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VIEWPOINT

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Sexual Assertiveness and Adolescents' Sexual Rights

By Patricia East and Joyce Adams

Consider this: By at least some estimates, one in three teenage women will be in a controlling, abusive relationship before she graduates from high school; two-thirds of college freshman women report having been date-raped or having experienced an attempted date rape at least once; and one-fifth to one-half of U.S. women were sexually abused as children at least once, most of them by an adult male relative.

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Sexual violence against women is woven insidiously into the fabric of our society. Every day, millions of Americans see images of violence against women on TV, in movies and in advertising. Long-term exposure to sexually degrading depictions of women can escalate aggression against women and blur the line between behavior that is appropriate and behavior that is not. And it is not just women who are being victimized. In early 2002, revelations by 40 men that they were sexually abused by Roman Catholic priests as children or teenagers created a crisis within the church. And studies document that up to 25% of men report having had some kind of unwanted or uninvited sexual activity by 13 years of age. One common theme across all sexual abuse cases is that the perpetrator uses his or her dominant position within the relationship to coerce another sexually. Almost all sexual abuse involves the abuser's taking advantage of another's psychological, emotional or physical vulnerability.

The findings presented in the article by Rickert, Sanghvi and Wiemann on page 178 of this issue could not be more timely. This research highlights the substantial vulnerability of today's young women, many of whom believe that they lack the most basic of sexual rights, such as the right to not have intercourse if they do not wish to, the right to tell a partner that he is being too rough or the right to use any form of birth control during intercourse. Why are young women not more sexually assertive? Where does one's sexual assertiveness come from? And what is being done to protect adolescents' sexual rights?

To be sure, there are at least two forms of sexual assertiveness. One involves communicating one's sexual needs and desires. Even many adults have inhibitions

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Patricia East is research scientist, and Joyce Adams is professor, both in the Department of Pediatrics, Adolescent Medicine Division, University of California, San Diego Medical Center. about asserting their sexual desires openly and clearly. And even in the most loving and caring relationships, asking for what you want can be hard: What if your partner perceives a request as a threat or a criticism? What if the request simply is too embarrassing to make out loud?

These skills, however, are merely supplementary to a second form of sexual assertiveness, which is reflected in the understanding that it is not okay for anyone to touch or kiss you when you do not want it, that you do not have to have sex if you do not want to, and that you need not be pressured into doing anything sexually with which you are not comfortable. These beliefs and, indeed, the skills required to act on them are invariably rooted in how we feel about ourselves and our bodies, and how we allow others to treat us on a day-to-day basis. To be "assertive" means to pursue one's goals or to state with assurance and self-confidence.

Sexual assertiveness also, however, has roots in power. Many types of power come into play in sexual relationships—physical, social, economic, intellectual and even power gained through one's physical attractiveness. Experiences of racism or social and economic discrimination contribute to a loss of empowerment and, thus, to sexual vulnerability. Even political discrimination can affect one's ability to assert oneself. For example, Hispanic women who are not fluent in English or not U.S. citizens may have difficulty asserting any of their rights, including their sexual rights. 6

Women who have been made to feel powerless by abusive experiences would surely have difficulty negotiating condom use or other protective health behaviors, even within consensual sexual unions. Such women would also have difficulty warding off further unwanted sexual experiences, as has been documented in a study that found that childhood sexual abuse victims have an increased risk of being victimized again as adults. Both male and female abuse victims have been found to engage in high-risk sexual behaviors, such as having unprotected sex or multiple partners. But their risky behavior likely masks a gross neglect of their ability to assert themselves. One can easily imagine a cycle wherein abuse inflicts a sense of helplessness and a perceived loss of control, which in turn contribute to apathy and risk-taking, setting the stage for further victimization.

Age differences between partners also contribute to power disparity and young people's inability to assert their sexual rights. Young adolescent women often have male partners who are five or even 10 years older than they are, and this tendency contributes to the risk of teenage pregnancy. Many of these young people do not even know that they have sexual rights, let alone know how to assert them. We have observed in our clinical practice that when young adolescent girls are asked if a sexual experience was one that they wanted or one that was forced upon them, many simply shrug their shoulders: They do not know the difference.

As a point of fact, children and adolescents do have sexual rights, whether or not they know it. For instance, it is against federal child abuse and neglect laws for a child to receive or participate in any kind of unwanted sexual touching (for example, of the breasts, genital area or inner thighs). And under Title VII of the Civil Rights Code, "any kind of sexual advance or conduct that is unwelcome" is illegal.

Globally, children's rights are recognized and protected in the Convention on the

Rights of the Child, an international human rights treaty adopted by the United Nations in 1989. This treaty states that every child in the world has a right to food, shelter, education, a safe and healthy environment, and (importantly) protection from exploitation and abuse of all kinds. Surprisingly, the United States and Somalia are the only two nations that have not ratified the convention. At issue for the United States is the treaty's statement of children's rights to family planning education and services. Because the language is vague, it may be interpreted to mean that young people are entitled to comprehensive sexuality education and a full range of reproductive health services, including abortion; the U.S. position, by contrast, is to promote abstinence as the primary strategy for dealing with adolescent sexuality. In this policy context, with their government unwilling to acknowledge their basic rights to protect their reproductive health, is it any wonder that large numbers of American teenagers and young women are not aware of or educated about their basic rights to refuse unwanted sexual relations?

Understanding one's sexual rights and developing a sense of empowerment to enforce them, however, are just the first steps toward sexual assertiveness. Eventually, when adolescents are sufficiently mature and responsible, they should be able to come to terms with their own sexual needs and desires, and when the timing is right, they should learn to enjoy a healthy, developmentally appropriate sexuality. And if adolescents choose to become sexually involved, then they need to understand that it is their right to experience sexuality free of violence, risk of pregnancy and disease, and exploitation, and that any partner who does not respect their wishes for effective protection is not a desirable partner. In this way, information and affirmation of one's rights is a first line of defense against unwanted pregnancy and sexually transmitted disease.

Yet, how can U.S. teenagers responsibly protect themselves when only 19 states require that high school sexuality education courses cover contraception? In sharp contrast, 51% of U.S. school districts promote abstinence as a preferred option for adolescents, and 35% require that abstinence be taught as the *only* acceptable option outside of marriage. And as if these policies did not sufficiently limit the scope of education, President Bush has proposed nearly doubling the federal spending on abstinence promotion programs in 2003, while zero dollars have been committed to a comprehensive sexuality education approach, one that teaches both abstinence and contraception. Is it acceptable, or fair, to deny teenagers the right to learn how to protect themselves and their partners? Is it ethical to withhold potentially lifesaving information from today's youth?

We would argue that all Americans—children, adolescents and adults—would benefit from knowing their sexual rights and knowing how to exercise them. We would further argue that a wide range of resources—media campaigns, school-based programs, parent education programs, and pediatricians and other health care providers—should be available to ensure that children and adolescents are aware of their basic sexual rights. These rights include knowing that it is they who decide who touches their bodies, and knowing that they can refuse any sexual contact at any time and with anyone if they so choose.

Sexual assertiveness means recognizing the warning signs of inappropriate sexual

advances and potentially controlling, abusive relationships, and having the sense of empowerment and the skills to say no. It means having the right to receive a *comprehensive* education about sexuality, one that educates about *all* options and that bolsters all necessary skills. And for those who choose to be sexually active, it means having the right to protect themselves against the risk of pregnancy, HIV and other sexually transmitted diseases. Unquestionably, being sexually assertive is a difficult and complicated skill to acquire, particularly for teenagers. But in today's world, young people's lives may depend on it.

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Acknowledgments

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