form of **resilience**, which is a strategy that people use to adapt to and cope with adversity, trauma, and negative or difficult experiences (Cho & Docherty, 2020). Erotophobia can exacerbate existing stress and make these negative experiences even more difficult. For example, erotophobia affects a person’s mental well-being by decreasing their self-esteem and increasing their engagement in negative behaviors such as smoking and alcohol addiction (Simpson, 2021).

Some erotophobic messages about sexuality are deeply woven into many of our developmental experiences, resulting in shame, fears, and attitudes that can lower our resilience in the face of stress (Simpson, 2021). You may have noticed that different forms of erotophobia were present in the stories of Daria and Jack earlier in this chapter. The erotophobia may have been imposed by their environment, by themselves, or by a combination of both.

Sex Positivity and Well-Being

The emphasis on resilience in sex positivity connects to sexuality’s crucial role in human strength and **well-being**, defined as the comprehensive optimal functioning of a person or group (see Table 1.1). Most health researchers see well-being as continued maintenance of wellness, including preventing illness, maintaining a healthy lifestyle, and making decisions that enable people to live a long and healthy life. Well-being is necessary for living a healthy, happy, and fulfilled life. The primary difference between health and well-being is that health is a goal that a person wants to achieve, while well-being is the active process of achieving health and meeting that goal (Riemer et al., 2020). **Health** is defined as a state of complete physical, mental, and social well-being (see Chapter 11). For example, you may think about health in terms of how long you may live or the physical shape you want to be in at 75 years old. You may also think about your well-being in terms of the choices that you make to accomplish those goals: eating right, engaging in the right types of exercise, and making sure you get enough quality sleep each night.

Table 1.1 ■ Health vs. Well-Being

	Health	Well-Being
Definition	A state of complete physical, mental, and social comfort and security.	The comprehensive optimal functioning of a person or group through continued maintenance of wellness.
Example 1	What physical shape do I want to be in at age 75?	What are the lifestyle changes I want to make now so I can be in good shape at age 75?
Example 2	What is the overall impact of a healthy diet throughout my life?	What are small changes that I can make to my diet over time that will ensure a longer life?
Example 3	How will I be able to function if I can avoid certain illnesses until I am 80 years old?	What precautions can I take throughout my life to avoid illnesses at 80 years old?

Research indicates that a person's active engagement in promoting well-being for themselves and loved ones can increase their overall lifespan and longevity (Thompson & Livingston, 2018). Sexual well-being (as seen in Figure 1.7) has many components, which are helpful in achieving overall sexual health.

Prevention and Promotion

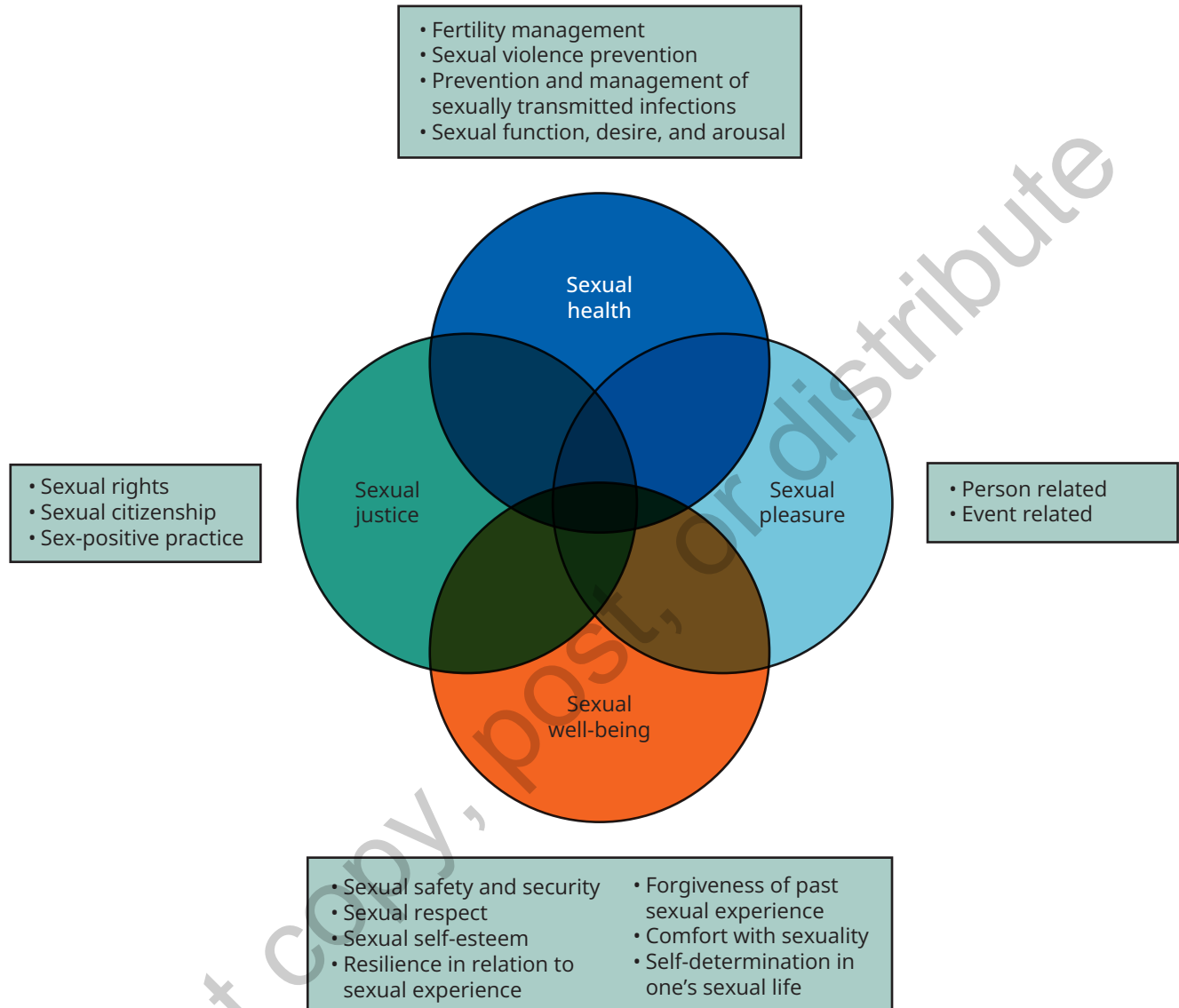
Seeing our sexual selves as whole, healthy, and proud (as opposed to shameful) is an important factor in a lifelong commitment to health. In fact, bringing more sex positivity into our own sexuality can help us examine the ways that healthy sex can improve our individual and collective lifespans. Sex positivity also aims to prevent harm and illness associated with sexuality (such as sexually transmitted infections) and to increase sexuality-related health and well-being (such as sexual satisfaction and healthy intimate relationships). In other words, sex positivity has a focus on both prevention and promotion. **Prevention** is the warding off of disease, harm, and negative health-related behaviors before they start (Albee et al., 1988). Sexuality researchers have expanded on this definition to include actively preventing the onset of sexuality-related infections (e.g., pubic lice), disease (e.g., HIV/AIDS), negative behavior related to sex (e.g., pressuring a partner into intercourse), and other health problems. The three distinct levels of prevention, as outlined in Table 1.2, are primary, secondary, and tertiary prevention. They can be applied alone or simultaneously.

Table 1.2 ■ Levels of Prevention

Level	Definition	Example
Primary Prevention	Preventive efforts that ward off the onset of a sexuality-related illness or injury before it begins	<ul style="list-style-type: none"> • HPV immunization • Classes on how to have healthy communication about sex
Secondary Prevention	Preventive efforts that lead to early diagnosis or sexual health education in a population that is at greater risk of a sexuality-related illness or injury than the general population	Screening for sexual violence in communities with increased alcohol use (and therefore at greater risk of sexual violence than the general population)
Tertiary Prevention	Preventive efforts aimed at early intervention following the diagnosis or treatment of an illness or negative health-related behavior	<ul style="list-style-type: none"> • Regular visits to a health care provider • Medication compliance so that a person living with HIV does not develop AIDS

Figure 1.7 • Components of Sexual Well-Being

In this exploratory research, Mitchell and colleagues (2021) reviewed sexuality literature in order to address the needed components of sexual well-being. They found that sexual pleasure, sexual well-being, sexual health, and sexual justice were all core components of positive sexuality.



Mitchell et al., 2021

An important clarification is needed for the term *prevention*. When used in the context of sexuality, prevention does not mean that sex-positive practitioners *prevent* people from having sex, which might actually translate into erotophobia. Instead, sex-positive researchers, therapists, educators, and practitioners use prevention as a way to *prevent unhealthy sex* or *prevent engagement in sex that results in harm*. This is why sexuality-focused professionals must be cautious when using terms associated with the concepts of prevention and promotion.

Promotion is the advancement of well-being, health, or positive health-related behaviors (Riemer et al., 2020). Sexuality researchers have expanded on this definition to include planning for and actively undertaking sexuality-related positive behaviors, such as avoiding feelings of shame; protective health measures, such as condom usage; and positive interactions related to sex, such as talking to a partner about likes and dislikes related to sexual intercourse. The three distinct levels of promotion, as outlined in Table 1.3, can be applied alone or simultaneously.

Table 1.3 ■ Levels of Promotion

Level	Definition	Example
Primary Promotion	Promotion efforts that encourage a sexuality-related health behavior before it begins	A billboard supporting feeling positive about identifying as gay, lesbian, or bisexual
Secondary Promotion	Promotion efforts that lead to sexual health education in a population at greater risk of sexuality-related illness or injury than the general population	Sexual health programs in communities with increased risk of sexually transmitted diseases (and therefore at greater risk of sexual violence than the general population)
Tertiary Promotion	Promotion efforts aimed at reinforcing health-related behaviors following the diagnosis of or treatment for an illness or a negative health-related behavior	A sexual health educator's talk to people living with HIV about how to discuss safer sex with their partners

Professionals in the field of human sexuality use both prevention and promotion tools to advocate sexual well-being. Specifically, they promote healthy sexuality; avoid shame-based, pathology-focused models of sexuality; and promote sex positivity as a tool for increasing a person's well-being. In their work, they use the different levels of prevention and promotion to focus their efforts and ensure a successful outcome. For example, if you were going to design a program to help prevent erotophobic comments at a school where you work, you might first want to figure out how often the comments are being heard at the school. Knowing this information will help you to determine the magnitude of the problem and whether you need to design a primary, secondary, or tertiary prevention program—or some combination of the three.

Introducing Sex, Gender, and Sexual Orientation

1.6 Explain common terms related to sex, gender, sexual orientation, and affectional orientation.

Vicki is a 4th-year student in mechanical engineering who is excited to attend the first day of her human sexuality class, which she is taking as part of her women's studies minor. Vicki is a 30-year-old White Polish American lesbian female-identified student who has had some sexual experiences and conversations about sexuality with others, including people in her small circle of friends who are also lesbian or bisexual women. She has postponed taking this class a few times due to conflicting required classes, and now she is excited to learn more about the science and evidence behind sexuality studies. She hopes to learn more about sexuality, especially because she is not familiar with a lot of research or studies about gay and lesbian people. Most of the information Vicki has received about her community has been from the media or her peers, and Vicki believes that not all of this information is accurate. She is determined to use this class to separate fact from fiction.

Sex positivity, well-being, and the value of diversity are core tenets of the field of human sexuality. The norm of a White, heterosexual person who identifies as either male or female is increasingly outdated. In fact, there is a growing need to highlight sexual orientation and gender identity when discussing sexuality (Burnes & Stanley, 2017). A sex-positive approach understands that sex and gender are different, but linked, concepts. This section explains some key terms that will help you better understand the different components of human sexuality, including sex, gender, sexual orientation, and affectional orientation.

Sex

As you learned in the beginning of this chapter, the term sex may refer to a variety of different categories, such as male, female, and intersex. Most humans are typically assigned a sex at their birth based on genitals. A person's **sex assigned at birth** classifies a person as female, intersex, or male based on a person's sexual anatomy, chromosomes, and hormones. Many people are assigned a sex at birth by a doctor in the hospital and are labeled as *boy* or *girl* in the delivery room based on a doctor's interpretation of their anatomy. *Sex assignment* is a term that many sex-positive people use in place of *biological sex* to encompass more diversity.



Medical professionals assign each of us a biological sex when we are born. These professionals intend to identify each of us as “male,” “female,” or another sex.

1905HKN/iStock

Before the 1950s, assignment of sex was based almost entirely on external genitalia. To honor the perspective of those for whom the term *biological sex* does not resonate, a sex-positive multicultural approach uses the words *sex* and *assignment* when learning about these concepts (American Psychological Association, 2015).

Gender

Sex is distinct from gender. **Gender** refers to “the attitudes, feelings, and behaviors that a given culture associates with a person's biological sex” (American Psychological Association, 2021, p. 56). *Gender* reflects elements of our identity and expression—such as clothing, pronoun choice, and the way people walk, talk, and carry themselves—that are constructed by the culture, society, and values around us. These elements of our identity and expression may or may not line up with the sex we were assigned at birth. Our **gender identity** is our internal sense of self as masculine, feminine, androgynous, or another gender identity that we know ourselves to be.

Combining Sex and Gender

Sometimes our gender identity and how we express our gender fit traditional socially constructed categories. In these cases, a person's sex and gender match the way society believes they should be based on their gender. For example, Tyrone is a Black person born in Los Angeles, California, in 2000, so he was 24 years old in 2024. If his gender identity is male and he was assigned male at birth, Tyrone is considered **cisgender**, or someone with a gender identity that matches with his male sex assigned at birth. Tyrone may wear certain clothes that allow the people around him to see his gender as male based

on cultural and societal norms about gender and clothing. Because of the culture he lives in, he may engage in hobbies or pastimes (such as athletic sports) that men disproportionately engage in compared to other sexes and genders.

Other people may not have a gender identity that matches the sex they were assigned at birth. **Transgender** is an adjective that is an umbrella term used to describe the full range of people whose gender identity does not conform to what is typically associated with their sex assigned at birth (American Psychological Association, 2015). Many people experience this incongruence with their gender identity. People who are transgender may wear certain clothes that allow people around them to see their gender as they know themselves to be, and not based on cultural and societal standards about the sex they were assigned at birth. Because of the cultures they live in, transgender people may engage in hobbies or pastimes that people of the gender they know themselves to be disproportionately engage in compared to other sexes and genders.

As you learn about human sexuality from a sex-positive approach, you will engage with many different researchers, some of whom may use certain terms when referring to sex and gender (and sometimes incorrectly combining the two concepts). If these researchers use terms such as *men* and *women* to refer to their samples, this book will reflect that language when reporting the research (because it is what these researchers used). However, we must recognize that we may make incorrect assumptions about the gender identity of a group of people referred to using certain gender labels. For example, if a sexuality researcher is studying sexual arousal in women and refers to “women” throughout their research study, we may assume that all these women were assigned female at birth and have certain genitals.

Therefore, our sex-positive approach may use more inclusive and accurate language when discussing larger theoretical concepts about the impact of gender and biological sex on sexuality. The author will use these two phrases—*people with a vulva and ovaries* and *people with a penis and testes*—when referring to concepts that focus on sex assignment and that are more biological in nature. The author will use *man* and *woman* to refer to people who identify with each of those gender identities, including when their gender identity differs from their sex assignment. The author will use *male* and *female* when referring to gender concepts that focus on social roles and gender roles in nature. These changes aim to encourage and develop inclusivity instead of divisiveness.

Sexual Orientation and Affectional Orientation

Sexual orientation refers to our social, emotional, or physical attraction to someone else, whether of the same sex, another sex, or multiple sexes (Diamond & Butterworth, 2008; Park, 2022). This attraction has many factors that overlap, but we need to understand each factor on its own terms. For this reason, people working in human sexuality are increasingly separating *sexual orientation* from *affectional orientation*. **Affectional orientation** describes the gender identity, gender expression, or sex assigned at birth of one or more other people with whom we are predisposed to share emotional, physical, spiritual, and/or mental bonds. Many sex-positive researchers use *affectional orientation* instead of *sexual orientation* to emphasize the many types of possible relationships that we can have with each other (emotional, physical, spiritual, and mental). The word *affectional* also minimizes sexual behavior as the only way to understand a person’s identity, because a person’s identity may not exactly match their sexual attraction and/or sexual behavior. Sexual orientation, like human sexuality, is complex. The extent to which we are attracted to someone may not be solely sexual in nature. That is why the language and terminology should reflect these updated understandings of how we are attracted to other people.

Nonetheless, many people prefer to use the term *sexual orientation* in reference to their own identity. For that reason, it is respectful and sensitive to ask people to specify which term(s) they like to use when they describe their own identity.

The American Psychological Association (2021) defines three examples of sexual-affectional orientation as follows:

- Someone who identifies as having a **gay** sexual orientation is a man who is emotionally, physically, mentally, and/or spiritually oriented to bond and share affection with other men.

The term *gay* is also used sometimes as a catch-all term that refers to people who identify as lesbian, gay, bisexual, and/or queer.

- A **lesbian** is a woman who identifies as emotionally, physically, mentally, and/or spiritually oriented to bond and share affection with other women.
- A **heterosexual** person is emotionally, physically, mentally, and/or spiritually oriented to bond and share affection with those of the “opposite” sex.

These three terms are just a few examples of how people describe different *sexual identities*. **Sexual identity** is the label that describes someone’s identity. Sexual identity can often (but not always) be influenced by culture, environment, and community.

Although sexual orientation may be fixed, the way that we *express* it may change throughout our life, with our attractions shifting at different times (Diamond, 2016; Katz-Wise & Hyde, 2015; Rupp, 2012). *Fluidity* may occur in terms of whom we are attracted to and how those attractions manifest over time—for example, through physical attraction, emotional attraction, or sexual behavior with others. In a specific example, if you identify as a heterosexual person for 31 years of your life, there may be a point after your 31st birthday when you become attracted to a person of the same sex—such fluidity could be indicative of our attractions shifting over time.

These introductory conversations about sex, gender, and orientation add up to a broader and necessary lesson: We cannot assume all people who identify as women, men, or other gender identities were assigned that way at birth. It’s important to keep these ideas in mind as part of a sex-positive approach to learning about human sexuality. For example, research on women’s sexual response cycles should clarify whether it has studied only cisgender women or all women. Further, when studying biological anatomy, we need to distinguish between the biology of people assigned male at birth and those assigned female at birth without assuming that a person will choose to express a gender socially congruent with their sex assigned at birth. For example, just because a baby is born and assigned female at birth by doctors in a hospital does not mean that this baby will grow up to want to express a female gender; rather, this baby may come to know many other gender identities and/or expressions as they mature.

Finally, knowing about sexual orientation and affectional orientation can help you avoid inaccurate assumptions and generalizations about sexuality research. For example, if you are reading an article about sexual communication in romantic partnerships, you will likely recognize that researchers have historically reported on communication patterns with cisgender and heterosexual couples. Communication styles will probably differ when both members of a couple identify as cisgender and heterosexual versus a couple that identifies as cisgender and the same sex (either gay, queer, or bisexual). Communication styles may also differ when one person identifies as transgender and heterosexual and the other person identifies as cisgender and heterosexual. So as you learn about sexuality research in this book, use these identities as a framework to understand the complexity and diversity of human sexuality.

Reviewing Key Concepts

1.1 Distinguish between sex, sexuality, and human sexuality.

- Sex and sexuality have different definitions. Sex refers to categories to which people are typically assigned at birth based on physical characteristics, such as genitals.
- Sexuality refers to the way in which living organisms (such as animals) express themselves as sexual organisms. It is important to understand how culture, context, and environments influence various components of human sexuality.
- Human sexuality refers to the many dimensions that impact how we experience, understand, and express ourselves as sexual human beings throughout our lives. Human sexuality is influenced by multiple factors, including culture, family of origin, and identity, and together creates a unique person who interacts with human sexuality.

- The Circles of Sexuality Model is a theory designed to help explain and differentiate the components of human sexuality. It is a helpful visual depiction of the sex-positive approach because the model centers values of nonjudgement.

1.2 Identify and discuss the elements of a sex-positive approach.

- Sex positivity is a shift that moves away from a pathology-focused model to a new model in which sexuality that is safe, consensual, and communicative is seen as healthy and a necessary part of human development.
- A variety of dimensions make up a sex-positive lens for studying human sexuality. Understanding the need to see sexuality within a cultural context is a key aspect of this approach, as is the notion that sexuality has historically prioritized a White, Western view of sexuality as a norm, a view that needs to change.
- Approaches to human sexuality based on well-being ensure that people of various genders and sexualities are centered in the study of sexuality. Conversations about biology cannot refer to “men’s bodies” and “women’s bodies,” because different bodies can belong to people of the same gender identity and expression.

1.3 Compare and contrast the concepts of intersectionality, privilege and power, marginalization, and oppression.

- Intersectionality describes the ways that people’s multiple marginalized identities may create unique sources of stress for them. These intersecting identities and their resulting additional stressors can have a large impact on people’s sexual well-being and are thus a critical component of a multicultural approach to sexuality.
- Privilege is a system of advantage based on identification with a cultural majority group (DiAngelo, 2018). Privilege is often based on race, gender, and/or social class. Privilege affects human sexuality when people exercise it through power, or a person’s capacity to influence others’ behavior or future events.

1.4 Illustrate how multiculturalism and diversity impact sexuality.

- Multiculturalism is a key component of understanding human sexuality. Everyone’s cultural identity affects their sexuality.
- Societal forces such as oppression, marginalization, and cultural privilege lead to unequal distribution of power, which affects human sexuality in a variety of ways.

1.5 Discuss the impact of sex positivity on human well-being.

- As we think about applying a sex-positive approach, we must think of our reason for applying it so that it most benefits other people. When we think about why, we must center concepts of well-being, or the comprehensive optimal functioning of a person or group.
- Tools to promote sexual well-being include prevention and promotion. Each of these tools exists at different levels—primary, secondary, and tertiary—that help to prevent pathology-focused and harmful aspects of sexuality and promote healthier, more positive versions of sexuality overall.

1.6 Explain common terms related to sex, gender, sexual orientation, and affectional orientation.

- Sex is distinct from gender. Gender refers to “the attitudes, feelings, and behaviors that a given culture associates with a person’s biological sex” (American Psychological Association, 2021, p. 56).
- Sexual orientation refers to our social, emotional, or physical attraction to someone else, whether of the same sex, another sex, or multiple sexes (Diamond & Butterworth, 2008; Park, 2022). This attraction has many factors that overlap, and people working in human sexuality are increasingly separating sexual orientation from affectional orientation.

- Diverse sexual orientations and affectional orientations are key components of human sexuality. A person's orientations may be static, or they may be fluid and change over time. These aspects of a person's identity are a core component of diversity and multiculturalism.

Key Terms

affectional orientation	primary promotion
body image	privilege
Circles of Sexuality Model	promotion
cisgender	resilience
cultural privilege	secondary prevention
diversity	secondary promotion
erotophobia	sex
gay	sex assigned at birth
gender	sex-negative
gender identity	sex-positive
health	sexual identity
heterosexual	sexuality
human sexuality	sexually intelligent
inclusion	sexual orientation
intersectionality	sexual pleasure
lesbian	tertiary prevention
marginalization	tertiary promotion
multicultural	theory
oppression	transgender
power	unconscious bias
prevention	well-being
primary prevention	White supremacy

Discussion Questions

1. What are some ways that you can adopt sex-positive attitudes in your daily life?
2. How might a person's ethnic identity affect how they understand their sexual orientation?
3. What might be one or two challenges to engaging in health promotion? For each challenge that you identify, what strategy would you use to overcome that challenge?
4. How can people who have cultural privileges based on race (e.g., White people) seek to create more sex positivity for people who may hold marginalized identities (e.g., people of color)?

Fact or Fiction?

After reviewing the "Ask Yourself" questions at the beginning of the chapter, take this quiz to check your learning.

1. Fact or Fiction? The term *sex* refers primarily to one's physiology, whereas sexuality is how organisms express themselves as physical beings in a variety of ways
Fact.

2. Fact or Fiction? Most of our information about sexuality comes from one primary source in our lives, such as a trusted family member or a specific media outlet.

Fiction. Our knowledge of human sexuality comes from a variety of sources that we rarely question or think about critically.

3. Fact or Fiction? Our gender identity refers to the gender that each of us know ourselves to be, which is different from our sexual orientation, which is the emotional, physical, and psychological connection that we may have to someone else.

Fact.

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Chapter 2

Historical Influences on Sexuality



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Learning Objectives

By the end of this chapter, you will be able to do the following:

- 2.1 Illustrate the ways that our understanding of history impacts human sexuality.
- 2.2 Discuss historical myths focused on sexuality that were pervasive prior to the 17th century.
- 2.3 Compare and contrast at least two different influences on sexuality during the 17th and 18th centuries.
- 2.4 Identify at least two ways that sexual degeneration impacted experiences of sexuality in the 19th century.
- 2.5 Identify and discuss the work of key sexuality scholars from the 20th century.
- 2.6 Compare and contrast at least two different factors that will influence the future of human sexuality.

Ask Yourself . . .

Here are some questions to consider. Think about them, and you'll find answers as you read throughout the chapter.

1. What were at least two characteristics of attitudes about sex in the 19th century?
2. What primary contribution did Henry Havelock Ellis make to sexuality research?
3. Who is Michel Foucault, and what contributions did he make to human sexuality scholarship?
4. What is the minority stress model? What impact does this model have on understanding health for LGBTQ+ people?

Sexuality in a Historical Context

2.1 Illustrate the ways that our understanding of history impacts human sexuality.

Annie is a 31-year-old White cisgender female undergraduate at a university in a very conservative region of the United States. In a class that focuses on African history, the instructor begins to discuss common cultural norms that 19th-century African people had with respect to sex, as well as countercultural groups in North Africa during the 16th century that prioritized sexual rights and forms of birth control for Black women. Several students have strong reactions, saying that birth control is against their religious beliefs. Annie raises her hand and asks, "Just because there may be certain views about birth control now doesn't mean they've always been the predominant views, right?" The instructor confirms that contemporary views about birth control may have emerged from a certain time, place, and context and that there may have been multiple influences on these views. As she reflects on her instructor's response, Annie wonders, "How did certain views about birth control become the views of contemporary society?"

Annie's experience highlights the fact that historical customs, traditions, and values have had a huge impact on contemporary sexual norms and rules across the planet. As you continue your study of human sexuality, it is useful to remember that most of us believe that the values, traditions, and norms we learned about sexuality are correct (and they may not all be so).

Historical and educational perspectives, separately and together, have influenced human sexuality. But how did certain ideas, rules, laws, and norms about sexuality come into being? Often, they are the product of the social and cultural ideas from previous decades and centuries. A person's sexuality does not occur in a vacuum or happen as an isolated experience. For example, suppose you are watching a film that depicts a scene in which two people who just met are having sexual intercourse. At first glance, you might think of it as a "random sex scene." However, in thinking more deeply about the scene, you may wonder which specific social attitudes (such as values about casual sex) might have influenced its representation of sex. What cultural norms might influence your viewing of the scene? For example, would you view the scene differently if you thought that *people should have sex only if they are married*?

The larger context influences our understanding of sex and sexual values. As you learned in Chapter 1, our understanding of sexuality is shaped by our environment. In addition, historical trends can mold contemporary understandings of sexuality. That said, you might be surprised by how different past understandings of sexuality are from how we understand sexuality today. In this chapter, we focus on the social, cultural, and economic factors that have influenced understandings of human sexuality throughout history.

Transnational vs. Comparative Historical Analyses of Sexuality

Sex-positive researchers and historians generally take two key approaches to studying historical sexuality, as shown in Table 2.1: the transnational approach and the comparative approach.

Table 2.1 ■ Comparing Methods of Historical Analyses

	Transnational Analyses	Comparative Analyses
Subject of Analysis	Analysis of historical themes, connections, and trends across a wide variety of locations and nations	Comparison of distinct and specific countries' interactions or institutions' histories
Results of Analysis	Helps in understanding similarities. Results are wide, systemic trends across countries, societies, and continents.	Helps in understanding differences. Results are trends and overarching themes (not connections or similarities) in comparing several specific countries or interactions.

Transnational history is an analysis of historical themes, processes, and trends across a wide variety of locations (Bayly et al., 2006). Instead of analyzing the history of sexuality in one country at a time, transnational history focuses on interactions; connections across different countries; and ideologies that occur among, between, and within different cultures, communities, and institutions (Iriye, 2004). Thus, instead of reviewing the history of sexuality in one specific place at a time, sex-positive historians using a transnational approach often make connections and identify trends—such as similar attitudes toward sex, sexual behaviors, or erotophobic legislation—across multiple countries, societies, and continents.

Using a transnational, sex-positive approach, we can identify several major similarities in the history of sexuality. One trend that historians have found across different civilizations is an increasingly affirming understanding of sexuality (i.e., not shamed-based), although historical civilizations may not have labeled these approaches “sex positivity.” The ways that premodern cultures understood and practiced what we today call sexuality bear little resemblance to the ways we engage with sexuality today. Second, another trend and similarity is that positive sexuality has been a source of resilience and strength for various people and cultures with multiple marginalized identities, indicating strong links between sex positivity and intersectionality. Third, there is evidence that certain religious beliefs and traditions have had the effect of creating shame, guilt, and secrecy with respect to sexuality.

In contrast to the cross-nation focus on similarities, **comparative history** is the comparison of distinct countries, interactions, or institutions to show differences. That is, comparative history is not a focus on the history of sexuality in one country or civilization but rather the comparison of two or more of these civilizations. Studying multiple countries and/or historical civilizations helps us understand trends or overarching themes rather than focus on one particular experience. An example of using a comparative history approach would be considering the same time period in two different countries and how they each displayed different attitudes toward sex and sexual behavior.

A sex-positive approach to studying human sexuality strongly aligns with honoring diverse and multicultural historical perspectives. We will analyze a variety of themes and values about human sexuality throughout various periods of history. Although we will learn about these periods chronologically, we will also analyze themes that exist in multiple time periods (and so move back and forth through time).

For example, imagine that you and your friend, Mae-Li, a Chinese woman who just turned 21 years old, are out shopping one weekend. She tells you she is thinking about having sex with her boyfriend for the first time after dating him for several weeks. Mae-Li confides that most of the people in her hometown of Shanghai have come from families that have carried historical, strict religious beliefs that sex outside of marriage is forbidden from generation to generation. She says that her hometown has been this way for centuries and that most people who live in Shanghai can date their religious lineage for generations. Mae-Li's experiences and thinking demonstrate how history can influence current thinking about sexuality.

Apply It to Yourself: Historical Timeline Analysis

Much of the information about human sexuality that we process daily comes from various historical sources. However, we do not always stop and think about the source of that information. Use this

activity to reflect on these historical messages about sexuality (please be aware that some info you create for this activity will be shared with others).

1. Create a blank document on your computer in landscape format, or turn a blank piece of paper in your notebook so that the longer sides of the rectangle are horizontal. At the center of the page, draw a line from the left-hand side to the right-hand side. Think of this line as a timeline of notable events regarding sexuality. The left-hand end of this timeline is the day you were born. The right-hand end of this timeline is today's date.
2. Above the line, list events, figures, and strong societal influences throughout your history that have positively impacted your sexuality. Examples of positive influences include people in your life, conversations you have had, books you have read, billboards you remember viewing, and songs you remember hearing.
3. Below the line in the middle of the page, list events, figures, and strong societal influences in your own life that have negatively impacted your sexuality.
4. Next, think about the trends as you review your entire timeline. Is there a particular trend in your personal history with sexuality? Was this trend influenced by a specific political system? Is it a message that was influenced by a certain cultural tradition or norm?
5. After you identify these trends, compare and contrast your timeline with those from a small group of classmates. What did you notice? Are there things that you left off your timeline that another student identified?

Early Approaches to and Misunderstandings of Sexuality

2.2 Discuss historical myths focused on sexuality that were pervasive prior to the 17th century.

Where do today's sexual values come from? When we investigate this question, we find that some of them are relatively new. For example, treating human sexuality as part problem and part pleasure is a relatively recent attitude. In contrast, aspects of a sex-positive approach, such as frankness and the absence of shame, characterized many of the earliest social and cultural notions surrounding human sexuality. These early notions were also rooted in basic biology about sexual anatomy and physiology.

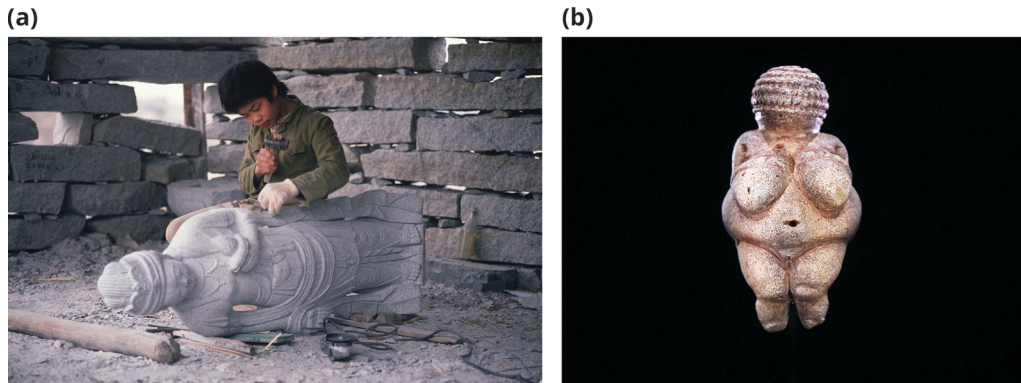
For example, stone carvings from 15,000 BCE, like those shown in Figure 2.1, depicted pleasurable intercourse between two people. One famous example is the Venus of Willendorf, a carving about 4 inches tall that accentuates parts of the body related to fertility and childrearing (Weber et al., 2022).

It was not until the 17th and 18th centuries that shame-based understandings of sex began to gain prominence. Evidence of explicit sexual experiences and behaviors appears in written legal and financial records from 1754 BCE Mesopotamia (now thought of as the region of countries such as Iraq, Iran, Turkey, Syria, and Kuwait). Such records have also been found in East and Southeast Asia (including Japan, Korea, and China) as well as parts of Africa. Specifically, the *Kama Sutra* (400 BC to 200 CE) is an ancient Hindu Sanskrit text that depicts a historic sex-positive view for men, with graphic depictions and sexual variation, and provides historical evidence of sexual medicine. In another example, the *Su Nü Jing* is a sex-positive book written about 900 CE (after the renowned Han dynasty). The book includes discussion of sexual positions, consent, and pregnancy. Both of these examples highlight how sexual variation was being explored all over the globe for centuries and that sexual practices have been long-standing.

One significant example of a sex-positive understanding existed in the cultures of ancient Greece and Rome (500 BCE to 400 CE). Ancient Greeks and Romans believed that **eros**, or sensual love and

Figure 2.1 • Stone Carvings and the Venus of Willendorf

Stone carvings like these have been found to depict sexual activity and pleasure, revealing the sexual discourse happening in these time periods.



Gerhard Joren/LightRocket/Getty Images; HELMUT FOHRINGER/AFP/Getty Images

desire, was a driving force in all facets of life. Many scholars then and since have expanded the concepts of “love” and “desire” to describe eros as a life force, or an energy that helps to create meaning and purpose for people. In his work to classify different types of love and pleasure, the philosopher Plato (428 BCE to 370 CE) defined eros from a more idealistic framework, as a “platonic love” that multiple people could have for one another. Plato’s approach was a kind of precedent for a sex-positive approach, as he discussed what kinds of love were appropriate for different kinds of relationships. Plato believed that love in the form of erotic desire can grow into an appreciation and respect for the many different facets of a person. Although many of us think of Cupid (another name for Eros) and his arrows only around Valentine’s Day, in ancient Greece, Cupid was continuously present. The understanding of eros in ancient history has prompted many contemporary researchers to speculate that sex-negative views are not historically based—instead being the result of expanding of religion influence (Goulart, 2022).

Nonetheless, a transnational analysis of certain aspects of sexuality in ancient civilization does reveal oppressive ideologies that existed in many parts of the globe during ancient times. For example, early Mesopotamia tradition (approximately 10,000 BC) thought of love as a madness that occurred when someone could not stop thinking about someone else. This reflected some of the earliest erotophobic views and emphasized sexuality and romance as an illness and began a long trend of seeing sexuality as unhealthy, pathological, or illness based. Further, in parts of ancient Europe, men could have extramarital affairs, however women were not allowed the same freedom, given the social requirement to produce heirs for their husbands. During the Middle Ages (the 5th through the 15th centuries, from 500 CE–1500 CE), sexual teachers (called *entremetteuses*) often aided women in exploring their sexuality. These teachers often helped heterosexual cisgender women in arranged marriages to discover parts of their sexuality with their new husband. In addition, there were many rules in organized religions such as Christianity that viewed same-sex relationships as against societal norms and sinful. However, same-sex relationships between men in some social settings, such as brotherhoods and social bounds, were considered an ideal sort of love (Stone, 1979).

African historical writings noted that some African cultures were not gender specific, though sexuality in precolonial (starting in 4000 BC) Africa also privileged the experiences of cisgender men (Ohia, 2015). These perspectives from different parts of the globe began to create ideas that certain types of love and desire were preferable to other types and that anything outside the idea of “typical” was problematic. These ideas were later transformed into a variety of troubling frameworks to view certain types of sexuality as illnesses. We discuss these frameworks in later chapters.

A comparative analysis of documentation related to sexual behavior in various parts of the globe first began to appear in the historical record in the 15th century CE. The first case of syphilis was recorded in Naples, Italy, in 1494. In 1566, Spanish military authorities in North America executed a



The Attic cup, made approximately 470 BC, shows a seated man with a naked boy. This pottery depicts same-sex nudity in a variety of different contexts, including portrayals of same-sex relationship between men as an ideal type of love.

Heritage Images/Contributor/Hulton Archive/Getty Images

French interpreter named Guillerme for having a same-sex relationship with a Native American man, the first known execution related to the act of (then-illegal) anal intercourse in what would become the United States. Meanwhile, some documents in East Asia contained legal proceedings and artwork that portrayed interracial unions, typically between European men and Asian women (Loos, 2009). Many historians believe that sexual behavior, intimacy, and sexual unions became ways for colonizers to impose systems of oppression and marginalization on other civilizations (Sigal, 2021; Stoler, 1989). In addition, cultures that emerged in the 15th century were very specific about sex roles. This meant that same-sex relationships were considered sinful and against societal norms because many people of the time believed that, in such a relationship, people were recreating sex between a cisgender man and a cisgender woman.

Researchers have also investigated the impact of religious organizations on the evolution of sexuality practice throughout history. For example, Augustine of Hippo (354 CE–430 CE), an early Christian theologian who worked in North Africa, defined the early Christian view of sex that ultimately influenced traditional American attitudes about sexuality. Historical documents suggest that Augustine was not against sexual behavior itself. Rather, he was morally opposed to the emotions and attitudes that went along with sex, which he believed inevitably turned people away from God as a higher power. Augustine understood that there had to be some amount of what he called “sexual passion” in order for reproduction to occur, but he believed that sex should be a “passionless affair” that allowed people to maintain a devout relationship with a higher power (Clark, 1996).

Something to Think About . . .

Other than religious institutions, what other historical systems might have impacted the evolution of sexuality practice and research?

Sexuality in the 17th and 18th Centuries

2.3 Compare and contrast at least two different influences on sexuality during the 17th and 18th centuries.

The 17th and 18th centuries brought a view of sex as taboo and secretive. This new perspective supported an emerging transnational theme of shame and secrecy that extended from certain religious traditions to many different civilizations and institutions across the globe. In the 17th century, there were a variety of rules and laws related to sexuality being secretive. Such secrecy arose from multiple societies around the globe, including the Bourgeois societies in Europe and parts of East Asia, that discouraged expression of emotions such as sexual desire and joy from pleasure. Religious institutions often encouraged people to admit sexual thoughts and desires in secret. Despite these rules, many historical texts indicate that royal courts across the globe—from the Dutch elite to royal courts in Africa and in East Asia—transcended such rules, and a variety of sexual experiences happened in both public and private spaces (Dekker & Marcure, 1999). Interestingly, erotic dancing and burlesque performances were increasingly common in the 17th and 18th centuries, but the taboo nature of sexuality meant that sexual exploration was usually done in secret and not discussed.

Despite the great amount of anti-sex sentiment in 18th-century England, there were not many documented uses of these laws or rules related to sexuality to punish people. Indeed, in 18th-century England, obscenity prosecutions were sporadic, even though London had a great deal of sexually explicit literature and sex manuals (Stone, 1979). However, outside of England, a comparative historical analysis suggests that there were several records of documented punishments.

In 1848, King Rama III of Siam (Figure 2.2) ordered the execution of the highest-ranking prince due to the prince's sexual behaviors, which included intercourse with members of the royal male performance troupe (Loos, 2009). At the time, people compared the prince's sexual behavior with that of China's Emperor Daoguang, who was also said to have exchanged money for sexual intercourse with male performers (Loos, 2009). The Emperor received shame and dishonor from the royal court.

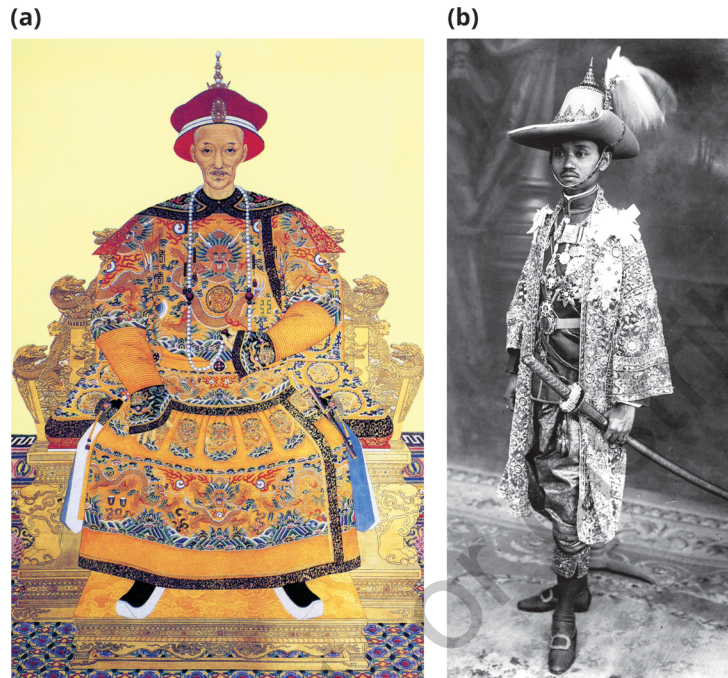
Eighteenth-century social mores polarized the differing views of sexuality for men and women and provided a strong rationale for the evolving idea that men and women had different sexual needs. Examples of such different needs included views of men having more sexual desire than women, with increasing attention on masturbation. In addition, many people in the 17th and 18th centuries believed that masturbation was a sin against God, and many medical providers during this time offered health-related descriptions of the various medical ills and problems that could befall someone as a result of "self-abuse" (Pierce, 1875). These beliefs carried into 19th-century Europe, Africa, and parts of Asia.

The situation was similar in many European colonies in countries and provinces across the world. Despite the widespread availability of sexually explicit books and erotic fiction, there were no prosecutions for obscenity during the entire colonial era. In fact, when the U.S. Constitution was adopted, there were no laws against obscenity (Stone, 1979). For example, artistic sexual expression was common in the late 1800s and early 1900s, which counters the false idea that nude dancing was always considered a criminal act.

The Victorian era of the 19th century led to different attitudes about sexuality. In the United Kingdom during Queen Victoria's long reign (1837–1901), there was a shift in cultural ideas, moral sensibilities, and political reforms. Art and science led to a shift in cultural ideas, with some art depicting sexual experiences between men and women that opened up conversations about sexuality and desire. There was a strong religious drive for higher moral standards, led by the Methodist Church and the Evangelical wing of the Church of England. During this time, many people believed that women had no sexual desire whereas men had insatiable sexual appetites. Political reforms led to more people in the working class becoming parts of government and politics, the majority of those being men, which increased social and cultural differences between masculine and feminine genders within this context of social reform. These differences also highlighted ways that men had access to social power and ways that experienced discrimination.

Figure 2.2 ▪ China's Emperor Daoguang and King Rama III of Siam

China's Emperor Daoguang (a) was noted for pleasure-focused sexual behavior that was uncommon during his time period, while the King Rama III of Siam (b) inflicted punishment that reflected the growing anti-sex sentiment of this time period.



Pictures from History/Universal Images Group/Getty Images; Hulton Archive/Stringer/Hulton Royals Collection/Getty Images

With these changes, many social norms related to sexuality also shifted in the Victorian era. In one example, people began to view sexual intercourse as an unfortunate process required for reproduction rather than an act of pleasure. In 1860, the Catholic Church declared that human life begins at conception, which was the start of many efforts to stop the termination of pregnancy before childbirth. It was the job of both women and men to tame the urges of a male's sexual appetites. Using transnational analyses, contemporary sex-positive scholars characterize the overarching approach to Victorian sexuality this way: "If sex does not exist, do not make it exist. If it does exist, keep quiet and do not talk about it" (Trumbull, 2018).

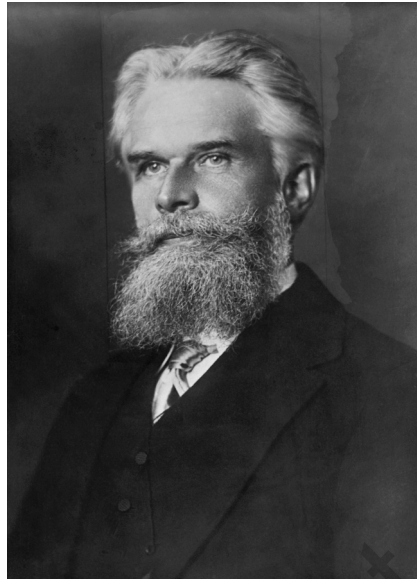
Using comparative analyses, many historians of sexuality note that silence about and repression of sexuality were common across some cultures in the 18th century and the beginning of the 19th century. Despite this, there was also growing openness related to some sexual expression—in particular, same-sex relationships. For example, parts of French Indochina saw same-sex relationships and sexual bonds as common practice. People did not internalize much shame and secrecy until they were scrutinized by European colonists and military members (Aldrich, 2002). In fact, same-sex sexual practices among Indigenous peoples of Polynesia and North Africa provided a space for many European colonial settlers to explore same-sex attraction—both with Indigenous people and with members of their own armies (Aldrich, 2003).

As part of the growing sexual exploration in some cultures, members of some cultures (such as Victorian-era England) began to explore sexuality with increased research and science. In these cultures, a person most likely acted on sexual urges or thoughts in a private setting, but never in a public setting. Henry Havelock Ellis, known as Havelock Ellis (1859–1939; Figure 2.3), was an English physician, writer, scholar, and social reformer who studied human sexuality. In 1897, Ellis coauthored the first English text about homosexuality. Ellis also wrote about a variety of sexual practices and transgender psychology. He also introduced an idea that was later adopted by the field of psychoanalysis, **autoeroticism**, or the ability to be sexually stimulated by oneself through either external or internal

stimuli, which is sculpted and influenced by certain personality disorders (we will cover this concept in greater detail in Chapter 6).

Figure 2.3 • Henry Havelock Ellis

The work of Henry Havelock Ellis—including his text on homosexuality, his writing on transgender psychology, and his exploration of autoeroticism—reflected an increased desire to study and learn about sexuality.



Hulton Deutsch/Corbis Historical/Getty Images

In addition, during the 17th and 18th centuries, many sexual historians point to erotophobic experiences in many parts of the world. For example, sexuality historians have noted a great deal of sexual shame, guilt, secrecy, and repression in texts and depictions (art and narrative) among Africans who were brought to America as enslaved people and who experienced spiritual and religious colonization. Such shame and secrecy has been linked to the historical and generational trauma and colonization experienced by these enslaved people.

Christianity had a deep influence on the passage of numerous laws in the 17th and 18th centuries, banning certain sexual practices by Christians but allowing others. For example, same-sex relationships between men were prohibited, but the church of the Victorian era often did not regard same-sex relationships between women as problematic. The justification for “allowing” such behavior was same-sex relationships between women were not considered sex—because it did not involve a penis and it was thought that women were needed a penis to be satisfied (Stone, 1979).

Spotlight: Sexuality and Slavery of African People

We often do not recognize the intersection of sexuality and historical events. Yet, throughout history, sexuality has served to perpetuate social discrimination, especially those based on gender, class, and race (D’Emilio & Freedman, 2013).

One example is the **Middle Passage**, which was part of the triangular slave trade from the 1500s to the 1800s between Europe, North America, and Africa during which millions of people from Africa were transported by force to North America. Ships carried manufactured goods from Europe to trade in Africa for purchased or kidnapped Africans. The enslaved people were then brought across the Atlantic to North America, where most slaves were sold or traded for goods. Those goods completed the triangular voyage back to Europe. Voyages on the Middle Passage were major financial undertakings, generally organized by companies or groups of investors rather than people (Thomas, 1999).

Historians of sexuality have documented that sexual access to women of color (of different ethnicities) influenced diplomacy and conquest during the Middle Passage (Armstrong-Partida, 2024; Muskateem, 2016). Enslavers considered the enslaved Black women an economic possibility, given their ability to create more slaves through childbearing, which ensured another generation of enslaved people who could work in fields and homes.



Historical analyses indicate that there were a variety of European cisgender men who engaged in sexual abuse and assault of women of color (of a variety of African ethnicities) during the Middle Passage.

Hein Nouwens/iStock

Let's look at sexuality within the Middle Passage through a lens that values multiculturalism and social justice. The need to understand how forced sexuality was used as a form of oppression is a needed lens. Within entertainment and media studies, many sexologists explore whether films and their stories worsen the objectification of Black women's bodies. Specifically, sexuality scholars question scenes in which directors, actors, or productions place Black women's bodies in a context of enslavement rather than empowered narratives of building resilience and escaping enslavement. Sexologists found that the depictions of enslavers often do not critically evaluate power dynamics when portraying love and companionship (Brown, 2007). Other researchers have noted that the problem of how we depict sexual enslavement will only worsen if media creators continue to use narratives in which Black women's bodies are seen as available and desirable only in the context of slavery (Nanda, 2019). Future research in human sexuality will need to continue to explore and explain this issue.

Black enslaved men were also sexually abused in many ways. Most of the sodomy cases in the early United States involved enslavers violating enslaved men. Very few of these assaults included peer-on-peer sexual abuse or sexual contact. For example, there was forced sex called slave breeding, in which White enslavers coerced enslaved Black men to rape enslaved Black women. The more reproduction

that occurred as a result of these sexual assaults, the more enslaved people would be available for the production of goods (West, 2018). This power dynamic led to racial stereotypes that we see today, such as myths that Black men are either absent fathers or rarely participate in their children's lives (Smith et al., 2011).

During slavery, Black manhood was also violated in ways that highlighted discrimination and oppression. This sexual exploitation took place within a cultural context that fixated on Black male bodies with both desire and horror (Foster, 2011). These early interactions led to the stereotype of Black men as hypersexual and objects to be fetishized whereas White women were considered asexual and helpless (Smith et al., 2011). In addition, White women often used their racial power to engage in relationships and sexual dalliances with enslaved Black men. However, due to the racial stereotypes at the time (which continue today), the White women were often viewed as victims of assault even if they initiated the sexual encounter and even when they paid Black men to sleep with them (Muskateem, 2016).

Punishment of enslaved Black men often focused on their genitalia. In cases of alleged rape of White women, punishment could include castration and genital mutilation. Free White men who were guilty of sexual assault received different punishments, usually a small fine or sometimes a stern reprimand in court with no other punishment. These are early examples of how systemic racism intersected with sexuality to harm Black men and are representative of U.S. history. One notorious event was the lynching of Emmett Till—for merely offending a white woman—near the beginning of the civil rights movement (Crowe, 2018).

As sex-positive people, we need to continue to identify how sexuality is a part of our history, even when that history includes oppression and marginalization. Documenting these events helps us identify and understand historical complexities while decreasing the silence and secrecy that have prevented power structures from being accountable for the marginalization of others.

Since this time period, many Black-identified people have made significant advancements in reclaiming their sexuality. Many different organizations create spaces for Black-identified people to heal from the historical and institutional trauma of slavery. Some of these different healing circles are often also separated by gender. This provides Black women a separate space in which to speak about the intersecting trauma of surviving rape both as a woman and as a Black survivor. Many of these spaces use intersectional frameworks for healing assault (Griffin, 1996).



Many Black people and communities are continuously healing from the historical trauma of enslavement, including healing their sexuality, so that they can create intimacy and connection with others as part of their sexual well-being.

jenjen4/iStock

Part of such healing includes healing from the trauma that occurred in their physical bodies and through the processing of the generational impact of rape and sexual assault. A variety of healing circles occur throughout the world. In one example, Black Emotional and Mental Health (2022) offers online

support groups and interactive workshops that include safe spaces for Black-identified people to process their sexual liberation from much of the historical trauma faced by their ancestors and from which many are still healing today.

Sexuality in the 19th Century

2.4 Identify at least two ways that sexual degeneration impacted experiences of sexuality in the 19th century.

The Victorian influence led to increasingly conservative views about sexuality in parts of Europe and Asia in the 19th century. These Victorian views were accompanied by a medical model of understanding sexuality that deemed atypical sexual pleasures and behaviors as “problematic.” However, some European, African, and Asian people began to question shame-based understandings of sexuality. These questions were the beginning of a sex-positive approach, which included a desire for inclusive language, diverse cultures, and contexts. Nineteenth-century historians note the heavy criticism of the term *sexuality* as many found the term to be a Western European concept that did not apply to other areas of the world such as East Asia (McLelland & Mackie, 2019).

The rise of print materials and photography replaced carvings and woodblock, which led to communities around the world becoming more engaged with depictions of erotic acts (McLelland & Mackie, 2019). Not all developments were positive, however. For example, Japanese armies of the 19th century began to make use of military brothels, enslaving 100,000 women from colonized nations for the purpose of sexual acts (McLelland & Mackie, 2019).

Gradually, sex-positive views began to emerge in parts of Europe and North Africa. By the late 19th century, increased public debate about sexuality took place as women started calling for birth control and sexual rights. The evolution of thought regarding sexuality began to create an alternative narrative to the shame and secrecy of certain religious traditions. For example, during the late 19th century, sexual activists founded brothels to engage in sex work and commercial sex, as well as engaging in sex education (Best, 1982). In North India, people began to create intimate relationships, social relationships, and types of work (such as the exchange of sexual intercourse for money or goods) that went against traditional ideas and values. These new forms of sexuality were considered “immoral” or “improper.”

Despite these evolving sex-positive narratives, the predominant view in the 19th century combined sex with shame and secrecy. A transnational analysis of beliefs and attitudes about sexuality suggests that **sexual degeneration**, or the disparaging and shunning of European people whose sexuality did not conform to societal norms of morality, was common. Many Europeans embraced sexual degeneration, the idea that sexual perversions were passed down through generations, and the idea that they were a public danger for all of society. Many doctors and sexologists of the 19th century used sexual degeneration as a platform to suggest that sexual “perversions” were illnesses. The result was the medical “treatment” of “perversion” in horrific ways.

Also common was the **repressive hypothesis**, or the idea that pleasure-based sexuality needs to be repressed in order to focus on sexual intercourse that results in the birth of babies. The repressive hypothesis argued that new births would lead to new workers and more need for economic goods, which would maximize economic production. The true concern was not to maximize productivity but to ensure the “morality” and “purity” of the family line—that is, another shame-based attitude about sex and sexuality.

Charles Darwin and Sexual Selection

According to biologist Charles Darwin’s (Figure 2.4) theory of **sexual selection**, each of us competes with others of our same sex for the “biologically fittest” mate with whom to create offspring (Darwin,



As sex-positive views began to emerge in Europe and North Africa in the 19th century, birth control (see birthing drawing, right) and sexual rights for women (see rally, left) became more prominent.

DEA/M. SEEMULLER/De Agostini Editorial/Getty Images; Bildagentur-online/Getty Images

1871, p. 256). Darwin believed that this drive shapes human evolution. According to classic sexuality studies, sexual selection has favored some people with certain chromosomal structures due to the ability of those people to more easily procreate (Darwin, 1882, 1888).

Darwin did not promote ideas about controlling reproduction, but his work served as an unfortunate foundation for eugenics. **Eugenics** is a series of oppressive and harmful practices that prioritize reproduction in certain cultural groups. There is some evidence of eugenics in ancient Greece, but the practice of eugenics became prominent in the 19th century. Those who espoused eugenics believed that many people of marginalized groups were “not fit for reproduction,” which included people of color, people with disabilities, people who scored low on intelligence (IQ) tests, and people who were engaged in criminal behavior. It was unfortunate how many prominent scientific and medical (including psychiatric) professionals endorsed the eugenics movement.

In the 19th century, eugenics led to marriage prohibitions and forced sterilization without the person’s knowledge. Eugenics became popular after the movement spread to the United Kingdom and then to many other countries, including Australia, the United States, and Canada. In the 19th century, many European people believed that eugenics would “improve the quality of a specific population,” but today the practice is considered to be pseudoscientific racism (Matić, 2018, p. 21).

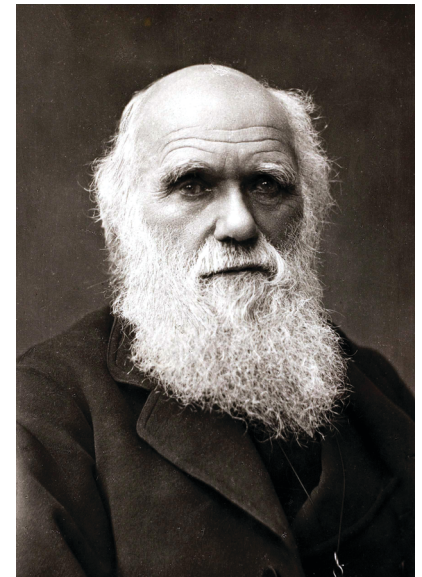
These 19th-century influences on sexuality explicitly noted negative attitudes toward sex and sexuality across many countries: secrecy, shame, and marginalizing of diversity. These patterns had been evident for many centuries, but the social forces of the 19th century made these oppressive trends even more secretive. Sexuality was forced underground and behind closed doors.

Sigmund Freud

A primary contributor to sexuality research was Austrian neurologist Sigmund Freud, who began his work in the 19th century. Considered one of the founders of modern psychotherapy, Freud (Figure 2.5) hypothesized that human beings have unconscious mental processes that they may not be aware of but that drive their thoughts, feelings, and behaviors. Freud envisioned a structure for the unconscious that includes a **libido**, or an instinctive drive of sex-related energy that helps human beings to engage their erotic desires and form intimate sexual attachments. He later formulated the idea that humans have a **pleasure principle**, or a part of

Figure 2.4 • Charles Darwin

Darwin’s theory of sexual selection proposed that certain people are more “fit” to find a mate and create offspring. This discriminatory view of human evolution led to the unfortunate foundation of eugenics.

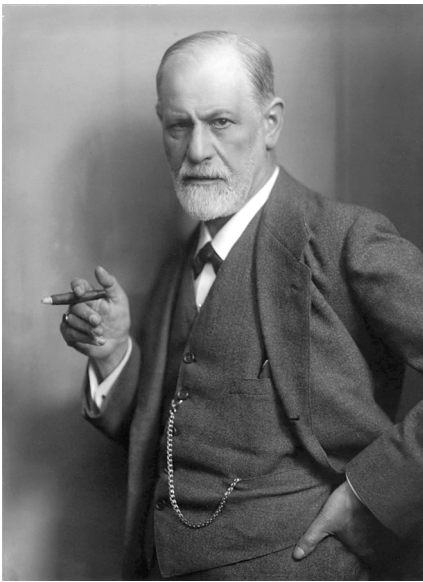


Bob Thomas/Popperfoto/Getty Images

their unconscious that drives them to seek pleasure and avoid pain in order to fulfill psychological and biological needs. There is little empirical research to support many of Freud's theories (most of his work was based on his own case studies), but many scholars have noted that Freud's work contributed to early discussions about sexuality-based drives that motivate human functioning and well-being.

Figure 2.5 ■ Sigmund Freud

Dr. Sigmund Freud's theories of libido and the pleasure principle, although cited by many, have been seen by many as controversial and not inclusive of context.



Universal Images Group/Getty Images

We have understood children as sexual beings since the work of Sigmund Freud. Specifically, Freud argued that children begin to learn about themselves as sexual beings starting when they are born and that five different stages of childhood affect their ongoing sexual development. Freud viewed children as receiving pleasure from a central instinct at each stage of development and considered this pleasure to be much like the pleasure older people derive from sex. Freud labeled this driving instinct the *libido* (Freud, 1905/2017).

In the **oral stage** (0 to 1 year of age), a child's sexual development is centered in the mouth. That is, children receive satisfaction from their mouths by sucking, biting, and breastfeeding. Freud believed that too much oral stimulation as a child might result in an oral fixation later in life, becoming behaviors such as smoking and nail biting. He also hypothesized that humans who are fixated in the oral stage engage in oral behaviors most often when stressed.

In the **anal stage** (1 to 3 years old), Freud believed that the center of a child's developing sexuality becomes focused on the anus and the child derives great pleasure from defecating (McLeod, 2017). According to Freud, children in the anal stage are fully aware of being people in their own right. The desire to engage the pleasure principle can bring the child into conflict with the rules that govern how and when it is socially acceptable to experience pleasure. Resolving such conflict can bring a loss of freedom.

Freud believed this conflict tends to reach its apex during potty training, when adults restrict where defecation can take place. He thought the result of this initial conflict with authority could determine how a child interacted with authority in the future. He also believed that such stingy behaviors are related to the pleasure received from the toddler's retaining their feces in the face of a caregiver's insistence that they get rid of their waste by placing their children on a toilet and toilet training them.

In the **phallic stage** (3 to 5–6 years old), libido is concentrated in a child's genital area and masturbation becomes a major source of pleasure. During this stage, the child discovers anatomical sex differences. This discovery creates conflicts between erotic attraction, competition, resentment, envy, and fear of isolation. Freud believed this fear appeared differently in different sexes and called it the *Oedipus complex* in boys and the *Electra complex* in girls.

In the **latency stage** (from age 5–6 to puberty), no further psychosexual development takes place. The libido is dormant, meaning that sexual energy can be redirected toward school, friends, and hobbies. Children develop new skills and acquire new knowledge. Notably, a child's play now happens mostly with children of the same gender.

In the fifth and final stage, the **genital stage** (from puberty to adulthood), the child enters puberty and begins to develop into an adult. The genital stage can involve sexual experimentation in adolescence that eventually leads to a loving relationship with another person. For Freud, heterosexual intercourse was the appropriate way for an adult to resolve their sexual instinct. Freud believed that impulses, such as fixation and conflict, might stunt the sexual instinct, the result being the development of sexual perversions.

Freud's stage theory (see summary in Table 2.2) has been widely used to consider sexuality in childhood; however, many scholars have questioned the theory. To begin, using an exclusively European sample meant that Freud neglected the experiences of people of color. Further, some people come from cultures that do not look at development as an individual process. Instead, they prioritize the values of their families and/or cultural communities over each person's sexual development. In addition, Freud's theory assumes heterosexual and cisgender identities.

Table 2.2 ■ Chart of Freud's Stages

Stage	Age	Description
Oral	0 to 1 years	Children receive gratification by putting things in their mouths, the focus of the stage. Too much oral stimulation was believed to lead to too much oral stimulation later in life.
Anal	1 to 3 years	A child's pleasure is focused on the anus. Potty training represents a conflict with authority as parents impose rules on children.
Phallic	3 to 5–6 years	Sensitivity becomes heightened and focused on the child's genitals. Masturbation becomes a new source of pleasure.
Latency	5–6 to puberty	No further sexual development takes place. Sexual energy can be focused on making friends and schoolwork.
Genital	Puberty to adult	Adult development is marked by a time of adolescent experimentation, which eventually resolves when the person enters into a loving relationship with another person.

In addition, Freud's work is primarily based on the experiences of European children during the Victorian era—a time that fostered sexual repression. Scholars have suggested that Freud's theories of childhood sexual behavior may actually have been his way of not reporting childhood sexual abuse—by misinterpreting his patients' claims of sexual abuse as repressed sexual desire or incestuous behavior (Rush, 1980). Today, many scholars have noted the lack of cultural and contextual inclusion in Freud's work, making it a theory that is widely referenced but lacks scientific usefulness.

Sexuality and Gender in the 20th Century

2.5 Identify and discuss the work of key sexuality scholars from the 20th century.

Public understanding of sexuality began to shift in the 20th century due to several key events, which led to sex positivity and erotophobia growing together. Print media mostly move in a sex-positive direction, providing more opportunities for readers and viewers to engage with sexual content. The first issue of *Playboy* was published in the United States in 1953 and featured Marilyn Monroe on the cover as well as fully nude inside. However, other institutional and global forces seemed to move in a different direction. For example, in Africa and other parts of the world, understandings of sexuality were permanently shaped by the spread of HIV (Figure 2.6), racism, and colonialism that had been happening throughout Africa (Arnfred, 2004). Meanwhile, religious communities began to analyze media content for censorship, and activist movements challenged African people to expand their views about sexuality. And sexuality was an increasing topic of interest for many scholars.

Unfortunately, a transnational analysis of sexuality in the 20th century suggests that sexuality continued to be shaped by earlier oppressive forces. For example, the eugenics movement became associated with the Nazi party and the Holocaust, resulting in forced sterilizations that permanently prevented millions of people around the globe from reproducing (in addition to other horrible consequences). In 1934, despite fears that it would foster censorship, the Hays Code appeared. The **Hays Code** was a voluntary code that the Motion Picture Producers and Distributors of America adopted to provide a uniform national standard of “decency” for movies (Stone, 1979). The Hays Code and other doctrines made their way into economic, religious, and legal standards in the United States.

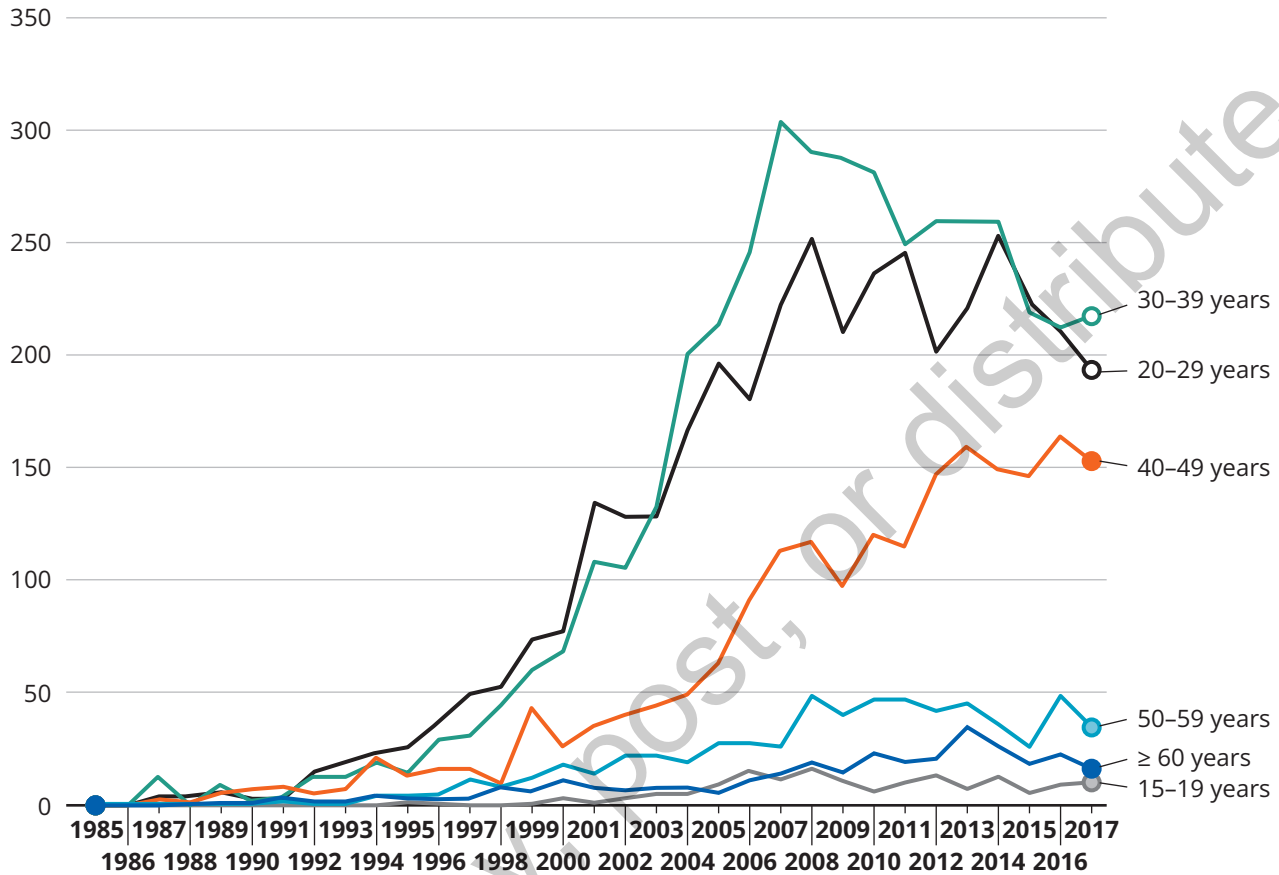
The **sexual revolution** was a time of sexual liberation that started in the 1960s as a political and social movement. People involved in the sexual revolution labeled sexual norms within the United States as “repressive,” focusing instead on sexuality in the context of a person's self-expression and autonomy (Allyn, 2016). The sexual revolution also promoted an understanding of women's sexuality, the impact

Figure 2.6 ■ HIV Data From the Late 20th Century

The 20th century found an expansion of data related to sexual health prevention research, such as the data here. These HIV data show new infections in Japanese males, indicating that the highest new infection rates of HIV between 1985 to 2000 were in Japanese men 20–29, followed closely by men 30–39.

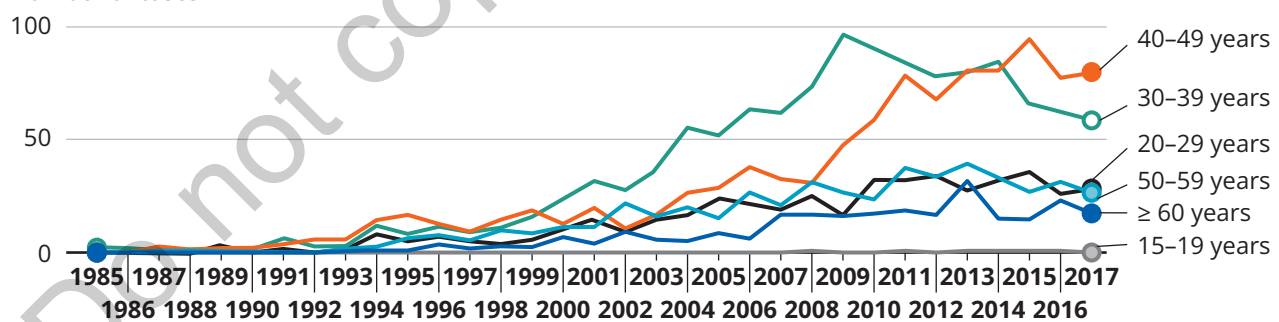
(a) HIV patients

Number of cases



(b) AIDS patients

Number of cases



National Institute of Infectious Diseases, 2017

of gender, intimate relationships outside marriage, and sexual orientation, as well as the importance of sex education.

Based on these new pillars of understanding, people who took part in the sexual revolution embraced **free love**, a philosophy of sex that allows people to explore their sexuality outside monogamous marriage and traditional expressions of sexual desire. Inspired by the free love philosophy, people began to explore their sexual orientation by questioning their attractions to people of multiple genders. They sought free

lectures and workshops by sexuality experts, had sexual intercourse using new positions and in new environments, and critiqued erotophobic people and systems.

In the 20th century, people also began to explore gender expressions that transgressed societal and cultural norms. For example, drag balls were organized masquerade balls that provided safe spaces for people to wear the clothing usually worn by people of other genders. In large cities where laws prohibited gender expressions, drag balls were a place for people to perform various types of artistic expression in gendered clothing. These events were a source of pride and resilience for many LGBTQ+ people of color, highlighting the impact of sex positivity on people of multiple, intersecting marginalized identities. There was strong resistance, especially by law enforcement agencies, but drag balls grew in popularity among African American and Latin youth in large metropolitan areas within the United States.

Sexuality Theory and Research in the 20th Century

The 20th century saw several key turning points in the theory and research about human sexuality. Theorists wanted to expand awareness about sexual intercourse and sexual pleasure. They wanted people to know more about themselves as sexual beings, including the ways they had sex with each other and how they understood pleasure. In 1972, birth control was legalized for U.S. citizens. In 1973, the book *Open Marriage* (O'Neill & O'Neill, 1973) became a bestseller. It introduced the concepts of open marriage and relationships and was one of the first books to document diverse relationship structures.

Much of the theory and research published during the 1900s still focused on White European Americans, with little concern for intersectionality and cultural diversity, but the work was becoming more sex positive. In addition, some particularly important sexologists of the 20th century published important work—including Alfred Kinsey, Paul-Michel Foucault, and Audre Lorde.

Alfred Kinsey and the Continuum of Sexual Orientation

In the 1940s, Alfred Kinsey explored sexuality from a multifaceted perspective. He was one of the first sexuality researchers to observe and document people having sexual intercourse. Sometimes these people were his coworkers. After interviewing more than 8,000 people, he documented that people may not be exclusively heterosexual or homosexual. In 1948, he created a scale that ranged from 0, meaning exclusively heterosexual, to 6, meaning exclusively homosexual. Kinsey wrote that people who rank anywhere from 1 to 5 are often considered bisexual. Since then, the Kinsey scale has been widely criticized and reworked (as we will see in Chapter 6). However, his work was important given that it was some of the first sexuality research to understand the continuum of sexual orientation.

Paul-Michel Foucault and Sexual Power Dynamics

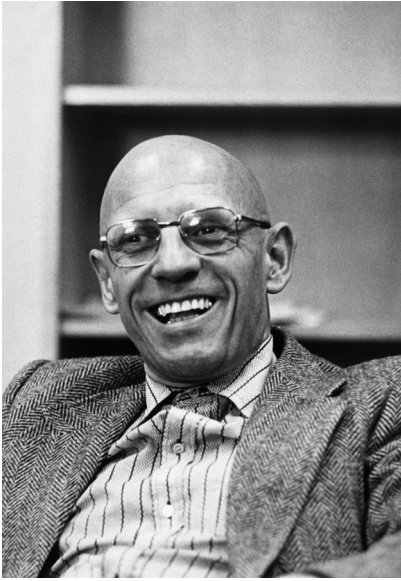
One of the most prominent shifts in 20th-century views of human sexuality occurred as a result of the work of Paul-Michel Foucault (Figure 2.7), a French philosopher and social theorist. Foucault was one of the first sexologists to investigate the relationship between sexuality, knowledge, and power dynamics. Contrary to the opinions of his time, Foucault argued that power results in people's repression of sexuality, power comes from the expression of sexuality, and people should express their true sexuality to liberate themselves. In examining power dynamics, Foucault identified "sites of resistance," or places that provide a reconfiguring of power relations in a way that might remedy oppressive institutions and practices. For example, a group of women marching against a company that will not recognize sexual harassment is an example of redistributing power to a group of women who have had power taken from them in the form of assault.

In 1976, Foucault published *Histoire de la sexualité: La volonté de savoir* (*The History of Sexuality: The Will to Knowledge*), in which he critiqued some of Sigmund Freud's theories. Foucault's focus was on pleasure and how pleasure and sexual morality are culturally bound. He argued that the idea of sexual pleasure represented (at that time) a potential counterpoint to the many people who believed there was only one moral compass for understanding sexuality. He explored how large social and economic forces of the time, such as capitalism, impacted people's ability to express their sexuality without judgment (Foucault, 1990). In one example, Foucault pointed out that many gay, lesbian, and bisexual people

were not allowed to express and explore their sexual orientation for fear of losing their job or being cut off from their families.

Figure 2.7 ■ Michel Foucault

Philosopher Michel Foucault created concepts such as strategic resistance to explore how large systemic and economic forces impacted people's freedom to express their sexuality.



Bettmann/Getty Images

Using the repressive hypothesis, Foucault argued that sex for reasons other than procreation was repressed. To be free sexually meant to transcend experiences of economic productivity to focus on relationships and self-awareness rather than meeting deadlines, finishing projects, or completing work tasks. In doing so, he articulated what he called a “strategic resistance” to understanding sexual desire from a morality-based value system (Trumbull, 2018).

Audre Lorde and Intersectionality

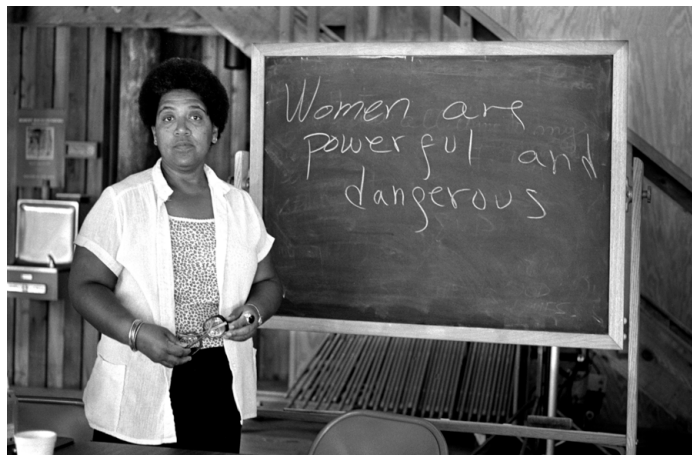
As a Black feminist scholar of the 20th century, poet and activist Audre Lorde wrote prolifically about intersectionality and the experiences of injustice for people who experienced multiple marginalized identities (Figure 2.8). She openly identified as a Black lesbian woman in a time in which openly gay people often experienced increased amounts of oppression. She also spent a majority of her career advocating for the rights of women who had survived sexual abuse and intimate partner violence. Lorde’s work, including anthologies of poetry and essays, critiqued how much of the research within sexuality did not include explicit considerations of race and legitimized the experiences of women of color.

In collaboration with other scholars, Lorde founded one of the first nonprofit publishers in the United States that focused on creating media by and for women. Later in her career, she also cofounded the first U.S. publisher to highlight work by women of color, as well as founded one of the first academic departments of Black studies. Today, Black studies departments exist across the country and are a place for university students to learn about Black scholarship related to racism, the African diaspora, and the Black experience. As part of her work, Lorde often centered experiences of Black women’s sexuality by creating and supporting existing spaces in which Black women could write about their experiences of their race, ethnicity, and sexuality. In addition, the spaces that

Lorde created and supported allowed Black women to critique the lack of attention to these experiences in other academic and scholastic venues.

Figure 2.8 ■ Audre Lorde

Activist Audre Lorde created many spaces for Black women to examine their sexualities. She also supported existing spaces that allowed Black women to critique spaces that focused on sexuality but ignored Black women's sexuality.



Robert Alexander/Getty Images

The Rise of HIV

Despite these positive developments, theory and research in the 20th century also regressed somewhat. In particular, there was a rise in shame-based information due to a new focus on sexually transmitted diseases and infections. The rise in incidence of the human immunodeficiency virus (HIV) occurred predominantly in gay-identified men in the latter part of the 20th century. In the United States, the rise of confirmed HIV+ cases intersected with many anti-gay attitudes based on religion. During some of the first recorded outbreaks of HIV, many people cited religious beliefs to denounce homosexuality among men, sexual well-being, and sexual liberation. You will learn more about HIV+ as an illness and its impact on various communities in Chapter 13.

As more people began to denounce sex, erotophobia about sexual knowledge, behaviors, and attitudes became more apparent. That is, it was not just about sexually transmitted infections. In the 1970s, a political action group called The Moral Majority formed to work toward the inclusion of prayer in schools and the passage of strict laws against abortion. President Ronald Reagan founded this group, arguing that limiting abortion rights would “put women back in their place” (Meyer & Northridge, 2007, p. 405).

Sexuality Health Research, Prevention, and Promotion in the 20th Century

Sexuality has, in part, been shaped and expanded by the work of organizations that study physical health and mental health, such as the World Health Organization (WHO) and the National Institutes of Health (NIH) and Mental Health (NIMH). In doing so, however, these organizations have reduced some aspects of sexuality to behaviors while ignoring the larger context. For example, the World Health Organization (WHO) has developed the 11th edition of the International Classification of Diseases (ICD-11) to identify and classify a variety of health conditions (Navarro-Cremades et al., 2017). In its review of health conditions, writers and researchers of the ICD-11 reviewed historical trends and integrated mind/body approaches to sexual health. In their reviews, these writers and researchers explicitly note that sexual response is a complex interaction of psychological, interpersonal, social, cultural, physiological, and sex-influenced processes. Although the ICD-11 presents a comprehensive approach to understanding sexual functioning in people of different genders and seems oriented toward sex positivity, critics have noted that it does not take into account relationship issues or systemic issues when labeling dysfunctions or syndromes. For example, the ICD-11 does not indicate a typical standard for sexual activity, and clinicians and medical doctors can subjectively define satisfactory sexual functioning as being satisfying to the person. However, the ICD-11 also places transgender identity in a pathology-focused framework, classifying transgender identity as an incongruence of sex assignment and gender identity in either adolescence or adulthood (or both). Although this language is better than the language used in earlier versions of the ICD, it is still focused on illness.

In Chapter 1, you learned about different types of sex-positive prevention and promotion strategies that are often used in public health work and research. Transnational analyses of trends in sexuality during the 20th century have shown an increase in these public health approaches, with more prevention and promotion programs entering a variety of different medical, religious, educational, and social environments. For example, programs that promote healthy communication are sometimes part of a



Protests like the one pictured here occurred often in the 1980s, as many believed that government institutions and agencies were not doing enough to provide care for those impacted by the HIV/AIDS virus.

Barbara Alper/Getty Images

church's or synagogue's offerings to its communities. In addition, educational institutions such as high schools, colleges, and universities increasingly offer more prevention programs for sexually transmitted infections and diseases. However, these programs vary in terms of style, quality, and degree of sex positivity.

LGBTQ+ History in the 20th Century

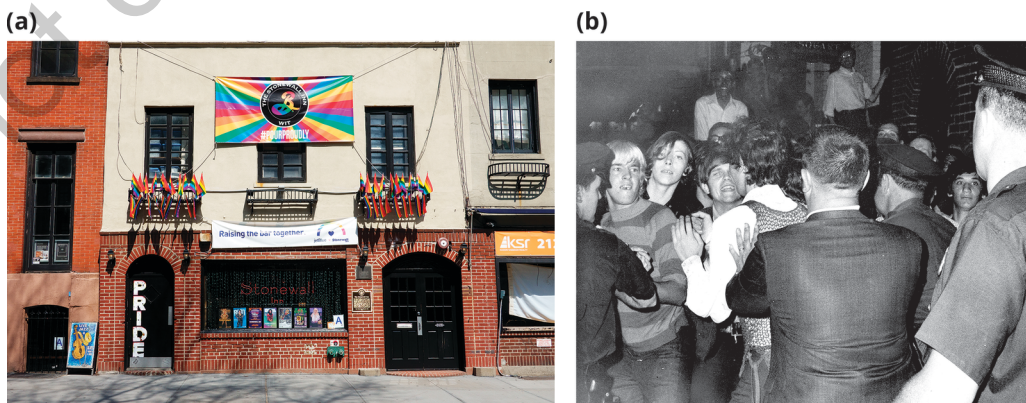
The mid-20th century was a time of systemic oppression and discrimination for lesbian, gay, bisexual, transgender, and intersex people (Leonard, 2011). Persecution of gay men and women in the United States increased dramatically in the mid-1930s, despite the work of gay activists such as Harvey Milk. Reports in *The Lavender Scare*, a historic LGBT newspaper, noted that in 1947 the U.S. Park Police launched a “Pervert Elimination Campaign” and that in 1948 Congress passed a law for sexual psychopaths in the District of Columbia. In the early 1950s, Christine Jorgensen, the first person to medically transition to become a transgender female, encountered discrimination in the United States. Jorgensen was a U.S. citizen, but she had to travel to Denmark to undergo the first in a series of gender-affirming surgeries for her medical transition.

The discrimination during this time was magnified for LGBTQ+ people of color. Many LGBTQ+ Black people felt that disclosing their nonheterosexual sexual orientation would result in further discrimination—in addition to the blatant racial discrimination they already experienced. Black newspapers in Los Angeles described drag ball performers and other Black people who tolerated same-sex desire as “abnormal” and “immoral” (Leonard, 2011). Sadly, there is little information available that would allow researchers to draw solid conclusions about the rich history of LGBTQ+ identities in Black communities during this period of U.S. history.

In the late 1960s, a pivotal moment in LGBTQ+ history occurred in New York City. The **Stonewall riots** (also referred to as the *Stonewall uprising* or the *Stonewall rebellion*) were a series of spontaneous and sometimes violent demonstrations by people in the LGBTQ+ community. The demonstrations were a response to the police raiding the Stonewall Inn in the early hours of June 28, 1969. At the time, the Stonewall Inn (Figure 2.9) was considered a safe establishment for the LGBTQ+ community, particularly transgender women, drag queens, and gay men (National Park Service, 2018). The demonstrations began outside the inn and spilled into the surrounding Greenwich Village neighborhood over the next several days, causing some injuries and damage to property.

Figure 2.9 ■ The Stonewall Inn and the Stonewall Riots

The Stonewall Inn (a), shortened to Stonewall, site of the Stonewall protests (b) for gay and lesbian equality against police raids. The bar became a national landmark in 2000.



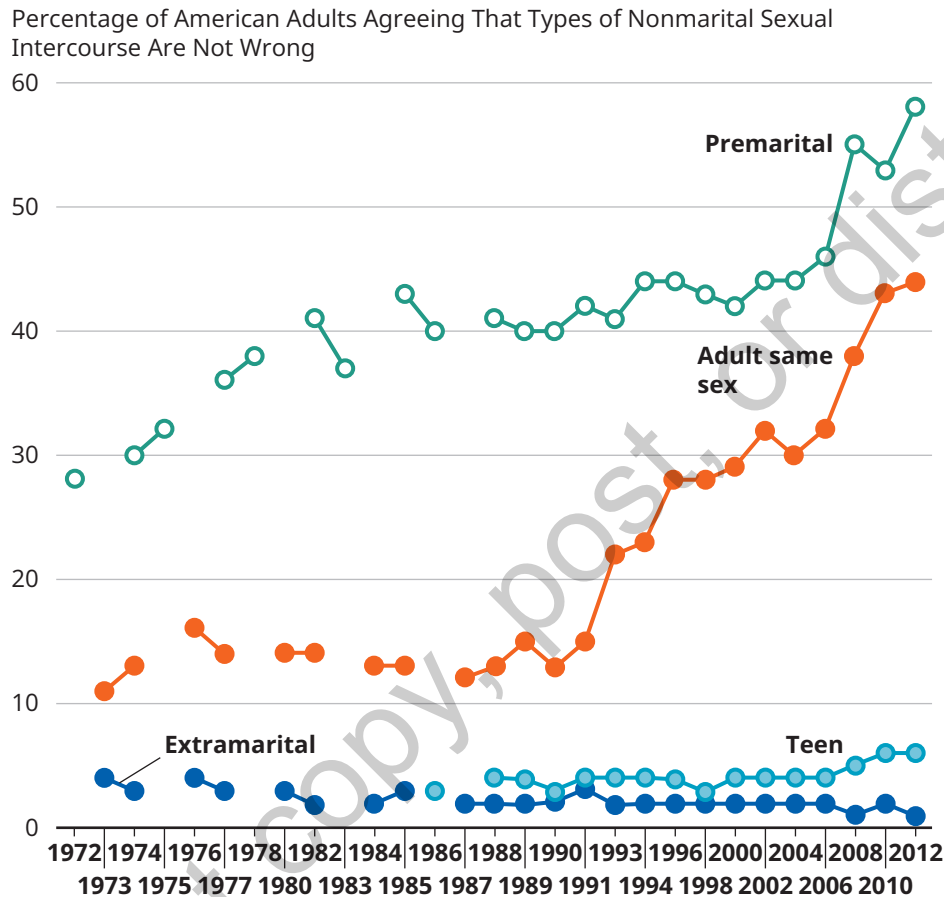
Education Images/Universal Images Group/Getty Images; New York Daily News Archive/Getty Images

Although there are misconceptions about the Stonewall riots being conducted exclusively by gay and lesbian people, Black transgender and gender-diverse people actually orchestrated them on behalf

of the gay and lesbian community. Within weeks of the riots, Greenwich Village residents organized groups of activists to establish places where gays and lesbians did not fear being arrested for their sexual orientation. Historians have noted the importance of the Stonewall riots not only for championing the civil rights of LGBTQ+ people, but also for revealing how the intersectionality of marginalized identities—specifically race and gender—inspired the movement (Figure 2.10).

Figure 2.10 ■ Historical Trends in Sexual Attitudes

Data from Americans in the 20th century suggest a shift in their attitudes about certain sexual behaviors. This graph depicts such a change in American adults' attitudes between the 1970s and the 2010s. During this time, American adults' attitudes toward adolescent sex, premarital sex, and sex between same-sex partners became increasingly accepting. Americans also become less accepting of extramarital sex.



Twenge et al., 2015

The Minority Stress Model

The late 20th century also brought more complex understandings of LGBTQ+ identity. In 1981, Dr. Virginia Brooks introduced the **minority stress model**, a framework that addresses health disparities and high levels of chronic stress that stigmatized minority groups, such as LGBTQ+ people and people of color, face. In the late 1990s, I. H. Meyer (2003) expanded upon Brooks's work of the 1980s and conducted more research and documented the minority stress model. Such stress may be caused by a number of factors, including lack of social support, lack of community, and lack of financial resources. People can also experience such stress when they experience discrimination, anticipate rejection, hide or conceal an identity, or internalize negative societal views (Riggle et al., 2008, p. 211). Researchers suggest that the higher numbers of stress-level experiences, combined with the additional impact of the stress, can have a significant negative impact on someone's lifetime (Riggle et al., 2008).

The best-understood causes of minority stress are interpersonal prejudice and discrimination (Meyer & Northridge, 2007). The prejudice and discrimination that LGBTQ+ people experience, often on a daily basis, can take a toll on their mental and physical health. For example, suppose Maria, a 22-year-old, Latina-identified lesbian who is a senior at her university in Mexico City, decides to tell her family she is a lesbian. Her mother and father are not supportive and tell her they are ashamed of her sexual orientation. According to the minority stress model, Maria is now at greater risk of suffering physical or psychological symptoms due to the stress caused by her unsupportive family.

Let's also suppose that, in addition to coming out to her family, Maria decides to tell one of her professors, who warns her that she should not tell other people at the university due to possible discrimination in her department. Maria will now be at even greater risk of psychological or physical illness because she faces stress at both home and school. This greater risk could have a cumulative impact on Maria over her lifetime, causing her to get sick more based on the discrimination that she has experienced and the silence she is encouraged to keep. The concept of minority stress is somewhat new in human sexuality research, but it is increasingly applied by mental health practitioners and public health officials who seek to understand and reduce minority health disparities (Dentato, 2012).

Some sexuality researchers have argued that the 20th century saw more advances in the understanding of sexuality than any century before it. They point to groundbreaking research, expanded understandings of sexuality and identity, and increased knowledge about how sexuality intersects with other aspects of human functioning. Of course, it is difficult to compare steps forward across time given the different levels of knowledge available at any given time.

Sexuality in the 21st Century

2.6 Compare and contrast at least two different factors that will influence the future of human sexuality.

Manuel (Manny) is a 19-year-old cisgender Latino-identified senior in high school living in Ecuador. For the last few years, Manny has been working after school at a local coffee shop and Internet café in his hometown of Manta. At the café, customers can buy a cup of coffee and for a small fee browse the Internet with their smartphone or tablet. Recently, several high school students have come to the café and used the computers to look up information about sexual health on nonpornographic websites. Manny's boss, an older Ecuadorian cisgender man who has owned the café for over 20 years, exclaims, "No one is allowed to look up anything sexual in this café!" Manny feels uneasy about his boss's comments, and he wonders if he should say something.

The history of human sexualities across the globe illustrates a very diverse set of experiences. The significant influence of anxiety about sexual activity in young adult populations shifted the history of sexuality—and the new emphasis on sex positivity has shifted the landscape even further. Where do we go from here? Many professionals in sexuality research and practice have speculated about how the 21st century will continue to unfold.

In addition to the increased visibility of the sex-positive movement via actions like the SlutWalk, intersections between sexuality and technology continue to have an impact on sexuality in the 21st century. For example, the increased power of medical technology better explains sexual dysfunction, and the use of dating websites enhances the future of romance, relationships, and sex. In 2017, the Kinsey Institute and the app Clue surveyed 140,000 worldwide adults about the relationship between technology and sex (Clue, 2017). The researchers found that 30% of their sample used dating applications for sex, short-term relationships, or long-term relationships—with Swedish app users the most likely to find a partner and Russian users the least likely. The data suggested that respondents in China are most likely to use technology to learn more about sex (Singaporeans were least likely). Further, 67% of respondents had used a cell phone to send sexual messages or images, though South Africans were most likely to sext. This data suggest that technology continues to play an increasingly

significant role in the lives of adults, but more research is needed to help us understand how it influences the sexuality of children and adolescents.



The collaboration between the Kinsey Institute and Clue is one example of the phenomenal ways that technology can be used in sexuality research—in this case by having participants fill out surveys on their smartphones.

Oscar Wong/Getty Images

The study of sexuality in the 21st century needs to further address multiculturalism and diversity. Many scholars have noted that many portions of the world are returning to more conservative values about sexuality and gender (Charlesworth & Banaji, 2022). This return includes the erasure of diverse aspects of sexuality that do not reflect such a conservative point of view, including rights for transgender people and abortion-related reproductive justice. Many scholars have noted that more research needs to be done on the relationship between racial and gay identities and their affiliated communities (Kim et al., 2022). In addition, scholars continue to call for more information about how a person's varying abilities—cognitive, developmental, and physical—may affect their sexuality. For example, latex allergies for some people with spina bifida requires using nonlatex condoms and dental dams during safe sex. As another example, some people with poor circulation or poor mobility may need to avoid certain types of birth control pills because they may be at higher risk of thrombosis (blood clots).

Advocacy, Multiculturalism, and Social Justice

When we look closely at historical trends of sexuality, we must note the impact of **advocacy**, or any action that results in the change of one or more systems with the goal of increasing fair treatment for marginalized persons. Advocacy engages in actions that empower both individuals and small groups of people. Often, these people are not recognized within the larger systems of oppression that silence their voices—so as not to disrupt mainstream ideas about sexuality. For example, what would happen if Manny, in the section-opening vignette, explored the ways that his Ecuadorian identity is underrepresented in sexuality pamphlets? What if he understood the cultural nuances related to giving (or receiving) consent before engaging in a sexual act?

Sexuality researchers have often struggled to define “social justice,” which can be difficult to separate from related ideas such as empowerment and social advocacy. However, we can define **social justice** as a distinct idea that combines advocacy and empowerment with knowledge of disadvantaged people and communities (Doorn et al., 2019). Social justice is the application of knowledge about multiculturalism to the process of creating systemic change and advocating for others. In another example of social justice, what if Manny advocated for more positive attitudes toward sexuality with his employer?

One form of advocacy is **activism**, or efforts to promote, impede, or direct social, political, economic, or environmental reform or stasis with the desire to make improvements in society (Kim et al., 2022). For example, it may be difficult for some people to understand certain ideas related to gay

and lesbian people, given negative beliefs they grew up with—for example, that gay and lesbian people are “immoral.” Activism might be challenging these views through having a panel of gay and lesbian people talk about their experiences or writing a letter to administrators at a school to change certain written policies to include gay and lesbian people in their anti-discrimination policy.

When applied to sex positivity, social justice allows us to engage in activism with others by starting a conversation about the impact of anti-sexuality bias. It can be as simple as creating a space where social change might occur through one student helping other students to shift their own views. For example, suppose Maggie, a 17-year-old woman with a disability, is enrolled in a human sexuality class. Through a lens of social justice and ability-focused sexuality education, Maggie could engage in a conversation about sexuality with her classmates while also educating them about the relative absence of resources about disability-related and disability-focused sexuality.

Social justice in understanding sexuality means that we can engage in activism in our families, communities, and society while still valuing and respecting our friends and communities. For example, what if Manny spoke to the high school students at the Internet café about their need to freely express their desire for knowledge about sex and sexuality? By looking at social justice through a lens of intersectionality, we see every person not only as a sexual being but also as a unique constellation of privileged and marginalized identities. This means that the future of sexuality studies (and of sex positivity) must acknowledge the ways that privilege, oppression, and systemic change affect the balance between sexual attitudes, sexual values, and sexuality education.

Given all of the information that has shaped contemporary views of sex, how do people learn about themselves as sexual beings and about human sexuality as a whole? We look at this question next by looking at the work of Dr. Debra Mollen.

Pathways and Careers with a Sexuality Educator

Like many people interested in careers focused on sex and sexuality, Dr. Debra Mollen describes herself as “pretty fascinated with sexuality from a very young age. Whenever there was an opportunity to learn about sex, I wanted to do that.” Mollen, who is a professor of counseling psychology at Texas Woman’s University and a licensed clinical psychologist in Texas, notes that some of her key developmental experiences occurred in the early 1970s, a time of great civil and social activism in the United States. She received her PhD at Indiana University, which Mollen says “was a good experience in part because I liked being immersed in a place where people were thinking about sexuality.” She currently teaches courses in human sexuality, cross-cultural psychology, and the psychology of women to undergraduate and graduate students.

In her doctoral program, Mollen studied the experiences of women who choose not to have children, and she realized the importance of studying sexuality from an intersectional framework: “I began to notice who was allowed to be sexual and who was not. I began to notice whom we attack for decisions related to their sexuality.” Mollen conducted her own research about the gender-based and racial issues related to reproduction, contraception, and abortion. As she notes, “Research on reproduction has so many implications for women, for people of color, and for people of various class backgrounds.” She also began to learn how interdisciplinary and



Debra Mollen’s career as a professor and sexuality educator has helped many people in various phases of their educational experiences to learn about different aspects of sexuality.

Debra Mollen

how intersectional sexuality is: “Many times, someone needs to reclaim their sexuality, and their various identities impact these processes.”

Mollen was certified as a sexuality educator in 2015 through the American Association for Sexuality Educators, Counselors, and Therapists (AASECT), and she is one of just a handful of certified sexuality educators in the state of Texas. Such certifications are helpful for government agencies and businesses that need to hire qualified educators for their constituents. Certified educators effectively facilitate others’ learning and provide comprehensive sex education that is medically accurate, scientific, and inclusive of multiple perspectives and viewpoints.

For people who want to study sexuality, Mollen advises to “find a good mentor and immerse yourself in studying. And, once you have done some work, reach out and be a mentor to others, as you will be a mentor sooner than you think.” Mollen cautions that people studying human sexuality should ensure that sexuality research and education are of good quality. “Many times, faulty science [in sexuality research] can get translated into bad policy,” she said.

Something to Think About . . .

What are some of the steps it takes to become a certified sexuality educator? Why would it be important for some educators to have specific certifications in the area of human sexuality?

Reviewing Key Concepts

2.1 Illustrate the ways that our understanding of history impacts human sexuality.

- Many of our current understandings about sex (including our values and attitudes about sex) have been influenced by different historical trends in human sexuality.
- When learning about sexuality within a historical context, there are two predominant approaches used by sex-positive researchers and historians: the transnational approach and the comparative approach. The transnational approach is used to identify similarities and trends across different countries and territories. The comparative approach to historical analysis allows historians to make distinctions and identify differences between different countries and territories through constant comparison of rituals, movements, and evolving experiences.

2.2 Discuss historical myths focused on sexuality that were pervasive prior to the 17th century.

- The history of human sexuality has a wide variety of influences. Contrary to many myths, prior to the 17th century, many communities and different countries did not have anti-sex attitudes.
- The 17th century saw a shift to increasing shame-based attitudes about sexuality, including negativity toward same-sex relationships and the negative influence of religious attitudes.

2.3 Compare and contrast at least two different influences on sexuality during the 17th and 18th centuries.

- The 18th century and the Victorian era brought secrecy around the topic of sex.
- The influences of cultural shifts, moral differences, and political influences all had differing impact on human sexuality.
- In particular, various historians have noted the religious influences that emerged during this time that intentionally removed aspects of desire and pleasure from sex (and instead focused on procreation).

2.4 Identify at least two ways that sexual degeneration impacted experiences of sexuality in the 19th century.

- The 19th century saw increasing sexuality practices and sexual behavior that diverged from strict societal norms. Homosexuality, sex work, and autoeroticism became increasingly common during this time.
- The 19th century identified several scholars important to the field of human sexuality, including Charles Darwin. His theories of sexual selection (which contributed to theories of eugenics) continue to be controversial.
- Freud's work, which related to the pleasure principle and the unconscious, helped many to begin to talk about sex, despite being surrounded by larger values of secrecy and shame around sex.
- Freud's theory of psychosexual development identified five stages: oral, anal, phallic, latency, and genital. While it has been valuable, critiques of the theory and related concepts like libido have roots in its cultural limitations.

2.5 Identify and discuss the work of key sexuality scholars from the 20th century.

- The 20th century brought more diverse types of research into the sex field. Alfred Kinsey's work on a person's sexual orientation helped to identify a large continuum (outside of identities such as homosexual and heterosexual) that people could use to better understand their attractions.
- The 20th century brought theorists who began to view sexuality from new lenses. Michele Foucault's work highlighted how large systemic and economic forces impacted people's freedom to express their sexuality.
- Audre Lorde's work on intersectional experiences of sexuality for Black women highlighted the absence of sexuality research focused on people of color and on women.
- The 20th century also brought a stronger understanding of the history of LGBTQ+ people.

2.6 Compare and contrast at least two different factors that will influence the future of human sexuality.

- Historical analyses indicate that the study of sexuality in the 21st century needs to center concepts of diversity and multiculturalism.
- Investigations and depictions of social movements within the history of human sexuality emphasize the influence of advocacy, or efforts to promote, impede, or direct social, political, economic, or environmental reform or stasis with the desire to make improvements in society.

Key Terms

activism

advocacy

anal stage

autoeroticism

comparative history

eros

eugenics

free love

genital stage

Hays Code

latency stage

libido

Middle Passage

minority stress model

oral stage

phallic stage

pleasure principle

repressive hypothesis

sexual degeneration

sexual revolution

sexual selection

social justice

Stonewall riots

transnational history

Discussion Questions

1. Give two examples of historical narratives about sex and sexuality that are erotophobic and lacking a sex-positive perspective. (You might want to consider your own experiences with sex education as taught in a school you've attended).
2. Describe three to four ways that Freud's theories have impacted thoughts about present-day sexuality.
3. List at least two factors that you think will impact human sexuality in the 21st century that are not mentioned in this chapter.

Fact or Fiction?

After reviewing the “Ask Yourself” questions at the beginning of the chapter, take this quiz to check your learning.

1. Fact or Fiction? Two characteristics about sex in the 19th century include a carryover of repressive ideology from the 18th century and a growing openness to new attitudes about sex.
Fact.
2. Fact or Fiction? One contribution by Havelock Ellis to sexuality research was his focus on unconscious desire.
Fiction. Havelock Ellis is credited with authoring the first medical textbook in English that addressed homosexuality and normalized same-sex sexual practices.
3. Michel Foucault was a protégé of Freud who carried on Freud's work related to children's repressed sexuality.
Fiction. Foucault critiqued Freud's theories, writing with a focus on pleasure and how pleasure and sexual morality are culturally bound.
4. Fact or Fiction? The minority stress model asserts that discrimination experienced by LGBTQ+ people will have an aggregate and significant impact over time.
Fact.