

Fall 2010

More Than Just Biology: Creating an Informational Website for Teens on Sexuality and Lifelong Sexual Health

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SIT Study Abroad

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MORE THAN JUST BIOLOGY

**Creating an informational website for teens
on sexuality and lifelong sexual health**

By Sarah Cyr-Mutty
SIT Study Abroad, Fall 2010

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Academic Director: Kevin Connors

Submitted in partial fulfillment of the requirements for:
The Netherlands: International Perspectives on Sexuality & Gender

Simmons College (Boston, MA)
Women and Gender Studies / Social Justice

Europe; Netherlands; Amsterdam

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Abstract

“More Than Just Biology – Creating an informational website for teens on sexuality and lifelong sexual health” is the product of four weeks’ research in Amsterdam, NL on sexuality education and the use of the Internet as an educational tool for youth. The research defied a “Dutch approach” to sexuality education and used it to create a website for American teenagers to get confidential and accurate information regarding their sexual lives and health. Information was gathered primarily through personal interviews, as well as a review of existing literature on the subject. Through this research, it was found that the Dutch approach was rooted largely in the acceptance of young people’s sexuality and the messages of positivity and responsibility. Keeping these themes in mind, *More Than Just Biology* was created. It can currently be found at more-than-just-biology.tumblr.com.

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Acknowledgments

There are so very many people who helped me through this process. Of course, I could not write a word more without thanking everyone who works for SIT Amsterdam, keeping us in homes, on bikes, well caffeinated, and sane. This is especially true of Kevin Connors, our Campsterdam Dad, who turned this project from a whimsical idea to a complete reality, and who never ceases to make us smile.

This project never would have been completed were it not for my advisors, Joke Hermes and Christa de Graaf, who I cannot thank enough for their willingness and enthusiasm. A huge thanks goes out as well to my wonderful host Olaf for keeping me nourished and relaxed throughout the past four weeks (and two months), as well as for providing me with the best lit study space in all of Amsterdam – his kitchen.

The true inspiration for this project came from the role models I have had in sexuality and health education throughout my life: Kristin Loftus, Carole Cowles, Sue Carlson, Elise Phillips, and Silvia de la Sota. The fantastic example of these amazing women has motivated me endlessly, and I cannot thank them enough for their unwavering support of my endeavors.

I could also never go without thanking my fellow Campsterdammers, for all their honesty and good humor. We have been through so much together, and you have truly made this the time of my life. Last but not least, I must thank all the people at Simmons who made this experience possible for me, but especially my family.

I have never been more proud of a piece of work – this is what I give back to all of you. Thank you!

Introduction

Education has long been a cornerstone of Western societies. The idea that one generation must educate another is not a new one, and schools have been around for centuries, educating youth on matters of language, mathematics, science, history, music, technology, art, and skills. However, when it comes to educating youth on matters of sexuality, there is significant debate, especially today in the United States. While many parents believe it is their own right to educate their children on the issue, others see the teachers in their children's schools to be better equipped for the task. The argument one stands behind is useless; what is important to know is that sexually transmitted infection (STI) and unintended teen pregnancy rates in the United States have been on the rise in the past five years, and that is indicative of teenagers not having the information to make good decisions.

There is also no doubt that current generations are becoming more and more reliant on technology and the Internet. The opportunities for developing informational websites on sexuality for teens are endless, and the Dutch are providing a good example. Due to the anonymity and private nature of websites, youth might feel more comfortable asking personal questions than they might in a classroom setting. It would also provide the opportunity for youth who are home-schooled, living within a fundamentalist family, or who are disabled to access information they might not be able to receive elsewhere. I argue that this is next frontier in sexuality education, and that it is something the United States needs to utilize.

My research looks into the how Dutch sexuality education is developed, taught, and received, as well as the merits of using the Internet and new technologies as a way of

educating today's youth: what makes the Dutch an admirable model? Why are responsible websites for youth necessary today in America? Why is the Internet an important tool for educating youth? What should an informational website on sexuality for youth contain? By interviewing developers, youth, and parents from the Netherlands (in particular, Amsterdam), I have attempted to answer these questions, define a "Dutch approach" to sexuality education, and use it as a map for creating a website for American teenagers on their sexual lives and health.

This paper first discusses the previous research conducted on this issue in the form of a literature review. It then presents the methodology and data from my personal interviews, followed by a discussion and analysis of the findings. The goal of executing and analyzing this research was to create the website, *More Than Just Biology*, the process and text of which is presented last.

Literature Review

Before I could begin creating this website, it was essential to look at a few different questions: what makes the Dutch model an admirable one? Why are responsible websites for youth necessary today in America? Why is the Internet an important tool for educating youth on issues of sexuality? What content is needed to make these websites effective? This final question was the basis for my personal research. In order to answer these questions, I have reviewed "A Matter of Facts... and More: an Exploratory Analysis of the Content of Sexuality Education in The Netherlands" by Rebecca Ferguson, Ine Vanwesenbeeck, and Trudie Knijn; "Changing Emphases in Sexuality Education In U.S. Public Secondary Schools, 1988-1999" by Jacqueline E. Darroch, David J. Landry, and Susheela Singh; and "Toward an Internet-driven, Theoretically-based, Innovative approach to Sex Education" by Azy Barak and William A. Fisher. Together, these sources provide me with a basic understanding of the existing research done on using the Internet as a tool for educating today's youth, as well as the research done on sexuality education, both in the Netherlands and the United States.

Sexuality education in the Netherlands is heralded worldwide as being comprehensive, progressive, and effective, due to their extremely low rates of teen pregnancy and abortion (Vernout 17). Researchers from all over have put time and energy into finding out what exactly it is that makes the Dutch approach to sexuality education so successful. Many developers of sexuality education curriculum are looking to adapt the Dutch approach to implement in their own country, specifically in the United Kingdom and the United States, where the STI and teen pregnancy rates are significantly higher.

In "A Matter of Facts... and More: an Exploratory Analysis of the Content of Sexuality Education in The Netherlands," Ferguson, Vanwesenbeeck, and Knijn look into the actual content of programs in the Netherlands, as well as statistics such as age of first intercourse, use of contraceptives, and teen pregnancy and abortion rates. Through their research, the authors are able to pull out themes in Dutch sexuality education (which will be discussed at length later). Ferguson, Vanwesenbeeck, and Knijn go on to write, "Dutch sexuality education emerges from an understanding that young people are curious about sex and sexuality and that they need, want, and have a right to accurate and comprehensive information about sexual health" (102-103). This is one of the most important factors in the success of Dutch sexuality education, and it truly embodies the "Dutch approach." It gives power to youth by validating and explaining what they are going through, instead of trying to keep them in the dark for fear of corruption. Acknowledging the reality of young people's lives is crucial to the development of a good program or website.

More than that, almost all of the documents reviewed by Ferguson, Vanwessenbeeck, and Knijn cast sexuality in a positive light, by acknowledging the pleasurable aspects of sex and putting the responsibility on the individual to make informed decisions about partaking in any kind of sexual act when they are ready: "In addition to providing information about safe sex, Dutch sexuality education encourages young people to think critically about their sexual health, including their sexual wishes and desires" (103). The authors noted that while the topics covered were quite similar, the attitude with which they were presented was different, the Dutch having a more "positive method" (94). This is another pillar in the Dutch approach to sexuality education, and one

that is often over looked in sexuality education in the United States, as it moves more and more towards abstinence-only and shame-based programs.

The need for a comprehensive, informative website is made clear in Darroch, Landry, and Singh's article, "Changing Emphases in Sexuality Education In U.S. Public Secondary Schools, 1988-1999." Through their research, they found that between 1988 and 1999, there was a large shift towards abstinence-only sexuality education programs, and that teachers were far less likely to cover contraception in 1999. The main goal of teachers was to promote "abstinence as the only appropriate option for adolescents" (211). This goes against the recognition of young people's sexuality that Ferguson, Vanwesenbeeck, and Knijn found so prevalent in the Dutch model. It has also proven to be ineffective, as the aforementioned noted that about 50% of all teenagers aged 15 to 19 in both the Netherlands and the United States have engaged in sexual intercourse (97). Since abstinence is being practiced just as much as it is not, I think it is imperative to address both options and educate youth on both so that they make their own decisions.

The authors also point out that the goal of sexuality education in the United States has changed since its inception: "Although the major aim of school sexuality education was originally to teach young people about their physical and sexual development, such courses are now often expected to delay adolescents' initiation of sexual activity and to increase the chance that those who do have sex will use contraceptives to protect against pregnancy and STDs" (204). It is crucial to realize that this leaves out the recognition of intimate relationships, sexual pleasure, and lifelong sexual health. Youth have questions regarding these issues, which can be proven by looking at the advice column in any teen magazine. While the authors do not make any recommendations, their research indicates the need for

comprehensive information for youth who do not feel that abstinence, or who simply want to be educated on all aspects of sexuality before making a decision.

This is bolstered by Barak and Fisher's article, "Toward an Internet-driven, Theoretically-based, Innovative approach to Sex Education." They argue that the Internet is a valuable tool because the issues often present in the classroom - large class size, lack or cost of textbook, academic confidence, comfort level with classmates and teacher, learning style, experience, gender, etc. - are removed. "Special characteristics are required of learners in the sex education context as well and involve at least a threshold level of comfort with sexuality which is required to attend to, retain, and retrieve sexual information. Learners' comfort levels with sex education may be enhanced by environmental conditions of privacy and anonymity" (325). This is an extremely important factor to keep in mind. Sexuality is a sensitive topic for youth - especially for religious youth - and having a safe, confidential, and anonymous space is extremely important.

Not only this, but Barak and Fisher point out the benefits of youth communicating with each other anonymously: "The Internet allows for exchange of information among users, a capability that can be critical to learning experiences, especially in topic areas influence by social norms and interpersonal interaction, such as sexual behavior" (326). It is imperative for youth to be able to talk to one another about issues regarding their own lives; the Internet is a place where teenagers who do not feel comfortable talking to their friends or family can do that. Youth can be uncomfortable talking to people for a variety of reasons - disability, shyness, guilt, embarrassment, lack of people to talk to - and the Internet is available for them. It is essential that we utilize the Internet as a tool for sexuality education.

Assumptions, Methodology, & Limitations

Throughout the semester, this project has changed many forms, largely due to the assumptions I walked into it with. Being human, I make no denials that I have certain biases and opinions; however, I strove to reduce their sway on the research that I conducted. My interest in this project arose from my unique experience with extremely comprehensive sexuality education in my preteen and teenage years, and a belief that this experience influenced much of who I am and how I conduct myself today. I also see the merits to be found in using the Internet as a tool for sexuality education, as I have grown up in a generation deeply intertwined with technology. Both of these personal experiences have a stake in my motivation to do this research.

For this project, I have used multiple personal interviews as a guide for developing an informational website for American youth about their sexual lives and health. For strategic reasons, I chose to interview three different groups of people on sexuality education: youth, parents, and developers. My participants were found primarily through classmates' home-stay families and the extensive SIT community. For their anonymity, I have chosen give my youth and parent participants self-selected pseudonyms. My goal in conducting these interviews was to understand how sexuality education is approached in the Netherlands from different perspectives, and to gain feedback on what should be including in an informational website on sexual health.

Each group had a different interview guide, which can be found in the appendix at the end of this report. The loose format allowed for conversation and tangents, which often lead to new topics or ideas. My goal in interviewing youth over 18 was to understand how they viewed their sexuality education in the Netherlands, and where they felt the majority

of it was received – the home, the classroom, the media, the hallways, etc. By interviewing parents of youth over 18, I hoped to understand how they educated their child on issues of sexuality, as well as how they saw the culture of sexuality in the Netherlands. The aim of interviewing developers of sexuality education materials was to understand the philosophy behind the Dutch approach and to gain professional advice for my website.

It also must be recognized that I am an American female student attempting to draw conclusions about all of Dutch culture, which certainly influenced my research in a way that I could not control. Since all my interviews had to be conducted in English, all of my participants were speaking to me in their second or third language. Therefore, it must be assumed that some things were lost in translation. I also faced the constraint of time; four weeks to conduct the research, write the report, and create the website. This contributed to relatively small number of personal interviews, as well of the lack of ability to interview people outside of Amsterdam. More over, it contributed to my inability to speak with different Dutch communities, such as immigrant groups and Muslim communities. Along this same vein, one must recognize the challenges in interviewing youth and minority groups, especially on a topic as sensitive as sexuality. It happened more than once that a potential participant would agree to be interviewed, but then never respond to a request to formally set a time, for whatever reason.

The consideration must also be made that I spent a significant amount of time and energy making sure that this was not just a plan for an ideal website. The idea was that my project would be an alternative to the standard ISP, and that my website would give back to the community. Taking on a website, having only very minimal knowledge of HTML codes and how sites are actually built, was a much larger task than I expected, and this is

reflected in the topics I chose not to cover in this initial publishing. These will be discussed when I present my process, and I hope that they will be included as *More Than Just Biology* continues to develop and grow.

Data & Analysis

My goal for this project was to define a “Dutch approach” to sexuality education after which I could model a website for American youth. To ensure that my website was well rounded, I interviewed three different clusters of Dutch citizens – developers of sexuality education, youth, and parents. Due to my desire to hear a variety of voices, I was only able to conduct two interviews within each cluster. Each gave a unique perspective that was essential to creating a website that was approved by all three. Since the questions varied, I will first look at the data collected from each individual cluster. I will then look at all three together, and go on to explain how this became the website, *More Than Just Biology*.

Developer Interviews

Though I was only able to conduct two interviews with developers, one of them was an interview with two people who had worked on developing the same project. My first interview was with Yuri Ohlrichs, who works for the Rutgers Nisso Groep. My second interview was with Joke Hermes and Christa de Graaf, two of the primary developers in the website, *Geen Taboes*. My goal in interviewing these developers was to understand how they approached sexuality education, as well as to get suggestions for building my site. Because the questions posed during these interviews were so different, I have chosen to present the data separately for clarity’s sake.

I wanted to speak with Yuri because of his extensive background in the field of sexuality education. He has worked for Rutgers Nisso Groep for 15 years, and currently works in creating new sexuality education material for youth, as well as in training

professionals in communicating issues of sexuality. When asked what Rutgers Nisso Groep's philosophy on sexuality education for youth is, Yuri responded:

It's comprehensive, in the way that it's not only focused on the biological aspects of sexuality; they're very focused on social aspects as well. It's the positive and social approach to sexuality basically. When we talk about sexuality, unlike many other programs and many other institutions, we don't start with the risky side of sexuality. We say, "hey, it's fun, it's part of daily life: for men, women, different sexual orientations... it's there to enjoy it. And in order to enjoy your sexuality, there are rules and also advices."

He made it clear that it was important to not start with STIs and the fear of unwanted pregnancy, because programs that do often lose the attention of its students, due to feeling disrespected or ashamed. Yuri also cited Rutgers Nisso Groep's unique "RAP-rule," which can be found printed on most of their publications. "RAP" stands for a "rights-based approach; acceptance of young people's sexuality; participation of young people" (Massaut 1). Though there is no national curriculum for sexuality education in the Netherlands, one of the most commonly used program is one called "Long Live Love" which was developed by Rutgers Nisso Groep on this principle, and it can be seen as one of the fundamentals of the Dutch approach to sexuality education.

Yuri was also asked to verify the requirements the country has regarding sexuality education. He noted that there were three objectives set forth by the ministry of education: "kids should be told about their genitals and how they work; they should be informed of basic reproductive functions and biology; and they should be instructed to prevent sexual risks such as STIs, violence, pregnancy, etcetera." He said there was no requirement to

discuss pleasure or communication, and both of the youth interviews I conducted verified that those topics were not discussed in their classrooms. Though the government heavily subsidizes the development of programs such as “Long Live Love,” it seems as though they are not being used as widely in the Netherlands as the international media would have one believe.

When asked for suggestions for my website, Yuri had many, the number one being including youth in the development of it. He presented me with an anecdote about developing a DVD with a few colleagues recently on miscommunication among young people regarding issues of sexuality: “We wrote a very rough script and gave it to a producer, and he showed it to young people in a theatre, and they completely rewrote the script. The basic idea is still behind it, but the story is completely different. They know what’s current.” He noted that the exercise was also educational for those youth involved with the process, and sees that as a very valuable tool. Yuri also emphasized the need to respect youth as adults:

[The key is to] take them serious, and not to patronize them, and to accept that they have sexuality. ... They are all experts in their own way. I’m not there to tell them what to do; I’m there to facilitate them to find solutions to their problems and to answer their own questions. Sometimes they have misconceptions, but I can tell them. That’s also the approach to [take with] all the people you work with: you don’t know everything, but you know where to find it and you know other people to find solutions.

His other key recommendations were to involve different kinds of media within the site, as well as to include a “frequently asked questions” page. This will be discussed further at a later point in this paper.

Joke Hermes and Christa de Graaf were interviewed to get insight on creating a website for the purpose of sexuality education. The two of them worked together with colleague Pauline Borghuis and their students to create a website on issues of sexuality and sexual health for Turkish and Moroccan Dutch youth. The website has been extremely successful in the Netherlands, with Christa citing “50,000 unique visitors daily,” a statistic that alone shows the need for websites of this kind.

Joke defined their approach to sexuality education as “not just an emancipatory [sic] view but a feminist view in the sense that what we want to problematize [sic] is the moment that sex stands in for relations of power and especially for reproducing power on the side of some and powerlessness for others.” This theory is also a pillar in the Dutch approach to sexuality education. It emphasizes the need for youth, and especially women, to be educated in order to make informed decisions and know the rights of their bodies. Education allows youth to be aware, which empowers them to control their own lives.

The need for the website was based on government distributed health surveys that reported high rates of STIs and unintentional teen pregnancies among Turkish and Moroccan Dutch youth. The Ministry of Health felt that something needed to be done to address the fact that these communities were falling far below the Dutch standards. Joke also mentioned the issue of in-classroom sexuality education:

We wanted it to be something in addition to what’s happening in schools because there is one particular group that walks out of or is not allowed to

attend sex education lessons for religious issues. The more fundamentalist among the different religions are not allowed to stay because their parents forbid it. They don't want them to hear, or they have been raised in a culture that has deemed this is all a taboo, and they can't deal with it. It's information overload, or it's information coming from the wrong person. ... For this group, the Internet community would be considered a safe space where they could come, which is of course the first prerequisite for any sex education.

In order to create their website, they had some of their students take life story interviews of over 50 Turkish and Moroccan Dutch young adults about their experiences with sexuality (Borghuis 238). From these interviews, they created eight characters, each of which has a different story to tell. By educating through story telling, there is a less patronizing tone, and it allows the reader to relate to a person instead of a statistic or a fact. Joke maintains that sex education "needs to be a very gentle push."

When asked for suggestions on creating my website, Joke and Christa also stressed the need to involve the target community with the development as they did. Joke also emphasized presentation and word choice: "You'll have to think about how to layer your information, not to frighten off either the kids themselves or their parents and teachers." As their research and website showed that anonymity is key for the website being utilized by youth, they reminded me that it must be a factor in my website. All in all, their suggestions mirrored Yuri's very closely.

My conversations with these three developers gave me insight into the Dutch approach to sexuality education, as well as things to keep in mind during the planning and

development stages of my website. I felt that it was extremely important to consult both youth, being that they are my target community; I also felt that it was necessary to include input from parents, to insure that my website would have approval of parents.

Youth Interviews

Within the two youth interviews I conducted, I was able to get both a male and a female perspective on sexuality education in the Netherlands. The male was 22-year old Vincent, and the female was 18-year old Marijke. Both have lived in Amsterdam their whole lives, aside from attending college outside of the Netherlands. Their answers contained notable similarities, but also notable discrepancies.

Given the Netherlands relative fame worldwide for successful sexuality education programs, my questions were framed largely around the assumption that every student in all of Holland received the same curriculum, and that it started early and continued throughout all of one's schooling. Both participants were asked when their first experience with learning about sex and sexuality was, where it took place, and whom it was with, and both were quick to mention that it was not in school. Marijke said, "Honestly, I didn't have really a sex education class. When I was 13, I had biology and we had to learn about reproduction. ... I didn't gain a lot of information out of it. My teacher wasn't really comfortable talking about it, so he kind of rushed through the chapter." Vincent agreed with his sentiment, noting as well that he felt that it was focused primarily on prevention of STIs and unwanted pregnancy, and that it did not discuss communication or pleasure.

In addition to not feeling as though they got much sexuality education in schools, neither indicated much conversation with their parents. However, both seemed to feel

confident in their knowledge of sexual health and feel as though they got information when they needed it. When participants were asked if there were any questions they felt uncomfortable asking and therefore did not get the answers too during puberty, both said no. Marijke cited the Internet as a reason for this, as did Vincent: "I think for me it has been [the] Internet as a convenient source of information. In puberty, you would start to get interested and start asking questions like what is good and what is bad, and you could use [the] Internet as a place to get answers" (Vincent). Other sources of information included conversations with friends and influences from the media, such as safe sex campaigns on television.

Participants were also asked about how they saw the culture of sexuality in the Netherlands, and both Marijke and Vincent gave lengthy responses, indicating that the majority of their sexuality education is a result of the messages presented by the Dutch culture and media. They each felt that the Netherlands was more progressive than many other countries when it came to discussions of sexuality. Vincent said:

If I compare the culture of sexuality here to the sexuality culture in North America, I can safely say that here people are confronted with sex at a younger age, so it's easier to talk about it. For example, in Amsterdam there are sex shops and prostitutes, which show sex from a very progressive and liberal point of view, so it's not as much of a taboo as it is in North America. ... Over here, sex is confronted more, so people in puberty get to deal with it and gives them the impression it isn't wrong and it's part of life. Whereas in North America they try to [convey] it to teenagers that it is wrong to have sex.

This brings up something that must be recognized when discussing the culture of sexuality in the Netherlands: the recognition of prostitution as legal employment. Not only that, but Amsterdam's famous Red Light District is located in the heart of the city, instead of being pushed to the outskirts, as most other cities with red light districts have done. Whether or not it is accepted or respected by the citizens is a non-issue – at the very least, it sparks a discussion about what it means to be sexual at a younger age.

Marijke's response was similar, but it brought up a different aspect of Dutch culture: the health supports in place for youth. She said:

Talking about sexuality isn't a taboo here. You even have programs about sex and sexuality for adults. Also, in a lot of magazines for teenagers, there are pages about sex and sexuality [where] people can ask questions about sex. It could be very true that because of our liberal and tolerant view on sexuality, we have low sexually transmitted infections and teen pregnancy rates – not necessarily because of sex education in schools, but because there are a lot of advertisements on TV about safe sex and getting tested for STIs. When you're a teenager, each year you even get a box sent to your house where you can test yourself for Chlamydia.

Not only are teenagers provided with the tools they need to test themselves for STIs, but contraception is made available to teenagers much more easily than in many other developed countries. The cultural emphasis is placed on the need for practical prevention and personal responsibility, rather than abstinence as prevention.

At the end of the interview, participants were asked for their input on the creation of an informational website. As both had indicated that they used the Internet as a resource

when they had questions, they agreed that one website with almost all the answers would be an extremely helpful tool for youth, as long as it was anonymous. While Marijke focused more on the merits of the website being able to give information on preventing, identifying, and treating STIs, Vincent focused more on the ability to get information on how to pleasure one's partner. The variation in responses indicates that the website could be helpful on a variety of subjects and to a variety of people.

These interviews were imperative to the development of the website in order to gain insight from the target community: youth. In my interviews with developers, all of them noted the need to involve youth in order to get a result that will be utilized by them. The input I received from Marijke and Vincent was vital to the process of developing the website.

Parent Interviews

The parents that I interviewed were both mothers of two children who grew up in Amsterdam. Anna has a son and a daughter, aged 22 and 17, respectively; Fleur has a son and a daughter, aged 21 and 18. Both have spent the majority of their lives in Amsterdam, though both have also spent time living in different parts of the world. Both participants recalled their first experience with sexuality education being in school, around their freshman year of high school. At the time, it was typical to have a doctor or nurse come into the classroom to give you practical information on pregnancy and preventing it. For Anna, it was not extremely informational, but Fleur had a different experience that influenced her significantly:

There was this one very well informed girl that asked some questions that were very relevant about how the female body actually worked. There were only women there, otherwise the doctor wouldn't have said a lot. He was very technical, just to make sure that he told you about the way you got pregnant. I was in a Christian school, so we were not meant to have any sexual experience before we got married, and that could be a very long time. It was more preventative than educational, but because this one girl was asking about it, it was informative – she was asking about [masturbation] and what that was doing to your body and if it was risky or not. Because of that, all the girls who knew nothing about anything got their information. ... If she wouldn't have been there, it would have taken years for me to find out.

Having that experience influenced how Fleur saw sexuality, as well as how she desired to raise her own children. She expressed that she never wanted her children to feel ashamed of their bodies or nudity or asking questions. Her first experience with sexuality education, she said, “was very important.”

When it came to talking about sexuality with their children for the first time, both participants said there was not much of an explicit conversation. Anna stated, “I found that my children got their sex education in school and I hardly had to tell them anything. They sort of figured it out for themselves whenever they were ready.” She was confident that her children were equipped with adequate information regarding sex and sexuality. Anna noted that she did have conversations with her children about sexuality as issues arose, such as with her daughter about getting the human papillomavirus (HPV) vaccine:

The first round, we let it go – she was maybe 15 or something. Then again they wrote a letter saying, “you haven’t had this vaccine yet, you should do it.” So then I said, “listen: this is something that you are more prone to get when you have multiple sexual relationships. Are you thinking that you will go to bed one week with this one, then the next with that one?” and she said, “no,” and I already knew that because I know [what she’s like]. So then we decided not to do it, so she didn’t have the vaccine.

She felt that her daughter seemed quite comfortable talking with her, and that it was fine to have periodic conversations instead of long, explicit talks.

Fleur expressed focusing on sexuality more when her children were younger: “With [my daughter], we’d sit downstairs at the mirror and spread her legs and show her, ‘this is what your body looks like.’ When they get to be around 10, they really develop a sense of shame; they felt that this wasn’t something they wanted to talk to their parents about.” She also trusted that her children were receiving sexuality education in school, and she knew that her daughter had other adults to talk to who were “less threatening than we as parents were,” whom Fleur trusted as well.

When asked to describe the culture of sexuality, both of them acknowledged that there were two sides to the issue, and that it also depended on where in the Netherlands you were. Both noted that “different groups” have different opinions, especially in the southern part of the country. In general, there was an implication that laws regarding sexuality are quite liberal, whereas the people are often more conservative. However, in Amsterdam, both acknowledged a pretty liberal environment. Fleur stated that there “is a lot of explicitness about sexuality in the public space, which makes it easier to discuss

things.” The presence of nudity in advertisements, as well as the presence of prostitutes in the Red Light District windows, opens up a lot of conversations between children and parents about sexuality.

They agreed that the website would be a good tool for educating youth today, both emphasizing the advantages of anonymity and being able to ask questions without the fear of being persecuted, by friends or by teachers. Fleur said:

They find that the anonymity of asking for help through the Internet is very helpful also in psychiatry support of young people. The main difficulty would be how to reach kids that are actually looking for help so they know where to find you. And here, I think the climate would be much more supportive of a website like this. ... I think, on average, people think it's important that kids have access to information on sexuality – it's more that they might be embarrassed to be the person to transfer it.

Many parents or even teachers feel uncomfortable talking to students about sexuality because it is a sensitive topic or because they do not feel they are equipped with the necessary information. Therefore, a website is a good tool for reaching youth.

Anna agreed: “[A website] is a very anonymous way of checking certain things, and you can put everything on it, like homosexuality and health issues and general emotional questions, which you can answer. I think that's a very good tool,” She also said it could be helpful to parents who are looking for information on talking to their child about sexuality, or who want to refer them to a website where they can find the information on their own. The support from parents for a website of this nature appears to be great; Fleur suggested as well that I use doctors and teachers to get the word out about my site.

These interviews gave me a unique look at how children are educated from a young age on issues of sexuality. Parents were able to talk about education done before their child's working memory, though equally as influential. Their voices were key to consider in defining a "Dutch approach" to sexuality education and ultimately in the creation of an informational website.

Defining the "Dutch Approach"

From all three clusters, major themes can be drawn out in order to create a working definition of the "Dutch approach" to sexuality education. Though the sentiments expressed by the participants varied at times, many of them used the same words or phrases to describe how they see the culture of sexuality and of education in the Netherlands. From this research, I was able to extract three ideas that were communicated by all parties: approaching sexuality education with respect of the students and acceptance of their sexuality; recognizing the positive aspects of sexuality before the negative ones; and emphasizing person decision-making and responsibility.

My definition of the Dutch approach was bolstered by the one defined by the Rutgers Nisso Groep, published in their pamphlet, *Young and Sexual*: "The Dutch Approach is based on accepting young people as sexual beings ... The value of rights, responsibilities and respect underpins the social philosophy of young people's sexual and reproductive health in such a way that young people are given the chance to shape their own lives and futures" (Massaut 20-21). This definition provides me with a philosophy that I can use in creating a website for American teenagers.

How this Became More Than Just Biology

This research indicates a demand for responsible sexuality education websites that allow teenagers to get answers to their questions in an anonymous way. More and more research is showing that the messages being sent by abstinence-only classroom-based sexuality education are not lining up with the behaviors of American teenagers. In an increasingly technology dependent world, it is imperative that we look for new forums to educate youth in ways that are relevant to their lives and accepting of their reality as sexual beings living in a hyper-sexualized culture. The more youth are educated, the more they are able to make informed decisions about their lives and bodies.

I set out to create an informational website for American teenagers on lifelong sexuality and health, modeled after the Dutch approach. In addition to using my personal interviews as a guide, I looked at some of the sexuality websites existing for Dutch youth. After consulting many different websites, I kept being pointed back to *Sense.info*, a website developed by Rutgers Nisso Groep for Dutch youth. To navigate the site, I employed some personal translations, but primarily relied on Google Chrome to translate adequately.

The first thing I felt was necessary was to decide what content would be on the website and how it would be broken up. To do this, I looked at the themes that Ferguson, Vanwesenbeeck, and Knijn pulled from the “Long Live Love” program – physical and emotional sexual development; reproduction; “weebaarheid” or “interactional competence;” relationships; sexuality; and safe sex (98-100). I also looked at the different sections on *Sense.info* – love and relationships; girls’ bodies; boys’ bodies; lovemaking; bad experiences; culture and faith; sex and the Internet; contraceptives; pregnancy; and STIs. It also had pages for asking questions, a glossary, and a page of links to other Internet

resources. A lot of interactive components are featured on this page – such as an interactive “discover your body” where you can undress male and female figures, and click on different body parts to learn about them – that I will not be able to replicate on mine in time for the completion of this project.

Taking this information, I chose to make sure the following sections were included in the first publication of my website – development; reproduction; sexuality and gender; relationships; and sex. In addition to these pages, I included a place to ask questions, a page where frequently asked questions are answered, and a resources page. The frequently ask questions page is a portion of the site that remains undeveloped at this stage. The resources page was created with the intention of providing more information on subjects that were only covered briefly due to my knowledge and time constraints.

In order to keep the project attainable, I decided to exclude a page for parents on speaking with their young children or teenagers, as well as a page to quiz one’s knowledge on sexuality. I also wanted to include a page for religious youth to utilize, similar to Joke and Christa’s site; however, they noted that it would be difficult to attract them to my website at all, due to the presence of diagrams of genitals and other sexually explicit information. Since I did not have the time to interview religious youth, I did not feel it was appropriate for me to develop a whole section on it at this time. More interactive activities, as well as more information on a variety of subjects, such as religion, will be kept in mind as the site grows.

The first page I wrote was the “development” section, and, in addition, it turned into writing the “reproduction” section quite quickly. This development section covers the physical and emotional changes during puberty for boys and girls. It includes a diagram

and explanation of both male and female genitals. This page also covers masturbation and nocturnal orgasms. The reproduction page covers how babies are made and the different ways parents can go about having children. It includes a diagram and explanation of both male and female internal reproductive organs. I included colloquial words and slang in parenthesis, to ensure the reader could connect words they may have heard to their official terms. These were the two easiest sections to write, as it is very basic and based in explaining anatomy and physiology.

Next, I went about writing the “sexuality and gender” section. I was careful to make a distinction between *gender* and *sex*, and was sure to mention being straight, gay, lesbian, bisexual, transgender, and intersex. I also looked at various websites existing in the United States on these topics, and located places online where youth could go to type in their zip code and find support in their area. My goal was to approach this section with as little heteronormativity as possible and provide as many resources for questioning youth as possible.

The fourth page I tackled was the “relationships” section. This is where I really developed the idea of communication and responsibility. This is the part of the website that most American sexuality education programs and websites are lacking. I emphasized the need to know yourself, your values, and your boundaries. It then goes on to suggest ways in which to flirt and begin relationships with others, as well as ways to keep relationships going, or end them if one needs to. Here, I included activities adapted from both American and Dutch ideas on identifying one’s values and boundaries.

The “sex” page was the most difficult to take on, as it had to cover the topics of pleasure, contraception, STIs, and unwanted pregnancy. An enormous part of the Dutch

approach is putting pleasure first and the risks second when it comes to sex. I made sure to address pleasure myself, and then created separate sections for information on safe sex, contraception, STIs and HIV, and unwanted pregnancy. The contraception and STI/HIV pages provide a short introduction section, and then link to other reputable websites with factual information. Eventually, these pages will be written by me and hosted on this page.

To make the “resources” page, I focused on looking for websites that filled the gap in information in my website. This included links to sites on sexuality and religion, LGBTQ center locators, free clinic information, abortion provider locators, and a reputable existing FAQ page. These same resources are listed at the bottom of the sections where they are brought up; for example, there are links to LGBTQ websites at the bottom of the “sexuality and gender” section.

In many ways, the information currently on the website just barely begins to scrape the surface; though it serves youth by referencing them to other websites with information, it could provide more information on its own. I hope in time that it will, and that *More Than Just Biology* will continue to grow and develop.

Conclusion

More Than Just Biology is intended to provide American youth with accurate information on lifelong sexual health, based on the “Dutch approach” that has been found to be rooted in respect, positivity, and empowerment. Research continues to show that American youth are choosing to have sex before marriage, and the rates of teen pregnancy and STIs prove that many are not making informed or safe choices. With the increasing reliance on new technologies and the Internet, it is imperative that educators look for new ways to communicate with youth on the issue of sexuality and sexual health. Many existing websites for youth in the United States are outdated, hard to navigate, gendered, based solely on prevention, or only talk about abstinence. In order for youth to make good decisions, they must be informed on all their options and make choices based on what they are feeling, not on what they are being told. Their experiences must be validated and respected. Creating *More Than Just Biology* was my way of adapting the Dutch approach for the United States.

This website will always be a work in progress, and it is by no means perfect. The research was limited and would greatly benefit from including more participants, being conducted in one’s native language, and employing a variety of methodologies for gathering information. Further research in the field of the Internet as a tool for education in general is necessary. The more it is proven to be effective, the more it will be utilized to reach youth on a myriad of issues. Technology will only continue to develop, and it is extremely important that educators keep up; hopefully, *More Than Just Biology* will continue to develop and grow as well.

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Appendix A: Interview Guides

Developer Interview Guide:

- What is your (or your organization's) philosophy on sexuality education?
- Describe the process of developing sexuality education curriculum - who do you talk to? How is research conducted? How is it finally decided what is or is not included in sexuality education? What is the biggest challenge you face in developing curriculum and educating youth?
- How do you see the culture of sexuality in the Netherlands? Do you think the low STI and teen pregnancy rates are due to sex education in schools or the cultural approach to sexuality? Are people very open about teen sex, contraception, and abortion?
- What is the biggest problem that you see with youth and sexuality today? What do you think the key is to getting youth to take sexuality education seriously? What do you feel is the best way to reach youth?
- In terms of creating a website, what are the qualities that it must have to be utilized by youth and accepted by parents?

Youth Interview Guide:

- Describe your first experience with learning about sex and sexuality. Was it in school or from your parents? Do you feel you it came early enough? Were there any questions that you were uncomfortable asking?

- Where do you feel you learned the most about sexuality – school, your parents, the media, your friends, magazines, television, the internet, etc.? Do you feel as though it was a reliable source of information?
- How do you see the culture of sexuality in the Netherlands? Do you think the low STI and teen pregnancy rates are due to sex education in schools or the cultural approach to sexuality? Are people very open about teen sex, contraception, and abortion?
- Would you have used (or did you use) a website as a young teenager to receive information on sexuality? What qualities would have attracted you to this website? What must a good website for teens contain?

Parent Interview Guide:

- Tell me a little bit about your experience with sexuality education as a child. Did you receive it from your parents or school first? From your friends? Was the culture of sexuality any different then?
- How was your first experience with talking to your children about sex and sexuality? Was it prompted by an unexpected question from them? Was there an ongoing conversation? Were you comfortable talking to them?
- What would you say your philosophy about educating your children on sexuality is?
- How do you see the culture of sexuality in the Netherlands? Do you think the low STI and teen pregnancy rates are due to sex education in schools or the cultural

approach to sexuality? Are people very open about teen sex, contraception, and abortion?

- Would you have used a website as a young teenager to receive information on sexuality? What qualities would have attracted you to this website? Do you think it is a good tool for educating youth today? What must a good website for teens contain for it to be approved by both parents and children?

Appendix B: Website Text

Welcome! This is an informational website on all things related to sex and sexuality. It covers everything from puberty to baby making to falling in love to masturbation. You can click on one of the tabs above to get information and resources on a certain topic, or you can click through the articles and pages below. Have a question? Just hit the "ask" button above. It's completely anonymous and totally safe; just check back in a few days for your answer.

Development

There's a good chance that you've noticed some changes in your body. These changes are different for almost everyone, especially between boys and girls. There is nothing to be scared of - everyone goes through these changes. Some start early, and some start late. A great way to get answers to questions is to talk to an adult you trust, because, believe it or not, they went through puberty, too.

That's what this time in your life is called: **puberty**. It is a very exciting time, because it signals the beginning of your development into an adult; it can also be a very emotional time because of all the **hormones** in your body and the changes in your life. The most important thing to remember is that you are not alone, and if you have a problem, someone else in the world has probably had the same one.

Before we go any further, you should take a look at these diagrams of both boys' and girls' **genitals** (or *private parts*), as well as a brief explanation of what happens to each during puberty. Its good learn about both! Click [HERE](#) to go to the boys' page and [HERE](#) to go to the girls' page.

Puberty usually begins between the ages of 8 and 16, and it typically starts earlier for girls. During puberty, hormones are produced within your body; for girls, the hormone is primarily **estrogen**, and for boys, it is primarily **testosterone**. The changes that occur in your body are due to these hormones. During puberty, both boys and girls get taller, have voice changes, get acne, and start having sexual feelings. Boys become more muscular, and they begin to grow hair on their face, back, chest, and around their penis. Girls' breasts get bigger, and they begin to grow hair around their vagina. Around this time, girls also begin to **menstruate** (or *get their period*), which you can learn about in the girls' section.

If you are a boy or a girl, you may have begun to feel things that you have never felt before, like tingling or excitement around your genitals. This is completely normal. There are lots of nerve endings in both male and female genitalia, and with enough stimulation, both can have orgasms, too. An **orgasm** is something that happens with your body when it is at the peak of its sexual arousal. During sexual arousal, your heart and breathing rate will go up, and you might even get sweaty. A girl's nipples will become hard and their vagina will become self-lubricated (or *wet*). A boy's penis will become erect and he can **ejaculate** (or *come*). Ejaculation is when semen is released from the penis. Both boys and girls can have nocturnal orgasms (or *wet dreams*). This is an orgasm that occurs during your sleep, without your knowledge or control.

There is nothing wrong with giving yourself an orgasm, either intentionally or not. Giving yourself an orgasm intentionally is what we call **masturbation**. You may have heard that it will make you grow hair on your hands or make you go blind, but those are just silly myths. In fact, it has been proven that it is a good way to release stress. It is also a great way

to know what makes you feel good, and it gives you an idea of whether or not you would be comfortable having someone else give you an orgasm.

Boys' Development

This is what boys' genitals look like from the outside. Remember that this is just a diagram, and that everyone's body looks a little different! (Image: AVERT.org.)

The **penis** and scrotum hang between boys' legs. The **shaft** is the part of the penis that becomes erect (or *hard*) when a male is sexually aroused. The **glans** (or *head*) is the part of the penis at the tip of the shaft, and it is the most sensitive part. It is filled with nerve endings, and stimulation of those nerve endings can result in **orgasm** and **ejaculation** (or *coming*). The **scrotum** is situated behind the penis, and that is the sac in which the **testicles** (or *balls*) sit; it protects the testicles from becoming too hot or too cold. We'll talk more about the testicles when we talk about [REPRODUCTION](#). Though it is not pointed out in this diagram, the tip of the penis has an opening for urine and **semen** (or *jizz*); men also have an **anus**, which is a small, tight opening located behind the scrotum. Feces leave the body through this opening. Some people also like to have anal sexual intercourse.

During puberty, boys' testicles will grow, and they can also get erections (or *boners*) at unexpected times. It isn't something that can be controlled, and it's nothing to be embarrassed about. Boys might notice that their erections are not straight or worry that they are not big enough. This is not something to be worried about - everyone is different and nothing is right. The average American male penis size erect is about six inches. Some boys also worry about urinating during masturbation or intercourse; however, when the

penis becomes erect, it blocks the tubes that release urine. Therefore, it is very difficult for men to urinate when they have an erection.

If an unexpected erection happens to you, there's not much that you can do to make it go away. To make it less noticeable, try sitting down and covering it with a bag or a book until it goes away. Concentrate on something else and take a deep breath - it happens to all men.

Girls' Development

This is what girls' genitals look like from the outside. Remember that this is just a diagram, and that everyone's body looks a little different! (Image: AVERT.org.)

This is called the **vulva**, though you've probably heard it called the **vagina**. The vulva is the name for all the parts we can see with our eyes - the vagina is actually inside the girl's body. The **labium major** and **labium minus** (often just called the labia, or *lips*) serve to protect the urethra and vaginal openings, as well as the clitoris. The **urethra** is an opening where urine comes out, and the function of the anus is the same for women as it is for men. The **vaginal opening** is visible only when the labia are parted, and it is an entry to the **uterus** (which you can read about in the reproduction section). The walls of the vagina are rings of muscles, filled with nerve endings and blood vessels. The **hymen** is a thin tissue membrane that covers the vaginal opening, though not entirely. Most girls are born with them, although some are not. It can break for many reasons - gymnastics, horseback riding, use of tampons, or sexual intercourse. The **clitoris** is located where the labium minus connects. It is packed with nerve endings, and stimulation can result in orgasm.

Though they are not part of her genitals, women also have **breasts** (or *boobs*). They can vary greatly in size - bra cup sizes range from 28AA (the smallest) to 50N (the largest).

Some girls worry about the shape or size of their breasts, but nothing is normal or right. Breasts can produce milk through the nipples after pregnancy. The **nipples** are extremely sensitive, and can become hard upon touch or if it is too cold. The **areola** is the dark skin that surrounds the nipple, and it can vary in size and color. It is important for girls to feel their breasts occasionally so that they know what is normal; later in life, it is important to do self-breast examinations.

The start of **menstruation** is also a big part of puberty for girls. After this, the only times in a woman's life when she does not get her period is during pregnancy and after menopause. Once a girl has had her first period, the lining of her uterus is always prepared for pregnancy; if a pregnancy does not occur within a menstrual cycle, the lining breaks up and is shed through the vaginal opening.

If it is your first time getting your period, you should know that getting your period is not something to be embarrassed about. Since all women menstruate, over half of the world's population has dealt with it at some point in their lives. In order to keep your clothes (and body) clean, you can use tampons, pads, or a menstrual cup to soak up or collect the blood. Talk to an adult you trust about getting something that is comfortable for you.

Reproduction

At some point in your life, you probably asked your parents where babies come from. They may have told you something different from what your friend's parents told me; they may have told you something different when you were six than they told you when you were twelve. As you become an adult, it's important to know exactly what reproduction is and how it works.

Before we go any further, you should take a look at these diagrams of both male and female reproductive organs. It is good learn about both, and you'll need to know the terminology in order to understand the explanation below. Click [HERE](#) to go to the male page and [HERE](#) to go to the female page.

Babies are created when the man's sperm meets the woman's egg - this occurs usually during [SEXUAL INTERCOURSE](#). It will only happen if the woman is **ovulating**, meaning an egg has been released from her one of her ovaries. When the man ejaculates into the woman's vagina, millions of tiny sperm travel through the opening in the cervix, through the uterus, and up to the fallopian tubes. During this process, many of the sperm die or do not make it up to the egg. Only one sperm can enter the egg. **Twins** (or triplets, or quadruplets, etc.!) are born when a sperm fertilizes an egg, but it breaks into two embryos - these are *identical twins*. Sometimes, two eggs are released from the woman's ovary instead of one, and if both eggs become fertilized, they will be *fraternal* twins.

Once the egg has been fertilized, the woman will no longer get her period, and a baby will begin to grow. It takes about nine months for babies to become fully developed, and it is important that mothers stay healthy and take care of themselves. If a baby is born before nine months, they are called **premature** and they often need to stay in the hospital for some extra care.

There are other ways for a woman to become pregnant. **In-vitro fertilization** is when the egg from a woman is fertilized by the sperm from a man outside of the body in a special fluid. The eggs are then implanted in the woman's uterus, and allowed to grow. Because of the success rate, women often implant more than one egg, which leads to a higher likelihood of twins. If a woman is unable to carry a child on her own - for instance, if

in-vitro fertilization does not work for her body, or if there are other medical reasons - she might look for a **surrogate** to carry the baby through pregnancy for her. Because only a man and a woman can create a baby, these are great options for two men or two women who want to have a child together. There is also always the choice of **adoption**, where the birth mother has chosen to give her child a life with a family who, for whatever reason, is better equipped to take care of them.

Male Reproduction

These are the internal organs involve with reproduction for men. Remember that this is just a diagram, and that everyone's body looks a little different!

(Image: HowStuffWorks.com.)

As we mentioned on the [BOYS' PAGE](#) for development, the testicles are where testosterone, as well as **sperm**, are produced. When a man is sexually aroused and his penis is being stimulated, sperm gather in the testicles to be released. As the millions of tiny sperm leave the testicles through the **vas deferens**, they are mixed with fluid from the **seminal vesicles**. This fluid gives the sperm energy to get to the egg. Now, the fluid is called **semen**, and it leaves the penis through the urethra. In order to create a baby, the semen must be released into a woman's vagina, at the base of her **uterus**. You can learn about the uterus and the other female reproductive organs on the [GIRLS' PAGE](#). To learn about how babies are actually made, return to the [REPRODUCTION PAGE](#).

Female Reproduction

These are the internal organs involved with reproduction for women. Remember that this is just a diagram, and that everyone's body looks a little different!

(Image: HowStuffWorks.com.)

As we mentioned on the [GIRLS' PAGE](#) for development, the vagina provides an entry for sperm into the **uterus** (or *womb*) through the **cervix**. The cervix is located at the base of the uterus, and it has a small hole, which is how sperm gets to the **ovaries**. The ovaries are located slightly above the uterus, and are connected by **fallopian tubes** (here marked as the "oviduct"). Each month, an egg is released from one of the ovaries into the fallopian tubes - this is called **ovulation**. If a woman has unprotected sexual intercourse during ovulation, there is a very good chance the egg will become **fertilized**, and the woman will become pregnant. If the egg is not fertilized, the woman will have her period. You can learn about sperm and the other male reproductive organs on the [BOYS' PAGE](#). To learn about how babies are actually made, return to the [REPRODUCTION PAGE](#).

Sexuality and Gender

There's a good chance that you've heard the terms "straight," "gay," or even "LGBTQ" before. These words are used to talk about someone's **sexual orientation**. Sexual orientation refers to whether you are attracted to people of the opposite gender, the same gender, both genders, or no genders. It covers a wide range of people and desires, and you shouldn't feel like you have to define yourself right away, or even at all; however, sexual orientation is a personal matter, and you should put some thought into it!

Being attracted to people of the opposite gender is called **heterosexuality** (or *being straight*). Being attracted to people of the same gender is called **homosexuality** - men are often referred to as *gay*, and women are often referred to as *lesbians*. Being attracted to people of both genders is called **bisexuality**. A lot of people also identify as **queer** for a variety of different reasons. The term **LGBTQ** comes from lesbian - gay - bisexual - transgender - queer (or questioning). Transgender is discussed further down on the page.

Though we don't often see portrayals of gay people in the media, there are millions and millions of gay people all over the world. Many centers, clubs, and communities exist to give people who identify as LGBTQ a space to share experiences and get information. Telling friends and family that you are *gay* (or *coming out*) can be a big part of one's life, and there are lots of resources to help you with this. You can find them at the bottom of this page.

It is also important to address the difference between sex and gender. **Sex** refers to the biological characteristics presented through reproductive system, sexual organs, hormones, chromosomes, etc. **Gender** refers to the social construct presented through roles, social norms, expectations, clothing, colors, body language, etc. Most people who have male chromosomes identify as male, and most people who have female chromosomes identify as female. However, there are some exceptions, and it is important to be educated. If you feel like this sounds like you, you can find resources at the bottom of this page.

Some people are born with male parts, but feel on the inside that they are female (or vice-versa); these people often identify as **transgendered** and sometimes they undergo hormones or surgery to change their anatomy. Some people are born with both male and female parts; these people often identify as **intersex**, and sometimes they undergo surgery

to change their anatomy as well. This is often done when children are born, but, when left up to the child, it sometimes is done later in life. Some people who are transgender or intersex don't identify as LGBTQ, and some do, but it is important not to make assumptions or feel pressured into being a certain way.

Going to LGBTQ clubs or centers is not only a great way to get more information on gender and sexuality, but it is a wonderful place to meet people who are LGBTQ and have gone through (or are going through) similar things as you; never underestimate the importance of talking about your experiences with others.

Relationships

Relationships are a big part of our lives. We have them with everybody and they are all different - your parents, your friends, your significant other, your teachers, your doctor, your siblings, your employer. It is more than likely that you treat everyone of those people differently, and you may tell one of them something you wouldn't tell the other. However, the most important relationship you will have in your life is the one you have with yourself, because that one you will be in forever. In order to be happy in all your other relationships, it is important that you are first happy with yourself.

Values are something that everyone has, whether they are conscious of them or not. It's good to know what your values are so that you can be aware of the effects that they have on your life and your sexuality. They are not set in stone, and they are influenced by a variety of factors. Click [here](#) for an activity that will help you identify your values. **Boundaries** are also something that everyone has, and many people do not know where their boundaries are, simply because they have never been tested. When it comes to

issues of sexuality, it's important to know what you are and are not comfortable with sexually. Click [here](#) for an activity that will help you identify your boundaries.

Now that you have identified your values and boundaries, it is important to know how to convey those to other people. **Communication** is the basis of every interpersonal relationship that you have, and it is important that you feel comfortable communicating your opinions, values, and boundaries to others. In order to be happy in relationships - especially sexual ones - you need to be able to tell others what you want or need (and to do that, you need to know yourself!). It isn't always easy at first, but if you make it a priority in your life, it will become easier.

Your teens are a great time to develop relationship skills, and you may have already been in a relationship. If you haven't, don't feel any pressure to be in one - your teens are also a great time to discover and develop who you are. At some point in your life, you may find someone that you are attracted to and want to start a relationship (or just a conversation) with. It is very exciting, but also very nerve-wracking. Click [here](#) for suggestions on flirting and starting a relationship, as well as maintaining it, and what to do when it ends.

Values Activity

This activity is intended to help you identify your values and acknowledge the ways in which they affect your life. Below, you will find 10 values listed. Think about what is included in each, and number them in your head 1 through 10, with 1 being the most important value and 10 being the least. If you're with a friend or a family member, have

them do the same. Do you have different values? Think about what your grandmother or cousin or teacher's answers might be - what about the president's? What about the pope's?

- *Beauty*
- *Family*
- *Popularity*
- *Love*
- *Rights*
- *Religion*
- *Education*
- *Health*
- *Money*
- *Friends*

Even if you did this activity alone, you can probably tell that everyone has different values; what would be the most important to you might be completely different from the person sitting next to you. And that's great, because it keeps the world an interesting place. It is important that you respect other people's beliefs and values just the way that you would expect them to respect yours.

Boundaries Activity

This activity is intended to help you identify your values and acknowledge the ways in which they affect your life. Below, you will find a series of statements. Ask yourself whether or not you agree with them. If you want, you can even print it out, write the

answers down, and keep it with you. Remember that some of your boundaries may change as you get older and develop, but some may not.

- *I am comfortable with talking with people of my own gender.*
- *I am comfortable with talking with people of the opposite gender.*
- *I am comfortable with playful teasing.*
- *I am comfortable with laughing at myself.*
- *I am comfortable with being the center of attention.*
- *I am comfortable with people touching me affectionately (like hugging).*
- *I am comfortable with telling people when I have a problem with them.*
- *I am comfortable with being told that someone has a problem with me.*
- *I am comfortable with flirting with people I am attracted to.*
- *I am comfortable with being flirted with.*
- *I am comfortable with going out on a date.*
- *I am comfortable with kissing someone or being kissed.*
- *I am comfortable with having my shirt off in front of my partner (and vice-versa).*
- *I am comfortable having my pants off in front of my partner (and vice-versa).*
- *I am comfortable having my genitals touched by my partner.*
- *I am comfortable touching my partners genitals.*
- *I am comfortable with having sexual intercourse.*
- *I am comfortable with expressing what I want in sex.*
- *I am comfortable asking what my partner wants in sex.*

Maybe you are not comfortable with any of these things; maybe you are comfortable with all of them. Maybe you haven't thought of many of these things before;

maybe you have thought about them a lot. It doesn't matter, and as we've stated, your feelings will change. It is important that you are thinking about them now. You can think of other statements and add them to your own personal list.

Beginning, Being In, and Ending Relationships

The beginning of any new relationship is an exciting time, but it can also be a stressful one. You're always thinking of what to do to get the other person's attention or get them to like you. Here are a few suggestions for dealing with your emotions and starting out your relationship:

- *Be yourself: the most important! You want the person you're with to like you for you.*
- *Take an interest in something they do and ask them about it. Are they a great dancer? Writer? Golfer?*
- *Compliment the other person and generally be friendly; touch them affectionately if they seem comfortable.*
- *Ask them to do things with friends to get a sense of how they feel about you.*
- *Talk to them on Facebook, Skype, or on the phone and get to know them through interacting. Lots of relationships start as friendships!*
- *If they seem to like you, ask them to do something that you both enjoy just the two of you.*

During everyone's life, they face rejection from someone that they like. It's not any fun, but it happens, and the most important thing is to not take it personally or let it effect future relationships. However, it is just as common that people aren't rejected, and a relationship begins. Once you're in a relationship, there are lots of ways to keep it going:

- *Be honest with each other and make sure your lines of communication are open.*

- *Trust each other and try not to be jealous of other people in their lives.*
- *Support each other when one of you is having a bad day or a hard time; show up to events that you know are important to them.*
- *Respect each other's opinions and engage in intellectual conversations about your differences.*
- *Become close with your partners friends, and let your partner become close with your friends.*
- *Make sure you spend time alone and do thing independently; it will help you appreciate your time together more.*
- *Surprise each other and continue to compliment each other and go on dates.*
- *Decide whether or not your relationship is going to be monogamous (just you two) and keep it that way; don't disrespect the other person by cheating.*

Being in relationships as a teenager helps you develop the skills you need to be in relationships for the rest of your life. Don't let adults underestimate the importance of your relationship or the power of young love! However, not every single relationship was meant to last forever; many of the relationships in your lifetime will end, and that is always hard. Break-ups are difficult, and they can really effect you, but just because they are sad doesn't mean relationships aren't worth having. Here are a few suggestions as to how to deal with break-ups:

- *Count on your friends; if you feel like you need to get something off your chest, then do. Friends are very good at seeing things that you can't see about yourself or your relationship.*

- *If you did the breaking up, give the other person their space. You may want to be friends with them or make sure they're okay, but they probably need some time.*
- *If you were the one broken up with, give the other person their space. You don't want to beg someone to be with you, and if you get angry, it will only make things harder in the future.*
- *Keep yourself busy with your normal activities, and try to get lots of exercise and sunlight. Activities keep you distracted, and the endorphins released during exercise and the vitamins you get from the sun are great for you.*

Sex

Sex. You've probably heard about it a lot, and you've probably heard it called a lot of things. No matter how you look at it, sex is everywhere. Our culture tells us it's not okay to talk about it, but we encounter it (and think about it) every day. Sexual desire is human nature, and the only way to get rid of the bad messages in the media is to start a positive dialogue about sexuality.

There's only so much that we can tell you about sex, because most of sex is pretty personal and how you see it completely depends on who you are. For starters, a lot of people enjoy having sex with someone they know very well the best (especially for the first time). It's up to you to decide who you want to have sex with, but the most important thing is that you feel comfortable, safe, and protected with the other person. Sex can be very enjoyable, but there are also risks involved that you need to be fully aware of before you decide if or when you become sexually active. Choosing not to be sexually active is called **abstinence**, and it can mean different things to different people. For some, abstinence

means you will not have intercourse; for others, abstinence means you will not do anything sexual at all. And it doesn't always mean until marriage; sometimes it just means until you're ready. It's all up to you, but make sure you and your partner are able to communicate on this topic.

There are lots of sexual things that you can do without having sex: kissing, massaging, cuddling, mutual masturbation (*fingering* or a *hand job*), oral sex (*giving head*)... if you've never done any of these things, don't worry! During **mutual masturbation**, the penis or the clitoris is stimulated or rubbed by another person's fingers; during **oral sex**, the penis or the clitoris is stimulated by another person's mouth or tongue. It's hard to say what to do, because the best way to figure out how to pleasure someone else is to ask them what they like; you can also watch their body language for clues as to how they are feeling.

So what are some of the risks? The big ones are unwanted pregnancy and **sexually transmitted infections** (or *STIs*) & **HIV/AIDS**. As long as you practice safe sex, you should be able to avoid these things. What exactly is safe sex? Click [HERE](#) to get some answers. After reading the [REPRODUCTION](#) section, you know that pregnancy happens when sperm fertilizes an egg; in order to prevent this from happening, you have to use **contraception**. You can learn all about contraception and unintentional pregnancy [HERE](#). STIs occur when one person with a contagious virus or bacteria passes it on to another person through sexual contact. There are many different kinds - some are curable, some are not. Though HIV/AIDS isn't technically an STI, it can be protected against in many of the same ways. It has been a hot topic over the past three decades with a lot of misconceptions. HIV causes AIDS, and neither currently have a cure. You can learn all about STIs and HIV/AIDS [HERE](#).

What is safe sex?

We've talked a lot about having safe sex, but you might not know what that means. When we say "safe sex," we mean that you feel comfortable, respected, and protected by a condom and, if it is heterosexual sex, a hormonal method of contraception, like the pill. Condoms protect you from getting STIs and also helps protect you from getting pregnant; however, it's always good to have a "back up" method as well, that is there solely to prevent pregnancy if the condom fails. With typical use, condoms are only effective about 92% of the time, so it's important to have the pill or something else in case of that 8%. Everyone should know how to use a condom, and how to turn it into a **dental dam** (protection for women while receiving oral sex) - check out ScarleTeen.com for now for more information on how to store and put on condoms. Below, we have put together two lists: one that goes over things that are unsafe, and one that goes over things that are safe.

Unsafe:

- *Having sex without a condom and a hormonal method*
- *Having anal sex without a condom or lube*
- *Performing or receiving oral sex without a condom or a dental dam*
- *Using a sex toy that has not been properly cleaned*
- *Having sex with the same condom twice*

Safe:

- *Having sex with a condom and a hormonal method*
- *Having anal sex with a condom and extra lube*
- *Performing or receiving oral sex with a condom or dental dam*

- *Using a sex toy with a condom that has been properly cleaned*
- *Kissing, cuddling, fondling, massaging, fingering, hand jobs*

Contraception and Unintentional Pregnancy

Contraceptives have existed in many ways and in many cultures for centuries. With all the advances in science and medicine over the years, hormonal contraceptives are more reliable, easier to take, and have less side effects than years ago. They're even working on developing a contraceptive pill for men to take. Right now, the only male contraceptive is a condom (and that's more than just a contraceptive, because it's the only thing that protects you from STIs and HIV). You can learn all about condoms over at ScarleTeen.com for now. There are lots of options for women, and they affect everyone differently. That's why you have to go to a doctor to get most of these prescribed. You can always go to a free clinic if you do not feel comfortable going to your regular doctor.

No matter how careful you are, there's a chance that something will fail. If your birth control method fails and you are 17 or older, you can get **emergency contraception** (or *EC*) over-the-counter in a drugstore. It can be a little expensive, but it is up to 89% effective at preventing pregnancy. It's also important to know that it's not the "abortion pill" - if the egg has already been fertilized, this will have no effect. "Plan B" is the most commonly known EC pill. If you do become pregnant unintentionally, you have two options: continue (raise the child or open up to adoption) or terminate (have an **abortion**). Depending on your personal values and where you are in your life, your choice may be different. What's important to know is that this is a very big choice, and it's for you to make. The best thing to do is to talk to your partner, a friend, or an adult you trust, and then get into a

professional as soon as possible. They know all the facts and will help you immensely in your decision.

For more information on pregnancy prevention, contraception, and unwanted pregnancy:

People:

- School health center
- A free clinic (find one at HRSA.gov)
- An abortion clinic (find one at AbortionClinic.org)

Websites:

- PlannedParenthood.org
- AmplifyYourVoice.org (abortion)
- AmplifyYourVoice.org (contraception)

The best thing to do if you want to get prescription contraception or think you are pregnant is to go to a professional. Take your partner or a close friend if it makes you more comfortable. Your doctor is required to keep your conversations confidential, and they are extremely helpful in answering questions and talking to you.

STIs and HIV/AIDS

Sexually transmitted infections (STIs) have been around for a very, very long time. Fortunately, modern medicine and science have given us the opportunity to learn new things about how to prevent, treat, and cure some of them. It's important to know what the various types of STIs are, and as well as which ones can be cured and which can't. There are over 18 million new cases of STIs per year, and 9 million of those are youth aged 15 to 24.

The only way to stop yourself from being another number is to be educated and be protected. Learn all about STIs over at [AmplifyYourVoice.org](https://www.amplifyyourvoice.org) for now. It's also extremely important that you get tested - it's recommended that you get tested once per year if you are sexually active. This keeps you and the people you are sleeping with protected and empowered. You can ask your doctor for one. Many women assume that their yearly pap smear includes STI testing, but this isn't the case; however, they are easily done during that visit if you just ask.

For more information on STIs, prevention, and testing:

People:

- School health center
- A free clinic (find one at [HRSA.gov](https://www.hrsa.gov))

Websites:

- [PlannedParenthood.org](https://www.plannedparenthood.org)
- [ScarleTeen.com](https://www.scarleteen.com)

The best thing to do if you are worried about having an STI is to go to a professional; look up your symptoms, and if enough of them match, don't waste any time in getting to the doctor. Take your partner or a close friend if it makes you more comfortable. Your doctor is required to keep your conversations confidential, and they are extremely helpful in answering questions and talking to you - they are professionals, after all! You're not the first person to have an STI, and they won't judge you for it.