

RATHUS / NEVID / FICHNER-RATHUS / MCKAY

FIFTH CANADIAN EDITION

# Human Sexuality

*in a World of Diversity*



# human sexuality

in a world of diversity

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in a world of diversity

fifth canadian edition

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*Dedicated with love to our children, Taylor Lane Rathus and Michael Zev Nevid, who were born at the time the first edition of this book was written.*

—S.A.R., L.F.-R., J.S.N.

*Dedicated to my parents, Janet and Gerald McKay.*

—A.G.M.

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# Brief Contents

Preface xv

|                          |  |
|--------------------------|--|
| <b>Chapter One</b>       | What Is Human Sexuality? 1                                 |
| <b>Chapter Two</b>       | Using Theory and Research to Understand Human Sexuality 33 |
| <b>Chapter Three</b>     | Female and Male Anatomy and Physiology 55                  |
| <b>Chapter Four</b>      | Sexual Arousal and Response 96                             |
| <b>Chapter Five</b>      | Gender Identity and Gender Roles 126                       |
| <b>Chapter Six</b>       | Attraction and Love 152                                    |
| <b>Chapter Seven</b>     | Relationships, Intimacy, and Communication 169             |
| <b>Chapter Eight</b>     | Sexual Behaviours and Fantasies 189                        |
| <b>Chapter Nine</b>      | Sexual Orientation 212                                     |
| <b>Chapter Ten</b>       | Conception, Pregnancy, and Childbirth 239                  |
| <b>Chapter Eleven</b>    | Contraception and Abortion 266                             |
| <b>Chapter Twelve</b>    | Sexuality Across the Life Span 292                         |
| <b>Chapter Thirteen</b>  | Sexual Dysfunction 326                                     |
| <b>Chapter Fourteen</b>  | Sexually Transmitted Infections 356                        |
| <b>Chapter Fifteen</b>   | Sexual Health Education 386                                |
| <b>Chapter Sixteen</b>   | Sexual Variations 405                                      |
| <b>Chapter Seventeen</b> | Sexual Coercion 429  |
| <b>Chapter Eighteen</b>  | Commercial Sex 462   |

Answer Key 489

References 491

Name Index 531

Subject Index 539



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# Contents

Preface xv

## Chapter One

### What Is Human Sexuality? 1

Choices, Information, and Decision Making 3

What Is Human Sexuality? 4

#### INNOVATIVE CANADIAN RESEARCH

What Is This Thing Called Sex? 5

#### INNOVATIVE CANADIAN RESEARCH

Ethnocultural Communities and Sexuality 6

#### A WORLD OF DIVERSITY

Sexual Scripts of Young People in Kenya 10

Sexuality and Ethics 13

Sexuality and Spirituality 15

Thinking Critically About Human Sexuality 15

Perspectives on Human Sexuality 16

#### APPLIED KNOWLEDGE

Thinking Critically About Sexuality Information on the Internet 18

#### A WORLD OF DIVERSITY

The History of Desire 25

Multiple Perspectives on Human Sexuality 28

#### A WORLD OF DIVERSITY

Gender and Sexual Orientation in Aboriginal Culture 29

#### INNOVATIVE CANADIAN RESEARCH

Canadian Sexuality, Gender, and Other Social Variables 30

## Chapter Two

### Using Theory and Research to Understand Human Sexuality 33

Theoretical Approaches to Understanding Human Sexuality 33

A Scientific Approach to Human Sexuality 39

Quantitative Research Methods 41

Methods of Observation 42

#### A WORLD OF DIVERSITY

Studying the Sexual Behaviours of Diverse Populations 46

The Experimental Method 48

#### A CLOSER LOOK

Measuring Sexual Arousal 49

#### INNOVATIVE CANADIAN RESEARCH

Using a Thermographic Camera to Measure Sexual Arousal 50

Qualitative Research Methods 51

Ethics in Sex Research 51

#### INNOVATIVE CANADIAN RESEARCH

Do Research Consent Forms Affect Findings? 52

## Chapter Three

### Female and Male Anatomy and Physiology 55

Female Anatomy and Physiology 55

The External Female Sex Organs 56

#### A WORLD OF DIVERSITY

Pubic Hair Removal 58

#### A WORLD OF DIVERSITY

Female Genital Mutilation/Cutting 60

The Internal Female Sex Organs 62

The Female Breasts 68

#### A WORLD OF DIVERSITY

The Strong Breast Revolution 69

The Menstrual Cycle 71

**A WORLD OF DIVERSITY**

Historical and Cross-Cultural Perspectives on Menstruation 72

Menstrual Difficulties 75

**APPLIED KNOWLEDGE**

How to Handle Menstrual Discomfort 77

Male Anatomy and Physiology 78

The External Male Sex Organs 78

**A WORLD OF DIVERSITY**

Perspectives on Penis Size 81

The Internal Male Sex Organs 82

Diseases of the Male Urogenital System 85

**APPLIED KNOWLEDGE**

Self-Examination of the Testes 87

Male Sexual Functions 88

**Chapter Four**

**Sexual Arousal and Response 96**

The Senses and Sexual Arousal 96

**A WORLD OF DIVERSITY**

YSEX—The Reasons People Give for Wanting to Have Sex 100

Aphrodisiacs, Anaphrodisiacs, and Psychoactive Drugs 101

Sexual Response and the Brain 105

Sex Hormones and Sexual Behaviour 105

Models of Sexual Response 109

**INNOVATIVE CANADIAN RESEARCH**

Gender, Sexual Orientation, and Arousal 110

**INNOVATIVE CANADIAN RESEARCH**

Genital Versus Subjective Sexual Arousal 113

**INNOVATIVE CANADIAN RESEARCH**

The Subjective Experience of Orgasm 115

The Enigmatic Orgasm 116

Sexuality and Disability 118

**INNOVATIVE CANADIAN RESEARCH**

Improving Sexual Function in Men with Spinal-Cord Injuries 121

**APPLIED KNOWLEDGE**

A Comprehensive Guide to Sex and Disability 123

**Chapter Five**

**Gender Identity and Gender Roles 126**

Prenatal Sexual Differentiation 126

Gender Identity 129

**INNOVATIVE CANADIAN RESEARCH**

What Can the Samoan *Fa'afafine* Teach Us about Western Concepts of Gender Identity? 133

**A WORLD OF DIVERSITY**

Third Gender/Third Sex 136

**INNOVATIVE CANADIAN RESEARCH**

The Trans Pulse Project 137

Gender Roles and Stereotypes 137

Sexism 137

Gender Typing 138

Gender Roles and Sexual Behaviour 142

**A WORLD OF DIVERSITY**

Are There Universal Differences in Sexual Strategies? 144

**INNOVATIVE CANADIAN RESEARCH**

Do Young Men Really Prefer Sex Over Romance? 148

Psychological Androgyny 148

**Chapter Six**

**Attraction and Love 152**

Attraction 152

**INNOVATIVE CANADIAN RESEARCH**

What Do Women Want? 157

**A WORLD OF DIVERSITY**

Sex Differences in Mate Preference Across 37 Cultures 159

**A WORLD OF DIVERSITY**

Ready, Set, Speed Date 160

Love 160

**INNOVATIVE CANADIAN RESEARCH**  
Obsessive Versus Harmonious Passion 163

## Chapter Seven Relationships, Intimacy, and Communication 169

The ABC(DE)s of Romantic  
Relationships 169

**A CLOSER LOOK**  
Online Dating—A Revolution in Matchmaking? 171

**APPLIED KNOWLEDGE**  
Sexting and Canadian Youth 172

**INNOVATIVE CANADIAN RESEARCH**  
Obtaining Sexual Consent 178

Communication Skills 182

**INNOVATIVE CANADIAN RESEARCH**  
Keeping the Spark Alive in Romantic  
Relationships 184

**APPLIED KNOWLEDGE**  
Communicating Sexual Needs 185

## Chapter Eight Sexual Behaviours and Fantasies 189

Solitary Sexual Behaviour 190

**INNOVATIVE CANADIAN RESEARCH**  
Online Masturbation 193

**INNOVATIVE CANADIAN RESEARCH**  
The Depiction of Masturbation in North American  
Movies 195

**A WORLD OF DIVERSITY**  
Good Vibes 197

Sexual Behaviour with Others 197

**INNOVATIVE CANADIAN RESEARCH**  
Desired Duration of Foreplay 198

Gay and Lesbian Sexual Behaviour 207

**A WORLD OF DIVERSITY**  
Sexual Behaviour in Australia 208

**INNOVATIVE CANADIAN RESEARCH**  
How to Have Great Sex: Advice in Popular  
Magazines 208

## Chapter Nine Sexual Orientation 212

Getting Oriented to Sexual  
Orientation 212

**INNOVATIVE CANADIAN RESEARCH**  
Bisexuality and Intimate Relationships 217

**A WORLD OF DIVERSITY**  
Youth Challenging Traditional Concepts of Sexual  
Orientation and Gender 219

Perspectives on Gay and Lesbian Sexual  
Orientations 219

**INNOVATIVE CANADIAN RESEARCH**  
Birth Order and Sexual Orientation 224

**INNOVATIVE CANADIAN RESEARCH**  
Measures of Homonegativity 227

The Coming-Out Process 230

**APPLIED KNOWLEDGE**  
Counselling Gays and Lesbians 232

Gay and Lesbian Adjustment 233

**APPLIED KNOWLEDGE**  
Increasing Resilience Among LGBTQ Youth 234

**INNOVATIVE CANADIAN RESEARCH**  
Innovation in Gay Male Relationships 235

Gay and Lesbian Lifestyles 235

## Chapter Ten Conception, Pregnancy, and Childbirth 239

Conception 239

Infertility and Assisted Reproductive  
Technologies 240

**APPLIED KNOWLEDGE**  
Optimizing the Chances of Conception 241

**A WORLD OF DIVERSITY**  
LGBT Family Building 245

Pregnancy 246

Prenatal Development 248

Childbirth 253

**A WORLD OF DIVERSITY**

Maternal and Infant Mortality Around the World 257

The Postpartum Period 258

Canadian Birth Rates and Teen Pregnancy 260

**Chapter Eleven  
Contraception and Abortion 266**

Contraception in Canada 266

**A WORLD OF DIVERSITY**

A History of Birth Control in Canada 268

Methods of Contraception 268

**INNOVATIVE CANADIAN RESEARCH**

Emergency Contraception 272

**APPLIED KNOWLEDGE**

Errors in Using Condoms 279

Abortion 284

**APPLIED KNOWLEDGE**

Selecting a Method of Contraception 285

**INNOVATIVE CANADIAN RESEARCH**

Women Who Have Repeat Abortions 289

**Chapter Twelve  
Sexuality Across the Life Span 292**

Childhood Sexuality 292

Adolescent Sexuality 296

**A WORLD OF DIVERSITY**

The Many Meanings of Menarche 298

**A WORLD OF DIVERSITY**

Do Sexy TV Shows Encourage Teen Sex and Pregnancy? 303

Adult Sexuality 304

**A WORLD OF DIVERSITY**

A Gay Prom Date 305

**A WORLD OF DIVERSITY**

Mating in Captivity 316

Senior Sexuality 319

**Chapter Thirteen  
Sexual Dysfunction 326**

Prevalence of Sexual Problems and Dysfunctions 327

Types of Sexual Dysfunction 328

Origins of Sexual Dysfunction 334

Treatments for Sexual Dysfunction 340

**APPLIED KNOWLEDGE**

How Do You Find a Qualified Sex Therapist? 343

**APPLIED KNOWLEDGE**

Thinking Critically About Buying Drugs Online 345

**APPLIED KNOWLEDGE**

Promoting Eroticism in Sex Therapy 347

**INNOVATIVE CANADIAN RESEARCH**

Treatment for Dyspareunia 351

**INNOVATIVE CANADIAN RESEARCH**

A Portrait of Great Sex 352

**A WORLD OF DIVERSITY**

An Alternative Approach to Enhancing Female Sexuality 353

**Chapter Fourteen  
Sexually Transmitted Infections 356**

STIs in Canada 357

Bacterial Infections 359

Vaginal Infections 363

Viral Infections 364

Ectoparasitic Infestations 373

**A WORLD OF DIVERSITY**

A School-Based HIV Prevention Education Program for Youth in Kenya 374

STI Epidemiology: Biological, Psychological, and Social Factors 375

**APPLIED KNOWLEDGE**

Reducing Your Risks for STIs and HIV 380

**INNOVATIVE CANADIAN RESEARCH**

The Male Call Canada Survey of Men Who Have Sex with Men 382

Education and Prevention 383

## **Chapter Fifteen** **Sexual Health Education 386**

Sexual Health Education in the Schools:  
A Brief History 387

**APPLIED KNOWLEDGE**

Educating Your Children About Sex 388

**INNOVATIVE CANADIAN RESEARCH**

Sexual Health Education in Schools Across  
Canada 389

The Canadian Guidelines for Sexual Health  
Education 390

Using Theory and Research to Inform Sexual  
Health Education 391

**INNOVATIVE CANADIAN RESEARCH**

The Information–Motivation–Behavioural Skills (IMB)  
Model 392

Attitudes Towards Sexual Health  
Education 395

Current Sources of Information About  
Sexuality 397

Innovative Canadian Curricula and  
Resources 398

Meeting the Sexual Health Education  
Needs of Diverse Groups 399

**INNOVATIVE CANADIAN RESEARCH**

Sexual Health Education for Youth with Physical  
Disabilities 401

## **Chapter Sixteen** **Sexual Variations 405**

Normal Versus Deviant Sexual  
Behaviour 405

The Paraphilias 406

**APPLIED KNOWLEDGE**

Responding to Exhibitionists and Obscene Phone  
Callers 412

**INNOVATIVE CANADIAN RESEARCH**

Normal Voyeurism 413

**A WORLD OF DIVERSITY**

It Seems Like Voyeurs Are Everywhere! 414

**INNOVATIVE CANADIAN RESEARCH**

Women's Submissive Desires 417

**INNOVATIVE CANADIAN RESEARCH**

The Personality Characteristics of Dominant and  
Submissive BDSM Practitioners 418

Theoretical Perspectives 420

Treatment for Paraphilias 423

Sexual Addiction, Compulsive Sexual  
Behaviour, and Hypersexuality 426

## **Chapter Seventeen** **Sexual Coercion 429**

Sexual Assault 430

**A WORLD OF DIVERSITY**

Female Sex Offenders 432

**A CLOSER LOOK**

Anatomy of a Date Rape 434

**INNOVATIVE CANADIAN RESEARCH**

Sexually Aggressive Behaviour in Bars and Clubs 436

The Complexity of Consent 437

**APPLIED KNOWLEDGE**

The Date-Rape Drug 439

**INNOVATIVE CANADIAN RESEARCH**

Male Versus Female Victims of Sexual Coercion 440

**APPLIED KNOWLEDGE**

If You're Sexually Assaulted 442

Coercive Verbal Pressure Tactics 444

**APPLIED KNOWLEDGE**

Lowering Your Risk of Sexual Assault 444

Sexual Abuse of Children 445

**APPLIED KNOWLEDGE**

Helping Children Avoid Sexual Abuse 452

Treatment of Perpetrators 453

Sexual Harassment 454

**INNOVATIVE CANADIAN RESEARCH**

Trouble Letting Go: Online and Offline Post-Relationship  
Contact and Tracking Among Young Adults 456

**APPLIED KNOWLEDGE**

Resisting Sexual Harassment 459

**Chapter Eighteen**

**Commercial Sex 462**

Prostitution 462

**A WORLD OF DIVERSITY**

“Prostitution” or “Sex Work”? 463

**INNOVATIVE CANADIAN RESEARCH**

Media Stereotypes 472

**A WORLD OF DIVERSITY**

Girls on the Streets of American Cities 473

Sexually Explicit Material (SEM) 476

**INNOVATIVE CANADIAN RESEARCH**

Women Who Visit Sex Shops 482

**INNOVATIVE CANADIAN RESEARCH**

An Educational Program to Counteract the Effects of  
Internet Porn 483

Answer Key 489

References 491

Name Index 531

Subject Index 539

# Preface

Canada in the twenty-first century is rapidly evolving with respect to human sexuality. Underlying this change is a growing recognition and acceptance of diversity in regard to many aspects of sexuality. *Human Sexuality in a World of Diversity* fully embraces and affirms this diversity, especially within Canadian society.

Before writing this edition, we searched extensively for new Canadian materials from a number of sources, including Canadian researchers themselves. We've added many new Canadian references to each chapter. In addition to integrating up-to-date Canadian research and statistics, we've addressed key issues in human sexuality within the uniquely Canadian context. A number of new Innovative Canadian Research Boxes featuring the work of leading Canadian researchers in the field of human sexuality have been added, and others have been updated.

This fifth Canadian edition is more concise than most other human sexuality textbooks, because we're aware that many enthusiastic users find other textbooks too long or unnecessarily complex for their courses. We have made every effort to provide a textbook that is clear and succinct but also one that embodies the highest standards of academic rigor. In addition to emphasizing theory and up-to-date research, practical applications that are relevant to students' lives are included.

## New to the Fifth Canadian Edition

The fifth Canadian edition of *Human Sexuality in a World of Diversity* includes several important changes that add substantially to its depth and ease of use:

- Chapter 1 has been revised to place greater emphasis on the theme of diversity and the sociocultural aspects of human sexuality.
- Chapter 2 now includes a dual focus on theory and research methods, including expanded coverage of different theoretical approaches to the study of human sexuality.
- A new chapter, Sexual Health Education (Chapter 15), has been added. This chapter introduces students to the theory and practice of sexual health education in a Canadian context.
- There is a greater emphasis on the impact of new information technologies on human sexuality throughout the book.
- There is a greater focus on diversity all through the book.

## Chapter-by-Chapter Changes

We've added hundreds of new references that reflect the newest research in the field of human sexuality. No part of the textbook has been untouched by change. Following are just a few of the topics we've added, substantially revised, or updated.

### Chapter 1

- Sexuality and ethics
- The Internet and communication technology
- Cultural diversity
- Social and political differences between Canada and the United States with respect to sexuality



## Chapter 2

- Theoretical approaches to understanding human sexuality (new sections on Sexual Script Theory and Social Exchange Theory)
- Studying the sexual behaviours of diverse populations

## Chapter 3

- Female genital mutilation/cutting
- Pubic hair removal
- Male circumcision
- Cervical, uterine/endometrial, ovarian, breast, testicular, and prostate cancer statistics

## Chapter 4

- Effects of recreational drugs on sexual response
- Effects of aphrodisiacs and psychoactive drugs on sexual response
- Female orgasm

## Chapter 5

- Gender independent children
- What can the Samoan *Fa'afafine* teach us about Western concepts of gender identity?
- The TransPULSE Project

## Chapter 6

- Cross-cultural differences in standards of attractiveness
- Obsessive versus harmonious passion
- Speed dating and attraction

## Chapter 7

- Online dating
- Keeping the spark alive in romantic relationships

## Chapter 8

- Sexual fantasy
- Masturbation/online sexually explicit material
- Depiction of masturbation in mainstream movies
- Research on vibrator use

## Chapter 9

- Estimates of sexual orientation in Canada
- Bisexuality and intimate relationships
- Canadians' changing attitudes towards sexual orientation

## Chapter 10

- LGBT family building
- Maternal and infant mortality around the world
- Canadian teen pregnancy statistics

## Chapter 11

- Contraceptive use among Canadian university students
- Effectiveness of different methods of contraception
- Emergency contraception

- Errors in condom use
- Canadian abortion rates

## Chapter 12

- The meaning of menarche across cultures
- Adolescent sexual behaviour
- Friends with benefits and other new forms of casual sexual relationships
- The percentage of Canadians who are single, cohabiting, and married
- Factors leading to marital satisfaction

## Chapter 13

- Chapter revised to incorporate new *DSM-5* classifications and terminology for sexual dysfunctions

## Chapter 14

- Updated statistics on sexually transmitted infections in Canada
- Updated statistics in HIV in Canada and female/male risk factors
- STI/HIV risk perceptions
- Gender inequality and STI/HIV risk
- Ethnocultural factors
- The Male Call Canada Survey of MSM

## Chapter 15 (New chapter on Sexual Health Education)

- History of sexual health education in Canada
- Sexual health education across Canada
- Sexual health education theory and practice
- *Canadian Guidelines for Sexual Health Education*
- The information–motivation–behavioural skills model
- Attitudes towards sexual health education
- Abstinence versus broadly based approaches
- Innovative Canadian curricular resources
- Meeting the education needs of diverse groups

## Chapter 16

- Incorporates new *DSM-5* definitions and classifications of paraphilia and paraphilic disorders
- Personality characteristics of dominant and submissive BDSM practitioners

## Chapter 17

- Sexually aggressive behaviour in bars and clubs
- Updated statistics on sexual assault and sexual violations against children in Canada
- Campus sexual assault prevention
- Online and offline post-relationship contact and tracking

## Chapter 18

- Legal challenges to Canada's prostitution laws
- Bill C-36: Canada's new prostitution laws
- Human trafficking
- The Internet and sexually explicit material (SEM)
- Gender differences in response to SEM
- Cybersex addiction/compulsivity

## Themes in This Edition

The fifth Canadian edition of *Human Sexuality in a World of Diversity* builds upon the strong themes for which previous editions have become known. Four themes are woven throughout the text:

- Human diversity.
- Critical thinking.
- Responsible sexual decision-making.
- Sexual health.

### Human Diversity

Colleges and universities undertake the mission of broadening students' perspectives, encouraging them to tolerate and appreciate human diversity. Canada is a nation of hundreds of ethnic and religious groups, many of which endorse culturally distinct beliefs about appropriate gender roles for men and women, as well as distinctive sexual practices and customs. Diversity is even greater within the global village of the world's nearly 200 nations and their subcultures.

*Human Sexuality in a World of Diversity* incorporates a multicultural, multi-ethnic perspective that reflects the diversity of sexual experience in Canadian society and around the world. Discussion of diversity encourages respect for people who hold diverse beliefs and attitudes.

### Critical Thinking

Colleges and universities also encourage students to become critical thinkers. Today's students are so inundated with information about gender and sexuality that it can be difficult to sort truth from fiction. Critical thinking requires thoughtful analysis and probing of others' claims and arguments in light of evidence. Moreover, it requires a willingness to challenge conventional wisdom and the common knowledge many of us take for granted. Throughout this book we raise issues that call for critical thinking.

### Responsible Sexual Decision-Making

We encourage students to make responsible sexual decisions on the basis of accurate information. Responsible decision-making is based not only on acquiring accurate information, but also on carefully evaluating this information in light of your own values.

### Sexual Health

*Human Sexuality in a World of Diversity* emphasizes issues that affect sexual health, with extensive coverage of such topics as HIV/AIDS and other STIs, innovations in contraception and reproductive technologies, breast cancer, menstrual distress, sex and disabilities, and diseases that affect the reproductive tract. The textbook encourages students to take an active—in fact, a proactive—role in health promotion.

## Feature Boxes and Additional Learning Aids

This fifth Canadian edition of *Human Sexuality in a World of Diversity* continues to use a variety of features to stimulate interest and enhance understanding.

“Innovative Canadian Research” boxes emphasize significant new research contributions by Canadian scholars. Many new Innovative Canadian Research boxes have been added to the fifth edition, and others have been updated.

“A World of Diversity” boxes highlight the rich variety of human sexual customs and practices, in Canadian society and around the world. They also include opinions that are contrary to commonly held beliefs.

“Applied Knowledge” boxes assist students with personal decisions, providing information and advice.

“A Closer Look” boxes provide in-depth discussions of societal issues and research.

Key terms appear in boldface within the paragraphs, while a running glossary provides definitions in the margins, close to where the key terms appear. At the end of each chapter, a “Summing Up” section organizes and reviews the subject matter according to the headings within the chapter.

The “Test Yourself” section at the end of each chapter contains multiple-choice and critical-thinking questions to facilitate individual study and promote class discussion. “Answer Key,” at the end of the book, contains answers to the “Test Yourself” questions.

## Student Supplements

### CourseSmart for Students

CourseSmart goes beyond traditional expectations—providing instant, online access to the textbooks and course materials students need at an average savings of 50%. With instant access from any computer and the ability to search the text, students will find the content they need quickly, no matter where they are. And with online tools like highlighting and note-taking, they can save time and study efficiently. See all the benefits at [www.coursesmart.com/students](http://www.coursesmart.com/students).

## Instructor Supplements

### Instructor’s Resource Manual

This manual includes a variety of resources, including chapter-at-a-glance tables (which correlate chapter topics and learning objectives with the offered resources), teaching tips, activities, additional lecture material, and recommended readings, videos, and websites.

### Test Item File

This test bank in Microsoft Word format includes an extensive set of multiple-choice, true-or-false, and essay questions. This test bank is also available in computerized format (see below).

### Computerized Test Bank

Pearson’s computerized test banks allow instructors to filter and select questions to create quizzes, tests or homework. Instructors can revise questions or add their own, and may be able to choose print or online options. These questions are also available in Microsoft Word format.

### PowerPoint Presentations

Chapter-by-chapter presentations highlight the key points from the text, supported by diagrams and visuals.

The preceding instructor supplements are available for download from a password-protected section of Pearson Canada’s online catalogue (<http://vig.pearsoned.ca>). Navigate to your book’s catalogue page to view a list of available supplements. See your local sales representative for details and access.

### peerScholar

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peerScholar facilitates this through the process of creation, evaluation and reflection. Working in stages, students begin by submitting a written assignment. peerScholar then circulates their work for others to review, a process that can be anonymous or not, depending on your preference. Students receive peer feedback and evaluations immediately, reinforcing their learning and driving the development of higher-order thinking skills. Students can then re-submit revised work, again depending on your preference. Contact your Pearson Representative to learn more about peerScholar and the research behind it.

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~ Alexander McKay, PhD

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# What Is Human Sexuality?



Let's Google two islands; the first is Inis Beag in the North Atlantic Ocean, off the coast of Ireland, and the second, called Mangaia, is in the South Pacific Ocean. If we search Google Maps for these islands, click on the satellite image, and swoop in, we find ourselves visiting two islands that are on opposite sides of the world. From the air, both appear green and fertile. Both islands contain very small populations of people, geographically separated from the outside world. Because of this they have been of particular interest to anthropologists looking to study the customs of unique societies that have developed and existed at least somewhat free of the cultural influences that have shaped personal and social life in the larger, more prominent cultures of the world.

What makes Inis Beag and Mangaia of interest to us is that they provide a vivid example of cultural diversity with respect to sexuality. Values and standards for sexuality are key components of the organization of all cultures, including contemporary Western society. So it is instructive to examine the accepted forms of sexuality and patterns of sexual behaviour in diverse geographical locations and historical time periods not so that we may judge them or marvel at what may seem to us to be their eccentricities. Rather, we learn about diverse cultures so that we can understand the ways in which each culture uniquely shapes and regulates sexuality. Ultimately, the study of sexuality in cultures that are distant from our own enables us to better understand ourselves and the ways in which our own culture shapes our sexuality. In Inis Beag and Mangaia, we see two distinctive cultures that are both different from mainstream North American culture but also quite opposite to each other in the culturally accepted ways that sexuality is expressed.



Inis Beag is a remote island off the coast of Connemara, Ireland. American anthropologist John Messenger visited the island from 1958 to 1966 (Messinger, 1993). The population at the time numbered about 350. The people of Inis Beag were Gaelic speaking Irish Catholics who lived as farmers. At the time of Messenger's visit, there was no electricity, and the primary mode of transportation was horse drawn carriages. In this isolated agrarian culture, the community of Inis Beag evolved beliefs and customs regarding sexuality that, in comparison to mainstream Canadian society, appear as quite restrictive.

From his study of sexuality on the island, here are some of the sexual beliefs, norms, and practices that Messinger (1993) observed among the Inis Beag. The residents of this community did not believe that it was normal for women to experience orgasm. Messinger reported that woman who found sex pleasurable—especially orgasm—were viewed as deviant.

Premarital sex was all but unknown on Inis Beag. Prior to marriage, men and women socialized apart. Marriage came relatively late compared to other cultures—usually in the middle 30s for men and the middle 20s for women. Mothers taught their daughters that they would have to submit to their husbands' animal cravings in order to obey God's injunction to "be fruitful and multiply."

But the women of Inis Beag did not need to be overly concerned about frequent sex, since the men of the island believed that sexual activity would drain their strength. Consequently, men avoided sexual activity on the eve of sporting events or strenuous work. Because of taboos against nudity, married couples had sex with their undergarments on. Intercourse took place in the dark—literally as well as figuratively.

During intercourse, the man was always on top. He was always the initiator. Foreplay was brief or nonexistent. The honourable man ejaculated as fast as he could, in order to spare his wife as much as possible from the unpleasantness of sexual interaction. In sum, rooted in a religious but internally derived and idiosyncratic understanding of human sexuality, the Inis Beag developed into a relatively sex negative culture.

On to Mangaia, which is a lush tropical island in the South Pacific Ocean. Mangaia is the most southerly of the Cook Islands, located about 650 miles southwest of Tahiti. Known for its coconuts, coral reefs, and natural beauty, Mangaia is home to about 500 people, most of whom are of Polynesian descent. As in many other cultures, including the people of Inis Beag, family bonds are of central importance to the people of Mangaia. Like nearly every other place in the world, most of the island's people form romantic attachments, get married, and place a high priority on their families. With respect to beliefs about sexuality and norms for sexual behaviour, however, the Mangaia culture is a stark contrast to that of Inis Beag.

The American anthropologist Donald Marshall conducted field research in the Cook Islands during the 1950s and spent a year living on Mangaia. Marshall's (1971) report on the sexuality of the island's people indicated a relatively sex positive culture. According to his account of sexual life on the island, from an early age, Mangaian boys and girls were encouraged to get in touch with their sexuality through sexual play and masturbation. At about the age of 13, Mangaian boys were given a two-week course of instruction on techniques of sexual behaviour, including how to perform oral sex, which was followed by a socially approved sexual experience with an older woman in the community. Girls also received instruction about sex from an older woman.

Marshall (1971) reported that premarital sex among Mangaia adolescents was culturally approved and frequent. Mangaian parents encouraged their daughters to have sexual relationships with several men so that they would be sure to choose a husband who was compatible. Both males and females emerged from adolescence sexually experienced and skilled. For men, it was important that they were adept in giving their female partners sexual pleasure, including the ability for him to delay

ejaculation in order to enhance her experience. Bringing his partner to orgasm was not just expected, it was a principle source of a man's own sense of sexual pleasure. Perhaps not unexpectedly, Marshall reported that regularly experiencing orgasm was a nearly universal experience among women on the island.

So what conclusions can we draw from our brief comparison of sexuality on the islands of Inis Beag and Mangaia? First, although the people living on these two islands belong to the same species (*Homo sapiens*), they have very different, and in some ways opposite, sexual beliefs, attitudes, and behavioural practices. This tells us that while our biology defines us as human, our culture—the group specific beliefs, values, social norms and customs passed down from one generation to the next—plays a central role in shaping human sexuality.

Second, as the title of this book suggests, we can conclude from our brief journey to these two islands that to study human sexuality is to study diversity. As we will see time and time again as we examine and investigate the key dimensions of this fascinating topic, human beings experience and express sexuality in diverse ways. Because our sexuality is a fundamental part of who we are as individuals and communities, this diversity contributes to the uniqueness within each of us.

## Choices, Information, and Decision Making

Although sex is a natural function, and our sexuality can be influenced by biological factors, how we voluntarily express our sexuality is a matter of personal choice. We choose how, where, and with whom to become sexually involved. We face a wide array of sexual decisions. What attributes do I look for in a partner? When should my partner and I become sexually intimate? Should I initiate sexual relations, or wait for my partner to approach me? Should my partner and I practise contraception? If so, which method? Should I use a condom to protect against sexually transmitted infections (or insist that my partner do this)? Should I be tested for HIV? Should I insist that my partner be tested for HIV before we engage in sexual relations?

In addition to our biology and our capacity for individual decision making, the expression of our sexuality is also inevitably influenced by the social context in which we live. The contrasting social norms related to sexuality on the islands of Inis Beag and Mangaia described above are a stark example of the powerful influence of culture on human sexuality.

Many aspects of human sexuality are viewed as moral issues, involving questions of right and wrong. Issues such as premarital and extramarital sex, contraception, and abortion, for example, are often subject to moral debate. No single value system defines us all. Each of us has a unique set of moral values—as a Canadian, as a member of one of Canada's hundreds of cultural groups, as an individual. The world of diversity in which we live is a mosaic of different moral codes and cultural traditions and beliefs. Gathering information and weighing the scientific evidence will alert you to what is possible in the contemporary world, but only you can determine which of your options are compatible with your own moral values.



*Spelling It Out.*

*In this artistic photo by Hamilton photographer Melanie Gillis, nude people are arranged so their bodies form the word "SEX."*

Making decisions involves choosing among various courses of action. The act of not making a formal decision may itself be a tacit decision. For example, we may vacillate about whether to use a particular form of birth control, but continue to engage in unprotected sex. Is this because we haven't made a decision, or because we've decided to accept whatever happens?

Gathering information helps us predict the outcomes of the decisions we make. This textbook provides you with a broad database concerning scientific developments and ways of relating to other people—including people who come from other cultures. We also encourage you to try to understand other people's sexual beliefs and values in light of their cultural backgrounds just as we should reflect on our own beliefs, values, and culture. Understanding is an essential milestone on the pathway to respect, and respect is vital to resolving conflicts and establishing healthy relationships.

### CRITICAL THINKING QUESTIONS

Some people don't consider oral–genital contact to be “having sex.” What's your opinion?

**Erotic** Arousing sexual feelings or desires.

**Gender** The behavioural, cultural, or psychological traits typically associated with one sex.

**Gender roles** Complex clusters of the ways males and females are expected to behave within a given culture.

**Human sexuality** The ways we experience and express ourselves as sexual beings.

## What Is Human Sexuality?

This is not a trick question. Consider the various meanings of the word “sex.” One use of the term refers whether we're anatomically male or female or somewhere in between. The words “sex” and “sexual” also refer to the anatomical structures, called sex organs or sexual organs, that play a role in reproduction and sexual pleasure. We may also speak of sex when referring to physical activities involving our sex organs for purposes of reproduction or pleasure, as in “having sex.” Sex also relates to **erotic** feelings, experiences, or desires, such as sexual fantasies and thoughts, sexual urges, and feelings of sexual attraction.

Many researchers reserve the word “sex” for anatomical or biological categories, preferring the word “**gender**” to refer to social or cultural categories. For example, one might say that “reproductive anatomy appears to depend on the sex [not the gender] of the individual, but in some societies, **gender roles** [not sex roles] are often seen as polar opposites and in others they appear more similar or fluid.”

The term “**human sexuality**” refers to the ways we experience and express ourselves as sexual beings. Our awareness of ourselves as females or males is part of our sexuality, as is the capacity we have for erotic experiences and responses. Our knowledge of the gender roles in our culture also has a profound influence on us.

### Sex as Leisure

Researchers Meaney and Rye (2007), at St. Jerome's University at the University of Waterloo, have conceptualized sex as a fun, healthy activity that can be considered leisure when it is voluntary, is not seen as work, and serves some personal need. According to their definition, sex is not a leisure activity when it is not voluntary, is viewed as work, or is seen as an obligation.

At its most basic level, sex provides physical pleasure. It's a fun activity that can be enjoyed alone or with others. Sexuality can also be a key component of personality development, as we discover which sexual activities are enjoyable, and with whom. Sexuality is an important part of identity. This is certainly true for gay, lesbian, bisexual, or transgender people. It's also true for people who engage in certain sexual variations, such as sadomasochism. Meaney and Rye (2007) argue that learning about one's sexual likes and dislikes through experimentation can lead to sexual self-actualization, a state in which a person is comfortable with his or her sexuality.

### The Study of Human Sexuality

The study of human sexuality draws upon the scientific expertise of anthropologists, biologists, medical researchers, sociologists, and psychologists, to name but a few of the professionals involved in the field. These disciplines all make contributions because sexual behaviour reflects our biological capabilities, psychological

## Innovative Canadian Research

### WHAT IS THIS THING CALLED SEX?

New Brunswick researchers Hilary Randall and Sandra Byers (2003) asked university students to indicate which behaviours they would define as “having sex” with someone if they were the ones engaging in those behaviours. The only behaviours most students defined as sex were penile–vaginal intercourse and penile–anal intercourse. Only about one-fifth defined oral–genital contact as sex, and even fewer (10%) defined the touching of genitals leading to orgasm as sex. Interestingly, there was a slight increase in the percentage of students who defined each behaviour as sex if it resulted in orgasm.

When the researchers modified the question, however, far more students indicated that they would define someone as their “sexual partner” if that person were engaging in those behaviours with the respondent. For example, about two-thirds considered anyone with whom they had oral–genital contact to be a sexual partner, and about one-half considered touching of genitals as an indicator of partnership.

University of Calgary researchers Eileah Trotter and Kevin Alderson (2007) asked university students to define “loss of virginity.” The students’ definition of “loss of virginity” was more narrow than their definition of “having sex.” For example, only about half thought penile–anal intercourse qualified as loss of virginity. Almost all accepted penile–vaginal intercourse as the marker for virginity loss. However, a small percentage indicated that orgasm had to be experienced with penile–vaginal intercourse for it to count as loss of virginity.

The researchers also presented students with a list of behaviours and asked them to define each behaviour as sexual if it was performed by an opposite-sex couple and if it was performed by a same-sex couple. Students were more likely to define most of the behaviours as sexual for opposite-sex couples than for same-sex couples. An exception was oral–genital sex: slightly more of the students classified this behaviour as “having sex” if the couple was same sexed than if it was opposite sexed (Trotter & Alderson, 2007).

characteristics, and social and cultural influences. Biologists inform us about the physiological mechanisms of sexual arousal and response. Medical science teaches us about sexually transmitted infections and the biological bases of sexual dysfunction. Psychologists examine how our sexual behaviours and attitudes are shaped by perception, learning, thought, motivation, emotion, and personality. Sociologists consider the sociocultural contexts of sexual behaviour. For example, they examine relationships between sexual behaviour and religion, race, and social class. Anthropologists focus on cross-cultural similarities and differences in sexual behaviour. Scientists from many disciplines explore parallels between the sexual behaviours of humans and those of other animals.

A number of organizations promote sex research and sexual health education. In Canada, leading organizations include the Sex Information and Education Council of Canada (SIECCAN), which publishes *The Canadian Journal of Human Sexuality*, and the Canadian Sex Research Forum (CSRF). The Canadian Federation for Sexual Health (CFSH), the Society of Obstetricians and Gynaecologists of Canada (SOGC), and the Public Health Agency of Canada (PHAC) also disseminate sexual health information to professionals and the public in Canada. Two major international organizations are the Society for the Scientific Study of Sexuality (SSSS), which publishes *The Journal of Sex Research*, and the World Association for Sexual Health (WAS).

## Canadian Society and Sexuality

To understand the complexity of factors influencing sexual attitudes and behaviours in Canada, it’s important to be aware of the diverse nature of Canadians. Particularly today, immigration patterns are changing the landscape of Canadian society.

## Innovative Canadian Research

### ETHNOCULTURAL COMMUNITIES AND SEXUALITY

There has been relatively little research on the sexuality of Canadian ethnic minority groups. Fortunately, some Canadian researchers have begun to study these under-examined groups.

Concerned over the spread of HIV/AIDS, in 1996, Health Canada sponsored a study of diverse ethnic groups in Canada. The study, entitled “Ethnocultural Communities Facing AIDS,” was conducted in consultation with representatives of five ethnic communities in Canada: South Asian, Chinese, South African, Caribbean, Latin American, and Arabic.

Most participants reported a double standard for sexual behaviour, with women expected to be virgins before marriage and monogamous after marriage, and men allowed to be sexually permissive before and to some extent after marriage. In the South Asian community, girls were not even allowed to date. In all five communities, many respondents took it for granted that at least some men would have sex with prostitutes and/or women outside their ethnic groups. Homosexuality was treated as if it didn’t exist in their communities, and homosexuals were made to feel ashamed. Gender roles were rigidly prescribed, with men considered “bosses” in their families. Women weren’t expected to have much interest in or knowledge of sex, and they lacked the power to ask their husbands to use condoms.

Researchers in Vancouver and Montreal, led by Lori A. Brotto of the University of British Columbia, compared the sexuality of Canadian university students from European-Canadian and Asian backgrounds. The Asian students had more conservative sexual attitudes and less sexual experience than the European-Canadian students. The European-Canadian women reported higher rates of sexual desire, arousal, receptivity, and pleasure. The Asian men reported higher rates of erectile dysfunction and less sexual satisfaction than the European-Canadian men.

Brotto et al. (2005) found that degree of acculturation to mainstream Canadian society was significantly related to sexual attitudes and experiences, but that length of residence in Canada was not. In other words, Asian students who kept the strongest ties to their cultural heritage had the most conservative sexual attitudes and experiences. Similarly, a study by Woo and Brotto (2008) found that Asians in Vancouver who identified less with Canadian culture had higher rates of sexual problems and less communication with their partners about sexual issues. They were also more likely to avoid sexual contact, and when they did engage in sexual relations, their encounters were less sensual in nature.

Canadian researcher Yanqui Rachel Zhou (2012) interviewed both male and female Chinese immigrants about their sexual attitudes and experiences during the settlement process in Canada. Zhou noted that while Chinese society has gradually become more open to personal sexual freedom there remains a taboo around

Currently, One in five members of the Canadian population was born outside of Canada, with the majority of immigrants (63%) moving to the metropolitan areas of Toronto, Vancouver, and Montreal. Immigrants constitute 20% of Canadian society and nearly 50% of Toronto’s population (Statistics Canada, 2013a). Of course, before the arrival of Europeans in North America, Canada was inhabited by indigenous peoples. Currently, 4.3% of Canada’s population is made up of those who identify as First Nations, Metis, or Inuit people, collectively known as Aboriginal peoples (Statistics Canada, 2013a).

The first European explorers in the region were mainly French and British, and for many years those two have been the dominant ethnic groups in Canada. In the latter half of the twentieth century, an increasing number of immigrants came from other European and non-European countries. According to the 2011 National Household Survey, 57% of immigrants who arrived in Canada between 2006 and 2011 were from Asia, and 14% were from Europe (Statistics Canada, 2013a). As a

public discourse related to sexuality. In China, silence around sexual issues is often encouraged. When immigrants come to Canada they may be separated from partners and family and experience feelings of loneliness and isolation. Zhou found that many of the men and women she interviewed became involved in sexual relationships in Canada out of a need for intimacy and companionship. The participants often revealed that these relationships were only possible because they were separated from family, friends, and spouses which in turn meant that they experienced a certain amount of liberation from the social and cultural norms of their home country. However, while they tended to be more open to sexual experiences, many still maintained a reluctance to discuss sexual issues with their partners. The cultural tradition of privacy and silence surrounding sexuality persisted even though there was a more open attitude to sexual experiences. Zhou noted that this continued reluctance to talk about sexuality could lead to unsafe sexual behaviours such as unprotected sex and engaging in sex with multiple or risky partners.

Eleanor Maticka-Tyndale at the University of Windsor and two visiting researchers from Iran, Khosro Refaie Shirpak and Maryam Chinichian, conducted research with Iranian immigrants (2007). Like the Health Canada researchers, they found that maintaining virginity prior to marriage was considered essential for girls, to maintain good reputations and the honour of their families. The Iranian adults were fearful of having their children exposed to sexuality from the broader Canadian society, especially by the media. Based on images they saw on Canadian television, the Iranian immigrants believed most Canadian adolescents began having sexual intercourse by age 13 or 14. They also perceived that Canadians didn't seem to care about marital loyalty and engaged in extra-marital relationships. The women worried that their husbands would be tempted to engage in affairs, because of the sexual freedoms in Canada. The men worried that in Canada it would be too easy for their wives to walk out of their marriages. Respondents also believed that sex education in Canadian schools emphasized the use of condoms

rather than abstinence before marriage.

Maticka-Tyndale et al. (2007) also studied the sexual health needs of immigrants from Iran. Some of the women expressed concerns that their husbands might want to engage in sexual practices, such as oral sex, that were commonplace in Canada but not acceptable in traditional Muslim culture. The immigrants acknowledged that their own lack of sex education resulted in embarrassment when discussing sexual-health topics with medical professionals. Women who had male physicians avoided having Pap smears taken because of embarrassment. Some women felt it was inappropriate to have Pap smears before marriage, because they worried the procedure might affect their virginity. Both males and females reported that modesty and shyness prevented them from discussing sexual problems and asking questions about sex when talking to health professionals. Maticka-Tyndale et al. recommended that health professionals be more culturally sensitive when interacting with immigrants, especially when talking about sexual-health issues.

result, Canadians of French and British ancestry today make up only about half of the population.

The most notable change in the Canadian mosaic has been the dramatic increase in the proportion of visible minorities. In 2011, 19% of Canadians (6,264,800) were members of visible minorities, with South Asians forming the largest group followed by Chinese and those who identified as Black (Statistics Canada, 2013a).

The **values** of immigrants often differ from those of people born in Canada. In South Asian communities, for example, arranged marriages are still fairly common. Some immigrants from Muslim countries maintain the practice of female circumcision, a procedure usually performed on young girls that involves surgical removal of the clitoris and in some cases parts of the labia. This practice, often referred to as “genital mutilation,” is contrary to Canadian values. (The Canadian and American governments have declared female circumcision illegal. Within some

**Values** The beliefs and qualities in life that are deemed important or unimportant, right or wrong, desirable or undesirable.



### *Sexual Appetites at the Burlesque Ball.*

*The Burlesque Ball in Montreal, organized by a group called Monde Osé, is meant to encourage people to explore their sexuality. In general, people in Quebec tend to have more permissive sexual attitudes than people in other provinces.*

## CRITICAL THINKING QUESTIONS

In some cultures, women going topless is seen as sexually provocative and exhibitionist, while in other cultures, it's seen as natural and nonsexual. Can you think of other cultural differences related to human sexuality?

immigrant communities, however, the procedure is still done.) Parents in some groups use gender-selection techniques, such as abortion, to ensure that they have boys rather than girls. In many cultures, sex is a taboo subject, not discussed openly between parents and their children.

For the most part, sexual attitudes and behaviours are more conservative among immigrants than among the rest of Canadian society. This is particularly pronounced in relation to the age of first intercourse. About three-quarters of 20- to 24-year-olds born in Canada report having had sexual intercourse before age 20, compared with less than half of 20- to 24-year-olds born outside of Canada (Maticka-Tyndale et al., 2001).

Children of immigrant parents often get caught in a culture clash between the traditional values of their parents and the more permissive values of Canadian society. A Manitoba study of ethno-racial minority youth found that since sex was a

taboo subject within the family setting, young people felt they could not communicate their real thoughts and questions to their parents (Migliardi, 2007). Research also indicates, however, that most bicultural young people successfully adapt to Canadian culture, while still maintaining ties to the cultural identities of their families. Negotiating conflicting cultural norms may prove to be a challenge, especially for issues pertaining to sexuality and relationships, but many young people find a workable balance between the expectations of each culture (Giguère, Lalonde, & Lou, 2010).

**COMPARING CANADA WITH OTHER COUNTRIES** Tremendous variation in sexual attitudes and behaviours is found among the different countries of the world. Many of these variations are presented throughout this textbook. For example, Laumann et al. (2006) surveyed 27 500 men and women over age 40 from 29 countries, asking about their levels of sexual satisfaction. In general, men reported higher levels of satisfaction than women. Western countries with higher gender equality, such as Canada, had the highest rates of sexual satisfaction. The lowest levels of satisfaction were in Indonesia and Japan. According to Laumann et al., in societies that have greater gender equality, sexual pleasure is considered as important for women as it is for men. However, in male-centred cultures where sex is more reproduction-focused, sexual pleasure for women is not considered important. Not surprisingly, many women in those cultures view sex as a marital duty.

There are also many cross-cultural differences in adolescent sexuality. Eleanor Maticka-Tyndale at the University of Windsor has conducted a groundbreaking study of adolescent sexual practices in Kenya (see “A World of Diversity: Sexual Scripts of Young People in Kenya”). This study shows a sexual “script” for adolescent sexuality that diverges from the scripts with which most Canadians are familiar.

When it comes to sexuality, there are many cultural variations. Consider the issue of women going topless at the beach. In Australia and many European countries, it's commonplace to see topless women at public beaches. In Canada, however, this is not the case. Until the 1990s, in fact, it was illegal in Canada for women to go topless.

On a hot summer day in 1991, University of Guelph student Gwen Jacob caused a sensation in downtown Guelph when she removed her shirt and exposed



*Go Topless Day.*  
 At this event in Toronto, topless women marched in protest against the city of Toronto. Toronto denied a group of women permission to bare their breasts and hold a demonstration in a public park, while going topless in the street of Toronto is legal. The event was organized in 2011, in an effort to help women feel comfortable about going topless in public. Many Canadian women are still uncomfortable about going topless.

her breasts. She was arrested and convicted of committing an indecent act in a public place. Jacob brought her case to the Ontario Court of Appeal, arguing that because men had the right to go topless, she had a constitutional right to go topless as well. In 1996, the Ontario Court of Appeal overturned the conviction, stating that her act was not degrading or dehumanizing and that it carried no sexual connotation.

This ruling brought out the central issue in the debate over toplessness: is it or is it not a sexual act? In a study of university students in Australia, Herold, Corbesi, and Collins (1994) found that women who had gone topless at the beach believed this was a “natural” rather than a sexual act when done at the beach. Conversely, women who had never gone topless argued that it was indeed sexual and a type of exhibitionism. Despite the court ruling, few women in Canada go topless in public, even at the beach.

**COMPARING CANADA AND THE UNITED STATES** Although there are many similarities between Canadians and Americans, there are also many differences. For example, a much higher proportion of the American population than of the Canadian population comes from a Spanish or African background. Consequently, ethnic comparisons in the United States are often based on three categories: African Americans, Latin Americans, and European Americans. This typology is far too narrow to describe Canada. The more than 5 million Canadians who are members of visible minority groups include significant numbers of South Asians, Chinese, Africans, Filipinos, Latin Americans, Arabs, Southeast Asians, West Asians, Koreans, and Japanese, as well as many who are members of more than one group (Statistics Canada, 2009b). It’s important to be aware of social and demographic differences between Canada and the United States, because they account for some major differences in sexual attitudes and behaviours.

The birth rate in Canada is lower than that in the United States, especially for women in their 20s. The teenage pregnancy rate is also almost twice as high in the