Adolescent Sexual Behavior: Impact of Decision Making

Bibliographic Information: 3 Girls I Know...intimate stories about young women, teen sexuality, pregnancy, and HIV/AIDS. A documentary film by Paula Mozen. Media Library/No Excuses Productions (190 Route 17M P.O. Box 1084 Harriman, NY 10926), 54 minutes, 2004.

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In 3 Girls I Know, we are introduced to Ari from San Francisco, Calif, Maggie from Bozeman, Mont, and Tishaun from Baltimore, Md. The video combines a set of 3 young women and their stories showing an interesting collection of culturally diverse individuals and the consequences of their decisions. These women are interviewed about childhood experiences, fitting in, high school conformity, peer pressure, stereotypes and myths, and alcohol and drug use, as well as sexual behaviors and their consequences. The video incorporates 8 segments: "Fitting in," "Talking about sex," "Hooking up, "Getting tested," "Results," "To tell the truth," "I wanted to do something," and "A few things I know."

During the first half of the video we get to know each of the women intimately. Ari talks about her strict upbringing and her overbearing mother who was physically abusive when Ari was a child. Maggie chats about wanting to be liked, having lots of friends, and being popular in middle and high school. Tishaun believes she

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was both liked and disliked while growing up because she never completely fit in.

Ari, Maggie, and Tishaun discuss their first love as well as losing their virginity and provide personal details about their experiences and the long-term effects of their decisions. Ari talks about dating a 30-year-old man when she was 16. She wanted an older man to have someone to understand her and teach her about life. Ari discovered she lost her virginity to an IV-drug user who had previously had sexual intercourse with a number of women. Maggie believed when she was in high school the only way she was going to get a guy to like her was to have sex with him. Consequently, she talks about losing her virginity one night while drinking alcohol. Maggie claims if a high school girl is insecure about sex in any fashion then she is not likely to ask a guy to use protection. Tishaun discusses her own experiences relative to knowing whether or not one is gay. She provides information about her first intimate episode of kissing another girl at the age of 15 and reveals how her family reacted when they first learned of her sexual orientation.

Segment 4 of the video deals with getting tested for STIs and HIV/AIDS. Ari explains she had been previously treated but was getting tested again specifically for HIV/AIDS. Maggie also had been previously tested for HIV/AIDS because "you never know" and was now going for another HIV/AIDS test. Tishaun states she has been sexually active with a number of different people and had failed to use protection and she was going for testing as well. Segment 5 "To tell the truth" reveals the testing results for all 3 women and the realities they must then face.

Throughout the video we are presented with a variety of educational facts. For example, commonly used sexual terms including *chicken-head*, *pigeon*, and *trade* are explained, and male/female sexual double standards are discussed. The video illustrates ways to protect oneself from STIs, including how to safely participate in oral sex.

Coverage of the National AIDS Memorial Quilt in Bozeman, Mont, is artfully

included, which has a profound impact relative to the overall message of the film. The video concludes with a meaningful take-home message from each of the women interviewed.

3 Girls I Know makes an excellent contribution to the field and is of particular value to a variety of health professionals. The video effectively examines both the psychological and physiological aspects of adolescent decision making as it affects sexuality. The video is based on current

issues, makes use of popular language, and is produced in a stylish fashion. Moreover, the video is culturally diverse with broad appeal. For counselors, it would be an excellent tool for contraceptive therapy with teenaged youth. Practitioners could use this video in a workshop setting for adolescents. Academics might use it in high school, at the undergraduate level, and even in graduate research courses to illustrate the variety of sexual issues typically faced by young adults.

Change or Die

By Alan Deutschman ISBN: 0-06-088689-7. Regan: Los Angeles, CA, 2007, ix+241 pp, \$26.95 hardcover.

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Assume a virtue, if you have it not, . . . For use almost can change the stamp of nature...

William Shakespeare

Why would health behavior specialists want to read a tradebook about health behavior? Haven't we professionals read enough textbooks and journal articles and crammed our brains with enough health behavior theories to make our heads swim? What does a popular writer have to teach us? Alan Deutschman, who previously wrote one book about Steve Jobs and another book about Napa and Sonoma valleys, is currently a senior writer at Fast Company Magazine. Despite this book's being his first foray into behavior change, Deutschman has much to offer to both professionals and the general public.

Sometimes it takes writers like Alan Deutschman and Malcolm Gladwell (*The Tipping Point* and *Blink*) to help professionals see our challenges from a different perspective. Deutschman uses Dr Dean Ornish's program to illustrate how coronary artery disease can be reversed without drugs or surgery. He highlights Mimi Silbert's Delancey Street program, which has changed the behaviors of hardened criminals and addicts, and he describes a corporate culture change at a General

Motors plant in Fremont, Calif, as the main examples of how complex changes can be made. According to Deutschman, all 3 of these examples have principles that are essential to making changes—they are the 3 Rs—Relate, Repeat and Reframe. These 3 R's are in contrast to the 3 Fs—Facts, Fear and Force—that often result in a fourth F—Failure.

We in health behavior fields have known for a long time that education or Facts alone are not enough to change behavior. We also know that Fear works to motivate only a small segment of the population and often for only a short time. As for Force, it actually triggers resistance in many people. As Dean Ornish said: "People don't resist change, they resist being changed."

The 3 Rs by contrast offer hope to those who wish to change. "Fake it 'til you make it" is the colloquial version of the Shakespeare quotation given at the beginning of this review that reminds people that they need to Relate to change by forming a "new, emotional relationship... that inspires and sustains hope." This is an act of persuasion in the same way that Malcolm Gladwell describes the salespeople required to make a concept "contagious" as put forth in *The Tipping Point*.

Many behavior changes are acquired tastes. For example, most young children hate to brush their teeth, and simply being told that toothbrushing is good for them is not a sufficient motivator. Similarly, telling youngsters that by not brushing their teeth, their teeth will rot and look bad will not motivate most. Finally, forcefully standing over them and demanding that they brush their teeth may get the job done for the moment, but it will likely cause resentment that can create a backlash. So, how is it that most of us go

from hating to brush our teeth to panicking if we get caught on a trip where we have forgotten our toothbrush? We begin to Relate to toothbrushing in a different way as we see others (our parents, older siblings, friends) brushing and seeming to like it. The repetition of doing it grows on us, and we begin to move from a feeling of drudgery to actual acceptance, indeed refreshment. Finally we Reframe. We reach a point where we can hardly see ourselves as nonbrushers. Brushing is the thing to do, and we miss it if we don't brush at our regular times.

Toothbrushing is, of course, a simple example, but the three Rs can work for much more complex behaviors, as Deutschman illustrates with his many examples. He engages the reader with his jargon-free style, and he captivates the reader with information that he gleaned from interviews with Dean Ornish, Mimi Silbert, Jeff Bezos, Bill Gates, and many other interesting experts.

In case you are wondering, Deutschman does address a question that may have come to mind: "If Fear doesn't work then why is the book entitled *Change* or Die?" Isn't the book title a type of scare tactic? Deutschman says that he knew that the fear tactic title would grab our attention for only a short time, but time enough to get us to pick up the book or maybe start reading. It worked for me! Deutschman concedes that a more appropriate title would have been Change and Thrive.

Deutschman also included a chapter on frequently asked questions where he addresses questions about Alcoholics Anonymous, Freudian theories, and the transtheoretical theory. This chapter helps to address some of the questions that professionals might ask.

The solutions given for effective changes that Deutschman references throughout the book are certainly not perfect, but he points out that they work better than most, if not all, of the alternatives. As we all know, change is difficult. For example, as successful as the Ornish program has been in working with people with coronary artery disease, it no longer exists in my hometown of Omaha, Neb, after 10 successful years. The reason it is gone is because insurance companies would not cover it (D. Ornish, personal communication, February 27, 2007).

In short, most insurance companies have been paying billions of dollars for surgical procedures that are invasive, dangerous, expensive and largely ineffective, whereas they pay little or nothing for diet and lifestyle interventions that are noninvasive, safe, inexpensive, and powerfully effective in treating coronary heart disease as well as many other chronic diseases. And the only side effects are good ones.¹

Of course, many people and insurance companies believe that behavior change is too difficult, and they bypass the option of behavior change. The insurance coverage problem is a good argument for advocacy to change a whole system rather than people's behavior.

Despite the difficulties that people have in changing systems or changing smoking, drinking, exercising, and eating behaviors, many people can and do make necessary changes. In *Change or Die*, Deutschman does not offer easy solutions, but he does offer solutions that are more likely to be successful. He gives the reader hope (Relates), he presents many examples from different perspectives (Repeats), and he addresses new ways to view problems and solutions (Reframes). Do you have change for a paradigm?

REFERENCE

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