I. COURSE DOMAIN AND BOUNDARIES

The World Health Organization defines sexual health not only as the absence of sexual infection, uncontrolled fertility and sexual violence, but also as the presence of sexual satisfaction, pleasure and intimacy. While sexuality can be a site of oppression, it can also be a source of happiness, knowledge, energy, intimacy and empowerment, components of wellness. A seldom-considered pathway for life course optimization, sexual health can materially improve and lengthen lives, while its lack can blight and shorten them. This course takes a person-in-environment perspective of sexuality and sexual health across the life course and does not confine understanding of sexual health to bio-medical perspectives.

How different populations and their members experience disparate opportunities for positive sexual development, freedom to express their sexuality, satisfying sexual experiences and adequate sexual and reproductive health care are focuses of this class. While sexual power, pleasure, satisfaction, intimacy and meaning are sources of individual and group agency, resilience and health, sexual wellness are distributed in most societies unevenly, according to hierarchies of privilege and power. This class focuses on sexual health advantages and disadvantages resulting from structural inequities.

Life course/ecological perspectives clarify how biological and social factors intertwine in early life to cascade later into consequences impacting, both for better and for worse, the quality and length of people’s lives. Sexually transmitted infections, sexual violence, and sexual dysfunction disproportionately expose some people to greater risks for deprivation and harm than others. Further, members of dominant groups have better access to sexual partners, adequate sexuality education, counseling, and therapy, and medical care that addresses sexual health needs. Disparities in sexual health destine some people to thrive, some to languish, and some to die young.

The study of sexual health involves understanding human anatomy, physiology, psychology, spirituality, power, development, relationships, societies, and cultures, so it is necessarily
transdisciplinary. Studying sexuality brings vocabularies, assumptions, goals, tools, and research methods from varying disciplines into conversation with each other, setting up opportunities for transdisciplinary problem solving.

The study of sexual health must be multicultural and attentive to changes across the individual’s life course. Shaped by social processes as well as physical development, sexuality should be studied more like dancing than digestion. Students of sexual health cultivate perspective-taking and seek to appreciate cultural knowledge, skills, attitudes, and values shaping different sexual stories humans in different cultures express throughout different parts of their lives.

By the end of this course, students will be able to create and implement holistic, pluralistic, pleasure-oriented, trauma-informed sexual health education interventions to improve sexual health at micro, mezzo, and macro levels.

This course is designed for students preparing to become health care practitioners focusing on sexuality education, therapy, advocacy and/or policy-making. It is also designed for students wanting to integrate sexual health principles in their careers in social work, public health, medicine, nursing, teaching, or occupational therapy.

II. MSW COMPETENCIES ADDRESSED IN THIS COURSE

| Demonstrate Ethical and Professional Behavior | C1 | Emphasized |
| Engage diversity and difference in practice | C2 | Emphasized |
| Advance human rights and social and economic and environmental justice | C3 | Emphasized |
| Engage in practice-informed research and research-informed practice | C4 | Emphasized |
| Engage in policy practice | C5 | Reinforced |
| Engage with individuals, families, groups, organizations, and communities | C6 | Emphasized |
| Assess individuals, families, groups, organizations, and communities | C7 | Emphasized |
| Intervene with individuals, families, groups, organizations, and communities | C8 | Emphasized |
| Evaluate individuals, families, groups, organizations, and communities | C9 | Emphasized |

III. BROWN SCHOOL ACADEMIC POLICIES

Academic Integrity: If a faculty member or student suspects that academic or professional integrity has been violated, they are required to submit an Academic Integrity or Professional Integrity Violation form found on Inside Brown for review by the Assistant Dean of the program. The Assistant Dean or designated representative will aid in the investigation of the violation, which includes but is not limited to gathering relevant evidence; conversations with the instructor, student(s) involved, witnesses, and others as necessary. Depending on the seriousness of the case, the Assistant Dean may choose to refer the matter directly to the University Student Conduct Board. This referral procedure will generally be followed if it is believed that the penalty is likely to involve suspension or expulsion from the University. The Assistant Dean for the program or designated representative will offer to meet privately with
the student(s) against whom the complaint has been made. It is the student’s responsibility to familiarize themselves with the behaviors that constitute an academic integrity violation requiring referral.

**Student Handbook 2019**

**Accommodations:** If you have a learning, sensory, or physical disability or any other diagnosis that requires accommodations and/or assistance in lectures, reading, written assignments, and/or exam taking, please work with the **Disability Resource Center**, a University-wide resource that provides academic accommodations support and referrals. After requesting **academic accommodations** by providing **appropriate documentation**, students approved for accommodations will provide an Accommodation Letter to the instructor and are encouraged to work directly with the instructor to discuss specific course needs. The student’s Academic Advisor and/or the Assistant Dean for Academic Affairs can support a student through this process.

**Pronouns:** The Brown School embraces and promotes gender expansiveness as reflective of the lived experiences of many students, staff, faculty and members of our expanded community. The correct use of an individual’s pronouns is a critical part of an individual’s identity and of building an inclusive community. Students, faculty and staff are encouraged to use pronouns during introductions, are **expected** to use expressed pronouns of all Brown School community members, and are encouraged to apologize when mistakes are made. Educational resources are available at: [https://campuslife.wustl.edu/lgbtqia/lgbt-resources/gender-pronouns/](https://campuslife.wustl.edu/lgbtqia/lgbt-resources/gender-pronouns/)

**English Language Proficiency:** If your English language proficiency is such that you may need special assistance in lectures, reading, written assignments, and/or exam taking, please communicate these needs to your instructor who may refer you to the **Brown Communications Lab**. If you would like help seeking additional English language resources, please visit the Global Programs Suite in Brown 309. You may also find the Academic Assistance resources available through the **Office for International Students and Scholars** to be helpful.

**Professional Use of Electronic Devices in the Classroom:** Computers or other electronic devices, including “smart pens” (devices with an embedded computer and digital audio recorder that records the classroom lecture/discussion and links that recording to the notes taken by the student), may be used by students at the discretion of the faculty member to support the learning activities in the classroom. These activities include taking notes and accessing course readings under discussion. If a student wishes to use a smart-pen or other electronic device to audio record lectures or class discussions, they must notify the instructor in advance of doing so. Permission to use recording devices is at the discretion of the instructor, unless this use is an accommodation approved by Disability Resources.

Nonacademic use of laptops and other devices and use of laptops or other devices for other coursework is distracting and seriously disrupts the learning process for other people in the
classroom. Neither computers nor other electronic devices are to be used in the classroom during class for nonacademic reasons or for work on other coursework. Nonacademic use includes emailing, texting, social networking, playing games, instant messaging, and use of the Internet. Work on other coursework may include, but is not limited to, use of the Internet, writing papers, using statistical software, analyzing data, and working on quizzes or exams. The nonacademic use of cell phones during class time is prohibited, and they should be set on silent before class begins. In the case of an emergency, please step out of the room to take the call. The instructor has the right to hold students accountable for meeting these expectations, and failure to do so may result in a loss of participation or attendance points, a loss of the privilege of device use in the classroom, or being asked to leave the classroom.

Religious Holidays: The Brown School recognizes the individual student’s choice in observing religious holidays that occur during periods when classes are scheduled. Students are encouraged to arrange with their instructors to make up work missed as a result of religious observance, and instructors are asked to make every reasonable effort to accommodate such requests.

IV. WASHINGTON UNIVERSITY ACADEMIC SUPPORT POLICIES

Accommodations based upon relationship or sexual violence, including sexual harassment and stalking: The University is committed to offering reasonable accommodations to students who are victims of relationship or sexual violence. Students are eligible for accommodations regardless of whether they seek criminal or disciplinary action. Depending on the specific nature of the allegation, such accommodations may include but are not limited to implementation of a no-contact order, emergency housing, course/classroom assignment changes, assignment extensions and other academic support services. If you need to request such accommodations, please direct your requests to rsvpcenter@wustl.edu or call directly to 314-935-3445.

There are four licensed RSVP counselors who serve as confidential resources. However, to implement requests for accommodations, limited information will be shared with the appropriate university administrator and/or faculty. The University will maintain as confidential any accommodations or protective measures provided to an individual student so long as it does not impair the ability to provide such measures.

If a student comes to me to discuss or disclose an instance of sexual assault, sex discrimination, sexual harassment, dating violence, domestic violence or stalking, or if I otherwise observe or become aware of such an allegation, I will keep the information as private as I can, but as a faculty member of Washington University, I am required to immediately report it to my Department Chair or Dean or directly to Ms. Jessica Kennedy, the University’s Title IX Director. If you would like to speak with directly Ms. Kennedy directly, she can be reached at (314) 935-3118, jw kennedy@wustl.edu, or by visiting the Title IX office in Umbrath Hall. Additionally, you can report incidents or complaints to the Office of Student Conduct and Community Standards or by contacting WUPD at (314) 935-5555 or your local law enforcement agency. See: Title IX
You can also speak confidentially and learn more about available resources at the Relationship and Sexual Violence Prevention Center by calling (314) 935-3445 for an appointment or visiting the 4th floor of Seigle Hall. See: RSVP Center

Bias Reporting: The University has a process through which students, faculty, staff and community members who have experienced or witnessed incidents of bias, prejudice or discrimination against a student can report their experiences to the University’s Bias Report and Support System (BRSS) team. See: brss.wustl.edu.

Mental Health: Mental Health Services’ professional staff members work with students to resolve personal and interpersonal difficulties, many of which can affect the academic experience. These include conflicts with or worry about friends or family, concerns about eating or drinking patterns, and feelings of anxiety and depression. See Mental Health Resources.

Center for Diversity and Inclusion (CDI): The Center of Diversity and Inclusion (CDI) supports and advocates for undergraduate, graduate, and professional school students from underrepresented and/or marginalized populations, creates collaborative partnerships with campus and community partners, and promotes dialogue and social change. One of the CDI’s strategic priorities is to cultivate and foster a supportive campus climate for students of all backgrounds, cultures and identities. See: diversityinclusion.wustl.edu/

Additional Issues or Concerns: If you feel that you need additional supports in order to be successful in your time at Brown, beyond the mentioned accommodations, please contact your Academic Advisor or Danielle Bristow, Assistant Dean for Academic Affairs. They can assist you in navigating a myriad of concerns.

V. READINGS - Please note that the syllabus is subject to change throughout the semester.

Book:

Readings on Canvas:
Assigned readings for fifteen class sessions are uploaded into weekly folders on Canvas. Please print or download assigned readings and bring them to class on the days they will be discussed. Discussion is not possible without the texts in hand.

Optional Texts:


VI. ORGANIZATION OF COURSE

A. **Seminar/discussion based.** The seminar format of the course encourages participants to share their expertise and questions and allows space for experiential learning. A number of methods aim to help students engage with course material. Lectures by instructors and guests, large and small group discussions, role-plays, debates, brainstorming, DVD screenings, and anonymous class surveys play essential roles in students' learning. Explicit films, readings and discussions help prepare sexuality educators and clinicians and will be an important part of this course. Course topics align with core knowledge areas required for certification by the American Association of Sexuality Educators, Counselors and Therapists.

B. **The Sexual Health Model:** CDC’s sexual health framework replaces former deficit model of health focused on pathology.
The Sexual Health Model, which informs the curriculum for this course, assumes 10 key components are essential to human sexuality education, counseling and therapy: talking about sex, culture and sexual identity, sexual anatomy and functioning, sexual health care and safer sex, challenges to sexual health, body image, masturbation and fantasy, positive sexuality, intimacy and relationships, and spirituality.

The definition for sexual health used in this class is that of the World Health Organization:

“Sexual health is a state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.”

VII. ROLE OF FACULTY AND STUDENTS

Sexuality can be challenging to discuss at times. You may find yourself feeling activated during class activities and readings. Please remember that student health services offers a number of free counseling sessions each academic year.
Class discussion is valued in this course because it facilitates an open environment for mutual learning. Students should complete assigned readings, be prepared to discuss them in class and bring readings, questions and insights to class.

Should problems, misunderstandings, or desire to meet with the instructor arise, students should promptly contact the instructor or visit during office hours.

Please do not use smartphones, iPads, tablets, or computers in class for any activity beyond taking class notes, reading assignments or participation in class polling. It is tempting to multitask, but this distracts others and destroys class attentiveness, cohesion and social support.

We encourage you to push yourself to grow.

VIII. ASSIGNMENTS AND GRADING CRITERIA

<table>
<thead>
<tr>
<th>ITEM</th>
<th>DATE DUE</th>
<th>ASSIGNMENT</th>
<th>% OF TOTAL GRADE</th>
<th>COMPETENCIES ADDRESSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>October 10</td>
<td>Sex Chat #1</td>
<td>15</td>
<td>C1,C2,C4,C6,C7,C8,C9</td>
</tr>
</tbody>
</table>
| B    | November 7 | Intervention project report includes  
  ● Lit Review  
  ● Needs assessment, problem statement  
  ● SMART learning objectives  
  ● Activities for meeting objectives—detailed schedule and materials needed  
  ● Evaluation plan and instruments | 25 | C1,C2,C3,C4,C6,C7,C8,C9  |
<p>| C    | November 7 | Ignite presentation of intervention project | 10 | C1,C2,C3,C4,C6,C7,C8,C9  |</p>
<table>
<thead>
<tr>
<th>D</th>
<th>December 5</th>
<th>Sex Chat #2</th>
<th>15</th>
<th>C1,C2,C3,C4,C6,C7,C8,C9</th>
</tr>
</thead>
<tbody>
<tr>
<td>E</td>
<td>10 postings throughout the semester within one week of class or class reading discussed. Final posting due by December 7.</td>
<td>Journal</td>
<td>10</td>
<td>C1, C2, C4, C6,C7,C8,C9</td>
</tr>
<tr>
<td>F</td>
<td>Throughout the semester</td>
<td>Lead: ● one experiential learning exercise ● 2 discussions of readings in class (separate days)</td>
<td>10</td>
<td>C1,C2,C3,C4,C6,C7,C8,C9</td>
</tr>
<tr>
<td>G</td>
<td>Throughout the semester</td>
<td>Class attendance, discussion and engagement</td>
<td>15</td>
<td>C1,C2,C3,C4,C6,C7,C8,C9</td>
</tr>
</tbody>
</table>

Use Canvas for assignments and submission.

Students’ final grades will reflect how they integrate course concepts and readings into their work and complete the following assignments, meeting expectations:

**A. Sex Chat #1 – Educational Sexual Health Interview and Report written as a personal essay. (Worth 15% of grade)**

The sex chat is an intervention used to expand sexual self-efficacy. You are encouraged to write your first Sex Chat about yourself, but you may write one about someone else. (More details on this to be shared in class.)

In 8-9 double spaced pages, students will conduct and report on a sexual health interview using:

1. SMART objectives
2. Sexual self-efficacy scale
3. PLISSIT model
4. Sexual timeline
5. Genograms
6. Ecomap
7. Pleasure-resistance Continuum
8. Ecological interview questions exploring intersectionalities
9. Analysis of developmental stages across the interviewee’s life course
10. List of resources to offer client wanting to optimize sexual self-efficacy
11. Integration of at least 5 readings and concepts from course beyond those of instruments listed above

B. Intervention Development Report (worth 25% of total grade)
Using evidence-based elements, students will create a new sex positive sexuality education/clinical intervention. Each student will develop an intervention to expand sexual self-efficacy. To do this, students will utilize developmental, ecological, trauma-informed, life course perspectives. Your report should be written in APA style.

Students will divide into groups dedicated to a particular age/stage. Each student will work independently, but in consultation with your group members. Your individual work will address different intersections and/or sexual issues within this stage. For instance, a group as a whole may be addressing adolescence. Each student within this group studies their own chosen sub-topic addressing different sexual activities and intersections of identity within the life stage of adolescence. (Worth 35% of grade)

1. Literature review and Matrix (worth 20%). See Canvas for videos and articles teaching how to create literature reviews and matrices. Sample papers are also available on Canvas.

Explore the literatures of various disciplines to support claims you make and for novel ideas for solutions to problems or opportunities you are addressing. Include a reference list of articles used in your literature review and in developing your ideas for your intervention.

Create a matrix of your readings in chronological order to reveal the historical development of ideas on the topic. What story about the field/topic do you find in the literature?

2. Needs assessment and problem statement, involving stakeholders (worth 10%)

3. SMART objectives, schedule and description of sessions, evaluation tools (worth 30%). Indicate your rationale for choosing the objectives, activities/lesson and methods, order and sequencing, theoretical models used, and any resources you select. All elements should be appropriate to the development and culture of the audience/client/participant

4. Detailed timed schedule of intervention elements and resources needed (worth 15%)

5. Evaluation plan and instruments (worth 10%)
6. Use APA style (worth 5%)

C. IGNITE Presentation of Intervention Project (Worth 10% of grade)

Students will create an IGNITE presentation to showcase their Intervention Development Project. Visit http://www.ignitetalks.io/ to review the criteria for an IGNITE talk.

The IGNITE talks will be given on Thursday, November 7. Note that they will be open to all Brown School students to attend!

The talks will be delivered by order of life stage groups. While the order of each group will be chronological, within your life stage group, you may determine amongst yourselves your individual order, based on what makes sense for the topics you are individually covering.

D. Sex Chat #2 Sexual Health Interview of self or other (see guidelines under Sex Chat #1), or of an agency. (Worth 10% of grade)

For your second sex chat, you may also do an organizational-level Sex Chat to evaluate the sex positivity of an agency. Note that the assessment tools for the organizational Sex Chat are adjusted to reflect systems and policies, rather than individual attitudes and behaviors.

E. Journal (Worth 10% of grade)

Students should post at least ten weekly entries on Canvas during the semester. Each journal entry must be submitted no later than one week after the class written about. Entries should log reactions, observations, insights, and thoughts about human sexual development and ways public health professionals and social workers can help to improve sexual health in individuals, families, communities, and populations. Reflections should address interventions to expand sexual self-efficacy, methods of implementation, personal and professional values and biases, class readings, and progress made in integrating sexuality counseling, therapy, and/or education into public health and/or social work careers. Class discussions and activities, assigned readings, and professional and personal experiences should inform written comments. This assignment aims to help students clarify personal and professional values regarding sexuality and expand awareness of intellectual conversations about sexuality, sexual health care and education in and beyond formal settings. Entries may vary from a paragraph to a page in length.

F. One Experiential and Two Reading Facilitations (Worth 10%, 3.3% each)
Activities should coordinate with the day’s themes and topics. Experiential exercises encourage students to learn actively, interact with others positively, and enjoy themselves.

G. Class attendance, class engagement (Worth 15%)
“Participation in class” means active involvement in discussions, activities, and posting of discussion questions. You will be marked absent if you spend class time checking emails, sending texts, surfing the internet.

**Expectations for Written Work**
Grades will depend significantly upon the degree to which content reflecting theories, concepts, and vocabulary studied in this course are referred to. An A paper makes clear its theoretical frameworks. Papers should show understanding of course content, ability to analyze and interpret it, and creativity in applying it to understanding one’s own and others’ sexualities.

**Checklist of questions for written work:**

1. Does your essay have a focused, arguable, interesting thesis statement at the end of the first paragraph?
2. Is your thesis supported with strong argumentation that draws on both your affect and cognition?
3. Do you acknowledge opposing views and answer them?
4. Do you refer to at least ten of our semester readings?
5. Do your topic sentences articulate your key points and argue your thesis?
6. Have you provided sufficient evidence, significant details taken from relevant texts, films, and discussions?
7. Do you provide adequate analysis of the quotations you provide?
8. Do you include personal reaction and analysis?
9. Do you consider social justice perspectives?
10. Is your paper easy for a reader to follow and interesting and illuminating to read?
   a. Do you have an effective introduction and conclusion that includes a map explaining where your paper is going?
   b. Do your paragraphs have topic sentences, adequate elaboration, and transitions, and are they properly arranged?
   c. Sentences: clarity, variety, diction
   d. Accurate mechanics (grammar, quotations, citations--use APA, please--spelling, punctuation)

Papers must be handed in on time. Late papers will not be graded.

Extra credit is not offered.

Only papers and projects earning grades below B- may be resubmitted for reconsideration.

**Expectations for Discussions and Facilitations**
Students are expected to attend all class sessions unless illness or other emergencies make attendance impossible. If unable to attend class, please contact the professor in advance, or, failing that, as soon as possible afterwards.
During discussions, students will be expected to:

1. Provide reading summaries before facilitating a class discussion.
2. Ask relevant and productive questions.
3. Express emotional and intellectual reactions to elements of a text and to the issues the text raises in collaborative dialogue with others in the class (not competitive argumentation) and respectfully respond to the comments/opinions of other students.
4. Recognize a text’s place within larger social, historical, and cultural contexts.
5. Use the ORID model to sequence questions and discussion (observations, reflections, interpretations, and decisions)
6. Analyze author’s assumptions, biases and goals and learning objectives
7. Students should post their reading facilitation questions on Blackboard by 9am the day of the class.
8. Students may ask one large question or several sequential questions. They may address one reading or integrate material from a number of the readings. Questions should be designed to prompt lively discussion of key issues addressed in each article.
IX. COURSE OUTLINE AND SCHEDULE

Class 1 - Theoretical Frameworks
Thursday, 8/29/19

1. Critical
2. Holistic – Circles of sexuality
3. Transformative Education – aims to change sexological world views
4. Pluralistic Sexological Perspectives
5. Rights focused
6. Strengths-based
7. Transdisciplinary
8. Empowerment focused
9. Pleasure focused
10. Trauma-informed
11. LGBTQIA affirmative
12. Sexual Health Model

Learning Objectives: By the end of the class, students will be able to

1. Define circles of sexuality, transformative education, sexological perspectives, sexual rights as human rights, strengths based perspectives
2. List guidelines for class
3. Report understanding assignments and grading
4. Identify a strength that will help development as sexuality educators
5. Identify a challenging area in which they hope to improve and grow in sexual self-efficacy

Readings:
Minnesota Department of Health. Definitions of Sexual Health.


Class 2 - The Social Construction of Sexual Privilege and Disadvantage
Thursday 9/05/19

Learning objectives:
By the end of the class, students will be able to
1. Identify their core sexual values, cultural values, generation values, family values, personal values
2. Differentiate sexual pluralism from sexual relativism
3. Define 6 terms used in life course theory
   4. Outline their racial identity development
   5. Define their vision of sexual health for their lives

Readings:


**Class 3 - Normate Sex**
**Thursday  9/12/19**

“Normate Sex” – a socially constructed ideology about sexuality. “Normate Sex” has the characteristics of being “Heterosexual, Married, Monogamous, Procreative, Non-Commercial, In Pairs, In A Relationship, Same Generation, No Pornography, Body’s Only” (Wilkerson 186).

Michél Foucault and Audré Lorde provide critical perspectives on sexuality central to this course. Foucault analyzes how sexuality is socially constructed as a naturalizing template, legitimizing other forms of social life in ways that camouflage social injustice. Foucault understands sexuality as a tool of biopower and governmentality. Because sexuality seems “natural,” hierarchical sexual conventions, styles, and scripts may be used to code other hierarchical social arrangements as “natural.” When concern with sexuality is evoked, people police themselves anxiously for normality, which can render them docile and so vulnerable to domination. Deconstructing hegemonic sexuality may enliven the docile, while threatening those holding hegemonic power.

Lorde sees sexuality paradoxically as a tool of domination and a source of empowerment. People who claim what she calls “the erotic” can resist oppression, use the erotic as a source of information, as a standard of excellence, as energy fueling connection, and as ground for community.
Tools used to understand sexual histories, such as genograms, timelines, and ecomaps, can enable clients and sexuality practitioners to see patterns and to deconstruct cultural narratives as they find and adopt their own preferred narratives. When sexuality is seen as socially constructed, people usually feel freer to construct their sexual lives according to their particular interests and desires rather than according to societal prescriptions.

Learning Objectives
By the end of the class, students will be able to

1. Identify at least one sexual pattern inherited from their family
2. Identify at least one aspect of their sexuality that does not fit under the “normate sex” Umbrella.
3. Explain “intersex” and best practices for addressing

Readings:


Mock, Janet (2013). Redefining Realness: My Path to Womanhood, Identity, Love and So Much More. Chapters 7 and 8. RESERVE

Class 4 - Childhood Pleasure: Bliss
Thursday 9/19/19

Strengths of childhood: Nurturance, sensuousness, merging, attunement, and bliss experienced in touch and “good enough” holding in infancy and childhood constitute “an erotic” that will serve as a foundation of sexual health throughout the life course. The securely attached child finds it easier to attune, connect, explore, and separate as she matures. The erotic becomes a positive force, a source of pleasure and information for her. Why do some individuals and groups have limited access to early care and nurturance, and what health disparities are associated with differing amounts of erotic capital gained in childhood?

Learning Objectives:
By the end of the class, students will be able to

1. Demonstrate at least three connecting behaviors and three distancing behaviors
2. Identify at least five cultural experiences that shape their most important cultural institutions
3. Write in their journals about their earliest memories of “bliss”

Readings:


Edwards-Leeper, Laura (2016)
“Affirmative Practice With Transgender and Gender Nonconforming Youth: Expanding the Model” (8 pages)

Class 5 - Childhood Sexual Abuse and Traumatic Growth
Thursday   9/26/19

Childhood sexual abuse can reverberate painfully across a life course. Despite high costs to those who experience sexual abuse in childhood and to society as a whole, child sexual abuse is not addressed to the degree justified by its 30% prevalence rate. What is also not generally emphasized is that 96% of perpetrators are men. Scripts for masculinity often coincide with scripts for boundary violation. To what degree do childrearing strategies create male dominance, privilege “normate sexuality,” and support perpetrators feeling entitled to sexually exploit children?

“The core experiences of trauma are disempowerment and disconnection from others. Recovery, therefore, is based on the empowerment of the survivor (regained control) and the creation of new connections” (Herman, Judith. Trauma & Recovery, 1992).

Redefining Realness is a story of a young girl who transforms gender oppression and sexual trauma into adult survivorship, advocacy, and leadership. What constitute the vectors of her oppression and the dynamics of her growth? How does violence impact sexual empowerment and sexual wellness?

Learning Objectives:
By the end of the class, students will be able to
1. Describe what symptoms may result from child sexual abuse and how they can impact a life
2. Describe how trauma can be followed by post-traumatic growth
3. List steps to take to promote empowerment when working with trauma survivors

Readings:

Kelly, B. L., & Gates, T. G. (2010). *Using the Strengths Perspective in the Social Work Interview With Young Adults Who Have Experienced Childhood Sexual Abuse*. *Social Work in Mental Health, Online*.


**Class 6 - Anti-Adultism Education and Adolescent Sexual Empowerment**
**Thursday 10/03/19**

Historically, younger generations have found themselves problematized by their elders. In recent years, parents and grandparents have pounced upon hooking up as unhealthy, proclaiming the end of chastity, the end of courtship, the end of marriage. At the same time, a movement of positive youth development (PYD) has arisen, promoting support of young people’s optimal functioning. Addressing the positive development of young people, sexuality as normal and health development, can help them achieve a healthy transition into adulthood. In this new conceptualization of adolescence, practitioners consider youth a society’s greatest asset and advocate using strengths based approaches to help them achieve positive goals to realize their potential. How does adolescent sexuality appear from this perspective? How could parents be encouraged to view teens’ sexual expression as normative and to help them make positive, life-enhancing sexual choices? Is sexual expression bad for adolescents or is it normative development that leads to good adult sexual development? What roles do and should parents play in the sexual education of their children?

Learning Objectives:
By the end of the session students will be able to

1. Define adolescent empowerment
2. Explain the relationship of group identity to adolescent isolation, using Erikson’s concepts
3. List what questions they would add to the sexual self-efficacy scale to make it culturally specific for members of different racial groups, gender/sexuality nonconformists, in US society.
4. List at least four of the biggest hurdles POC and White adolescents must navigate to develop positive sexual identity.

Readings:


**Class 7 - Tailoring Interventions for Young People**
**Thursday 10/10/19**

DUE: Sex Chat #1 Report (Assignment B)

Sexual development and sexual behavior involve more than personal choices. Inequitable power structures, absolute and relative poverty, structural violence, differential access to resources, and social isolation and discrimination restrict an individual’s ability to achieve positive health outcomes or to facilitate change. “Risk environments” disproportionately influence the health outcomes of the poorest and most vulnerable. Targeting interventions only at the individual level can leave in place structural inequities that harm the health of individuals and populations.

Compared to older adults, sexually active adolescents (10- to 19-year-olds) and young adults (20- to 24-year-olds) are at higher risk for acquiring STIs for a combination of behavioral, biological, and cultural reasons. The higher prevalence of STIs among adolescents also reflects multiple barriers to accessing quality STI prevention, including lack of insurance or other ability to pay, lack of transportation, discomfort with facilities and services designed for adults, and concerns about confidentiality. Recent estimates suggest that while representing 25% of the
ever sexually active population, 15- to 24-year olds acquire nearly one-half of all new STIs (http://www.cdc.gov/std/stats/adol.htm).

Considering ways to lower the incidence of STIs illustrates the value of ecological as well as developmental perspectives. The incidence of STIs is four times higher in the US than in Northern European countries. The incidence of gonorrhea is twenty times higher in African-American than in white populations in the US. When designing interventions to lower the incidence of STIs, determining different patterns of causality in different groups points to the advantage of targeting interventions at different levels. Stigma surrounding STIs needs to be eliminated if groups carrying the highest disease burdens are to be effectively alerted and protected.

**Learning Objectives:**
At the end of this session students will be able:

1. List at least 5 characteristics to consider when choosing, adapting or creating an intervention
2. Describe 2 strength-based interventions for teenagers
3. Define “family based” intervention

**Readings:**


**Class 8 - Transitioning: Life Course Agency**
**Thursday 10/17/19**

**Learning Objectives:**
By the end of this class students will be able to

1. Identify at least 3 institutions/systems that put young people on particular trajectories, and describe scripts for each trajectory
2. Describe at least three interventions that can give individuals and groups more agency in choosing life course trajectories
3. Discuss how “meritocracy” is taught and the pros and cons of the concept

**Readings:**
While marriage equality has become universal in the US, the percentage of adults 18 and older has dropped from 80% in the 1960s to 52% in 2010s—a new low. More options than monogamy exist for adults today: cohabitation, living apart together, remaining single, polyamory, serial monogamy, adultery, swinging. More women are financially independent than ever, and they no longer need to marry for financial reasons. How do different choices concerning relationship commitment affect one’s health trajectory over the life course, and what interventions can facilitate transitions?

Attachment, love, and relationship styles begin forming early in life, but they persist and shape approaches to relationships with partners in adulthood. Aggression, hostility, criticism, stonewalling, defensiveness and contempt poison relationships. The coital imperative, symbolic of male privilege, dampens sexual pleasure, and inequality smothers trust and gratitude. What social structures support the hyper-individualism that fuels selfish traits? What structural changes could raise emotional and social IQs to help people become better lovers, partners, parents and citizens? Why is one in five marriages today sexless, and what does this statistic portend for the future of families, and with what results to societal health? What needs to change to assure greater stability in children’s lives?

Learning Objectives:
By the end of this class, students will be able to

1. Role play a commitment conversation
2. List at least six ways poly and monogamy are similar
3. Clarify sexual behavior preferences
Readings:


**Class 10 - Pregnancy, Labor, Delivery & Lactation**  
**11/07/19**  
**DUE: Intervention Project Report (Assignment C)**

Pregnancy can enhance sexual response. Birth need not be unenjoyable.

Learning Objectives:  
By the end of this class students will be able to:

1. Discuss how racism affects disparities in rates of maternal infant morbidity and mortality.  
2. List five advantages of “non-violent” birth  
3. List risks of home births  
4. Explain advantages and disadvantage of breastfeeding  
5. Discuss counter-hegemonic version to story of “children having children”  
5. Explain parent-child bonding as important determinant of sexuality across the life course

Readings:  
Collins et. al. 2004. *Very Low Birthweight in African American Infants*: The Role of Maternal Exposure to Interpersonal Racial Discrimination  
SmithBattle, L. (2003). *Displacing the “Rule Book” in caring for teen mothers*  
Painter, Kim. (2013). *Abusive partners can sabotage birth; group advises doctors to screen women for ‘reproductive coercion’*, USA TODAY.


**Class 11 - Transformative Aging**  
**11/14/ 2019**
Dominant representations of aging depict the life trajectory slanting downward into debilitation and decline, frailty and dependence, isolation and loss of selfhood. Strength based accounts describe exceptional lucidity, insight, and wisdom that accompany aging. What life course factors contribute to decline outcomes and what factors contribute to life fulfillment and generativity outcomes?

Longevity now offers time for transformation after more than eighty years of life. Neuropsychological changes can moderate anxiety and unhappiness in old age and provide greater sense of balance. Sexuality is more important than ever as touch is the last sense one loses at the end of life and a communication method in which words are not needed. Life course agency theory calls for planning for growth until the end of life.

Learning Objectives:
By the end of the class, students will be able to

1. Describe physical aging, listing at least four positive changes and six physical changes that affect sexual health
2. Explain how to create a social portfolio
3. Conduct an abbreviated structured life review
4. Explain consequences of demographics of global and national aging

Readings:
Clark, T. 2015. The circles of sexuality and aging.

Film viewing: Our Souls At Night (1hr 43mins)

Class 12 - Aging and Generativity
11/21/19
Human development continues until death. Erikson defines a late developmental task as generativity and theorizes it is threatened by stagnation. The final task of development is integrity vs. despair, according to Erikson. How does enforced abstinence of the elderly threaten generativity and integrity? How do these threats compare with those experienced by
teens experience of sexual control? According to Erikson, teens are faced with achieving identity vs. identity confusion and achieving intimacy vs. isolation.

Learning Objectives- Forced Choice exercise
By the end of the session, students will be able to

1. List at least 4 costs and benefits of having to choose between generativity and sexual fulfillment and old age, using Addy and Louis’s experiences from Our Souls at Night.
2. Describe how sex negativity learned in childhood from parents is re-enacted by the adult child with elderly parents
3. Discuss innovations that can protect the sexual rights of elderly.

Readings:


Class 13 - Prepare for Ignite - practice and feedback in class
11/21/19
DUE: Ignite presentations submitted by 9AM

Learning Objectives:

Integrating sexual health into public health and social work practice improves results over those achieved when sexuality is ignored. For instance, treatment for depression, drug and alcohol addiction, and anxiety disorder are enhanced when attention to sexual health is added.

No Class  THANKSGIVING VACATION
11/28/19

Class 14 - New Understandings of Sexual Wellness: Ignite Presentations
12/05/19

Class 15 New Understandings of Sexual Wellness
12/12/19
In our last session, we will consider how our own sexual health has changed over this semester, celebrate improvements, and discuss new goals and objectives for work in sexual health.
Meet for final class and brunch at 5745 Lindell Blvd.
Learning Objectives:
By the end of this class, students will be able to
1. Describe growth in life course agency over the semester
2. Define principles of sexual health
3. Appreciate / critique 35 Esquire’s Best Sex Scenes

Readings:


View In Class: Esquire’s 35 Best Sex Scenes

DUE 12/13/19  Sex Chat #2: Sexual History Interview Paper