Perceptions of Sexuality in American Culture

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Popular culture has belittled the moral significance of sexual relations among young Americans, and the idea that sex is merely a recreational activity has prevailed. Whether or not this is a respectable mindset is debatable, but also separate, issue; the existence of this mindset among adolescent Americans is unquestionable. The first step towards preventing the spread of STDs is recognizing and accepting the fact that sex is a prevalent part of our lives, and is becoming an increasingly prevalent part of our lives at a younger age. There is no way to fight the course of cultural norms; but there is a way to prevent those cultural norms from becoming a detriment to our society, and that is by educating our younger generations about the risks and responsibilities associated with being sexually active.

Role of Men

Men are less likely to become emotionally attached after being intimate with someone, and our society is primarily dominated by men. In addition, the perception that having sex with a lot of women proves one’s manhood is driving the socially accepted principles to honor this idea that multiple partners is a good thing. For this reason, men have the power within to help promote STD prevention.

Recommendation 1: Men should advocate behavioral change and social responsibility because of their position in society.

Recommendation 2: Media messages should portray positive images of masculinity associated with them nurturing their families and maintaining a sense of responsibility towards themselves and their sexual partners.

Role of Media

The mass media has become an extremely pervasive and influential part of American society, and media messages are inundated by sexual references. *The Committee on Public Education* reported that young people spend more time in front of the television than they do engaging in any other activity, and an average 18 year old high school graduate will have spent 15,000 hours watching television. The Kaiser Family Foundation found that 70% of all TV shows include some sexual content, compared to their evaluation from 7 years ago, that reported only 56% of shows featured sexual references. The same study also reported that 8 out of 10 prime-time shows included sexual content; however, only 1 out of every 9 prime-time shows with sexual references included the associated risks and responsibilities. In addition to this, The Kaiser Family Foundation, found that only 10% of those shows that are top rated among teens include references to the potential consequences among the 20 highest rated shows among teen viewers. As these statistics show, the media is a primary source of information for many teens, and may be conveying inappropriate messages about sex.

Recommendation 3: Require media messages to include condom use and emphasize the prevalence of risk factors as a result of engaging in sexual activity.

Recommendation 4: Media needs to acknowledge the prevalence of STDs in real world situations.
Impacts of the Lack of Awareness

The fear factor needs to be instilled in the minds of adolescent Americans. Access to anti-retroviral drugs and other STD treatments belittles the importance of prevention methods; as does the conventional attitude taken by most teens that “It couldn’t happen to me.” But according to the Center for Disease Control and Prevention 19 million new STD cases were reported in 2004. Young people need to be scared of getting a disease and need to recognize the high probability of contracting a disease if they engage in sexual activity.

This negligible attitude is in part because of our cultural taboo on sex, and that parents and governmental officials frequently choose to ignore the issues of sex denying the fact that most young Americans are sexually active. This reaction only contributes to the issue. Our society needs to approach the subject honestly and openly to deal with it effectively.

STD education needs to be a sufficiently addressed in school sex education classes. This type of education is most crucial at the early stages of teen’s lives. According to www.cybercollege.com, since President Bush has been in office, there has been a major decrease in the sex education content on government websites regarding consequences of unsafe sex: “According to The New York Times, “Since President Bush came into office, information that supports the effectiveness of condoms in the prevention of disease, as well as studies that show the use of condoms do not result in earlier sexual activity, has disappeared from government web sites.” It is the government’s responsibility to ensure sex education classes adhere to an explicit curriculum that concentrates on the risks associated with sexual activity. The fact exists that American youth are sexually active, and the government can’t change the facts; but they are responsible for addressing the related issues.

Also, according to Patricia and Ron Deutsch in The Truth Can Stop V.D., a study was done in which education of venereal diseases was introduced to students in one high school, and consequently, the syphilis rate among those students dropped by about 50%, whereas in a neighboring high school where no such education was introduced (for fear of shocking the students and parents), the rates of venereal diseases rose over 700% during the same time period.

Sex education should be a parent’s responsibility; but in many cases, the parents are ill-equipped to adequately educate their children on all the factors regarding safe sex, and all the consequences of unsafe sex, or are too embarrassed to talk to their children about sex, and vice versa. As a result, the issue may never be addressed which may lead to the child making uniformed, unhealthy decisions about sex. Sex education needs to be an obligatory aspect of the school’s curriculum. Although sex educations in schools with qualified teachers may be the best way to produce an informed youth, many schools in the nation are afraid to adopt such a curriculum due to anticipated negative public reactions. Fear of these reactions is mainly created by our conservative government and religious leaders who preach abstinence but do not offer an alternative message regarding safe sexual practices among youth. If these leaders continue to suppress sex education that covers methods of having safe sex, and the consequences of unsafe sex, and the youth continues to not learn in-depth about these consequences in a classroom setting, how can society expect the behavior of youth to shift to safe sexual practices?

Recommendation 5: The government needs to require sex education for elementary, middle, and high school aged children; and use a realistic approach, rather than an idealistic approach that promotes abstinence, or faithfulness. Having sex with only one person and ensuring that both partners are tested for STDs and openly talking about it, is an irrational expectation. Condom use needs to be the loudest message sent to young people learning about sex; because it is the easiest and most feasible prevention method that will minimize STD infections and teen pregnancies.

Recommendation 6: Parents need to take the initiative and approach their kids about sex before they hear the distorted messages sent by the media and from their peers; teens need accurate, honest information so they can make personal, informed decisions.

Recommendation 7: Reduce sexual taboos and approach sex honestly and openly.

Recommendation 8: Make condoms easily accessible to anyone.
Effects of Stigma

Social taboos placed on sexually transmitted diseases, and especially HIV, are contributing largely to their proliferation throughout society. Sexually transmitted diseases are often times associated with promiscuity, poverty, or homosexuality which increases the social stigma. Many people are too scared to even get tested because they fear the social stigma, or they would rather just not know. Or, even if they do get tested and their results come back positive, they are too scared and embarrassed to share their results with their partners.

In addition to this, it is inconvenient to get tested for AIDS or many other sexually transmitted diseases. You first have to get to the doctor’s office, talk to the doctor/nurse/receptionist, make an appointment, show up for the appointment, wait to get tested, get tested, wait to hear back from the doctor that your results are in, go back to the doctor’s office, wait to get your results, get your results, talk to the doctor about your results. This process can often times seem like a hassle and be an embarrassing and uncomfortable situation that most people would rather not go through.

Recommendation 9: Reduce prejudices towards gay people and the notion that HIV only exists in the homosexual community needs to be discouraged.

Recommendation 10: Make getting an HIV test as painless and confidential as possible; release the pregnancy-test-equivalent HIV tests.


Works Cited


Pediatrics 107 (1) : 191-194.

Cyber College / Internet Campus. www.cybercollege.com

