Instructor: Dr. Marsha Kay Wilson
Section # and CRN#: HLTH 1023-P01 (31109)
Office Location: DELCO #114
Office Phone: 936-261-3421
Email Address: mkwilson@pvamu.edu
Office Hours: MTW 8:15 a.m.-9:30 a.m.
Mode of Instruction: Face to face
Course Location: P01-Delco #242
Class Days & Times: PO1-MTWR 9:30 a.m.-11:50 a.m.
Catalog Description: This course is designed to examine the foundations and characteristics of the American family, factors involved in learning sex roles, biological and emotional motivations, preparation for marriage, family planning and parental roles.
Prerequisites: None
Co-requisites: None
Required Text(s): TBA


Student Learning Outcomes:

<table>
<thead>
<tr>
<th>Course Learning Outcomes</th>
<th>Competencies (T, R, I)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluate past and present concepts of human sexuality</td>
<td>T</td>
</tr>
<tr>
<td>Understand factual sexual knowledge and apply this understanding to everyday transmitted diseases</td>
<td>T</td>
</tr>
</tbody>
</table>
Identify the components of sexual therapy and understand the characteristics necessary for effective referral | T | R | I
Understand the components necessary for family stability | T |
Develop positive attitudes regarding human sexuality | T |
Compare and contrast sexual attitudes from the past with sexual attitudes in our modern society | T | R | I
Identify resources which address human sexuality that are culturally specific | T | R | I
Access technology to research issues regarding human sexuality | T | R | I
Evaluate one’s own attitude as it relates to human sexuality | T | R | I
Analyze the impact of disease in issues surrounding human sexuality | T |
Describe the impact and consequences of premarital sexual intercourse | T |
Conduct a microteaching exercise regarding human sexuality while infusing technology | T | R | I

Course Objectives/Accrediting Body (NCATE):
Standard I: Candidates demonstrate the knowledge and skills of a health literate educator. (Key elements A, C, D, E)
Standard VIII: Candidates communicate and advocate for health and school education. (Key elements A, B)

Course Goals or Overview: The overall goals are to provide students with accurate information about human sexuality, develop an awareness of diversity in human sexual behaviors and attitudes around the world, promote acceptance of their own sexuality, and encourage tolerance and respect for the beliefs of others. In particular, each candidate will be able to do the following upon completion of the course:

1. Use a critical analysis of the scientific method as a basis for evaluating sexual information and concepts. Explain biological, cultural and social dimensions of human sexual and reproductive behavior.

Human Sexuality Course Objectives

Students will be able to:

- Critically examine and evaluate past and present concepts of human sexuality and determine the influence they have on ways of living.
- Understand factual sexual knowledge and apply this understanding to everyday transmitted diseases; principles and mechanisms of biological homeostasis; and characteristics of an emotionally intimate relationship.
- Identify the components of sexual therapy and understand the characteristics necessary for effective referral.
- Understand the components necessary for family stability and sexual adjustments in modern society.
- Develop positive attitudes regarding human sexuality. Compare and contrast sexual attitudes from the past with sexual attitudes in our modern society. Identify resources which address human sexuality that are culturally specific.
- Access technology to research issues regarding human sexuality.
- Demonstrate problem solving and decision-making skills as it relates to human sexuality. Evaluate one’s own attitude as it relates to human sexuality.
- Analyze the impact of disease in issues surrounding human sexuality.
- Describe the impact and consequences of premarital sexual intercourse.

**TExES Objectives:**

**DOMAIN I:** Personal Health  
**DOMAIN II:** Healthy Interpersonal Relationships  
**DOMAIN III:** Community and Environmental Health and Safety  
**DOMAIN IV:** Health-Related Skills and Resources

**COMPETENCIES AND STANDARDS**

This course is aligned with the Texas and NCATE (AHHE) standards as per the following table. Assignments will incorporate these basic competencies as required by Texas and Federal statute. **Course Performance Standards, Knowledge, and Skills:**

**Measurement code:**
- T = Test  
- JAC = Journal Article Critique  
- CS = Case studies  
- RP = Reflection Paper  
- TA = Teaching Assignment  
- C = Cooperative Learning (discussion, participation)  
- I = iRead Book Discussion

<table>
<thead>
<tr>
<th>Topic</th>
<th>NCATE</th>
<th>TExES Standards</th>
<th>Measurement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Factual sexual knowledge</td>
<td>Standard I: Key Element (A, C, D, E) Standard VIII: Key Element (A,B)</td>
<td>Domains I-III</td>
<td>C, T, JAC, TA</td>
</tr>
<tr>
<td>Sex Therapy</td>
<td>Standard I: Key Elements (B) Standard VIII: Key Element (A, B)</td>
<td>Domains I, II, and IV</td>
<td>T, JAC, TA</td>
</tr>
<tr>
<td>Family Stability and Sexual Adjustments</td>
<td>Standard I: Key Elements (B) Standard VIII: Key Element (A, B)</td>
<td>Domains I and II</td>
<td>T, JAC, TA, C</td>
</tr>
<tr>
<td>Access technology to research issues</td>
<td>Standard VIII (Key Element B)</td>
<td>Domains III-V</td>
<td>CS, JAC, TA, C</td>
</tr>
</tbody>
</table>
Problem-solving and decision making skills related to human sexuality

<table>
<thead>
<tr>
<th>Standard I: Key Elements (A, C, D, E)</th>
<th>Standard VIII: Key Element (A,B)</th>
<th>Domains I</th>
<th>T, CS, TA, JAC, RP, C, i, JAC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consequences of premarital sexual</td>
<td>Standard I: Key Elements (C, D, E)</td>
<td>Domain I</td>
<td>C, T</td>
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<tr>
<td>material</td>
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Major Course Requirements

Assessment/Grading:

Attendance 33.33%
Assignments 33.33%
Examinations 33.33%
99.99%

Evaluation Methods:

1. Examinations (8 @ 100 points each) 800 points
2. Case Study Assignment (5 @ 40 points each) 200 points
3. Alternate Assignment (1 @ 100 points) 200 points
4. Journal Article Critique (1 @ 100 points) 200 points
5. Micro Teaching Assignment (1 @ 100 points) 200 points
6. Attendance & Class Participation 800 points

TOTAL 2,400 points

Grade Scoring Range Grading Scale
A 90-100% 2,400-2,160 points
B 80-89% 1,920-2,159 points
C 70-79% 1,680-1,919 points
D 60-69% 1,440-1,679 points
F 59-0% 1,439> points

*Course calendar, instruction and/or assignments may change based on the needs of the Professor or the needs of the students, at the Professor’s discretion.

Detailed Description of Major Assignments:

Case Study 200 points
The teacher educator candidate will complete five case study assignments that deal with human sexuality scenarios. The teacher educator candidate must analyze the case study and develop a plan of action for each case study. A typed explanation of the teacher educator candidate’s response is required for each individual case study. A Rubric of this assignment will be provided.

Journal Article Critique 200 points
Each teacher educator candidate will identify a journal article regarding human sexuality to prepare a journal article critique. The critique should not exceed three typed pages. This assignment is to be submitted to the instructor typed and accompanied by a copy of the article utilized to develop the critique. A Rubric of this assignment will be provided.
Reflection Paper Assignment and iRead Book Assignment 200 points

The teacher educator candidate will complete a well thought out reflection paper that deals with a human sexuality scenario. The teacher educator candidate must analyze the scenario and develop a plan of action for the scenario. This assignment must be typed. Specific details will be provided separately. A Rubric of this assignment will be provided. (Assignment suspended)

Micro Teaching Assignment 200 points
The teacher educator candidate will be divided into small groups. Each group will be assigned a human sexuality topic from our text to teach to the class. The teacher educator candidate will utilize technology. The teacher educator candidate will prepare a lesson plan and develop an assessment tool to assess student knowledge. The teacher educator candidate will be assessed by their peers as well as the Professor. A Rubric of this assignment will be provided.

Substitution Assignment-NOT ADDITIONAL ASSIGNMENT 200 points
The instructor MAY substitute one of the aforementioned assignment with a compare and contrast of abortion laws between two states. Each candidate will have Texas as one state and one other state to be assigned by the Professor. The student will research and report the requirements/restrictions/laws of the two states and prepare a paper to discuss the candidates’ findings. Professor will visit with candidates during the first week of classes to determine if substitution will occur. A Rubric of this assignment will be provided if assigned.

Course Procedures or Additional Instructor Policies

Taskstream
Taskstream is a tool that Prairie View A&M University uses for assessment purposes. At least one of your assignments is REQUIRED to be submitted as an “artifact,” an item of coursework that serves as evidence that course objectives are met. More information will be provided during the semester, but for general information, you can visit Taskstream via the link in eCourses.

[NOTE: If there are any special instructions relating to assignment submissions, formatting, or other course policies, they should be included here. Include individual policies on tardies, cell phones and other class disruptions. If you have additional classroom rules that do not fit on a single page, consider posting them in eCourses instead.]

NOTE: No grade of “C” or below will be accepted toward certification. NO ASSIGNMENTS WILL NOT BE ACCEPTED FROM ANYONE OTHER THAN THE CANDIDATE UNLESS PRIOR APPROVAL.

Duplication of exams is prohibited!! No typed Exams will be accepted!!! Please be advised student will receive an “F” for violation (non-negotiable)- Each teacher educator candidate is responsible for all work that is covered in class, whether the teacher educator candidate is present or not. ALL ASSIGNMENTS WILL BE RETAINED BY THE PROFESSOR- GRADE DISPUTES MUST BE PROVIDED IN WRITING WITHIN ONE WEEK AFTER THE SEMESTER ENDS. Thank you!
# Tentative Course Calendar

<table>
<thead>
<tr>
<th>Date</th>
<th>Assignment Administered to Student</th>
<th>Assignment Due Date (by end of week)</th>
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</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>Introductions and assessments</td>
<td>Examinations #1 &amp; #2</td>
</tr>
<tr>
<td>Week 2</td>
<td></td>
<td>Case Studies Due</td>
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<td></td>
<td></td>
<td>Examinations #3 &amp; #4</td>
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<tr>
<td>Week 3</td>
<td></td>
<td>Examinations #5 &amp; #6</td>
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<td></td>
<td></td>
<td>Journal Article Critique</td>
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<tr>
<td>Week 4</td>
<td></td>
<td>Examination #7</td>
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<td></td>
<td></td>
<td>Micro Teaching Assignment Presentations</td>
</tr>
<tr>
<td>Week 5</td>
<td></td>
<td>Examination #8</td>
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<tr>
<td></td>
<td></td>
<td>Micro Teaching Assignment Presentations</td>
</tr>
</tbody>
</table>

| Week 1     | History of Human Sexuality         |
|            | Spirituality and Human Sexuality, Gender Roles |
|            | Communication in Intimate Relationships |
| Week 2     | Male Anatomy, Female anatomy       |
|            | Birth Control Pregnancy and Childbirth |
| Week 3     | Sexual Dysfunctions                |
|            | Sex Research                        |
| Week 4     | Childhood Sexuality                |
|            | Adolescent Sexuality               |
|            | Adult Sexuality                     |
| Week 5     | Sexually Transmitted Diseases, Prostitution |
|            | Date Rape, Acquaintance Rape        |

The calendar is a guide and may change based on the needs of the Professor or the students.
Student Support and Success

John B. Coleman Library
The library and its partners have as their mission to provide resources and instructional material in support of the evolving curriculum, as a partner in Prairie View A&M University's mission of teaching, research, and service and to support the University's core values of access and quality, diversity, leadership, relevance, and social responsibility through emphasis on ten key areas of service. It maintains library collections and access both on campus, online, and through local agreements to further the educational goals of students and faculty. https://www.pvamu.edu/library/ Phone: 936-261-1500

The Learning Curve (Center for Academic Support)
The Learning Curve offers Tutoring via peer tutoring. The services include workshops (i.e., Save My Semester, Recalculate Your Route), seminars (i.e., Tools You Can Use: TI-84), group review sessions (i.e., College Algebra Topic Reviews, GRE Preparation), group study opportunities (i.e., TSIA, HESI, Study Break, Exam Cram), and test-taking strategies (How to take Notes, Study Buddy, 5 Day Study Guide). The Learning Curve is a nationally certified tutoring program through the National Tutoring Association. The peer tutors are trained and certified by the coordinator each semester. Location: J.B. Coleman Library Rm. 207F. Phone: 936-261-1561

The Center for the Oversight and Management of Personalized Academic Student Success (COMPASS)
The Center for the Oversight and Management of Personalized Academic Student Success (COMPASS) is designed to help Prairie View students in their second year and beyond navigate towards graduation by providing the following services: Academic Advisement, Targeted Tutorials for Personalized Learning, Campus-Wide Referrals, and Academic & Social Workshops. Location: J.B. Coleman Library Rm. 306. Phone: 936-261-1040

Writing Center
The Writing Center provides student consultants on all aspects of the writing process and a variety of writing assignments. Writing Center consultations assist students in such areas as prewriting, brainstorming, audience awareness, organization, research, and citation. Students taking on-line courses or courses at the Northwest Houston Center or College of Nursing may consult remotely or by email. Location: Hilliard Hall Rm. 121. Phone: 936-261-3724.

Student Counseling Services
The Student Counseling Services unit offers a range of services and programs to assist students in maximizing their potential for success: short-term individual, couples, and group counseling, as well as crisis intervention, outreach, consultation, and referral services. The staff is licensed by the State of Texas and provides assistance to students who are dealing with academic skills concerns, situational crises, adjustment problems, and emotional difficulties. Information shared with the staff is treated confidentially and in accordance with Texas State Law. Location: Owens-Franklin Health Center Rm. 226. Phone: 936-261-3564

Testing
The Department of Testing administers College Board CLEP examinations, the HESI A2 for pre-nursing majors, LSAT for law school applicants and MPRE for second-year law students, the Experiential Learning Portfolio option, the Texas Success Initiative (TSI) Assessment, which determines college readiness in the state, and exam proctoring, among other service such as SAT and ACT for high school students. Location: Delco Rm. 141. Phone: 936-261-4286

Office of Diagnostic Testing and Disability Services
As a federally-mandated educational support unit, the Office of Disability Services serves as the repository for confidential disability files for faculty, staff, and students. For persons with a disability, the Office develops individualized ADA letters of request for accommodations. Other services include: learning style inventories, awareness workshops, accessibility pathways, webinars, computer laboratory with adapted hard and software, adapted furniture, proctoring of non-standardized test administrations, ASL interpreters, ALDs, digital recorders, livescribe, Kurtzweil, and a comprehensive referral network across campus and the broader community. Location: Evans Hall Rm. 317. Phone: 936-261-3585
Veteran Affairs
Veterans Services works with student veterans, current military and military dependents to support their transition to the college environment and continued persistence to graduation. The Office coordinates and certifies benefits for both the G.I. Bill and the Texas Hazlewood Act. Location: Evans Hall Rm. 323. Phone: 936-261-3563

Office for Student Engagement
The Office for Student Engagement delivers comprehensive programs and services designed to meet the co-curricular needs of students. The Office implements inclusive and accessible programs and services that enhance student development through exposure to and participation in diverse and relevant social, cultural, intellectual, recreational, community service, leadership development and campus governance. Location: Memorial Student Center Rm. 221. Phone: 936-261-1340

Career Services
Career Services supports students through professional development, career readiness, and placement and employment assistance. The Office provides one-on-one career coaching, interview preparation, resume and letter writing, and career exploration workshops and seminars. Services are provided for students at the Northwest Houston Center and College of Nursing in the Medical Center twice a month or on a requested basis. Distance Learning students are encouraged to visit the Career Services website for information regarding services provided. Location: Evans Hall Rm. 217. Phone: 936-261-3570

University Rules and Procedures

Disability Statement (Also See Student Handbook):
The Americans with Disabilities Act (ADA) is a federal anti-discrimination statute that provides comprehensive civil rights protection for persons with disabilities. Among other things, this legislation requires that all students with disabilities be guaranteed a learning environment that provides for reasonable accommodation of their disabilities. If you believe you have a disability requiring an accommodation, please contact Disability Services, in Evans Hall, Room 317, or call 936-261-3585/3.

Academic Misconduct (See Student Handbook):
You are expected to practice academic honesty in every aspect of this course and all other courses. Make sure you are familiar with your Student Handbook, especially the section on academic misconduct. Students who engage in academic misconduct are subject to university disciplinary procedures.

Forms of Academic Dishonesty:
1. Cheating: deception in which a student misrepresents that he/she has mastered information on an academic exercise that he/she has not mastered; giving or receiving aid unauthorized by the instructor on assignments or examinations.
2. Academic misconduct: tampering with grades or taking part in obtaining or distributing any part of a scheduled test.
3. Fabrication: use of invented information or falsified research.
4. Plagiarism: unacknowledged quotation and/or paraphrase of someone else’s words, ideas, or data as one’s own in work submitted for credit. Failure to identify information or essays from the Internet and submitting them as one’s own work also constitutes plagiarism.

Nonacademic Misconduct (See Student Handbook)
The university respects the rights of instructors to teach and students to learn. Maintenance of these rights requires campus conditions that do not impede their exercise. Campus behavior that interferes with either (1) the instructor's ability to conduct the class, (2) the inability of other students to profit from the instructional program, or (3) campus behavior that interferes with the rights of others will not be tolerated. An individual engaging in such disruptive behavior may be subject to disciplinary action. Such incidents will be adjudicated by the Dean of Students under nonacademic procedures.
Sexual Misconduct (See Student Handbook):
Sexual harassment of students and employers at Prairie View A&M University is unacceptable and will not be tolerated. Any member of the university community violating this policy will be subject to disciplinary action.

Title IX Statement
Prairie View A&M University (PVAMU) is committed to supporting students and complying with the Texas A&M University System non-discrimination policy. It seeks to establish an environment that is free of bias, discrimination, and harassment. If you experience an incident of sex- or gender-based discrimination, including sexual harassment, sexual assault or attempted sexual assault, we encourage you to report it. While you may talk to a faculty member about an incident of misconduct, the faculty member must report the basic facts of your experience to Ms. Alexia Taylor, PVAMU's Title IX Coordinator. If you would like to speak with someone who may be able to afford you privacy or confidentiality, there are individuals who can meet with you. The Title IX Coordinator is designated to handle inquiries regarding non-discrimination policies and can assist you with understanding your options and connect you with on- and off-campus resources. The Title IX Coordinator can be reached by phone at 936-261-2123 or in Suite 013 in the A.I. Thomas Administration Building.

Class Attendance Policy (See Catalog for Full Attendance Policy)
Prairie View A&M University requires regular class attendance. Attending all classes supports full academic development of each learner whether classes are taught with the instructor physically present or via distance learning technologies such as interactive video and/or internet.

Excessive absenteeism, whether excused or unexcused, may result in a student’s course grade being reduced or in assignment of a grade of “F”. Absences are accumulated beginning with the first day of class during regular semesters and summer terms. Each faculty member will include the University's attendance policy in each course syllabus.

Student Academic Appeals Process
Authority and responsibility for assigning grades to students rests with the faculty. However, in those instances where students believe that miscommunication, errors, or unfairness of any kind may have adversely affected the instructor’s assessment of their academic performance, the student has a right to appeal by the procedure listed in the Undergraduate Catalog and by doing so within thirty days of receiving the grade or experiencing any other problematic academic event that prompted the complaint.

TECHNICAL CONSIDERATIONS

Minimum Recommended Hardware and Software:
- Intel PC or Laptop with Windows 7; Mac with OS X; Smartphone or iPad/Tablet with Wi-Fi
- High speed Internet access
- 8 GB Memory
- Hard drive with 320 GB storage space
- 15” monitor, 800x600, color or 16 bit
- Sound card w/speakers
- Microphone and recording software
- Keyboard & mouse
- Most current version of Google Chrome, Safari, Internet Explorer or Firefox

Note: Be sure to enable Java & pop-ups in the Web browser preferences

Participants should have a basic proficiency of the following computer skills:
- Sending and receiving email
- A working knowledge of the Internet
- Proficiency in Microsoft Word (or a program convertible to Word)
- Proficiency in the Acrobat PDF Reader
- Basic knowledge of Windows or Mac O.S.
Netiquette (online etiquette):
Students are expected to participate in all discussions and virtual classroom chats as directed. Students are to be respectful and courteous to others on discussions boards. Foul or abusive language will not be tolerated.

Technical Support:
Students should go to https://mypassword.pvamu.edu/ if they have password issues. The page will provide instructions for resetting passwords and contact information if login issues persist. For other technical questions regarding eCourses, call the Office of Distance Learning at 936-261-3283

Communication Expectations and Standards:
Emails or discussion postings will receive a response from the instructor, usually in less than 48 hours. Urgent emails should be marked as such. Check regularly for responses.

Discussion Requirement:
Online courses often require minimal to no face-to-face meetings. However, conversations about the readings, lectures, materials, and other aspects of the course can take place in a seminar fashion. This will be accomplished by the use of the discussion board. The exact use of discussion will be determined by the instructor.

It is strongly suggested that students type their discussion postings in a word processing application and save it to their PC or a removable drive before posting to the discussion board. This is important for two reasons: 1) If for some reason your discussion responses are lost in your online course, you will have another copy; 2) Grammatical errors can be greatly minimized by the use of the spell-and-grammar check functions in word processing applications. Once the post(s) have been typed and corrected in the word processing application, it/they should be copied and pasted to the discussion board.

John B. Coleman Library
Health & Wellness & Human Sexuality Resources

1 Updated August 20, 2010 by Robert S. (Bob) Grundy, Reference and Instruction Librarian, John B. Coleman Library, Prairie View A&M University, P.O. Box 519 MS # 1040, Prairie View, TX 77446- [936-261-1535 Reference Desk or rsgrundy@pvamu.edu]

John B. Coleman Library Catalog (linked on PV home page far left column) www.pvamu.edu/pages/3585.asp

In the center "Research and Finding Aids" column of the library home page, click on "Books" to search for books, periodicals, and other library materials on your topic. The "Fill in the Box" index tab permits searches by combinations of author, title, keyword, or subject using pull down menus.
Suggested Library of Congress Subject Headings:
Abortion
Birth Control
Sex (also headings beginning with “Sexual”) Sex and Law
Sex Crimes Sex Customs
Sexism (Here are entered works on sexism as an attitude as well as works on attitude and overt discriminatory behavior).
Sexual Behavior

Recent Health and Wellness and Human Sexuality Titles: American Sexual Behavior : Demographics of Sexual Activity, Fertility, and Childbearing / by the editors of New Strategist Publications. [REF HQ18.U5 A455 2006].


Gender Issues and Sexuality: Essential Primary Sources / K. Lee and Brenda Wilmoth Lerner, editors. [HQ21 .G359 2007].

Handbook of Sexuality-Related Measures / edited by Clive M. Davis ... [et al.]. [REF HQ60 .H36 1998].


Practical Encyclopedia of Sex and Health: From Aphrodisiacs and Hormones to Potency, Stress, Vasectomy, and Yeast Infection / by Stefan Bechtel and the editors of Men's Health and Prevention magazines. [REF RA788 .B43 1993].


Health & Wellness & Human Sexuality Databases: EBSCOHost includes:

Academic Search Complete (updated daily) is the world's most valuable and comprehensive scholarly, multi-disciplinary full-text database, with >7,400 full-text periodicals, including >6,300 peer-reviewed journals. This database also offers indexing and abstracts for >11,500 journals and a total of >12,000 publications including monographs, reports, conference proceedings, etc. The database features PDF content going back as far as 1887, with the majority of full text titles in native (searchable) PDF format. Searchable cited references are provided for >1,300 journals.

CINAHL provides indexing for 2,960 journals from the fields of nursing and allied health with >2 million records dating back to 1981. In addition, this database offers access to health care books, nursing dissertations, selected conference proceedings, standards of practice, educational software, audiovisuals and book chapters. Searchable cited references for >1,250 journals are also included. Full text material includes 71 journals plus legal cases, clinical innovations, critical paths, drug records, research instruments and clinical trials.

Health Source: Consumer Edition is a rich collection of consumer health information, with access to ~80 full text, consumer health magazines. It also includes searchable full text for >1,000 health-related pamphlets and >130 health reference books, including books published by the People's Medical Society. Additionally, Health Source: Consumer Edition contains >4,500 Clinical Reference Systems reports (in English and Spanish); Lexi-PAL Drug Guide, which covers 1,300 generic drug patient education sheets with >4,700 brand names; and Merriam-Webster's Medical Desk Dictionary.

Health Source: Nursing/Academic Edition provides ~550 scholarly full text journals focusing on many medical disciplines. Also featured are abstracts and indexing for nearly 850 journals. Coverage of nursing and allied health is particularly
strong, and this database also includes Lexi-PAL Drug Guide, which covers 1,300 generic drug patient education sheets with >4,700 brand names.

MEDLINE, also available as PubMed <http://pubmed.gov>, is the U.S. National Library of Medicine's premier bibliographic database with >15MM references to >5K worldwide journals in 37 languages (covering 1950-date) providing authoritative medical information on medicine, dentistry, nursing, veterinary medicine, healthcare administration, the health care system, and the pre-clinical sciences. MEDLINE uses MeSH (Medical Subject Headings) indexing with tree, tree hierarchy, subheadings and explosion capabilities.

PsycARTICLES (1894 to date) from the American Psychological Association (APA), is a definitive source of full-text, peer-reviewed scholarly and scientific articles in psychology with >150,000 articles from 70 journals published by the APA, its imprint the Educational Publishing Foundation (EPF), and from allied professional organizations. Nearly all APA journals go back to Volume 1, Issue 1 and the database includes all journal articles, book reviews, letters to the editor, and errata from each journal indexed with controlled vocabulary from APA's Thesaurus of Psychological Index Terms.

PsycCRITIQUES, also produced by the American Psychological Association (APA), is an electronic serial of book reviews featuring full text reviews of current scholarly and professional books, popular films, and trade books and includes ~40,000 reviews dating back to 1956

Psychology and Behavioral Sciences Collection (full text from 1965-date) is the world's largest full text psychology database offering full text coverage for ~560 journals, including ~380 peer-reviewed journals. The database covers topics such as emotional and behavioral characteristics, psychiatry & psychology, mental processes, anthropology, and observational and experimental methods. The majority of full text titles in this database are available in native (searchable) PDF, or scanned-in-color.

PsycINFO (1887-date) from the American Psychological Association (APA), is the world’s largest resource devoted to peer-reviewed literature in behavioral science and mental health with ~3 million citations and summaries of scholarly journal articles, book chapters, books, and dissertations, in psychology and related fields such as medicine, psychiatry, nursing, sociology, education, pharmacology, technology, linguistics, anthropology, business, law and others. 99% of the covered material is peer-reviewed, and includes ~2,500 selected international journals in dozens of languages dating back to the 1800’s; all indexed with controlled vocabulary from APA’s Thesaurus of Psychological Index Terms.

SociINDEX with Full Text is the world's most comprehensive and highest quality sociology research database. The database features >2,096,700 records with subject headings from a 19,750+ term sociological thesaurus designed by subject experts and expert lexicographers. SociINDEX with Full Text contains abstracts for >1,260 "core" coverage journals dating as far back as 1895 and full text for >820 journals (dating back to 1908), >830 books and monographs, and 14,636 conference papers.

Texas Reference Center is a Texas specific product comprised of periodicals, reference books, reports, and other content with >75 full text periodicals, 150 full text reference books, and several Texas newspapers about Texas history, ethnic and cultural diversity, gender studies, literature, public health, business, and other topics.

Health & Wellness Resource Center (HWRC) is a comprehensive resource that provides integrated access to medical, statistical, health, and wellness information including the respected Gale Encyclopedia of Medicine, full-text magazines,
journals, and pamphlets from a wide variety of authoritative medical sources with descriptions of and links to several pertinent Web sites, selected for their usefulness and appropriateness.

ProQuest (including ProQuest Dissertations & Theses)
ProQuest Dissertations & Theses database (PQDT) is the world's most comprehensive collection of dissertations and theses and the database of record for graduate research, with >2.3 million dissertations and theses included from around the world. The database includes bibliographic citations for materials dating from the first U.S. dissertation, accepted in 1861, to those accepted as recently as last semester. Dissertations published since July 1980 includes a 350-word abstract written by the author. Master's theses published since 1988 include 150-word abstracts. The full text of >1 MM titles is available in paper and microform formats and >75000 are available for download in PDF format. Bibliographic citations are available for dissertations dating from 1861, and >6000 new citations are added to the database annually.

ProQuest Research Library provides one-stop access to a wide range of popular academic subjects. The database includes >3,870 titles - >2,600 in full text - from 1971 forward. It features a highly-respected, diversified mix of scholarly journals, trade publications, magazines, and newspapers. This combination of general reference volume and scope makes it one of the broadest, most inclusive general reference databases ProQuest has to offer.

Sage Nursing & Public Health Collection: SAGE Publications publishes over 395 (scholarly) journals in business, humanities, social sciences, science, technology and medicine; >178,000 full-text articles, book reviews, editorials, and more with all the original graphics, tables, and page numbers from January 1999 to the present. The Sage Nursing & Public Health Collection includes the full text of 45 journals published by SAGE and participating societies, encompassing >28,190 articles. Also, to enhance the research value of their publications, Sage has added features which permit researchers to create personalized alerts, to save their searches, and to receive e-mails when new journal issues are published or when new content is added to the database.

Science Direct contains >25% of the world's science, technology and medicine full-text and bibliographic book and journal information. It includes >2,500 authoritative journal titles with ~10 million articles; a historical archive of >4 million 1823-1994 journal articles; and >10,000 books - including backfiles - in the following categories: ebooks, major reference works, book series and handbooks. The ScienceDirect books collection covers the core disciplines of life, physical and social sciences and are fully linked with journal articles, giving scientists a broader perspective of their area of study.

Web of Science provides seamless access to current and retrospective multidisciplinary information from ~8,700 of the world's most prestigious, high impact research journals and citation indexes, including Science Citation Index ('45-date), Social Sciences Citation Index ('56-date), Arts & Humanities Citation Index ('75-date), Index Chemicus ('93-date), and Current Chemical Reactions ('86-date). Web of Science also provides a unique search method, cited reference searching which permits users to navigate forward, backward, and through the literature, searching all disciplines and time spans to uncover all the information relevant to their research.

Useful Medical Search Engine Omni Medical Search <www.omnimedicalsearch.com> is a metasearch engine designed to search up to 16+ different medical search engines from 30+ different sources in 4 different categories so you can find everything you need from one convenient website. Each medical database chosen is unbiased and non-commercial in nature and an established authority for delivering responsible medical information.
Health and Wellness and Human Sexuality Websites:

**Advocates for Youth** [www.advocatesforyouth.org](http://www.advocatesforyouth.org) "is dedicated to creating programs and advocating for policies that help young people make informed and responsible decisions about their reproductive and sexual health." The site provides information, training, and strategic assistance to youth-serving organizations, policy makers, youth activists, and the media about topics and issues (abstinence, dating violence, emergency contraception, HIV, and more), selected publications, information about programs in the U.S. and in developing countries, lesson plans, and links to related information. Searchable. Some material also in Spanish and French.

**Alan Guttmacher Institute (AGI)** [www.guttmacher.org](http://www.guttmacher.org). With an emphasis on teenage sex and pregnancy, this searchable site provides statistics, policy papers and reports relating to abortion, law and public policy, pregnancy and birth, prevention and contraception, sexual behavior, sexually transmitted infections (STI) and HIV, and youth. Site also includes the institute's newsletters with several years' worth of archives. Users can create tables of U.S. and international statistics from databases compiled by the institute.

**Center for Disease Control** [www.cdc.gov/health/default.htm](http://www.cdc.gov/health/default.htm). The U.S. Government's Center for Disease Control offers a look at health and illness through an A-Z index. Excellent and trustworthy information.

**Center for Young Women's Health** [http://www.youngwomenshealth.org/index.html](http://www.youngwomenshealth.org/index.html) Children's Hospital Boston has created a health information site for teen girls that teaches them about important topics ranging from "Health & Development" to "Driving Safety" to "Emotional Health". Visitors will find that the "Ask Us!" feature is one that's vitally important for easily embarrassed teens, because it allows them to ask a health question without asking for their name or e-mail. This website also features three teen "Youth Advisors", participants in the Youth Advisory Program at the Children's Hospital Boston, who have been trained to educate their peers on health topics. They write and publish "Teen Talk", a quarterly newsletter with health information, and visit schools to give health presentations. Visitors will find that Children's Hospital Boston hasn't forgotten about teen boys' health, as they have their own site called "Young Men's Health", which can be accessed from this site by clicking on the "Guys' Guides" link on the left hand menu, near the bottom of the page.


**Go Ask Alice! Sexual Health** [www.goaskalice.columbia.edu](http://www.goaskalice.columbia.edu). Answers to questions about reproduction, contraception, STDs, and men's and women's sexual health.

**MedlinePlus** [http://medlineplus.gov](http://medlineplus.gov). Authoritative information from the U.S. National Library of Medicine (NLM), the National Institutes of Health (NIH), and other government agencies and health-related organizations. Information on >700 topics covering diseases, conditions and wellness, as well as extensive information about drugs, an illustrated medical encyclopedia, interactive patient tutorials, and latest health news. Also includes: The A.D.A.M. Health Illustrated Encyclopedia [www.nlm.nih.gov/medlineplus/encyclopedia.html](http://www.nlm.nih.gov/medlineplus/encyclopedia.html) with >4,000 articles about diseases, tests, symptoms, injuries, and surgeries and contains an extensive library of medical photographs and illustrations and provides links to directories to help you find health professionals, services and facilities. *Sex, etc.*

**www.sexetc.org** has information on a broad range of sexuality issues. Topics include love, sex, abstinence, contraception, gender identification and sexual orientation, AIDS, sexually transmitted diseases (STDs), drugs and drinking, and violence. Features include live chats with experts, state laws affecting teens' rights, and a glossary. From the Network for Family Life Education (NFLE), a nonprofit organization at Rutgers University. **Teenwire** [www.teenwire.com](http://www.teenwire.com) is a website for teens with information about relationships, sexuality, pregnancy, peer pressure, dating, love, sex, birth control, infections and diseases, abortion, sexual orientation, parents and friends, feelings, and other issues of adolescence, with an archive of all questions teenagers have asked. Includes body diagrams and audio programs. Some information also available in Spanish. Sponsored by Planned Parenthood Federation of America.

**WebMD** [www.webmd.com/](http://www.webmd.com/) is a leading web-based provider of interactive online healthcare information, decision-support
applications, and communications services to consumers, physicians and other healthcare professionals, employers and health plans through public and private online portals and health-focused publications. It enables consumers to obtain detailed information on a particular disease or condition, locate physicians, store individual healthcare information, assess their personal health status, receive periodic e-newsletters and alerts on topics of individual interest, and participate in online communities with peers and experts. It provides physicians and healthcare professionals with access to clinical reference sources, stay abreast of the latest clinical information, learn about new treatment options, earn continuing medical education (or CME) credit and communicate with peers. And it also enables employers and health plans to provide their employees and plan members with personalized health and benefit information and decision-support technology that helps them make more informed benefit, provider and treatment choices.
Please read the following case study. Upon completion, please answer the questions following the case study on a separate piece of paper. Make sure your answer is well synthesized, grammatically correct and typed (double-spaced).

Who participated in the survey?

Making use of the latest thinking about scientific sampling, 3,432 individuals were surveyed. They ranged from 18 to 59 years of age. This final sample represented an 80 percent response rate.

Some interesting (and some unexpected) findings

- Eighty percent of those interviewed had one or no sexual partner in the year preceding the interview.
- Ninety percent of women and slightly more than 75 percent of men surveyed reported marital fidelity.
- Married people have more sex than singles do, but cohabiting singles have the most sex.
- About 75 percent of the married women reported they usually or always had an orgasm during intercourse.
- Ninety-five percent of the men reported orgasms during intercourse.
- The size of the population who identified themselves as having a same-sex orientation was found to be smaller than previously estimated (2.8 percent of male respondents and 1.4 percent of female respondents).
- Asking relevant questions differently brought different responses regarding same-sex orientation. About 9 percent of men and 5 percent of women had at least one same-sex experience. Forty percent of the men in this category had their experience before age 18. The majority of the women in this category had their same-sex experience after age 18.
- The three most preferred sexual activities for self-identified heterosexuals were (in order of preference) vaginal intercourse, watching a partner undress, and oral sex.
- More than half the men, but only 19 percent of the women, reported they thought about sex every day.
- About half of all cohabiting relationships last less than one year.
- Masturbation was generally regarded as a normal and healthy sexual outlet, particularly among males.
- Masturbation was more common among those between 24 and 34 compared to younger age groups.
- Contrary to the myth that adults masturbate if they do not have an available sexual partner, those who had the most sex with others also tended to masturbate the most.
- About 80 percent of the white college-educated male respondents regularly engaged in oral-genital stimulation, but only 51 percent of the African American respondents (regardless of education) did.
- Men engaged in more overall sexual behavior with more partners (median number was 6) compared to women (median number was 2). However, the range was great, with 26 percent reporting one lifetime partner. One woman reported 1,009 partners and one man reported 1,016.

CRITICAL THINKING QUESTIONS: (1) Which of the above findings are most and least in keeping with popular beliefs about American Sexuality? (2) Which findings are most surprising to you? (3) Which findings would be very different if this survey were conducted in 1954 or in 2004?
Prairie View A&M University Health and Human Performance
HUMAN SEXUALITY—for Dr. Marsha Kay Wilson’s class CASE STUDY

“THE SEXUAL VICTIMIZATION OF COLLEGE WOMEN”

Please read the following case study. Upon completion, please answer the questions following the case study on a separate piece of paper. Make sure your answer is well synthesized, grammatically correct and typed (double-spaced).

Our understanding of the prevalence and nature of violence against college women in the United States was expanded greatly by the publication of a study conducted in 1997 entitled “The Sexual Victimization of College Women” (Fisher et al., 2000). Not only are college women at greater risk for sexual assault and rape, but they are less likely to characterize their victimization as a crime.

This study is unique in that it correlated the results of two different survey methods. One sample of 4,446 randomly selected respondents participated in the National College Women Sexual Victimization Study (NCWSV), which used a series of behaviorally specific questions to assess a range of possible sexual victimizations. Rather than asking if a respondent “had been raped,” the NCWSV described an incident graphically (e.g., someone “made you have sexual intercourse by using force or threatening to harm you . . . by intercourse I mean putting a penis in your vagina”). These questions were then followed by a detailed incident report. Another group participated in a more traditional survey approach.

The NCWSV study found that in a 6-month period, 2.8 percent of college women sampled had experienced either a completed or an attempted rape, some more than once. These results suggest that in a calendar year, nearly 5 percent of college women are victimized in this manner. Put another way, for every 1,000 women attending college, there may well be 35 incidents of rape in a given academic year. Projected over the nation’s female student population of several million, these numbers suggest that rape victimization is a problem of large proportions.

Most often, the offender was a boyfriend, ex-boyfriend, classmate, friend, acquaintance, or coworker and was known to the victim. 12.8 percent of completed rapes, 35 percent of attempted rapes, and 22.9 percent of threatened rapes occurred on a date. Most incidents of sexual victimization occurred in the evening, in the victim’s home. College women were victimized both on- and off-campus.

Although two-thirds of victims told someone about the sexual victimization (usually a friend), fewer than 5 percent of completed and attempted rapes were reported to law enforcement officials. In some cases, the victim felt the incident was not serious enough to report, or wasn’t sure a crime had been committed. In others there were barriers to reporting, including fear of hostility from the assailant or the police, fear of not being believed, or concerns about others learning of the incident.

Other results from the NCWSV study suggest that many students will encounter sexist and harassing comments, receive obscene phone calls, and may be stalked or experience some form of coerced sexual contact. The study also showed that women who live on campus, are unmarried, get drunk frequently, and have experienced prior sexual victimization are more likely to be sexually victimized than others. College officials should use this information to improve education and knowledge of sexual assault. College women would be wise to use this information to develop safe habits and strategies to avoid circumstances in which sexual assault can occur.

CRITICAL THINKING QUESTIONS:

How do you feel about this study? Do you feel this is a problem at PVAMU? What type of suggestions would you make to decrease sexual victimization of college women?
Please read the following case study. Upon completion, please answer the questions following the case study on a separate piece of paper. Make sure your answer is well synthesized, grammatically correct and typed (double-spaced).

The Communications Decency Act of 1995 attempted to keep “obscene, lewd, lascivious, filthy or indecent” material off the Internet (Levy, 1995). Legal challenges arose immediately because the law was so broad and so vague that uploading some classic literary works would become felonies, as would distributing certain information about contraception and abortion. The central question was whether cyberspace should be as controlled as radio and television, or as free as telephones, magazines, newspapers, and private conversations. Cyberspace experts point out that the Internet is more comparable to a river of ongoing conversation among 30 million computers and thus should not and cannot be subject to the same restrictions as other electronic media.

Trading sexually explicit images is one of the largest recreational uses of computer networks. (Yet such images constitute only 3 percent of all messages on Usenet newsgroups). Because standard pornography is so easily available elsewhere, “specialty” materials are in greater demand on the Internet. Paraphilic images, especially those involving pedophilia, sadomasochism, and bestiality, are common. Most of the images are simply taken from preexisting print sources, but now these are available in one’s own home. Knowledge of children’s heavy involvement with computers has led some child molesters to use this means to contact children. But how should children be protected from such material? Is parental guidance enough? Can software be developed that would allow such material to be screened away from children?

In June 1996, a federal three-judge panel produced a 175-page memorandum (it appeared online within minutes) extending free-speech protections to cyberspace. The decision noted that because the Internet is in its infancy, still evolving, and one of the most democratic of communications channels, it probably deserved even greater free-speech protection than broadcast and print media (Nadler & Fong, 1996). They came to this conclusion after spending several weeks surfing around the Net alone and under the guidance of experts. They searched for pornography and tested programs that allow parents to screen or block certain materials. They concluded that parents, not government, should take responsibility for limiting their children’s access to materials on the Net. To protect children, the panel called for voluntary content rating by PICS (Platform for Internet Content Selection) as well as filtering and blocking software. SurfWatch and Canada’s Net Nanny are examples of such software. Groups representing social and religious conservatives vowed to continue their fight for increased restrictions.

In 1997, the U.S. Supreme Court declared the Communications Decency Act to be unconstitutional and a serious threat to free speech. Noting the tremendously democratic potential of the Internet as a forum where every citizen’s voice can be heard, the Court concluded that communications on the Internet deserve the highest level of protection. After learning how to surf the Internet, the Supreme Court Justices determined that the Internet is not as invasive as radio or television and that there are other ways to protect children from the pornography on the Internet. The Court found, in particular, that it is extremely difficult to “accidentally” encounter pornography on the Internet (Levy, 1997).

CRITICAL THINKING QUESTIONS:
How do you feel about cyberporn? What do you think about this study? What do you think about the Supreme Court ruling? Do you believe cyberporn is harmful to children? Why or why not? Do you believe cyberporn is harmful to adults? Why or why not?
Please read the following case study. Upon completion, please answer the questions following the case study on a separate piece of paper. Make sure your answer is well synthesized, grammatically correct and typed (double-spaced).

Many couples take it for granted that the responsibility for avoiding pregnancy should be on the woman. They might assume that because women bear the children, they should be more concerned about preventing pregnancy.

Yet taking total responsibility can be burdensome for a woman. She will always be the one to schedule appointments, take time from work and studies, undergo and pay for examinations, be fitted for contraceptive devices, have prescriptions filled, or pay for supplies. She must remember to take the pill daily, be sure the IUD, cervical cap, diaphragm, or foam is in place, or keep charts of her menstrual cycle. She might wish for freedom from the health hazards associated with the pill or IUD. Shoudering the bulk of the responsibility can create resentments that interfere with loving feelings. And the male’s lack of involvement can result in his feeling distant and isolated.

An even worse scenario involves the couple who both assume that the other partner has taken the responsibility for contraception and feel embarrassed to ask about this. For this couple, this lack of communication can mean that no preparations have taken place.

For many couples, contraception can be a shared responsibility. Some share by having each partner use one form of contraception. For example, he uses a condom, while she uses a diaphragm. Aside from the sense of shared responsibility, this can improve the effectiveness of the methods chosen.

CRITICAL THINKING QUESTIONS:

How do you feel about the information above? Should the responsibility of contraceptives be a responsibility of the male or the female? Why or why not? Identify four types of contraceptives and identify at least three advantages and disadvantages of each.
Recent years have seen an increasing number of lesbian, gay, and bisexual (LGB) people who desire to raise children. The desirability of LGB parenting has been debated in the courts and elsewhere. Let’s look at each side of this issue.

On the negative side, assumptions are made about non-heterosexuals and the effect of LGB parenting on children. Rationales stated by courts in both the United States and Canada in denying custody or adoption rights to LGB parents have included the following claims (Fowler, 1995):

- Being raised in an LGB household would impair the psychosocial development of a child.
- The child would suffer from society’s stigmatization, harassment, or intolerance.
- Individuals who are lesbian, gay, or bisexual are unable to be good parents.
- The child might be infected by HIV.
- The child might be sexually exploited or molested by LGB parents.

An abundance of literature suggests that these assumptions are invalid. No one claims that growing up in a household with one or more LGB parents or co-parents is exactly the same experience as growing up in a household with one or more heterosexual parents. But neither has any research shown that the former experience is inferior to the latter (Flaks et al., 1995; Samuels, 1995; Tasker & Golombok, 1995; Fowler, 1995; Victor & Fish, 1995). None of the five listed assumptions has been validated.

In one study, fifteen lesbian couples and the three- to nine-year-old children born to them through donor insemination were compared with fifteen matched heterosexual-parent families. Results showed no significant differences between the two groups of children. No significant differences were found between the couple adjustment of the lesbian and heterosexual couples. The only difference found was that the lesbian couples exhibited more awareness of parenting skills than did the heterosexual couples (Flaks et al., 1995).

Many people have wondered about the effect of parents’ non-heterosexual orientation on the sexual orientation of their biological or adoptive children. In light of the strong possibility that sexual orientation is biologically influenced, one might expect a high percentage of the natural sons of gay fathers to be gay. But they are mostly heterosexual in their orientation. In one study, only about 10 percent of adult biological sons raised by gay fathers were gay, only a little higher than the percentage of gay males in the general population (Bailey et al., 1995). Another study showed that neither the daughters nor the sons raised by lesbian mothers have a high incidence of same-gender sexual orientation (Tasker & Golombok, 1995). As adults, these sons and daughters also functioned well in terms of their psychological well-being, their family identity, and their friendships and intimate relationships.

Being an LGB parent is not always easy. The parent’s partner might or might not take an active role in parenting or co-parenting, and social support networks might not be as widespread as they are for heterosexual parents. A sector of the lesbian community itself, for example, is unsupportive of lesbian motherhood (Lott-Whitehead & Tully, 1993).

CRITICAL THINKING QUESTIONS:
What do you feel about the content of the study? How do you feel about the gay and lesbian population? How do you feel about bisexuality? How do you feel about people on the “down low?” How do you think the gay and lesbian population feel in today’s society? Do you think they have issues/obstacles that mainstream couples do not have? If yes, what kind? If no, why not?
Prairie View A&M University
Health and Human Performance Department

Please be advised that cheating and plagiarism will not be tolerated in the Department of Health and Human Performance. Please read, sign and date this form. Thank you in advance, for your cooperation.

THE DEFINITION OF CHEATING IS:

Cheating is defined as using, or supplying information that is not authorized by the instructor in taking an examination or completing assignments assigned by the instructor. Cheating is also turning in someone else’s work as that of your own.

THE DEFINITION OF PLAGIARISM IS:

Plagiarism is a unique form of cheating where a person turns in someone else’s work and represents it as being their own. This would include: 1) purchasing term papers and turning them in as if they were original work, 2) using a paper that had previously been turned in, 3) copying passages verbatim from books, articles, etc. and, 4) submitting material for grades in which the student has not done the work required.

Consequences of these actions are severe, ranging from failure of the assignment to failure of the course. Repeated offenses could even result in expulsion.
I have read and understand the above policy.

____________________________________________
Please print your name legibly.

____________________________________________
Signature

____________________________________________
Date

Dr. Marsha Kay Wilson

June 6, 2016

Professor

Date
Prairie View A&M University  
Health and Human Performance Department

Please read, sign and date this form. Thank you, in advance, for your cooperation.

I have received a copy of the syllabus for this course and I understand that I am responsible for knowing and following the information contained herein. I also acknowledge and understand the syllabus has multiple addendums, subsequently identified in this document, thoroughly explained by the professor.

(1) “While attendance is reflected as 33% of the students’ grade, be advised excessive absences will result in an “F” as per the student handbook.”

(2) “The calendar is an initial guideline for assignment due dates. The Professor reserves the right to make modifications, as necessary, based on the needs of the students and/or the needs of the Professor.”

(3) “If a personal emergency occurs during my office hours or class time, please accept my sincere apologies, in advance. If an emergency occurs, an attempt to make up office hours during the same week will be made. Additionally, my office hours may change to accommodate the responsibilities associated with a student organization.”

(4) I will not “snapchat” or “instagram” post(s) of content covered in class to protect the privacy of my classmates or the Professor.

(5) I will not text or use my phone during class as not to disrupt my classmates.

(6) I understand I may not enter class 15 minutes beyond the time class begins as not to disrupt my classmates or the Professor.

________________________________________________
Please print your name legibly.

________________________________________________
Signature

________________________________________________
Date

Course Name ______HLTH-1023 Human Sexuality
Course Section/Time ________________________________

Dr. Marsha Kay Wilson ___________________________  June 6, 2016

Professor Date