ABSTRACT

Presented is a developmentally sequenced curriculum designed for teaching human sexuality to mentally impaired adolescents. A brief objective is presented, teaching methods are listed, and materials needed are described (in terms of author, title, source, and price) for each of the following topic areas: vocabulary of sexuality; fact vs. myths; public vs. private behavior; sexual variance; body image and self concept; role identification; body parts and function; menstrual hygiene; prepus hygiene and circumcision; autoerotism; pregnancy, birth, birth control, and sterilization; and sexual disorders. Also provided are a detailed list of teacher references (including books, organizations, and professional journal articles), a paper by L. Burt on sexuality and ambisexuality, and an educational resource materials chart. (SB)
A CURRICULUM FOR TEACHING HUMAN SEXUALITY
TO MENTALLY IMPAIRED ADOLESCENTS

By

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INTRODUCTION

Consistent with the position of the Sex Information and Education Council of the United States (SIECUS) regarding sex education for the mentally retarded, an educational curriculum for the teaching profession is presented. To avoid misunderstanding, sex education should be considered not as sex instruction, but rather an exploration of the total person's sexual life and sexuality. This paper is zeroing in on just one of the developmental stages of the human sexual growth pattern, namely the years of puberty.

It is hoped that the teacher who uses the content of this paper will do so, recognizing his or her own moral value system, but attempt to minimize that moral system in teaching sexuality. One should not be taking sides when dealing with an area so important to everyone, and especially an area holding such emotional and psychological repercussions. It is hoped that the teacher who uses this material will do so in a manner that allows each student to make his or her own decision as to its worth and value, and in a way that maximizes the value of a teaching and learning situation.

Often a great concern confronts teachers who choose to take on the task of providing an understanding of human sexuality to young people. These concerns and perhaps fears, stem from several sources. They may come from a feeling of personal guilt. Often they originate in concepts and values which develop in many educators at a young age. Some are a direct result of traditional and religious
teachings. The teacher may be confronted with the need to relearn many concepts in areas of human sexuality that were once taught as sins or demons by the church body. Many churches today are reconsidering their earlier teachings regarding particular areas of human sexual understanding. A good example of this can be seen in the recent changes in the two million membership United Church of Christ, which recently began to publicly support the fellowship and ordination of homosexual men and women within its church. We are witnessing a considerable interest in human sexuality by many religious groups. Accordingly it is a frequent topic of conversation and debate.

Another problem the teacher may face is that of dealing with poorly informed teachers, administrators and school boards. A teacher must assume the responsibility as a concerned citizen in any community to present well prepared workshops and discussion groups. These discussion groups and workshops assist a teacher by gaining needed support for such a new program.

Parent groups such as the Michigan Association of Retarded Children, County Associations of Parents with Retarded Children, Planned Parenthood Associations, and PTA's all have great influence on the development of programs for teaching sex education to young people. Many times these pressure groups are the most influential in getting sexuality programs into the local school districts and State Departments. Key factors that play important roles in getting parent group support are:

1. Parents of the retarded student who request schools teach in areas of human sexual development because they themselves lack
basic knowledge or have not received updated and accurate information in human sexuality.

2. Parent groups who want workshops on human sexuality presented to their committees.

3. Parent groups who get involved with school personnel in setting up curriculas in human sexuality.

4. Teachers who take an interest in contacting parents of retarded children concerning the development of informative programs about human sexuality.

5. Programs to discuss and establish a network for continuing input into an on-going curriculum for teaching human sexuality.

6. Programs aimed at determining which teachers are competent to teach human sexuality.

The needs of people in a given society vary greatly for understanding the many aspects of human sexuality. By offering well developed programs and materials the schools should be able to balance out the learning in a particular area such as this. Most individuals, including the retarded, still are poorly informed and often denied the opportunities to learn about sexuality. It is hoped that through the development of programs in human sexuality people will learn that natural functions of the human body are wholesome, healthy and desirable.

For people who have not undertaken sex education before, I would like to make the following suggestions based upon my experiences.

1. When working with the slow learner be sure to give examples of a concrete nature when explaining concepts that are abstract.
2. Try to have the coeducational group of similar mental age.
3. Find out what sexual words the group is familiar with and use them, gradually introducing clinical terms.
4. Take plenty of time. Don't try to present too much information about any one topic in any given setting.
5. Start at the beginning of the lesson and review a great deal. Never assume even the most basic knowledge.
6. If you are working with people who are chronologically adults, call them "men" and "women".
7. Never moralize (judge others personally).
8. Recognize and accept the acute discomfort in the group. Try to establish areas of discomfort common to them and you.
9. Have a practice session beforehand with a colleague. If it turns out that you are really uncomfortable with the vocabulary or the subject matter, get someone else to do the job. A positive attitude toward sexuality in general and one's own sexuality in particular is the most important factor in successful sex education.
10. Remember, education does not end with a set number of formal discussions. Informal teaching and the sharing of information and attitudes about sexuality will continue to occur on a day-to-day basis when people are working closely with mentally retarded individuals.
TOPIC AREAS

The curriculum is presented to assist the slow learner with basic understanding of concepts in human sexuality. It is suggested that when teaching students of limited mental ability instruction be presented in such a way that it is developmentally sequenced. This is done to enable the learner to progress from one concept to another without unnecessary abstraction. It also allows the student to build new ideas and concepts from earlier learned information. With this in mind the curriculum is presented to explore concepts believed by professionals as most effectively presented to slow learners. The curriculum represents a style of teaching which uses both objectives and methods as tools for developmental learning.

Vocabulary of Sexuality

The topic involves the language process used in communicating basic word meanings between people. Vocabulary of the student is explored and examined. The student is encouraged to use his own language, even that which is slang or perhaps vulgar, inorder that the educator may view the students comprehension of a given word or concept. The educator is urged to familiarize himself with the learner's language and use it during the teaching process thus contrasting the less appropriate terminology with the apparently more desirable words.

Objective

The learner will more effectively use during classroom discussion appropriate language (ie. clinical terms) as specified by the instructor.
Methods

1. Given a picture of the genital area of the human body ask the child to verbally identify that area. Use pictures of both immature and mature male and female anatomy. The pictures from the Human Sexuality Portfolio are very helpful and specially designed for the slow learner. Examples of pictures used most effectively include breast, penis, vagina, scrotum, and anus.

2. During the time students are identifying these pictures print the words offered by the student alongside the pictures.

3. The correct terms should be printed beside the pictures following the student discussion. At this time the teacher should instruct the students to pronounce the clinical terms with him. This allows students the opportunity to verbalize the appropriate words correctly.

4. The teacher should then erase the incorrect terms offered explaining that the clinical terms are those which we prefer to be used when discussing human sexuality.

5. It is suggested the teacher use group discussion with the class to develop definitions or descriptions of each term listed. The teacher may put these definitions on a cassette tape for reinforced learning. The materials listed below are important here.

6. Have the students take turns constructing sentences out loud in the class using one of the preferred listed words to see if they are using the words appropriately (e.g., Penis - Johnny has a penis).
Note: Do not expect the students to learn terminology listed in the reference below other than those terms they express when developing the chalkboard list. New terms will be introduced intermittently throughout the program.

7. A mannequin or model of the male and female anatomy will be helpful in teaching this concept.

Materials


   These plates are effective in demonstrating basic differences between mature and immature males and females, differences in male and female anatomy and identifying characteristics of the male and female.


   This paperback book has one of the most comprehensive dictionaries available in human sexuality. This book is recommended as a required reference.


   This dictionary gives accurate information about the sexual organs and processes to dispel ignorance and superstition which color so many of our sexual attitudes. The material includes over 100 illustrations and 350 definitions of scientific names of the anatomy,
function of the sex organs, and different kinds of sexual behavior. Highly recommended.


These slides present anatomical and behavioral terms along with their slang equivalents to assist teachers in coming to terms with the communication problems in sex education classes.

Facts vs. Myths

(Distortions, Lies, Misinformation, etc.)

The topic deals with where we get our ideas and attitudes regarding human sexuality. Here we are dealing with basic ignorance and misconception concerning areas of human sexuality. There has been a preponderance of uptightness regarding most discussions of sexuality and its many ramifications. This area of teaching centers on our misinformation and how to become better informed.

Objective

The learner will discriminate differences between factual information and misinformation through pointing and verbalizing during classroom discussion as directed by the instructor.

Methods

1. Develop some pictures (graphs or charts) for an overhead projector that depict the more common forms of factual information in the sexual arena. These transparencies may include:

   a. "I was born into the world by my mother."

   b. "I once lived inside my mother's body."

   c. "I came into the world through the opening between my mother's legs."
d. "My father's sperm united with my mother's egg to begin my life inside my mother."

e. "My mother probably was in the hospital when I was born."

f. "The doctor probably helped my mother when I was born into the world."

The teacher can depict other facts through graphs or sketches. The teacher may find the slide series "Genesis" of some assistance here.

2. After the overhead presentation of factual information ask the class to describe other situations related to mother, dad, and birth. Be open about discussing any myths which are offered by students.

3. Using an Opaque projector and pictures found in the two books written by P. Mayle. Present pictures that depict factual information in areas of human sexuality.

4. Using the same pictures as those presented in method No. 3 place beside them a picture representing misinformation. (i.e. pregnant mother - stork with baby) Ask the students to point to the picture that is factual.

5. Point out that myths and lies about sexuality have often come from some of the following sources (include pictures):

   a. Fundamental Religions (traditional)

   b. Pagan, Greek and other Mythology

   c. Poorly informed and misguided parents

   d. Poorly informed and misguided teachers and counselors

   e. Misinformed students

   f. Outdated books
6. Center your discussion around why there is so much distortion and misinformation about sexuality and why many people are uncomfortable about discussing this topic. (ie. assumptions people make, social taboos, guilt people are made to feel, lack of factual information)

Materials

1. Overhead projector.
2. Opaque projector.
3. Pictures, graphs, and charts.

This filmstrip was created by cartoonist Dan O'Neill, creator of the syndicated cartoon strip Odd Bodkins, lampoons man and the taboos he imposes on his sexuality. The story of Genesis confronts the seriousness of sexuality with a little laughter at our very humanness.


This is a humorous book that examines the process of conception and birth. Written at a primary level (4th grade) and fully illustrated, the book is so real and so honest that many teachers may be astonished by it. The book covers orgasm, conception, embarrassment, growth, and sexual pleasuring.

This book is written at the same level of humor and is as completely illustrated as the book "Where Did I Come From?" The book has a little higher level of reading vocabulary (5th grade) and explores prepuberty and puberty. Categories discussed include: erections, breasts, menstrual periods, voice change, pimples, masturbation, body hair, penis size, wet dreams, and similar topics.


It's a film facilitating interaction and appraisal of information, attitudes and values concerning sexuality. Beginning with an unrehearsed rap session with urban teenagers seeking information and sharing misinformation on contraception, masturbation, homosexuality and sexual fantasies the movie offers opportunities to seek correct information. The second section sets forth basic information and points of view on seven topics, laying the groundwork for further discussion. The topics are sexual fantasies, body growth, masturbation, pregnancy, contraception, abortion and sex roles. The film is excellent for initiating discussion with teenagers and is highly recommended.

Public vs. Private Behavior

This concept expands an already familiar concept with children in an effort to differentiate public from private behavior. An example of this is in the following statement made by a parent: "Please don't fart at the table, please do this away from people." Much discussion and emphasis is needed through the entire coverage of the subject matter to differentiate public from private behavior. This is the area that brings the greatest revulsion of the handicapped by the public
and is, therefore, considered an essential topic. The handicapped or limited individual may require extra help in developing this specific concept.

**Objective**

The learner will more effectively differentiate appropriate behaviors in public and private situations for sexual activity and expression as directed by the instructor.

**Methods**

1. The teacher should make the following differentiation to the class between what is private and what is public in behavior. Cartoon booklets listed under materials may be of assistance here.

   The concepts to be developed in this area include:

   a. Private behavior is behavior which is performed by oneself or with another consenting person.

   b. Public behavior is behavior which is defined by the culture and society as acceptable when performed in the presence of others—frequently those who are strangers.

   The teacher should have the class roleplay some examples of what might be acceptable public behavior with same-sex and opposite-sex. The teacher should lead a discussion to help each student to define a place that is commonly regarded as being private.

2. The teacher should list the various kinds of sexual behavior the students are able to express under two separate categories on a chart or the chalkboard. Each vocabulary term given by a student should be matched with the appropriate term to assist other students with their understanding. Acceptable public behaviors would
include:

a. hugging
b. kissing
c. touching
d. caressing

Examples of activities which might be brought out by students and should be listed as private are: urination, bowel movement, baths, sexual self-pleasuring, sexual intercourse, changing clothing, looking at the genitals, and genital hygiene. This may be done with illustrations to assist poor readers.

Materials


This series is concerned with teaching social behavior and personal hygiene to mentally retarded adolescents. Of particular interest are the following: "Menstruation", which shows practical methods of care during the menstrual period, "A Personal Talk to Young Men", and "A Personal Talk to Young Women", which are directly concerned with approved manners and conversation in public. The elements comprising socially acceptable behavior are emphasized.

Ambisexuality: Sexual Variance

This topic defines human sexuality as the condition in which the individual has the biological capacity for sexual affinity which is directed toward both the opposite sex and the same sex. This defines all humans as ambisexual beings. Sexuality and sexual
behavior is seen as a continuum in human development which begins prior to birth and continues throughout the individual's lifetime. This allows an individual to shift from one sexual orientation to another in a different point within a lifetime. Unique neuro-endocrinological, psychological, sociological and unique prior conditioning—as well as perhaps genetic factors account for an individual's sexual orientation and sex partner choice. The uniqueness of each factor and the total of all ultimately is the cause for sex-object preference, erotic response and predominate sexual orientation. See reference sheet attached.

Objective

The learner will demonstrate through illustration and discussion that a continuum is commonly a part of everyday life, and that his own sexual behavior and sex-object choice is a part of the sexual continuum.

Methods

1. Bring to class a set of marbles of 10 different sizes (these can easily be made from clay). Allow the students to examine them and take note of their differences in size. Be sure the marbles used illustrate variation in sizes that can be easily recognized by slow learners. The instructor might wish to use a variety of balls (basketball, soccer ball, softball, and baseball) to teach this concept. Emphasis should be placed on how marbles or balls vary in size from one to the next. This is done to start students to think of gradations.

2. Bring to class a bottle of vinegar and 5 dishes (cereal bowel size). Set up 5 dishes using the following proportions of vinegar and water.

   a. 4 tablespoons vinegar - 0 tablespoons water
b. 3 tablespoons vinegar - 1 tablespoon water
c. 2 tablespoons vinegar - 2 tablespoons water
d. 1 tablespoon vinegar - 3 tablespoons water
e. 0 tablespoons vinegar - 4 tablespoons water

These dishes are set 4 inches apart in a straight line on a table. The students are allowed to walk past the dishes smelling of each as they pass over them. The teacher must emphasize to the students the continuum of odor from one dish to the next and the great amount of difference in smell between the two end dishes.

3. Using black paint and white paint place the following proportions into 5 dishes:
   a. 4 tablespoons black - 0 tablespoons white
   b. 3 tablespoons black - 1 tablespoon white
   c. 2 tablespoons black - 2 tablespoons white
   d. 1 tablespoon black - 3 tablespoons white
   e. 0 tablespoons black - 4 tablespoons white

Be sure to mix the white and black paint ratios correctly and stir them well. Place these dishes of paint in a row along the top of a table. Allow the students to pass by and observe them. Note: be sure to mix the paints while the students are present - this gives them added knowledge of how a continuum is constructed.

4. Make a large diagram of the Kinsey scale continuum (see attached reference sheet) using black, greys, and white. Allow shades of black for 5 and 6 of the Kinsey continuum, shades of grey for 2, 3, and 4 and shades of white for 0 and 1 of this continuum. This diagram of the Kinsey continuum could best be placed on a brightly colored
background of a bulletin board. Refer to Appendix I for assistance with the continuum.

5. Use the continuum to discuss the variety of friendships classmates have and how many of these are same sex (homosocial). Note common bonding of like sex. Use the overhead projector showing simple drawings of what boys do toward other boys when attempting to display affection and make friends—appropriate behavior (i.e., hand-shake, hand on shoulder). Then show what girls do toward other girls to make friends—appropriate behavior. Now show examples of how boys and girls appropriately respond toward one another when making friends.

6. Discuss class members' reactions to the scale and ideas presented by Kinsey. Point out that each individual may assign himself to some point on this scale during various points in one's lifetime. We need not tell each other openly where we feel we are in regards to this scale unless it is relevant to making a friendship or developing an interest in another. We can think of this scale in both physical behavior and emotional thought or fantasy.

7. Instruct the students to make a continuum on manila paper using crayons and pencil. The students should be presented a series of possible continuum examples and encouraged to use one of the examples given or develop their own. Examples might include drawing pictures of the seasons of the year (winter, summer, spring, fall), size in growth of any living thing, weight in growth, variations in colors (red-orange-yellow, black-grey-white, red-purple-blue), odors where strong smells vs. weaker smells (paint thinner, vinegar, etc.).
Materials


   This booklet covers all aspects of concern with teenagers and homosexuality. The material is written on the 4th grade reading level. This is an excellent book for both individual or group learning.

3. Vinegar, water, clay, crayons, pencils, black and white paints, and manila paper.

Body Image and Self Concept

This topic involves the way an individual sees his physical self in relation to others. Also, the topic concerns itself with how a person feels about their own body and the way others react toward them. To a degree this explains the differences and similarities in sexual identification.

Objective

The learner will identify basic similarities and differences in body image when directed by the instructor to contrast basic differences in self and others.

Methods

1. The teacher should have several children stand in a line in front of the class while asking their classmates to identify common characteristics of the group of individuals. The teacher should list these characteristics on the board.
2. In the next step the teacher should request the class-
members to identify as many different characteristics as possible
within the group standing. These also should be listed on the board
beside those which are common characteristics.

3. Have the class contrast the two lists and view which list
is the most lengthy. Are we more similar or dissimilar?

4. Have the students discuss the differences and similari-
ties of plates V and VI of the Human Sexuality Portfolio.

5. Take a collage (collection of cutouts) and place them on
a bulletin board in the classroom. The cutouts should be of various
people (size, shape, ages, etc.). (Refer to materials, Reference 4.)

6. View the two film series and discuss the children's
reactions.

Materials

1. Livingston, Victoria and Knapp, Mary E., Human Sexuality
Portfolio, Plates V and VI, Planned Parenthood of Seattle - King
County, Education Department, Seattle, Washington.

   These two plates are useful in assisting the student to recog-
nize basic differences in body size, color, and character. They can
assist in identifying what is male and female.

2. Boy To Man (1962), 16 minutes and Girl To Woman (1966),
18 minutes, Los Angeles, California: Churchill Films.

   These 16mm films presented in color with sound are available
for rental as an aid in developing an understanding of the physical
changes that occur during adolescence. Boys and girls should see
both films in order to understand the maturational processes.

This booklet goes through a variety of situations where children enjoy self-pleasuring and activity. Examples included are tumbling, kissing, hugging, genital manipulation in private, sucking thumb, swinging, bowel movement, wrestling, jumping, bath, back rub, and others. The material is primarily aimed for a female audience, because of only one situation where a male is presented. The material is very good to assist young women with attitudes.


This black and white, 16mm, ten minute film with sound presents eighteen young people from ages 13 to 18 are shown to vary widely in size and shape as all are in various stages of pubertal development. Structure and the function of male and female reproductive organs are outlined and discussed.


This book is completely illustrated with basic drawings of therapeutic value for assisting the teaching process with mentally handicapped students. The book is developed to teach sexual related information on a one-to-one basis for teacher and student. Topics include: differences between male and female body, male-female roles, body parts, mature and immature body of male and female, examples of acceptable forms of sensuous behavior (hugging, kissing,
etc.), appropriate vs. inappropriate behaviors for given situations, menstruation, masturbation (male and female), pregnancy, and a complete guide to assist with the educational process. This material is very useful where teachers and parents wish to do individualized sex education.


Role Identification

This concept makes reference to what the individual feels is characteristic of male or female. This deals with what we think of as masculine and feminine. The concept refers to various meanings of sexual image making.

Objective

The learner will identify characteristics commonly associated with both the male (masculine) role and the female (feminine) role as specified by the instructor.

Methods

1. The teacher should provide male and female illustrations for group discussion of work commonly performed by both men and women. These illustrations may encompass some of the following:
   a. factory workers (male, female)
   b. farmers (male, female)
   c. doctors (male, female)
   d. lawyers (male, female)
   e. ministry (male, female)
f. legislators (male, female)
g. policeman (male, female)
h. students (male, female)
i. office workers (male, female).

2. The teacher should encourage each student to role play one of the above work situations inorder to begin identifying with sex roles and employment. Discuss student's reactions within their roles performed and how they effect sex image. Some students will feel uncomfortable role-playing some work situations. Discuss reasons students may feel this discomfort (ie: family background, peer experiences, and personal taste).

3. Have the students write their own definition of what it means to be a man and what it means to be a woman. Each student should write one definition for each. Without identifying the student the teacher should share these definitions with the class for purposes of stimulating discussion.

4. The students may draw pictures to illustrate how they see themselves in male or female roles. These pictures should be pinned on a bulletin board collectively. During a discussion period the teacher and student will be able to contrast differences and similarities in male-male, female-female, and female-male drawings.

5. Show films on Masculine or Feminine: Your Role in Society and Masculinity and Femininity and discuss them.

Materials

1. Masculine or Feminine: Your Role in Society, Chicago, Illinois: Coronet Instructional Films.
This 18 minute color/black and white film with sound uses a cinéma verité technique to explore changing attitudes about gender role in contemporary American society. It examines the opinions of young people, the views of a more traditional spokesman and the objective approach of a cultural anthropologist. Available for rental.


This material is a two-part series. Students in these filmstrips examine physical factors which contribute to role definition, view sex roles as expressed in various cultures, probe basic American attitudes toward masculinity and femininity and problems caused when these attitudes are either exaggerated or oversimplified. The emphasis is on a simple understanding and explanation of how much more complicated our sexuality is than just genital sexual contact.


A group of booklets which includes: My Body Feels Good (Susan Singer, Susan Olderman, and Rosemary Mocceiras); Living With Mommy (Beatrice Siegel); The Strange Hocket Family (Ann Rizzo); Peter Learns To Crochet (Irene Levinson); When It Flooded The Elementary School (Elena Yatzeck). These booklets each include a unique story that often is missed by the traditional literature for children. The material directly combats sexism by allowing for the female heroine, boys to assume non-traditional roles for men, and girls to
take on traditionally male employment roles. A teacher/parent manual is included.


This coloring book gives a variety of role and employment situations where girls and women may someday find themselves. Each picture is accompanied by a short rhyming verse that describes the picture. This material is very useful to assist young women with role identification.

Body Parts and Function

This topic covers physical anatomy about which adolescents are most curious. Included are specific areas of the anatomy that are classified as part of human sexual potential.

Objective

The learner will discuss a variety of anatomical parts of the human body as they relate to sexual functioning, growth, and maturity. These areas of the body will be specified by the instructor.

Methods

1. Using nude pictures of male and female anatomy at various stages in physical growth, on a bulletin board show the basic physical differences between them. (ie: Plates I, III, and V of Human Sexual- ity Portfolio).

2. Discuss specific growth differences by asking students what is different between young people before puberty, during adolescence, and at maturity. Use the plates in method one to initiate discussion.
3. Point out obvious differences in human anatomy such as body hair between young boys, men, girls, and women. Where?

4. Look at penis development in boys and men contrasting differences in size and shape--do the same in girls and women with breast development.

5. Discuss the chemical change that occurs in the human body--referred to as hormonal changes (male - testosterone or female - estrogens and progesterone). This discussion should take place after viewing the filmstrips Growing Into Womanhood and Growing Into Manhood.

Materials

1. Livingston, Victoria and Knapp, Mary E., Human Sexuality Portfolio, Plates I, III, and V, Planned Parenthood of Seattle - King County Education Department, Seattle, Washington, 1974, Kit of 10 plates - $20.00

   These plates are effective in demonstrating basic differences between mature and immature males and females, differences in male and female anatomy and identifying characteristics of the male and female.

2. Growing Into Manhood (filmstrip and cassette) and Growing Into Womanhood (filmstrip and cassette), Pleasantville, New York: Guidance Associates, 16mm, color. $44.00 each.

   These filmstrips, which last twelve minutes each, deal with the rapid growth and the attainment of sexual maturity that characterize the adolescent period in a simple, straightforward and reassuring manner. The photography is excellent and the use of children and youth of various ethnic backgrounds will give the program wide appeal.
3. **Becoming A Man** (filmstrip and records) and **Becoming A Woman**, Pleasantville, New York: Guidance Associates. $40.00 each.

Each set includes two color filmstrips and records and a teacher's guide. Each filmstrip presents a study of the reproductive system and the physiological changes accompanying puberty and will help students explore the parallel development of emotional and social attitudes and of masculine and feminine roles.


This is presented in comic book format which brings out in a humorous manner some very important concepts that young people want to know. It is highly recommended for interest level and appeal.

5. **Girls are Girls and Boys are Boys...So What's the Difference?** Syracuse, New York: Ed-U-Press, 1974, 32pp.

This book discusses simple facts about differences between boys and girls—ages 6-10. The material is simple and easily understood and in plain language.


This material is simple, detailed, and easily understood by 4th graders and up. It represents a detailed discussion of facts related to sexual development and growth.

**Menstrual Hygiene**

The concept involves the understanding and health care of the female anatomy.
Objective

The learner will describe during class discussion the physiology and health care of female anatomy as specified by the instructor. The teaching should be directed toward both the male and female.

Methods

1. Begin this topic by showing the film called "World of A Girl."

2. The discussion following the film should focus around what makes girls begin menstruation and why this occurs only in girls.

3. Show the film "Story of Menstruation." Follow this with discussion centered around physical care and hygiene of the female anatomy.

4. Using a doll or other model demonstrate to the class how the female anatomy (vaginal opening) should be wiped with tissue after a bowel movement. The preferred way is from front to back. This is done to assist in the prevention of bacteria entering the vaginal area.

5. Using a doll or model demonstrate how a tampon is inserted and a sanitary napkin is applied during the menstrual phase to prevent soiling of clothing. Emphasize that the tampon need be used only during the actual days of menstrual flow.

6. Discuss myths that are commonly associated with sexual behavior and the discharge period of menstruation (i.e.: Women cannot have intercourse during the discharge period).
Materials

1. World of A Girl, New York: Modern Talking Picture Service, Inc., 1964. This is a 16mm film in color and sound lasting 20 minutes which is free on short-term loan. The film explains the menstrual cycle through animation, with candid photography and the actual voices of teenagers. It portrays the changing world of a sensitive girl.

2. Story of Menstruation, Neenah, Wisconsin: Kimberly-Clark Corp. This ten minute, color, 16mm film, with sound, available free of charge, uses animated drawings and diagrams to explain the physiology of menstruation. The film suggests methods of care and hygiene, and encourages a healthy attitude toward the process.

3. Recommend the acquisition of a mannequin or large doll, tampon, and sanitary pad (Kotex).

Prepuis Hygiene and Circumcision

This topic concerns teaching both boys and girls about the health care and functioning of the male genitalia. It will cover teaching appropriate methods of health care of the circumcised and uncircumcised male genitalia, and that the majority of uncircumcised males are able to retract the foreskin.

Objective

The learner will compare the basic differences between the circumcised and uncircumcised penis as specified by the instructor.
Methods

1. Using two separate illustrations on poster board of detailed male anatomy with genitalia (one circumcised and one uncircumcised) indicate to the student which genitalia is and is not circumcised. The drawings should be complete enough that both figures look realistic and have distinguishingly different characteristics. The teacher may wish to attach the genitalia drawn to a male figure drawing, so the student is able to see the relationship of the genitalia to the rest of the body.

2. Explain to the student that the male penis is naturally uncircumcised at birth and has been circumcised soon after birth. This occurs mainly because of traditional religious beliefs which have been passed down in our culture. This resulted from early mythology that circumcision was more attractive and clean. Pagan history teaches that circumcision was viewed as more attractive. The circumcision does not necessarily make a man's penis more clean and healthy.

Illustrate the principle of circumcision in the following manner:

a. Using a man's knee sock (quite large in size) and a paste-board roll (commonly used for paper towels, foil, or wax paper) fold the one end of the paste-board roll in such a way to create a blunted tip. Insert the open end of this paste-board tube into the sock pushing it clear to the sock toe. Roll the open end of the sock up until about 3 inches of the blunted tip of the tube protrudes. This now represents the male uncircumcised penis.
b. Using the shirt sleeve of a long sleeved shirt, and the arm and fist, one can demonstrate the following without necessarily constructing the above materials. The same demonstration may be used to teach cleansing as follows: Using the above demonstration model indicate to the students where the head and shaft of the penis are located and how the foreskin of the penis (sock of the pastebord tube) is pulled back and cleaned underneath using a common wash cloth, mild soap, and water. Using the shirt sleeve and arm this same procedure can be demonstrated. Explain to the students this should be done during appropriate times...such as during bath time.

3. The teacher will explain in rare circumstances the foreskin may fail to retract between the ages of 5 and 18 and require medical attention.

4. When teaching sexual hygiene to both boys and girls be sure to include a few words about anal hygiene.

Materials


   This material gives a frank discussion of why "my penis is not like his" while showing a detailed illustration of 2 boys (one circumcised and one not circumcised) standing in the shower together. The material gives a well detailed discussion concerning those issues related to the pros and cons of circumcision.

This 176 page picture book for children is illustrated with real pictures of young children and adults in everyday life situations. Pages 48 to 51 deal specifically with differences between a circumcised and uncircumcised penis. The material is presented in large 20" by 16" pages with brief descriptions included. Because the material is presented in truly good taste it can effectively be used in teaching other concepts presented in this curriculum.

Self-pleasuring (Autoerotism)--Nonsexual and Sexual

This topic deals with how individuals obtain self-pleasure, sexually and nonsexually. Self-pleasuring may be the result of personal interest and desire. Each individual has unique ways of self-pleasuring. Private and public considerations are necessary.

Objective

The learner will identify a variety of experiences in self-pleasuring as specified by the instructor, and that appropriate places for sexual self-pleasuring are necessary considerations.

Methods

1. The teacher should direct the students into a discussion on self-pleasuring through discussion of the following topic examples:
   a. eyes - seeing enjoyable things (scenery), reading by oneself, T.V. watching.
   b. ears - listening to enjoyable music.
   c. nose - smelling favorite foods, enjoying perfumes.
   d. hands - touching a soft object (fur), petting a cat or dog, holding mom's hand.
   3. mouth - taste of favorite foods, singing to oneself, chewing gum.
31

f. thoughts - daydreams.

g. sex organs - touching feels good

It is suggested the teacher might wish to bring to the classroom some of the above items to allow children to self-pleasure.

2. Point out to the students that we do not all find the same kinds of things pleasurable. John may find he likes listening to records as most pleasurable while Jill enjoys eating her favorite food the most. Indicate that in any single area of self-pleasuring that we have our favorite way of getting pleasure from that situation. (ie: Tom likes listening to hard rock music while Julie likes soft classical music. Jerry likes hamburgers and Jack likes hotdogs.)

3. Sexual self-pleasuring should be introduced by showing the plates VII and VIII of the Human Sexuality Portfolio. These plates show a young man self-pleasuring and a young woman self-pleasuring. The instructor should discuss with students that not all people find this form of self-pleasuring enjoyable or desirable. Just as not all people find rock music or Italian food enjoyable. Further, that we call this kind of self-pleasuring masturbation.

4. The instructor should discuss with students any questions concerning masturbation while pointing out to each student that masturbation is a non harmful form of self-pleasuring that is done privately. Students and instructor should discuss what private means and assist students with identifying a place of privacy in each person's life.

5. The teacher should explain any misinformation concerning masturbation. It won't cause weakness, illness, warts, make a penis
bigger, make a person get old, make a person sterile, etc. See References.

6. The teacher may wish to demonstrate masturbatory practices by showing the following two films: "Handvoice" (female) and "One on One" (male).

Materials


   These two plates illustrate basic differences in masturbation with young men and women. Each plate represents detailed masturbatory behavior that men or women may enjoy and find pleasurable. The illustrations are easily visible and developed in good taste.


   In the film an average appearing woman in her thirties begins masturbating by caressing her breasts, and uses manual stimulation and pelvis rocking to increase her excitement. The growing excitement is visible in the tension of her body, face, and hand. During her orgasms, the tension is noticeably released through her hands. This is an excellent film which is highly recommended.

3. One on One, San Francisco: Multi Media Resource Center, Ind., 1972.

   This short 16mm, color film depicts a teenage masturbation film showing a long-haired young man masturbating and fantasizing
while reading. He imagines being with his girlfriend, and having sex with her. The film is useful as an endorsement of young adult's sexual feelings.


This 19 page booklet costing $ .50 each is very inclusive of what the topic of masturbation concerns. The material is up to date and written at 4th grade reading level, easily comprehended and in excellent taste.

Pregnancy, Birth, Birth Control, and Sterilization

This topic cover simple differences in male and female reproductive organs, differences in stages of pregnancy, and possibilities for the prevention of unwanted pregnancy.

Objective

The learner will identify simple differences (drawings) in male and female reproductive organs, developmental stages of pregnancy, and options available for birth prevention as specified by the instructor.

Methods

1. Begin by using male and female drawings that explain basic differences in male and female reproductive organs. Make these very basic and uninvolved—not distracting or overly complicated.

2. Using drawings, show how women appear with clothes and without clothes during the developmental stages of pregnancy. Demonstrate, by using drawings, how the baby is within the mother's body before birth.
3. Discuss the options available to men and women in prevention of unwanted pregnancy and children which may result from sexual intercourse (coitus). Discuss the pro's and con's of these options:

a. Abstinence
b. Birth control pill
c. Diaphragm
d. Condom
e. Intrauterine device
f. Foam or gel
g. Sterilization (surgical)
   (1) Vasectomy
   (2) Tubal ligation

A physician or school nurse knowledgeable of human sexuality and birth prevention may be of assistance when presenting this material.

4. Set up a situation for a female member of the class to roleplay. An example might be that she is pregnant and not married. Have her and the members of the class evaluate her particular situation and decide on what option she might choose as a course of action. Try role playing a situation where the woman is married and already has several young children in the home. Include a father role to determine what input and suggestions the father can make.

Materials


This 16mm, color film portrays a young girl approaching puberty. During the 20 minutes of the film the teacher explains about changes
during adolescence, the menstrual cycle, and the development of a baby. Information is presented in a discussion format.


This short book developed to present facts about sex, reproduction, and the family to young people. It is appropriate for use with ages 3 to 7. It is a very basic and easy to understand picture book with great value to any individual lacking basic information about sexual concepts and functioning.


A delightfully informative book so basic that a first grader could understand its contents and vocabulary. Yet, this book is so interesting and informative that adults can enjoy its humor and candid presentation. As other books from this publisher it is presented as a comic with high interest and appeal.


This pamphlet is of great value to adolescents and young adults with limited literacy. It is designed to explore the basic issues dealing with birth control and prevention and has been found to be very useful by teachers of the handicapped.

Sexual Disorders

This topic is concerned with a wide range of health inhibiting situations. These may be inform or acquired at various times during a life span.
Objectives

The learner will discuss some of the more common sexual disorders such as gonorrhea, syphilis, venereal wart, herpes simples, and some forms of physical handicaps, injuries, and surgery to the genital areas.

Note: The teacher must use care not to unduly frighten the handicapped by vividly describing accidents. Emphasis should be placed on prevention of venereal diseases.

Methods

1. The teacher should use a film of basic word discussion and picture demonstration of venereal disease (Venereal Disease and Your Health).

2. The teacher should present a lesson appropriate to the level of student understanding centered around the use of the Multi Media Center's cartoon books covering VD and/or disability.

3. Use a variety of simple pictures and charts to illustrate positions or locations on the body where VD can be identified.

4. Have students role play a situation with a physician and two or more in which he or she has contracted a venereal disease, or has a sexual disability.

5. Contact a school nurse or local physician to present this topic area to the students. This would be considered an optional area. It is suggested the professional cover the following areas:
   a. Congenital sexual problems
   b. Trauma to sexual organs
   c. Dysfunction of sexual organs
Materials


   This is a color filmstrip and record which discusses the seriousness of the VD problem—especially among teenagers, the symptoms of the disease and the importance of early treatment. It deals with syphilis and gonorrhea as health problems and makes the basic point that knowledge is an important protection.


   This educational comic book is valuable in presenting a humorous discussion of sexual misconception surrounding the subject of VD. The material is difficult for some to comprehend due to the small print and detailed pictures which cause figureground difficulty.


   This 18 page comic book gives honest and direct information in a humorous fashion about syphilis and gonorrhea, including methods of prevention.


   This 50 page booklet contains a great deal of factual information which is presented in a format that lends itself to easy reading with simple illustrations.
SUMMARY

This curriculum represents an attempt to compile a useful collection of materials that are only recently coming to the attention of educators. The mentally retarded students have been a major concern in the development of materials for the profession of human sexual understanding. The valid concern on the part of parents and interest groups have assisted with the development of materials and programs for the handicapped student. These efforts, and those of concerned educators, urge strong support for combating social ignorance and human injustice.

Recognizing the educational needs of the slow learner, the subject matter is tailored in such a way that sex education becomes not an indoctrination procedure, but an educational experience designed to cover the wide latitude of subject material—value systems and vocabulary. The curriculum for the student proposes an approach of openness, a biological, psychological, and sociological honesty that views the individual as a whole person.

As an alternative to a structured sex education program it is suggested that a tactfully integrated program which develops throughout the school curriculum as a regular part of the ongoing process for all grade levels be substituted. This approach must include a teacher with special skills that are best met by an informed special education instructor.

Within the confines of this curriculum the teacher is urged to update his/her understandings in human sexuality. A short, but very adequate, reference section has been added for this particular reason.
Materials presented in this curriculum may also be useful with a wide range of grade and age levels for special education students. More advanced materials also may be purchased from many of the publishers listed.
TEACHER REFERENCES

A. Books


   This is a book written by an outstanding health and special educator on the topic of special groups and the teaching of sex education. Those groups covered by the material include: the mentally handicapped, physically handicapped, ill and elderly. The material looks at normality, philosophies associated with sexuality, ways and methods of presentation, questions and answers related to physical contact, nudity, circumcision, masturbation, sex play, menstruation, nocturnal emissions, dirty words, homosexuality, fantasy, child exploitation, VD, pornography, coitus, contraception, abortion, dating, sexual inadequacy, prostitution, marriage, and parenthood. This book is the best in the field of sex education and the handicapped. It is highly recommended that all special educators read this material.


   This 250 page book is very useful to the educator in defining what is commonly identified as feminine and masculine and where we get these ideas. The book presents a multiple area of understanding in male and female concepts. It discusses how individuals become confused about their masculine or feminine role. An easy to understand book in every day language.

3. Berryhill, Susan, Guest, Felicia, and Richardson, Sheryl, What's Happening, Georgia: Emory University School of Medicine, n.d.
Dr. Caplan, M.D., Ph. D., senior research psychiatrist, outlines and explores basic concepts in areas of human sexual understanding. Topics of this book include the following: sex is more than getting down; masturbation; test yourself, inside our bodies; how to say no; guys speak out on dating, birth control, and sex; methods of birth control; it's your right to decide; homosexuality; VD--true stories from three teens; and sex words. Both black and white students discuss these issues openly and honestly in this book.


A book that puts everything together in allowing for broad understandings in human sexuality. This is a book that for just reasons is misnamed. It explores the entire realm of concepts which society develops in areas of sexual information. How we get this information, and the multitude of different ways we put it all together. The book leaves no subject untouched in it's truly clever approach to sexual knowledge and the ways we apply this in our everyday living. The book is likely to be a classic in modern readings.


This 155 page book presents 20 or more professional articles delivered at an American Association of Mental Deficiency conference held in Region IX at the University of Delaware on sexuality for the Mentally Impaired. The book urges presenting sex education programs for the retarded student. A beautiful piece of supportive information by professionals of high standing to assist the educator and the teaching of human sexuality.
B. Organizations

1. AASEC (American Association of Sex Educators & Counselors) 5010 Wisconsin Ave., N.W., Suite 304, Washington, D.C. Services provided by this organization:
   (a) Newsletter, which is published bi-monthly.
   (b) Books and resources for sex education.
   (c) Starting 1975, a new Journal of Sex Education and Counseling.

2. Institute For Sex Research (Formerly the Kinsey Institute) 416 Morrison Hall, Indiana University, Bloomington, Indiana.
   This organization provides extensive up-to-date bibliographies of sexual topics and sexual categories. It also offers photocopy service of journal and magazine articles. In addition, the organization provides a search service for articles in sex education.

3. Multi Media Resource Center (The Bookstore & Film Library) 540 Powell St., San Francisco, Calif.
   MMRC specializes in a series of films of great value to educators of children at all age levels. It also publishes many books and prints a 300 non-fiction book bibliography.

4. SIECUS (Sex Information and Education Council of U.S.), Suite 922, East 42nd St., New York, N.Y. This organization provides the following literature for the members:
   (a) SIECUS sex newsletters
   (b) Book reviews
   (c) Pamphlets and booklets
   (d) Reviews of audio-visual materials
   (e) Study guides and special packets
C. Professional Journal Articles


"Okay, let's tell it like it is (instead of just making it look good)," *The Journal of Special Education*, 1971, 5:379-381.


APPENDICES
Adult sexuality and sexual behavior are not a product of separate periods or stages of development ... nor are they products of discrete and compartmentalized phases or stages. Sexuality and sexual behavior are a CONTINUUM.

The traditional staging of sexuality into developmental periods is a convenient but outdated, distorted and artificial concept. -- Only the human mind invents categories, misinterprets and tries to force facts into separated pigeon-holes. -- The living world is a CONTINUUM in every process and every one of its aspects.

Unique neuro-endocrinological, psychological, sociological and unique prior conditioning - as well as perhaps genetic factors - account for an individual's sexual orientation and sex partner choice. The uniqueness of each factor and the total of all ultimately is the cause for sex-object preference, erotic response and predominant sexual orientation.

AMBISEXUALITY is the condition in which the individual has the biological capacity for sexual affinity being directed toward BOTH the opposite-sex and the same-sex. WE ARE AMBISEXUAL BEINGS.

--- THE KINSEY SEXUAL CLASSIFICATION SCALE ---

Dr. Alfred Kinsey established a HOMOSEXUAL-HETEROSEXUAL rating system. It grades an individual's "HOMO-HETERO" experience on a scale from ZERO to SIX.

The heterosexuality or homosexuality of many individuals is not an all-or-none proposition. THE SCALE DEMONSTRATES THE MANY GRADATIONS BETWEEN THE EXTREMS OF MAN'S BASIC AMBISEXUALITY. It stresses the CONTINUUM of sexuality.
DR. KINSLEY'S SCALE:

0 - entirely heterosexual.
1 - largely heterosexual, with incidental homosexual history.
2 - largely heterosexual, but with distinct homosexual history.
3 - equally heterosexual and homosexual.
4 - largely homosexual, but with distinct heterosexual history.
5 - largely homosexual, but with incidental heterosexual history.
6 - entirely homosexual.

An individual may assign himself a position on the scale for the various age periods of his life. To be honest and complete he must assign both (a) sexual EXPERIENCE rating and (b) a PSYCHIC sexual rating. The EXPERIENCE (actual physical conduct and activity) rating may differ from the PSYCHIC (thought, desire and sexual fantasy) rating. One's scale-rating may be rather constant throughout life, or it may shift from one period of life to another. The shift may be in the area of desire and fantasy (PSYCHIC) only, or it may be a shift of actual physical sexual activity (EXPERIENCE) ... or the shift on the scale may be both PSYCHIC and EXPERIENCE.

With this scale in mind, it is easy to see that part of the dilemma regarding sexual classification is simply one of definition. What, in fact, constitutes a homosexual? What constitutes a heterosexual? Each individual must answer that question for himself.
SEXUAL MYTHS, LIES AND FALLACIES

SEXUAL PHYSIOLOGY AND FUNCTIONING FALLACIES:
- Nocturnal emissions ("wet dreams") are indications of sexual disorders.
- Women do not experience nocturnal (sleep time) orgasms.
- Women ejaculate, as men do.
- Simultaneous orgasms are more satisfactory than those experienced separately and are, moreover, necessary for sexual compatibility.
- Female orgasm is necessary to secure pregnancy.
- Women are incapable of multiple orgasms.
- There is a difference between vaginal and clitoral orgasms.
- Male ejaculation and orgasm are one and the same thing.
- It is dangerous to have sexual intercourse (coitus) during menstruation.
- Menstruation begins earlier in girls living in the tropics than in girls living in cooler climates.
- Lower animals menstruate just as humans do.
- During menstruation, women should not engage in sports; nor should they take a bath, shower, or shampoo their hair.
- The absence of the hymen (maidenhead) proves that a girl is not a virgin.
- The best health is enjoyed by those who abstain from sex.
- Athletic performance is diminished by sexual activity the night before.
- Diminishing function of the sex glands signals the end of the sex life of both men and women.
- All couples consummate their marriage on the wedding night, and sexual intercourse is always a part of marriage.
- Coitus should be avoided during pregnancy.
- The older man has no advantages over a younger one insofar as sexual activity is concerned.
- A woman's repeated sexual experiences with one man will leave a mark on a child later fathered by another man.
- Humans can get "hung up" (like the dog) during coitus.

SEX DRIVE FALLACIES:
- Each individual is allotted just so many sexual experiences, and when they are used up, sexual activity is finished for that person.
- Older men should not expect to remain sexually active; but if they are still potent, they should limit such activity to marital coitus.
- Negroes have greater sex drive than whites; the penis of the Black male is larger than that of the white male.
- Certain substances are valuable as aphrodisiacs.
- Once a man or woman is sterilized, sex drive diminishes.
- Castration completely destroys the sex drive.
- Menopause or hysterectomy terminates a woman's sex life.
- Sex desire and ability decrease markedly after the age of 40 to 50.
The psychological need for sexual expression is of less importance in the later years of life than during the earlier years. The handicapped, mental and physical, have less sex needs than the fortunate.

REPRODUCTION AND BIRTH CONTROL FALLACIES:
* There is an absolutely "safe" period for sexual intercourse insofar as conception is concerned.
* Simultaneous climaxes are necessary or helpful if conception is to take place.
* Urination by the woman after coitus will prevent pregnancy, as will coitus in the standing position.
* Frigid women, prostitutes, and promiscuous women are not so likely to conceive as women whose sexual response or activity is more average.
* There must be two acts of coitus to produce twins, three for triplets, and so on.
* Sperm from one testicle will produce males and from the other, females; or the ova from one ovary will produce males, and from the other, females.
* The female determines the sex of the child.
* A fetus sleeps during the day and is awake at night (and kicks).
* An unborn child can be "marked".
* The birth-control pill will eventually cause a wide variety of ills in any woman using it for any length of time.
* Taking the pill will delay a woman's menopause.
* Humans and infrahuman animals can crossbreed.

HOMOSEXUALITY FALLACIES:
* Homosexual orientation represents a menace to society.
* People are either totally homosexual or totally heterosexual.
* Men (and women) are homosexuals because they were "born that way".
* Vulval-genital sex between a man and woman indicates homosexual tendencies.
* The man who enjoys having his nipples stimulated has suppressed homosexual desires.
* A child conceived through rear-entry coitus will be homosexual.
* Any lesbian would prefer a man, if he is a "real man" and if he would use the right technique.
* Any male homosexual would prefer a woman, if she is a "real woman" and if she would use the right technique.
* Most prostitutes are lesbians.
* The typical career woman is a suppressed lesbian.
* A homosexual, male or female, can be identified by their appearance and mannerisms.
* Homosexuals can't have a valid and real attachment or love for the same-sex.
* Homosexuals lack the proper sex hormones ... the males need testosterone.
SEXUAL DISORDERS AND ABNORMALITIES:

* Masturbation is known to cause insanity, acne, and a constellation of other physical and psychological problems.
* Unusual or excessive sexual practices can lead to mental breakdowns.
* Impotent men need treatment with male hormones.
* Vaginal-penile intercourse is the only normal method of sex relations.
* Women who have strong sex drives, come to easy climaxes, and are capable of multiple orgasms are nymphomaniacs.
* Nymphomaniacs and satyromaniacs abound in our society.
* If one partner desires sex more often than the other, nothing can be done to make the couple sexually more compatible.
* People suffering from sexual inadequacy can expect very little help from treatment for their problems.
* Premature ejaculation is due to physical circumstances, such as an abnormally sensitive penis caused by circumcision.
* Removal of the prostate signals the end of a man's sexual activity and enjoyment of sex.
* A transvestite and transexualist are the same and both are homosexuals.
* Hermaphroditism and transexualism are the same and both require the same treatment.
* After sex-reassignment surgery the transexuals are usually non-orgasmic.

SEX OFFENSE FALLACIES:

* A sex offender cannot be cured and is likely to continue his unacceptable behavior the rest of his life.
* Sex offense occurs because the offender is oversexed.
* The typical sex offender, particularly against children, is aggressive and potentially homicidal.
* Sex offenders are typically unreligious.
* Sexual molesters of children are typically over 65 years of age.
* Sexual molesters of children are more likely to be homosexual.
* Pornography has a corruptive effect on the minds and behavior of people, especially children.
* Pornography stimulates people to commit criminal sex acts.
* Pornography and obscenity lead to sexual excess and sexual acting out.

AND OTHER FALLACIES

* The average physician is well-trained and emotionally equipped to deal with his patients' sexual problems.
* The virginity of the woman is an important factor in the success of a marriage.
* If a white woman has a blood transfusion from a Black donor, the child she later conceives may be black.
* Heart patients need not worry that sexual activity will be detrimental to their health, as long as they remain physically inactive and quiet during coitus.
* Today's young adults are "going wild" sexually.
* Sex education has no place in our schools, because it is a communist plot to destroy the country from within, and because it leads to: 1. sexual acting-out behavior; 2. a rise in promiscuity; 3. an increase in premarital pregnancy; 4. etc., etc., etc.
* Gender identity is only what the sex organs say it is.
* Penile size is related to sexual adequacy.
* Children seldom have interest in sex or sexual activities.
* Coitus produces a better orgasm for the female than some form of self-masturbation.
* Secondary impotence is to be expected as the male ages and usually is non-reversible.
* Homosexual don't or can't have children.
* The male has more knowledge of sex, sex techniques and female needs than the female. The male can teach the female what she needs to know.
* "Fear of performance" or "fear of failure" and "Phallic fallacies" are less important causes of most impotency and sexual dysfunctions than hormones and sex techniques.
* Genital stimulation is necessary for orgasm.
* Sperm and semen are one and the same thing.
* After a vasectomy the male no longer ejaculates semen.
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<td>About Sex</td>
<td>Texture Films</td>
<td>1600 Broadway New York, N.Y.</td>
<td>Color 16mm film with sound</td>
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<td>10019 (212) 586-6960</td>
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<td>Becoming A Man</td>
<td>Guidance Associates</td>
<td>41 Washington Ave, Pleasantvile,</td>
<td>2 color filmstrips each</td>
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<td>Breaking The Language Barrier</td>
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<td>27 Harvey Dr. Summit, N.J.</td>
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<td>Genesis</td>
<td>Multi Media Resource Center, Inc.</td>
<td>540 Powell St.</td>
<td>34 Color 55mm Slide</td>
<td>San Francisco, Calif. 94108 (415) 421-5035</td>
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<td>257 Park Ave.</td>
<td>Book (Illustrated)</td>
<td>$1.00</td>
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<td>Did the Sun Shine</td>
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<td>Growing Into Manhood</td>
<td>Guidance Associates</td>
<td>41 Washington Ave., Pleasantville, N.Y. 10570 (914) R09-7755</td>
<td>Each is color 16mm filmstrip and cassette</td>
<td>$44.00 each</td>
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<td>540 Powell St. Color 16mm film with sound San Francisco, Calif. 94108 (415) 421-5035</td>
<td>Rent: $20 Sale: $85</td>
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<td>It's Wonderful Being A Girl</td>
<td>Association Films, Inc.</td>
<td>600 Grand Ave. Color 16mm film with sound Ridgefield, N.J. 07657 (201) 763-9693</td>
<td>Free on Loan</td>
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<td>Seattle-King County Education Dept.</td>
<td>2211 E. Madison, Seattle, Wash. 98112</td>
<td>Portfolio of Plates (Paste-board)</td>
<td>$20.00</td>
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<td>Human Sexuality Portfolio</td>
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<td>120 Enterprise Ave., Secaucus, N.J. 07094</td>
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<td>Masculine or Feminine: Your Role In Society</td>
<td>Coronet Instructional Films</td>
<td>65 E. South Water St., Chicago, Ill. 60601 (312) DE2-7676</td>
<td>Color &amp; B/W 16mm film with sound Rental Available</td>
<td>$245</td>
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<td>Masculinity &amp; Femininity</td>
<td>Guidance Associates</td>
<td>41 Washington Ave., Pleasantville, N.Y. 10570 (914) R09-7755</td>
<td>2 Color film-strips, 2 LP records, teacher manual Rental Available</td>
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<td>Multi Media Resource Center, Inc.</td>
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<td>Ed-U-Press</td>
<td>760 Ostrom Ave., Syracuse, N.Y. 13210</td>
<td>Pamphlet (Illustrated)</td>
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<td>Kimberly-Clark Corporation</td>
<td>Northlake St. Neenah, Wis.</td>
<td>Color 16mm film with sound</td>
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<td>Story Pack: My Body Feels Good; Living</td>
<td>The Feminist Press</td>
<td>SUNY/College Old Westbury,</td>
<td>Booklets (Some are Illustrated)</td>
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<td>Feels Good; Living With Mommy; The</td>
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<td>Teaching Good Conduct and Personal Hygiene</td>
<td>Harris County Center for the Retarded, Inc.</td>
<td>Box 13403 Houston, Tex. 77019 (713) JA8-6371</td>
<td>4 Color 16mm filmstrips with Teachers manual</td>
<td>$18.50 each $2.00 for teachers manual</td>
<td>20 min.</td>
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<td>Venereal Disease</td>
<td>Society for Visual Education</td>
<td>1345 Diversay Parkway, Chicago, Ill. 60614 (312) 525-1500</td>
<td>Color filmstrip with LP record and teachers manual</td>
<td>$11.00</td>
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<td>World of a Girl</td>
<td>Modern Talking Picture Service, Inc.</td>
<td>2323 New Hyde Park Road, New York, N.Y. 11040 (516) 437-6300</td>
<td>Color 16mm film with sound</td>
<td>Free on short 20 min. term loan</td>
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