Promoting Sexual Health: The Public Health Challenge

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Meeting the Challenge:  
A Public Health Imperative

- 42 million living with HIV/AIDS
- 340 million new cases of STI’s per year
- Major cause of infertility is STI/RTI infection
- 15 million women under 20 give birth per year; many unintended.
- Unsafe abortion leads to a myriad of health consequences
- 8-33% of the adult population with some kind of sexual dysfunction
- 20-50% of women have suffered physical violence from partners.
- 12 and 25% of women have experienced forced sex during their lives.
- Untold numbers of violence against sexual minorities
- Child sexual abuse affects 10-25% of women; 3-13% of men.
What is common to these different domains?

- Sexual behavior
- Context of sexual relationship
- Interrelationship of physical, mental, sexual and reproductive health
Structural Factors

- Poverty
- Racism
- A culture uncomfortable talking about sex except in joking – especially about homosexuality
- Lack of sexuality education
- Heterosexism and Homophobia
Failure to recognize that most infections occur between men who have sex with men – and lack of political resolve to care for those at risk.

Institutionalized discrimination – creating fear of “coming out.”

Religious perspective: Sex for procreation, not for pleasure or health

Catholic church’s stand on barrier contraception has not been modified by disease prevention needs

Moralism rather than scientific information dictating public policy
Lack of citizenship for all human beings
Citizenship

- Citizenship confers upon us those rights and responsibilities that come with equal membership and participation in a community. Such membership is not only framed in relationship to the legal rules established by the state, but also through social relationships between individuals (Lister, 1997)
Sexual Citizenship

- This framing makes a whole lot of people with non-conforming sexualities, different genders (beyond the binary), sex workers, people living with HIV/AIDS, etc. – full citizens with full claims to resources, recognition and to representation.
Addressing the “Syndemic” Responding with a Systematic Approach
Sexual Health as the Overarching Framework of HIV Prevention/Reproductive Health Promotion
Sexual Health Model

1. Talking About Sex
2. Culture & Sexual Identity
3. Sexual Anatomy Functioning
4. Sexual Health Care & Safer Sex
5. Challenges
6. Body Image
7. Masturbation & Fantasy
8. Positive Sexuality
9. Intimacy & Relationships
10. Spirituality
Components of Sexual Health

1. Ability to talk about sex and sexuality.
2. Culture and sexual identity.
3. Sexual anatomy and functioning.
4. Sexual health care and safer sex.
5. Awareness of sexual health barriers.
7. Masturbation and fantasy.
9. Intimacy and relationships.
10. Spirituality and Integration
Time to Develop Global, Regional and National Public Policies to Promote Sexual Health
A Public Health Imperative!!!
In 1975, the World Health Organization (WHO) produced a historic document. It called upon societies to provide the necessary sexuality education, counseling, and therapy to promote sexual health and to provide necessary training for health professionals. This document also served as a stimulus for the development of the field of sexology and sexual resources centers throughout the world. It contained a basic definition of sexual health.

http://www2.hu-berlin.de/sexology
Developing Regional Strategies
Pan American Health Organization

- New definitions of sex, sexuality and sexual health and promoting the following regional goals and strategies:
  - Promote sexual health;
  - Provide comprehensive sexuality education;
  - Provide education, training, and support to professionals;
  - Develop and provide access to comprehensive sexual health care services;
  - Promote and sponsor research.

http://www.paho.org/English/HCP/HCA/PromotionSexualHealth.pdf
National Strategies

- Australia’s Health 2000, Australian Institute of Health and Welfare
- National Strategy for Sexual Health and HIV, Department of Health - United Kingdom
The Surgeon General’s Call to Action
To Promote Sexual Health And Responsible Sexual Behavior
2001

Office of the Surgeon General

http://www.surgeongeneral.gov/library/sexualhealth/
Developing National Strategies to Promote Sexual Health

- In the case of Australia and the United Kingdom, the strategies to promote sexual health were more specifically tied to HIV prevention.

- However, most recently, a broader strategy to promote sexual health and responsible sexual behavior was unveiled in the United States.

http://www.surgeongeneral.gov/library/sexual_health
Serious disparities in the populations affected:

Adolescents
Economically Disadvantaged
People of Color
Sexual Minorities
Prescription
(Not to be used to obtain medication
or to contradict your own doctor's advice)

Best Health Wishes

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- Moderate physical activity, at
  least 5 days/week, 30 min./day
- Avoid toxins — tobacco, illicit drugs,
  and abuse of alcohol
- Eat at least 5 servings of fruits
  and vegetables a day
- Responsible sexual behavior;
  abstinence where appropriate
WHO held an international consultation to discuss approaches and strategies for promoting sexual health:

- To elaborate new working definitions of sex, sexuality, sexual health and sexual rights;

- To serve as a basis for countries to develop their own strategies

Geneva, January 28-31, 2002
New working definitions of sex, sexuality, sexual sexual health and sexual rights

*http://www.who.int/reproductive-health/gender/sexual_health.html*
Sex

Sex refers to the biological characteristics which define humans as female or male. [These sets of biological characteristics are not mutually exclusive as there are individuals who possess both, but these characteristics tend to differentiate humans as males and females. In general use in many languages, the term sex is often used to mean "sexual activity", but for technical purposes in the context of sexuality and sexual health discussions, the above definition is preferred.]
Sexuality

Sexuality is a central aspect of being human throughout life and encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, ethical, legal, historical and religious and spiritual factors.
Sexual Health

- Sexual health is a state of physical, emotional, mental and social well-being related to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.
Sexual Rights

- Sexual rights embrace human rights that are already recognized in national laws, international human rights documents and other consensus documents. These include the right of all persons, free of coercion, discrimination and violence, to:
Sexual Rights

- the highest attainable standard of health in relation to sexuality, including access to sexual and reproductive health care services;
- seek, receive and impart information in relation to sexuality;
- sexuality education;
- respect for bodily integrity;
- choice of partner;
- decide to be sexually active or not;
- consensual sexual relations;
- consensual marriage;
- decide whether or not, and when to have children; and
- pursue a satisfying, safe and pleasurable sexual life.

The responsible exercise of human rights requires that all persons respect the rights of others.
Probably the most controversial issue that has daunted many constructions of sexual health is the issues of pleasure and sexual rights.
The responsibility of the state has been made clear: to respond strategically and comprehensively to the plethora of sexual health problems as an essential means of promoting human development.
Lessons Learned

- Groups from diverse backgrounds were able to find common ground on evidenced-based strategies to promote sexual health.

- There is remarkable consistency throughout these documents. They have all contributed to a clarity in our definitions of sex, sexuality, and sexual health.

- It has taken collaboration from leaders in HIV/AIDS and sexual, reproductive, child and adolescent, and mental health to produce comprehensive sexual health goals and strategies.
Lessons Learned

- Collaboration from leaders from diverse backgrounds in the health sector were needed to produce comprehensive sexual health goals and strategies. They were able to find common ground on evidenced-based strategies.
Conclusion

- One of the most exciting and potentially significant advances in HIV/AIDS policy worldwide has been the development of documents at the national, regional and international levels advancing sexual health.
Leadership needed from the Health Sector

Leadership is needed in the health sector to:

- create better climates for discussion of sexuality
- access to information and education about sexuality
- prevention strategies to include community-based interventions
- access to care for sexually related concerns,
- more research in human sexuality and evaluation of programs designed to promote sexual health and responsible sexual behavior.
A Public Health Approach is Needed

- While it is too early to assess the impact of such documents on national, regional or international policy, it is imperative that policies based upon a public health approach be developed and implemented.
Besides more research, more money for prevention, we need leadership, vision, courage, commitment to strategize for the promotion of a sexually healthier society.
We have a public health imperative.
Doing nothing is unacceptable.