FROM OUR CONSUMER CORRESPONDENT

Sexual myths

Susan Quilliam

Background
In the 18 months that I've been the Journal’s Consumer Correspondent I’ve rarely referred to my day job! But right now I think it’s relevant to mention that I’m an agony aunt, because the starting point for this feature is my postbag.

My readers’ problems include all the usual suspects: unwanted pregnancy, sexual difficulties, fading libido – in short, a full spectrum of the tricky issues that Journal readers also face with their patients. And what’s spurred me on to write this feature is that I’ve realised that beneath a surprising number of these problems is a very simple root cause: sexual myths.

The readers who need my help – ranging from 13-year-old schoolgirls through to 81-year-old male pensioners – are all too often suffering from a belief in one or more of the numerous fallacies that abound in the world of sexual health. Their problems, whether practical or emotional, are regularly underpinned by the fact that they not only don’t have the right information, but are also buying into emotionally undermining beliefs.

What myths are
Let’s first consider what a myth is. It’s not just a lack of information or a misunderstanding; if it were simply that then misinformed patients would be speedily re-educated by friends, family and the media. A myth is much more powerful, simply because it’s a widely held piece of misinformation so many people believe that it’s never challenged, and is actively reinforced, and so takes a hold. And a myth is harmful, either physically or emotionally.

Masturbation is bad for you. Masturbation is good for you: it teaches you about your body and makes you more likely to orgasm. Research suggests that 90-95% of men and 80-85% of women masturbate.

So the myth that masturbation makes you go blind may seem humorous – until you read the letters I receive every day from terrified young girls. The myth that the bigger the penis the better the lover may cause bored sighs – until you read the letters I receive from not-so-well-endowed young men who haven’t dared approach a woman, let alone suggest a physical relationship, for fear they will be laughed at. (Or until you read the letters from those who have been laughed at because, of course, young women buy into those beliefs too.)

Myths create problems, and not only because people are simply less effective and less resourceful if they don’t have the correct information about such topics as masturbation, lovemaking, contraception and sexual health. Myths create problems because they so often trigger negative emotions: confusion, self-doubt, blame and conflict.

How myths grow
How do myths develop? In any situation – particularly where there’s no access to hard information – human beings will instinctively find patterns in what they experience. And even if those patterns are incorrect, they may gain ground. That’s more likely to happen when the subject matter is a scary one: one which people need to feel they have control of. And what could be scarier than sex? What – apart from death – do we most want to be in control of if it isn’t sexual contact and its potential outcome, pregnancy? It’s only very recently that we had any hard information about the way that works – primitive cultures didn’t even link sex and conception – and even recent scientific realisations are taking a while to bed into the culture.

A long penis is more attractive than a short one. Length doesn’t seem to matter; many women prefer a wide penis, but all say that what is done with it is much more important than what size it is.

As a result, few human societies even in the 21st century have found a way to be utterly at ease with such issues as orgasm, oral sex, anal sex, masturbation, homosexuality, conception, contraception, and so on. It’s no wonder that myths cluster round the topic of sex like bees round a honey pot.

So, fear of conception leads people to want to control pregnancy. In the absence of scientific data they look around for possible explanations, and seize on the fact that, for example, they didn’t conceive after that quick and upright liaison against the village oak tree. Whoosh, the myth is born that “you can’t get pregnant standing up”. Yes, this is a simplified explanation of a complex process, but essentially that’s how such fallacies are born.

She won’t get pregnant if he withdraws before he climaxes. Even before climaxes, the penis can leak thousands of sperm. Once he’s penetrated, she’s at risk.

And what makes it even more likely to happen is that some myths develop from a genuine grain of truth. “You can’t get pregnant if you are on your period” is a misrepresentation, but does reflect the fact that if you’re menstruating then you are less likely to be ovulating. “You can’t get pregnant if he pulls out before he comes” is wrong, but it does reflect the fact that you are slightly less likely to conceive if male orgasm happens outside rather than inside the vagina.

Men have a higher sex drive than women. Many studies suggest that men and women share equivalent sex drives if all other conditions are equal.

There’s a further element in play, one that goes beyond the individual desire to control what’s happening, and that’s the group desire to control what’s happening. Human societies are driven to exert social control over their members, and that means myths which exert such control will flourish.

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So a society which wants, for religious and social reasons, to encourage only heterosexual, procreative sex will support myths such as “masturbation causes palm hair” or “anal sex means you’re gay”. A society which wants to discourage female sexual freedom will propagate such myths as “if a woman needs to masturbate then she doesn’t love her partner” and “women are naturally monogamous”.

**Why myths survive**

But surely, in these days of scientific proof and widespread mass communication, myths are hardly likely to survive, and won’t continue to spread? Well, certainly most people have much more accurate sexual knowledge than they had 20 years ago. But even now, my readers and your patients believe myths. Why?

**If his erection doesn’t get release, he’ll get ill. If his erection doesn’t get release, he may get frustrated. But he won’t get ill.**

Often, the reason is quite simply that people gain their information from, and get that information reinforced by, unreliable sources. Young people typically talk about sex with their peers, who also lack knowledge and so are likely to believe and repeat the same fallacies. Adults tend to be more informed, but they also discuss sex less, typically from a position of thinking they know what’s what. As a result, adult belief in myths is often more worrying a problem than that of young people – at least the youngsters are willing to admit they may be wrong!

When it comes to more formal information you might think that the plethora of sex books – and sexperts – would mean that myths couldn’t possibly take hold. And yes, both are consulted more than they were even a few years ago – but largely by the converted, those who want to know and who already know about sexuality.

When it comes to experts there’s a further problem: embarrassment. And that’s not just embarrassment at discussing sexual questions. It’s also embarrassment at needing to discuss sexual questions. Our society expects everyone to know about sex, be doing it and be good at it. Hence it’s become even more difficult for the man or woman in the street to approach their local medical professional; they don’t want to admit they don’t know. (This is one reason why agony aunt services, where advice is sought anonymously, are gaining ground.)

**A woman’s sex drive plummets after the menopause. In some societies, women have a more active sex life after the menopause. Lack of sex drive in Western women may be due to society’s expectations.**

A final, worrying reason why accurate detail about sex hasn’t fully propagated in today’s society is actually down to a myth: the myth that sexual information is in itself a harmful thing. Open any tabloid newspaper and somewhere within it you will find a repetition of the falsehood that sex education results in promiscuity, that teaching young people about sex means that they will do it more. Is it any wonder that sexual myths still abound?

**What we can do**

Myths are harmful for a whole variety of reasons. They not only lead to practical problems such as unplanned pregnancies. They lead to personal unhappiness – from women who think they shouldn’t masturbate but do, to men who think they should have constant erections and don’t. And they lead to couple problems – from husbands who think that their wives’ positive smear must be due to promiscuity, to wives who think that their husbands’ lowered libido must be due to infidelity.

**The more young people know about sex, they more tempted they are to have it. Several studies show that sex education makes it more likely that young people will have sex at a later age.**

So it’s vital that wherever possible, myths get challenged. To begin with, of course we need to make sexual information as accurate as possible – and both individual medical professionals and nationwide organisations such as the fpa are doing a sterling job in this regard. But where myths are concerned, simple information giving may not be enough. Because first, as I commented earlier, a myth is typically passed on by and to the uninformed, who then don’t bother to look further. We need to be more proactive in our propagation of the truth.

We need to educate as much as possible, particularly those people who, because of their inexperience or lack of confidence, are most at risk of buying into the myths.

We also need to make it emotionally easier for people to access informed sources, in other words, reduce the embarrassment factor. The Internet undeniably helps here because it provides an anonymous and humiliation-free way of answering questions. But of course medical professionals can look at their own performance. We can ask ourselves whether we are approachable, whether we give clear and relaxed information about sexual issues – or whether we simply squirm, avoid eye contact and hand over a leaflet!

**A real man can always get it up. All men have times when they can’t get an erection because of stress, too much alcohol or emotional issues.**

Lastly, we as a society need to remember that underlying and maintaining all myths is a climate of fear. Yes, sex is wonderful. But it’s also hung around with uncertainties, anxieties and low self-esteem. To create, within our society, an atmosphere of confident yet responsible attitudes to sexuality would help enormously. Because it would enable all of us to ask the questions we need to ask in order to know the truth about sex – and so to finally, finally debunk the myths.

I leave you with an anecdote that concerns a friend of mine, and which I trust will make the point. During a recent consultation with her general practitioner (GP) my friend mentioned, almost in passing, that she was having difficulty in orgasging during intercourse. Her exact words, I believe, were: “I know penetration’s meant to be the Holy Grail, but it sure doesn’t do it for me”. The GP – all respect due – spied a lurking myth in that sentence, and spontaneously gave her patient a quick paper and pencil lesson on the vital role of the clitoris in female orgasm. Result: one very happy woman.

Moral? Challenging though it may be, giving a patient (or her partner) information when you sense they need it could change their sex lives forever!

**Editor’s Note**