



# Module 1

## Introduction to sexual health



## Module 1 - Introduction to sexual health

**Upon successful completion of this module you should be able to understand the following working definitions:**

- sexual health
- sexuality
- sexual orientation
- social determinants of sexual health
- sexual rights



## Module 1 - Introduction to sexual health

# Sexual Health

Sexuality and sexual health are two closely related concepts fundamental to the overall health and well-being of populations.

WHO defines **sexual health** as a state of physical, emotional, mental and social well-being in relation 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”.

The WHO definition of sexual health mirrors the 1948 WHO definition of overall health.

Sexual health cannot be defined, understood or made operational without a broad consideration of sexuality, which underlies important behaviours and outcomes related to sexual health.



## Module 1 - Introduction to sexual health

# Sexuality

WHO defines **sexuality** as “a central aspect of being human throughout life [that] 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, legal, historical, religious and spiritual factors”.



## Module 1 - Introduction to sexual health

# International Conference on Population and Development

The International Conference on Population and Development, held in Cairo in 1994, addressed human rights, sexual and reproductive health, and gender equality and emphasized the equity of access to reproductive and sexual health services.

The ICPD conference described sexual health as, “the enhancement of life and personal relations, and not merely counselling and care related to reproduction and sexually transmitted disease.”

Since the ICPD meeting, the term “sexual and reproductive health” has widely been used in policy and academic circles. In some contexts, in which the term “sexual health” is considered too contentious or provocative, the term “reproductive health” has been used euphemistically.

Sexual health includes concepts that are broader than reproductive health and encompasses a range of issues that affect individuals throughout their lifecourse, particularly given most sexual activities are not directly related to reproduction.



## Module 1 - Introduction to sexual health

# Sexual orientation

Sexual orientation refers to an individual's physical, romantic, and/or emotional attraction towards others. Sexual orientation is distinct from gender identity. The term sexual orientation can be applied to sexual attraction, sexual behaviour, and sexual identity.

Sexual orientation greatly influences sexual health needs. Marginalized sexual identities are often accidentally or purposely ignored in sexual health education or services, and are therefore at greater risk of negative health outcomes.

Sexual orientation might be fluid.

The labels that have become commonplace both in society and within the healthcare community, such as homosexual and heterosexual, are socially constructed terms, and do not necessarily reflect actual, perceived expressions and experiences.



## Module 1 - Introduction to sexual health

### Social determinants of sexual health

Sexual health is greatly influenced by individual, family, community, cultural, socioeconomic, political, and environmental factors, that can in turn affect vulnerability and risk.

Risk:	The likelihood that an individual is exposed to an adverse sexual health outcome
Vulnerability:	The extent of exposure to ill-health stemming from social contextual factors that are largely beyond the individual's control or agency.

Inequitable power structures, poverty, access to resources, discrimination and stigma are all examples of social determinants that have far-reaching consequences on an individual's sexual health.



## Module 1 - Introduction to sexual health

### Social determinants of sexual health

Vulnerable populations include individuals who for example engage in transactional sex, MSM, transgender persons, migrants and refugees, and people with disabilities. Protective factors, however, can mediate the compounding effects of vulnerability and risk. Financial security, equality, and access to education are all examples of protective factors.

Social determinants must be considered in context when addressing sexual health concerns in legislation, healthcare, and education, and also when developing, planning, and implementing sexual health programmes, interventions and services.

Many interventions related to social determinants of sexual health are beyond the reach of typical public health interventions and require collaborative, inter-sectoral policies, using a human rights framework.





## Module 1 - Introduction to sexual health

# Sexual Rights

The achievement of the highest attainable standard of sexual health is closely linked to the extent to which people's human rights are respected, protected and fulfilled:

- the right to non-discrimination,
- to privacy and confidentiality,
- to be free from violence and coercion, and
- the right to education, information and access to health services.



## Module 1 - Introduction to sexual health

# WHO's Framework for Operationalizing Sexual Health and Linkages to Reproductive Health

Sexual health and reproductive health are closely linked, but crucial aspects of sexual health can be overlooked when grouped under or together with the domain of reproductive health.

WHO created a framework for an operational approach to sexual health to create broader awareness of comprehensive sexual health interventions and to ensure that sexual health and reproductive health both receive full attention.



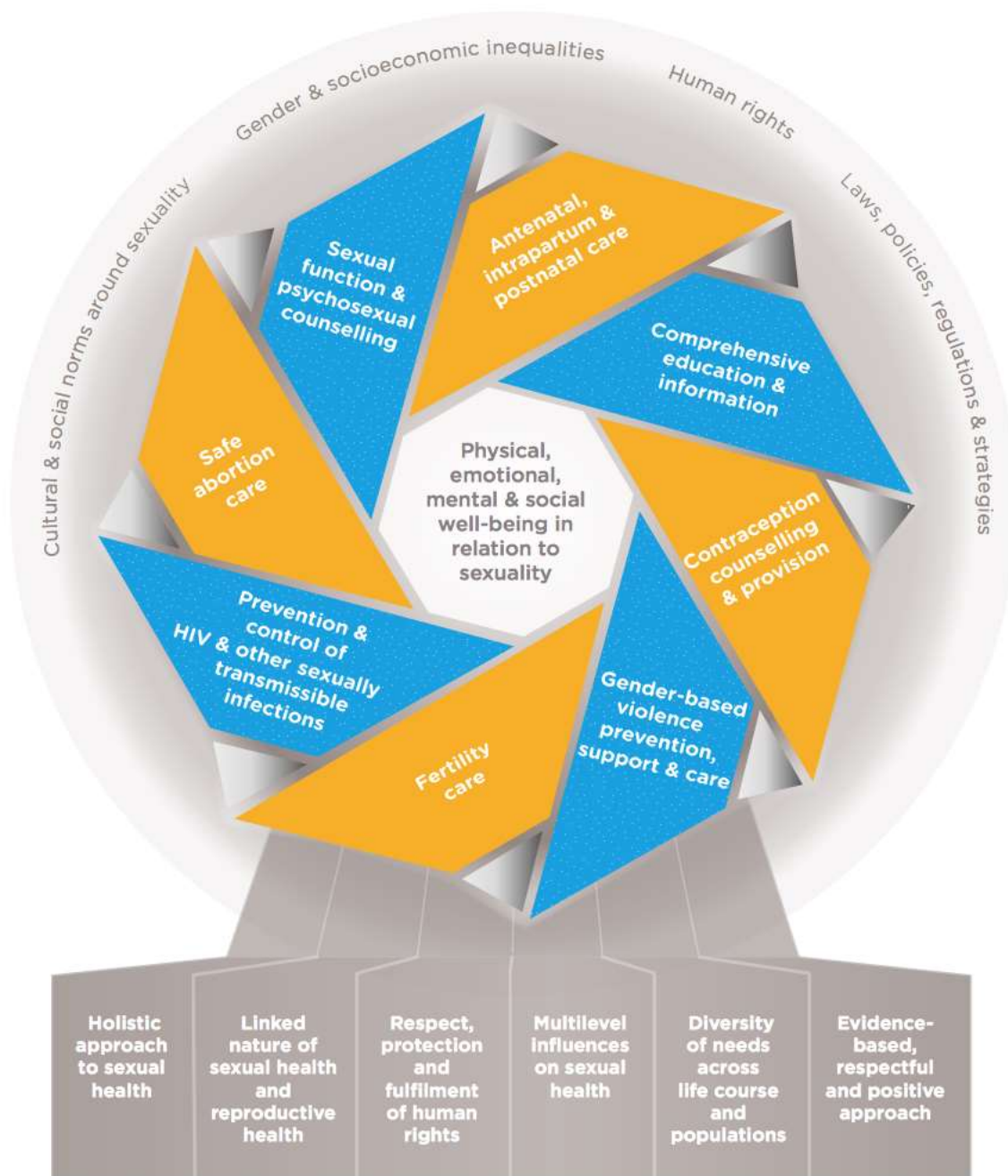
## Module 1 - Introduction to sexual health

# WHO's Framework for Operationalizing Sexual Health and Linkages to Reproductive Health

## Guiding Principles of Sexual Health Interventions

There are 6 cross-cutting principles must be incorporated into the design and implementation of all sexual health interventions. They are also the criteria against which these interventions will be evaluated:

- Holistic approach to sexual health
- Linked nature of sexual health and reproductive health
- Respect, protection and fulfilment of human rights
- Multilevel influences on sexual health
- Diversity of needs across life course and populations
- Evidence-based, respectful and positive approach



Sexual health  
intervention areas



Reproductive health  
intervention areas



Climate of  
social-structural factors



Foundation of  
guiding principles



## WHO's Framework for Operationalizing Sexual Health and Linkages to Reproductive Health

### The rosette of sexual health and reproductive health interventions:

Neither sexual health nor reproductive health subsumes the other. Rather, the two are inextricably interlinked as represented in the graphic framework by a rosette, which is formed by two contrasting but interwoven ribbons.

#### Sexual Health (Blue Ribbon)

- Gender-based violence prevention, support and care
- Comprehensive education and information
- Prevention and control of HIV and other sexually transmissible infections
- Sexual function and psychosexual counselling

#### Reproductive Health (Orange Ribbon)

- Antenatal, intrapartum and postnatal care
- Contraception counselling and provision
- Fertility care
- Safe abortion care



## Module 1 - Introduction to sexual health

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