

Sexuality: A Missing Dimension in Development



Preface

Sexuality is of fundamental importance in the lives of all humans. Although sexuality is a natural part of human life it is often neglected and mainly dealt with in relation to reproduction, disease, violence and oppression. Sexuality related issues are often fraught with unease, shame and conflict, due to cultural, religious, political, social, economic, and other factors outside the control of individuals, particularly those who have less power in societies. Therefore, it is important to address issues of sexuality from a positive perspective building self-esteem through highlighting respect, equality, tenderness and love in order to improve the quality of life of people living in poverty.

In order to address this need, and in an effort to contribute to the enlightening education of Sida staff and partners, Sida DESO/Tema commissioned this concept paper. The purpose of the paper is to illuminate the relationship between sexuality, rights and development.

As the paper clearly shows, there are strong linkages between not just sexuality, and health and gender, but also with other sectors such as agriculture, roads and infrastructure, and human rights and good governance. These linkages have not previously been well conceptualized at Sida, which makes this concept paper groundbreaking and important.

Sida DESO/Tema is confident about the potential of this concept paper, which will be launched at an initial seminar in Stockholm on May 26, 2008. It is in line with the renewed efforts from the Swedish government to educate government staff on sexuality related issues. We hope that it will increase knowledge, stimulate debate and, ultimately, improve the quality of our development cooperation for the benefit of people living in poverty.



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Abbreviations

DRC	Democratic Republic of Congo
FGM	Female genital mutilation
GBV	Gender based violence
IGLHRC	International Gay and Lesbian Human Rights Commission
IPPF	International Planned Parenthood Federation
IUCN	World Conservation Union
IWRAW	International Women's Rights Action Watch
LGBTI	Lesbian, gay, bisexual, transsexual and intersex individuals
MDG	Millenium development goal
PGD	(Sweden's) Policy on Global Development
NGO	Non-governmental organisation
SRHR	Sexual and reproductive health and rights
STI	Sexually transmitted infection
UNDP	United Nations Development Programme
UNHRC	United Nations Human Rights Council
UNICEF	United Nations Children's Fund

Executive Summary

Sweden is well-placed to play a leading role in championing gender equality, sexuality and sexual rights.

Sexuality matters because it is about power, lust and politics.

Sweden is well-placed to play a leading role in championing gender equality, sexuality and sexual rights. Swedish initiatives have often broken new ground, opening up new possibilities for confronting discrimination in its efforts to contribute to a fairer, more tolerant world. Sweden's current international policy on sexual and reproductive health and rights (SRHR) 2006 is considered by many to be the most progressive of any government in regards to certain sexuality related issues. However, much of Sida's work has been related to the more problematic and negative aspects of sexuality and, as such, has been confined to the health field or to work on gender equality. Rarely has development work in these areas, as well as in other sectors, taken on the more comprehensive and positive dimensions of sexuality. And even within SRHR work, the emphasis has been on reproductive health, and less on sexual health and rights. Yet issues concerning sexuality are about power and lust, and as such arise in almost every area of development work. These areas include education, employment, credit, agriculture, transport, human rights, good governance and political and economical participation. One reason for sexuality related issues being omitted may be that sexuality has a tendency to make people, including agency staff, feel uncomfortable. Hence, even the word sexuality in itself, seldom figures in development language.

Sexuality is multifaceted. The definition of sexuality developed by the World Health Organization's (2006) in Defining Sexual Health outlines the multifaceted nature of 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, religious and spiritual factors.

The aim of Sweden's policy for global development is to improve quality of life and is built on the two perspectives of people living in poverty and the rights based approach.

From a rights perspective, sexuality matters because it is about power and without basic rights over our own bodies and over fundamental life

choices, many other rights become simply unattainable. These life choices can be e.g. if, when and who to marry or enter into partnership with, and if, when and with whom to have children. Sexuality is important because sexual rights are everyone's rights. In some contexts, women may face genital mutilation, be denied a choice of partner, be subjected to coercive marital sex and restricted in their mobility in the name of protecting their reputation. Men may be forced to marry someone of prescribed age, class and ethnicity to maintain respectability for the family. Men and boys are also sexually abused, particularly in conflict or in prisons, and this abuse often goes unrecognised. Disabled people are often discriminated against also when it comes to their sexual rights. Lesbian, gay, bisexual and transgender (LGBT) and intersex people, or those perceived as such, face widespread discrimination and persecution. Hence, the need for a rights based sexuality politics in all countries.

From the perspective of people living in poverty, sexuality matters because for those who lack money and connections, the effects of societal and legal discrimination – such as sexual harassment and abuse or homophobic violence – may be much more difficult to mitigate than for those who are wealthier and well connected. A lack of sexual rights is in itself a dimension of poverty, producing a whole host of poverty-related outcomes, from social exclusion and physical insecurity to greater vulnerability to disease, hunger and death.

Sexuality affects programme outcomes and development goals. The Maputo Plan of Action, unanimously adopted by Ministers of Health and delegates from 48 African countries in September 2006, and later affirmed by the African Heads of States, says that the MDGs cannot be achieved without more work on sexual and reproductive health and rights, and that “Addressing poverty and addressing SRHR are mutually reinforcing”. Previous analyses have shown that the presence and accessibility of quality sexual and reproductive health services, information and education in relation to sexuality; protection of bodily integrity; and the guarantee of the right of people to freely choose sexual and marriage partners, to make decisions about child bearing, and to pursue satisfying, safe and pleasurable sexual lives are integral to achieving the MDGs. And in a visit to Kenya carried out as part of developing this concept paper, Sida staff and partners almost universally recognised that addressing sexuality issues is necessary for effective programming not only in areas such as gender, HIV/AIDS and human rights, but also in relation to other sectors such as agriculture, infrastructure and governance.

Sweden's revised Policy for Global Development (2007/08:89) outlines the government's thinking on sexuality further under the goal ‘Better health and quality of life for women and men, boys and girls in developing countries’, stating “To raise the level of ambition in terms of efficiency and resources for activities intended to improve knowledge and services around sexuality, as well as capacity in regards to women's and girls' bodily integrity and sexual rights, and to support the role and responsibility of men and boys in promoting gender equality and the sexual and reproductive health of all” (unofficial translation). Indeed the Budget Bill of 2008 clearly emphasizes the importance of sexuality and sexual and reproductive health and rights and its links to poverty and development.

The above implies that Swedish goals for development cannot be fully realised without increased attention to sexuality and support for sexual rights as human rights. This concept paper seeks to look at these connections and what they imply for Sida's work in general, but also on values and norms.

Swedish goals for development cannot be fully realised without increased attention to sexuality and support for sexual rights as human rights.

Summary of Recommendations:

- *Increase efforts to take a leading role internationally within the UN System and in the European Union in the area of sexuality.* Take the lead on putting the sexuality dimension into country collaboration strategies and, hence, onto the agenda in country programmes.
- *Recognize sexuality and its role in development by initiating information dissemination and discussion within Sida around Sida's many policy commitments on sexual rights, and how these fit together.* Develop strategies and a follow up system to implement Sweden's international policy on SRHR (2006). Explore the connections between sexuality and poverty reduction and programme outcomes in each sector. Explore mechanisms for integrating sexuality issues into each sector. Establish a tracking mechanism for budget follow ups on sexuality.
- *Support civil society and foster democratic decision making processes which involve primary stakeholders and are genuinely inclusive.* Create mechanisms such as basket funds to enable a range of sexuality and sexual rights organisations to access funding. Directly build southern institutional capacity rather than only fund work in developing countries through institutions based in the North. Take the lead from Southern partners rather than imposing a Swedish model.
- *Support positive empowering approaches to sexuality in general, and in sexuality education in particular.*
- *Sponsor a high profile conference on 'Re-conceptualizing Sexuality' which would bring together some of the most reputed thinkers on this issue.* This would provide a much-needed opportunity for in-depth thinking on how to address this issue in intelligent and effective ways. This would potentially have huge impact and put Sweden/Sida on the map as a progressive and innovative player in this field.

1. Introduction

Sweden is well placed to play a leading role in championing gender equality, sexuality and sexual rights. Swedish initiatives have often broken new ground, forging new possibilities for confronting discrimination in its efforts to contribute to a fairer, more tolerant world. Sweden's current international policy on sexual and reproductive health and rights (SRHR) 2006 is considered by many the most progressive of any government in regard to some sexuality related issues. The Budget Bill of 2008 with its three thematic priorities, clearly emphasises gender equality, sexuality and sexual and reproductive health and rights and its links to poverty and development. However, much of Sweden's work has been related to the more problematic and negative aspects of sexuality and, as such, has been confined to the health field or to work on gender equality. Rarely has development work in these areas, as well as in other sectors, taken on the more comprehensive and positive dimensions of sexuality.

Sida/DESO's Head of Department provided a mandate to DESO/TEMA to develop this concept paper on the relationship between sexuality, rights and development. The purpose is to guide and enhance Sida's capacity to better implement Sweden's Policy for Global Development (PGD) with the aim of improving the quality of life for people living in poverty.

This concept paper seeks to look at these connections and at what they imply for Sida's work in general, but also on influencing values and norms.

Many development practitioners have only a limited understanding of what sexuality might have to do with development. Information, research and training on these connections have been inadequate. Many associate the word sexuality with sexual minorities – as if sexuality was not part of all of our lives, no matter what our sexual identities or orientations are. Many assume it is only about health issues such as HIV prevention, sexually transmitted diseases, and unwanted pregnancies. And even within SRHR the emphasis has often been on reproductive health and less on sexual health and rights (IWRAP, 2007). Some think that sexuality is too private, intimate or embarrassing to be talked about by development practitioners or policy makers, even though sexuality is an intensely public and political concern. Few are aware of the extent to which issues concerning sexuality arise in almost every area of development work, whether in relation to education, employment, credit, agriculture, culture, transport, migration, conflict or political participation.

Much of Sweden's work has been related to the more problematic and negative aspects of sexuality.

Rarely has development work taken on the more comprehensive and positive dimensions of sexuality.

One reason for sexuality related issues being omitted may be that sexuality has a tendency to make people, including agency staff, feel uncomfortable. Hence, even the word sexuality in itself, seldom figures in development language.

Few have tested the possibility of bringing up sexuality related issues with development partners due to fears that it would be seen as inappropriate. However, others, while listening to a host of voices who urgently raise sexuality related issues in an effort to improve quality of life, reduce poverty and secure rights, have experienced that such fears are often misguided. Sweden/Sida should not hesitate to bring up sexuality related issues in the dialogue. This will encourage our development partners to do the same.

Sweden's policy for global development is built on the two perspectives of people living in poverty and the rights based approach. These and the principles of participation, non-discrimination, transparency and accountability form the foundation of Swedish aid policy. They provide a basis for thinking about the connections between sexuality, human rights and development in a more comprehensive way.

From a *rights perspective*, sexuality matters because it is about power and without basic rights over our own bodies, and over fundamental life choices, many other rights become simply unattainable. These life choices can be who to marry or enter into partnership with, and when and with whom to have children. Whatever our gender or sexual orientation, whether we are married or non-married, old or young, norms around sexuality always have an impact, hence the need for a rights-based sexuality politics in all countries.

From *the perspective of people living in poverty*, sexuality matters because for those who lack money and connections, the effects of societal and legal discrimination – such as, for example, sexual harassment or homophobic violence – may be much more difficult to mitigate than for those who are wealthier and well connected. A lack of sexual rights is in itself a dimension of poverty, producing a whole host of poverty-related outcomes, from social exclusion and physical insecurity to greater vulnerability to disease, hunger and death.

Sweden's broader goal, as expressed in the Policy for Global Development, is “to contribute to creating conditions to improve quality of life for people living in poverty”. From the above, it follows that to meet this goal, sexuality and sexual rights must be placed squarely on the development agenda.

2. Putting Sexuality on the Development Agenda

Sweden has long been a champion of SRHR in international dialogues and in development co-operation. Sweden has an important role to play internationally in promoting and defending these rights, especially at a time when they are under threat from conservative, political and religious forces. Groups working for a more progressive sexuality politics, gender equality and sexual rights are looking to Sweden as an important source of potential support.

The Swedish government has made prominent commitments to addressing issues of sexuality in Swedish development co-operation, notably in the 2006 SRHR policy, which some consider to be the most progressive of any government on some issues. The revised policy for global development (2007/08:89) outlines the thinking further under the goal 'Better health and quality of life for women and men, boys and girls in developing countries', stating "To raise the level of ambition in terms of efficiency and resources for activities intended to improve knowledge and services around sexuality, as well as capacity in regards to women's and girls' bodily integrity and sexual rights, and to support the role and responsibility of men and boys in promoting gender equality and the sexual and reproductive health of all" (unofficial translation). The Budget Bill 2008 with its three thematic priorities, clearly emphasises gender equality, sexuality and sexual and reproductive health and rights and its links to poverty and development. The political guidance is clear but implementation has been inconsistent. Sexuality, as a word in itself, is seldom used in development language.

For example, although SRHR was classed a special priority in Sweden's report on the Millenium Development Goals 2006, *Together towards 2015*, Sida in its declaration *Where we are, Where we are Going* states, without mentioning sexuality:

In the dialogue with other donors and partner countries, we will raise issues such as equality, sexual and reproductive health and rights, democracy, civil society and the environment – even though these are difficult issues. (Sida 2006)

Earlier commitments include those made at the landmark United Nations conferences of the 1990s on human rights, population and development, women, and HIV/AIDS, as well as the Millenium Development Goals of 2000, and the added sub-goal on reproductive health in 2006 (see section 2.4 on the relation of sexuality to realising the MDGs).

The Budget Bill 2008 clearly emphasises gender equality, sexuality and sexual and reproductive health and rights and its links to poverty and development. The political guidance is clear but implementation has been inconsistent. Sexuality is seldom used as a word in itself in development work.

Efforts have been made in raising the profile of sexual health and rights within Swedish international development co-operation, particularly in the health sector, however much remains to be done. A sharper focus on the multiple dimension of sexuality and sexual rights in all development sectors is needed in order to follow through on the commitments that have been made.

Because sexuality is so multifaceted, there is often confusion about how best to address it. Development agencies sometimes address sexuality only in relation to physical health and disease prevention – if at all. Sometimes they portray women only as victims of sexual and gender based violence and trafficking, and not as actors and survivors with their own agency. This means that sexuality is thought of as a problem to be solved by technical solutions, and not as an arena for empowering people from a rights based perspective.

The net result is that interventions can end up being limited to service related technical/medical approaches, sidelining social, political, cultural, power and rights issues. Yet it is in relation to these political and rights issues that much is at stake as far as sexuality is concerned.

We live in an increasingly polarised world. Today's sexuality politics revolve around competing value systems and beliefs about the extent to which individuals have the right to make their own moral, personal and sexual choices. Hard-won victories on the international stage are at risk of being undermined. The role of Sweden in the defence of these gains has never been more important in an international context where neo-conservative and reactionary religious forces have the upper hand at present. These forces are undermining the wellbeing of countless people by seeking to restrict rights to abortion, contraception, HIV prevention and basic choices around life, sexuality and love.

Sexuality is not just a private matter: it is an intensely public and political concern. It is about power.

2.1 What is Sexuality?

Sexuality is an intrinsic part of everyone's lives whether or not they have sexual relationships. It is about identity and self-esteem. But it is not just a private matter, concerned with our most intimate relationships: it is an intensely public and political concern. And it is about power. Across cultures, societies and historical periods, the state, religious authorities and other social institutions have sought to regulate sexuality and sexual expression, prescribing some forms of relationship – such as heterosexual marriage – and proscribing others. Sexuality may be represented in popular culture, laws or religious injunctions as a natural urge or unnatural desire. However, we know from scholarly work on this topic that over the course of history, what is considered “natural” has changed and continues to change.

One of the most comprehensive definitions of the term ‘sexuality’ is that developed by the World Health Organization's Defining Sexual Health (2006):

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, religious and spiritual factors.

Several aspects of this definition are worth highlighting. According to the WHO, sexuality is about far more than the sexual act. It is about a constellation of meanings and practices that are part of our everyday experience of the world. Sexuality is part of what it is to be human. Yet it is not some kind of fixed essence. It is inherently social, shaped by a host of factors, including religious beliefs, laws, and the specific historical, cultural, economic and social contexts in which people live their lives. In every society, there are beliefs, attitudes and values concerning sexuality that affect a whole host of everyday social relations and norms. When such ideas and norms about sexuality are reproduced through discriminatory and repressive laws and other institutions, they can become a powerful form of social control and oppression.

Seeing sexuality in this way takes us away from a view in which biological urges or natural drives are used to explain male sexual violence, and in which particular religious or cultural norms are used to discriminate against forms of sexual expression apart from heterosexual marriage. It permits us to go beyond ideas of what is “natural” or “normal”. And it allows us to ask deeper questions about how working with sexuality can better further a rights-based approach to development, rather than reinforce social norms that undermine human rights.

In every society, there are beliefs, attitudes and values concerning sexuality that affect a whole host of everyday social relations and norms.

2.2 Sexuality and Gender

Gender and sexuality are both social constructs. They are closely intertwined; both are about values and meanings, and both are concerned with norms that permit and constrain certain forms of social and sexual expression. Both, ultimately, are about power.

In every society, girls and boys grow up learning that differences between their bodies mean differences in how they are treated, in how they are expected to behave, in what they are praised and criticised for, and what they are allowed and not allowed to do. Some masculinities and femininities are valued more than others by society at large, and some are the object of disapproval or more active repression.

At one time, it was widely believed that social “gender” was simply mapped onto biological “sex.” Now we know that matters are more complex than this. In most, if not all, societies women and men are encouraged to modify their bodies to accentuate gender differences and make themselves fit accepted ideas about what is sexually attractive or appropriate. Measures like shaving armpits and legs, removing facial hair, dieting or over-eating produce bodies that conform to norms of beauty and attractiveness. Those who do not comply with what is expected from them may find themselves to be the object of ostracism or mockery in the workplace, on the street and in their families.

The relationship between gender and sexuality also emerges in the kinds of sexual relationships that are permitted and proscribed in different contexts. In many societies, there are strongly maintained social norms that make it very hard for women to enjoy an independent sexual existence if not married – whether they are teenagers, single women, widows, lesbians and/or bisexual women. There are norms that make it more acceptable for men than women to have extramarital affairs, visit sex workers, masturbate, ask for sex, and even enjoy certain forms of bodily pleasure. The quotes below from Bangladesh, Zimbabwe, Nigeria and Brazil illustrate some of the pressures faced by women, men and transgender people to conform with certain norms:

It is not enough to assume that work on gender will take care of sexuality – or that working on sexuality will automatically address issues of gender. Sida's development co-operation work needs to address both.

Bangladesh

Socio-cultural norms dictate what women should or should not do with their bodies... when, where and how far they can venture out of their homes and what constitutes a legitimate reason to do so; what parts of their bodies they have to cover and how; how they have to carry themselves when in the gaze of 'undesirable others' ranging from brothers-in-law to the general public; when they can have sexual relations and with whom; whether they can insist on sexual pleasure for themselves or not; when and how often they can complain of ill-health; whether they can seek healthcare, and where, when and from whom... (Huq 2006:134)

Zimbabwe

Everyone...warned me...that the males would chase me with great gusto. The onus was therefore upon me to preserve men's morality. The teachers were more hilarious. They showed us scary movies of sexually transmitted infections: gaping vaginas, infested with sores, looking terribly unlike what I was familiar with. How this "transformation" occurred we were not told. The underlying message was virginity, virginity, virginity; not for myself, but for the husband who would love me forever and for my parents – read my father – who would make so much money out of the mythical groom. (Win 2004: 13)

Nigeria

Boys are socialised to be aggressive, macho, dominant and in control. They have been socialised to always be ready for sex, and given the impression that their sexual urge is uncontrollable. (Dorothy Aken'Ova 2004:14)

Brazil

I left home aged 14 because when my brother discovered I was having sex with my friend Paulo...he called me names, mistreated me, hit me, beat me...he even took me to a bordello, to a red-light zone, so that I could have relations with a woman. (Mabel, transgender activist, Brazil, in Kulick 1998:59).

As the co-ordinator of the Turkish organization Women for Women's Human Rights and the Coalition for Sexual and Bodily Rights in Muslim Societies, Pinar Illkaracan, comments:

Oppression of women's and girls' sexuality lies at the core of several women's human rights violations related to development. Aside from the blatant violations such as honour crimes or female genital mutilation there are less obvious practices that are directly related to development targets. For example, look at girl children in Turkey. There are still hundreds and thousands of girls who are not sent to school because there is a fear that they will choose their own husbands, and not accept marriages arranged by their parents – thus costing the family both honour and the bride price. Sexuality is a crosscutting issue that lies at the heart of disempowerment of women. So if women are to be empowered, work on sexuality is essential (cited in Jolly 2006a).

Thus, it is not enough to assume that work on gender will take care of sexuality – or that working on sexuality will automatically address issues of gender. Sida's development co-operation work needs to address both.

2.3 What Are Sexual Rights?

As there has been greater recognition of the importance of sexual rights, growing attention has been paid to developing clear definitions to guide advocacy and practice. Some approaches focus on defining sexual rights in terms of specific human and legal rights. Others emphasise the use of existing instruments such as constitutions and international declarations, including the 1995 Beijing Platform for Action. Others still adopt a broad-

er rights-based perspective, combining reference to established human and legal rights with a focus on equity, intimacy, pleasure and choice.

Sweden's SRHR policy affirms sexual rights as human rights:

Sweden considers that sexual rights include already recognised human rights, for example the right to private life and personal safety...the Swedish Government defines sexual rights as meaning that all people, irrespective of sex, age, ethnicity, disability, gender identity or sexual orientation, have a right to their own body and sexuality (2006:8).

Sweden takes as the applicable definition of women's sexual rights paragraph 96 of the Beijing Platform for Action:

Paragraph 96. The human rights of women include their right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence. Equal relationships between women and men in matters of sexual relations and reproduction, including full respect for the integrity of the person, require mutual respect, consent and shared responsibility for sexual behaviour and its consequences.
(ibid, p8)

This standpoint is clearly affirmed in the Swedish government's Budget Bill for 2008, in which sexual and reproductive health and rights comprise a specific focus area for work to promote gender equality and women's rights, empowerment and role in development, as well as human rights and democracy.

Further guidance may be sought with reference to the more detailed definitions of sexual rights adopted by two of the most authoritative international institutions in this field, the World Health Organization and the World Association for Sexual Health.

World Health Organization

"Sexual rights embrace human rights that are already recognised in national laws, international human rights documents and other consensus statements. They include the right of all persons, free of coercion, discrimination and violence, to:

- the highest attainable standard of sexual health, including access to sexual and reproductive health care services;
- seek, receive and impart information related to sexuality;
- sexuality education;
- respect for bodily integrity;
- choose their 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."

WHO, 2006, *Defining Sexual Health*

The World Association for Sexual Health's (previously World Association for Sexology) Declaration of Sexual Rights is even more comprehensive¹.

Sexual rights are universal human rights based on the inherent freedom, dignity, and equality of all human beings. Since health is a fundamental human right, so must sexual health be a basic human right.

Declaration of Sexual Rights

Sexuality is an integral part of the personality of every human being. Its full development depends upon the satisfaction of basic human needs such as the desire for contact, intimacy, emotional expression, pleasure, tenderness and love.

Sexuality is constructed through the interaction between the individual and social structures. Full development of sexuality is essential for individual, interpersonal, and societal well being.

Sexual rights are universal human rights based on the inherent freedom, dignity, and equality of all human beings. Since health is a fundamental human right, so must sexual health be a basic human right.

In order to assure that human beings and societies develop healthy sexuality, the following sexual rights must be recognized, promoted, respected, and defended by all societies through all means. Sexual health is the result of an environment that recognizes, respects and exercises these sexual rights.

1. The right to sexual freedom. Sexual freedom encompasses the possibility for individuals to express their full sexual potential. However, this excludes all forms of sexual coercion, exploitation and abuse at any time and situations in life.

2. The right to sexual autonomy, sexual integrity, and safety of the sexual body. This right involves the ability to make autonomous decisions about one's sexual life within a context of one's own personal and social ethics. It also encompasses control and enjoyment of our own bodies free from torture, mutilation and violence of any sort.

3. The right to sexual privacy. This involves the right for individual decisions and behaviors about intimacy as long as they do not intrude on the sexual rights of others.

4. The right to sexual equity. This refers to freedom from all forms of discrimination regardless of sex, gender, sexual orientation, age, race, social class, religion, or physical and emotional disability.

5. The right to sexual pleasure. Sexual pleasure, including autoeroticism, is a source of physical, psychological, intellectual and spiritual well being.

6. The right to emotional sexual expression. Sexual expression is more than erotic pleasure or sexual acts. Individuals have a right to express their sexuality through communication, touch, emotional expression and love.

7. The right to sexually associate freely. This means the possibility to marry or not, to divorce, and to establish other types of responsible sexual associations.

8. The right to make free and responsible reproductive choices. This encompasses the right to decide whether or not to have children, the number and spacing of children, and the right to full access to the means of fertility regulation.

9. The right to sexual information based upon scientific inquiry. This right implies that sexual information should be generated through the process of unencumbered and yet scientifically ethical inquiry, and disseminated in appropriate ways at all societal levels.

10. The right to comprehensive sexuality education. This is a lifelong process from birth throughout the life cycle and should involve all social institutions.

11. The right to sexual health care. Sexual health care should be available for prevention and treatment of all sexual concerns, problems and disorders.

Sexual Rights are Fundamental and Universal Human Rights

Adopted in Hong Kong at the 14th World Congress of Sexology, August 26, 1999

¹ http://www.worldsexology.org/about_sexualrights.asp. The World Association for Sexual health (WAS) holds its 14th World Congress in Goteborg, Sweden, June 21-25, 2009

The emphasis in this declaration is on affirming that *sexual rights are human rights*, and that everyone has the right to a choice over their sexuality. It is enormously empowering to be able to recognise that we have these choices – including a choice not to be sexually active and not to marry, as well as to a satisfying, safe and pleasurable sex life and a choice of partner. Sexuality education plays a key role in enabling people to recognise these rights and to realise they have choices.

It also becomes clear that sexual rights are not just about the rights of lesbian, gay, bisexual, transgender and intersex people (LGBTI). They are important for everyone. As Scott Long of Human Rights Watch argues:

Sexual rights are not ...the property of a minority. They are everyone's birthright and everyone's concern. The man who faces arrest and torture in Egypt because he fell in love with a man; the lesbian in South Africa whose family believes that rape will "cure" her; the transgender woman in the United States harassed and brutalized on the street – these people share, despite their differences of geography and detail, a common cause with the woman confronting a sentence of death for adultery in Nigeria; with the mother ostracized and shunned by her village community in Jamaica because she contracted HIV/AIDS from a sexual partner; and with the woman in Pakistan whose parents can take her life with impunity, because her behaviour supposedly strikes at the family's "honour" – and her safety is unprotected by the state. All these people endure abuse, and are denied their basic rights, because they have claimed their sexual and physical autonomy in ways the state condemns and society fears. We must stand together in asserting that our bodies are our own, that our pleasures like our pains are part of us, that our privacy and integrity and dignity cannot be bargained away. (Human Rights Watch, 2003)

Realizing sexual rights requires a holistic, multi-sectoral approach. This is why it is so important to make the connections between sexuality, human rights and development.

However, lesbian, gay, bisexual, transgender and intersex people do face discrimination and other human rights abuses in every country. In 2006, human rights experts met in Yogyakarta, Indonesia, to establish a series of principles, the Yogyakarta Principles, that apply international human rights law to issues of sexual orientation and gender identity.²

Promoting, protecting and ensuring that sexual rights are respected is an enormous challenge. Realizing sexual rights requires a holistic, multi-sectoral approach. This is why it is so important to make the connections between sexuality, human rights and development.

2.4 Why Does Sexuality Matter?

Sexual rights are everyone's rights: Denial of sexual rights affects all people, whatever their sexual orientation or gender identity might be. In some countries, women are denied a choice of partner, subjected to coercive marital sex and restricted in their mobility in the name of protecting their reputation. Men may be forced to marry to maintain respectability for the family. Intersex people may never be validated as sexually attractive. Similarly, persons with disabilities may be seen as less sexually attractive (if they are even considered to have a sexuality or sexual rights and desires at all). Adolescents schooled only in abstinence learn little about their bodies or their desires, and may be more vulnerable to unwanted pregnancy and sexually transmitted infection as a result. Young people often get wrong information from peers and media which exacerbates their vulnerability and ignorance. Particular groups of people may be expected to give up sex, and face stigma if they seek sex

² see www.yogyakartaprinciples.org

and pleasure, such as people living with HIV/AIDS and people with disabilities.

Sexuality is a vital part of people's lives, from birth to death. Which issues arise will depend on the social, economic and cultural context, but there will almost always be some sexuality related issues at each stage of the life cycle. Children may experience sexual abuse and violence, as well as enjoy sexual experimentation and learning about the pleasure their bodies can give them. As girls grow up, they may experience restrictions on their mobility due to fear of sexual abuse. Some may undergo genital mutilation. Boys may find themselves pressured into particular risky sexual behaviours to live up to macho stereotypes. As people grow older, they may experience a lack of recognition of themselves as sexual beings.

Sexuality is a vital part of people's lives, from birth to death.

Sexuality Matters for Sida Programming: Examples from Kenya

As part of the process of developing this concept paper, a visit was undertaken to Kenya to look at sexuality in the Swedish development programme. The question of if and how sexuality affects programme outcomes was one of the issues discussed with the Swedish Embassy and with a range of Sida supported programmes and organisations, both with programmes that were more obviously linked to sexuality and sexual rights (e.g. HIV/AIDS) as well as with programmes with less obvious links (e.g. Agriculture and Roads). The answers were overwhelmingly positive, and some of the examples given are listed below.

Transportation and infrastructure

A road construction programme manager identified HIV/AIDS as depleting the work force. Another issue was husbands' fears around women spending a night away from home, which prevented some women from taking part in training courses that required them to be away overnight.

Agricultural extension

An agricultural extension programme identified certain sexual rituals of the Luo people in Western Kenya as having some implications for work in the area. One example is the custom that the husband should have unprotected sex with his first wife before the first planting of the season, which has been noted by the Ministry of Agriculture as a cause of late planting. For example, if the husband is away from home, the family cannot begin the planting until this activity takes place. Also, sexual and domestic violence, and power relations within the family, influences who makes decisions on land use and who benefits from increased outputs due to agricultural extension. Another issue was that people perceived as LGBT (lesbian, gay, bisexual or transgender) or intersex, or men perceived as too feminine, and women perceived as too masculine, might be excluded from community groups organised to share agricultural techniques.

Education, security, and governance

Action Aid International Kenya drew many links between their key programme areas and sexuality, such as: education – girls stay out of school during menstruation, if pregnant, or due to sexual harassment; security – often a relief agency will provide one tent per family, only big enough for the parents to share, young people will sleep outside, leading to more possibilities for sexual interactions; governance - few women are elected in part due to stigma around women being out campaigning instead of being good chaste women staying at their husband's side: fewer women elected might mean that issues such as sexual violence are less likely to be addressed in government. (Jolly 2007a)

Sexuality and the Millenium Development Goals: The Maputo Plan of Action, unanimously adopted by Ministers of Health from 48 African countries in September 2006, and later endorsed by their Presidents, states that the MDGs cannot be achieved without more work on sexual and reproduc-

tive health and rights, and ‘Addressing poverty and addressing SRHR are mutually reinforcing’.³ Hawkes et al (2006) have comprehensively examined the implications of sexual rights for the MDGs. They conclude that the presence and accessibility of quality sexual and reproductive health services, information and education in relation to sexuality; protection of bodily integrity; and the guarantee of the right of people to freely choose sexual and marriage partners, to make decisions about child bearing, and to pursue satisfying, safe and pleasurable sexual lives are grounded in and contribute to gender equality and the empowerment of women (MDG 3); access to primary education, particularly for girls (MDG 2); reduction of infant and child mortality, especially of girl children (MDG 4); to improvements in maternal health and mortality (MDG 5); to decreasing vulnerability to HIV/AIDS, sexually transmitted infections and other health threats (MDG 6); and also to reduction of poverty (MDG 1). Thus, achieving sexual rights for all people will not only contribute to sexual and reproductive health, well-being and quality of life but will also advance the MDGs.

2.5 Sexuality and Poverty

There are clear linkages between sexuality and poverty:

Poverty prevents the full realization of the sexual and reproductive health and rights of a large proportion of the African population...[and] poor sexual health and violations of sexual rights mean additional economic burdens and limited education and employment opportunities for many youth and women especially.⁴

These linkages have been recognized and highlighted in several key Swedish policy documents:

The Stockholm call to Action (2005) cites ‘Complications during pregnancy and childbirth are among the leading causes of death and illness for women in developing countries, and the HIV/AIDS pandemic takes approximately 3 million lives each year’ and calls for increased investment in reproductive health and rights as essential to achieving the MDGs.

Investing for future generations: Sweden’s international response to HIV/AIDS (Sida 1999) identifies ‘gender inequality’, ‘lack of dialogue on sexuality’ and ‘lack of education about sex and sexuality’ as among the underlying causes of HIV transmission (p22).

Perspectives on Poverty (Sida 2002) relates gender to sexual and reproductive rights: “Gender based inequalities deprive women of their basic rights (including sexual and reproductive rights), disempower them and constrain their access to resources, opportunities and security” (p32), and sees poverty as increasing women’s vulnerability to sexual harassment and exploitation (p19 and 44).

Sida at Work (Sida 2005) identifies gender and human rights as central elements for poverty reduction, and as among minimum requirements for assessment of poverty focus in Sida supported projects and programmes. SRHR is one of the priorities of the special gender equality initiative in the development cooperation field.⁵

³ <http://www.unfpa.org/publications/docs/maputo.pdf>, p3.

⁴ Concept Paper, Third Africa Conference on Sexual Health and Rights, Sexuality, Poverty and Accountability in Africa, Feb 4–7 2008. <http://www.africalsexuality.org/download/Concept%20Paper.pdf>.

⁵ Together towards 2015: Sweden’s report on the Millenium Development Goals 2006, Regeringskansliet, p34.

Addressing sexuality is crucial if we are to meet our government's development goals and commitments to reducing poverty.

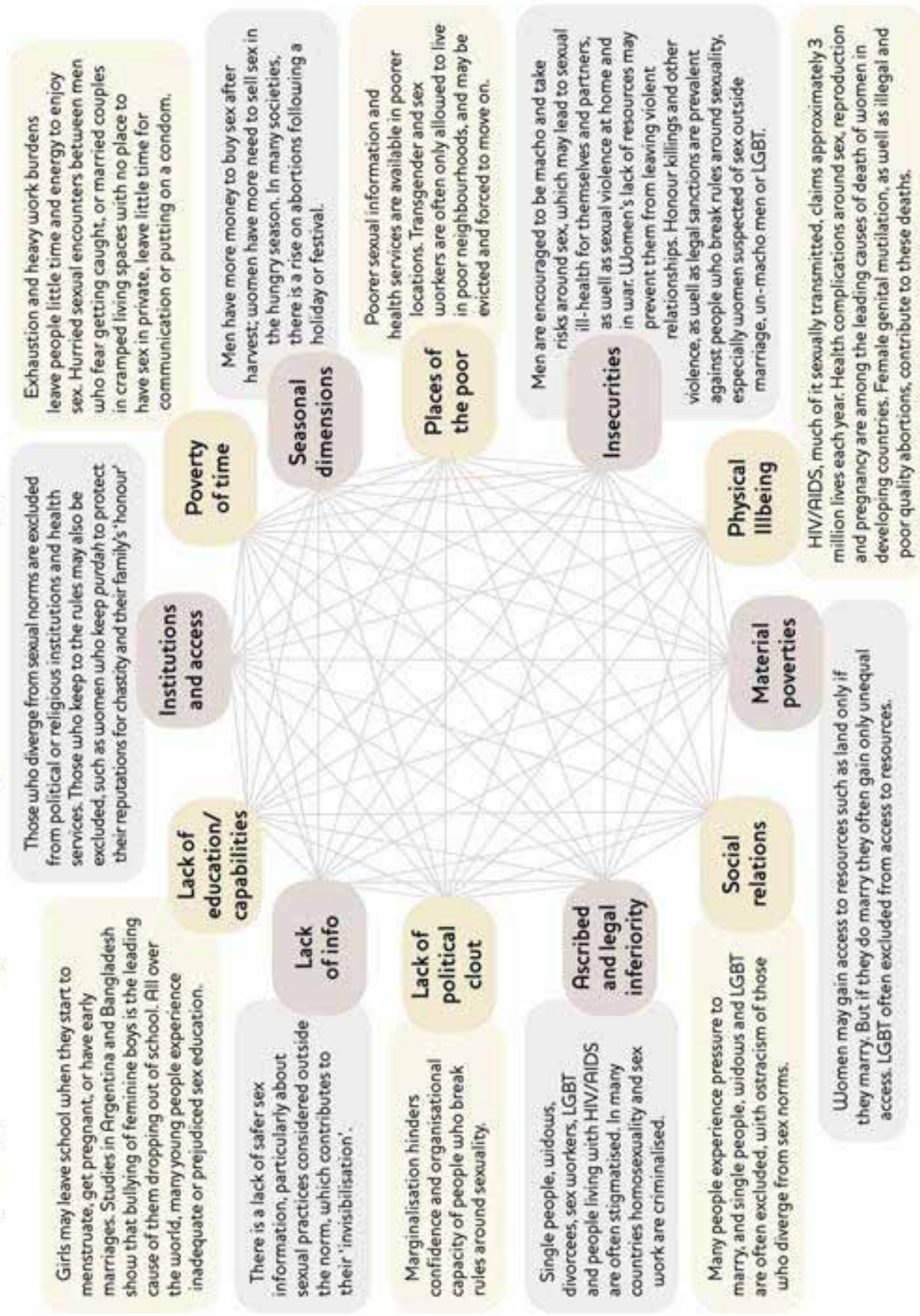
Poverty is understood as multi-dimensional, and resulting from unequal power relations in society: “The roots of poverty can often be traced to unequal power relations” (Perspectives on Poverty, 2002, p35) and Sida’s poverty reduction strategies include tackling these power relations with ‘efforts aimed at improving the situation of discriminated or underprivileged groups, such as disabled persons or ethnic minorities’ (p34). Power relations around sexuality are one cause of poverty.

Denial of sexual rights is a cause of poverty and poverty obstructs sexual rights. More needs to be done to make these linkages explicit in Sida’s policies and guidelines.

Robert Chambers’ (2000) Web of Poverty’s Disadvantages is a useful tool for analysis of the specific disadvantages arising from the conjunction of poverty and sexuality. It is adapted here to highlight some of the linkages.

Addressing sexuality is crucial if we are to meet our government’s development goals and commitments to reducing poverty.

Web of poverty's disadvantages – with examples related to sexuality



3. Sexuality and Sida Priority Areas

The Swedish Government has in the most recent 2008 Government Budget Bill committed to focus on three thematic priority areas for the remaining governing period:

- human rights and democracy
- gender equality and women's empowerment and role in development
- the environment and climate change

Within the thematic priority area of gender equality and women's empowerment and role in development, sexual and reproductive health and rights (SRHR) is identified as one of four specific focus areas. And in the thematic priority area of human rights and democracy, issues related to sexuality are included in the specific focus areas.

This section outlines some connections between sexuality and the three thematic priority areas, as well as the sexuality connections within some other key sectors of Sida's work on health, education, infrastructure, agriculture and migration, and provides recommendations. However, research in this area is inadequate. To date there have been few studies focussing directly on the connection between sexuality and specific sectors.

Sexuality may be used as grounds for exclusion from community and government organisations and political bodies at different levels.

Recommendation:

Support further research into the connections between sexuality and sexual rights and Sida's priority sectors.

3.1 Human Rights, Democracy and Political Participation

The connections between sexuality and poverty outlined in the previous section indicate that sexual rights are not only important in themselves, but are also essential to the realisation of other rights such as the right to livelihood, security, education, information, and gender equality. Sexuality also has implications for democratic participation. Sexuality may be used as grounds for exclusion from community and government organisations and political bodies at different levels – for example because the person is seen as an unchaste woman, or stigmatised for being divorced or single (as stated by Sida Kenya staff in regard to the Sida supported Gender and Governance programme), or for being a LGBT or intersex person. This can pose obstacles for those with non-conforming sexualities to take part in government or civil society.

A sexuality and democracy workshop in Peru

The organization I work with, GRUPAL (The Working Group on Participation) in Peru, doesn't do sexuality training but we do democracy and participation workshops which include reflection on sexuality: Are you democratic with your sexual partner? Do you listen to your own desire? Are you respected when you say 'no'? Do you dialogue about pleasure? What are the power dynamics of sex and sexual orientation and how do these interact with those of gender, race, and education? This can be quite a good entry point for getting people to think about democracy. We have 16 and 17 year olds who have lived through 10 years of dictatorship and think politics is a dirty space they don't want to participate in. Talking about the personal dimension of politics (and sex as a part of it) gets them interested. (Armas 2007:16)

Sexual rights are part of already recognised human rights, and as such are part of Sida's mandate to support human rights. Although the term 'sexual rights' has not made it into UN conventions, some key principles have been endorsed⁶. Debates are currently active in UN bodies such as WHO, UNHRC and UNDP on inclusion of sexual rights issues. While recognizing that Sida's role is primarily development cooperation, it is also vital that Sida systematically interacts with Swedish Ministry of Foreign Affairs to contribute to relevant sexuality, development and human rights debates underway in these institutions, as well as to infuse Swedish external policy guidelines with the concepts and principles addressed in this concept paper. Sida also has a key role to play in supporting civil society organisations domestically and internationally in engaging in these debates.

Sexual rights are part of already recognised human rights, and as such are part of Sida's mandate to support human rights.

Recommendations:

- Activities aiming to build democracy and support political participation must recognise and challenge exclusion on the basis of sexuality and relationship status.
- Sexuality work must foster democracy and respect for rights in people's own relationships.
- Sida should engage in debates on sexual rights within UN institutions and other international bodies, and support civil society participation in these debates.

3.2 Gender Equality and Women's Empowerment and Role in Development

Within the thematic priority area of gender equality and women's empowerment and role in development, four specific focus areas have been identified: political participation, the economy, SRHR including HIV/AIDS, and security, including gender based violence. Some sexuality implications for political participation have been outlined in the previous section on Human Rights and Democracy. The connections between sexuality and each of the three remaining focus areas are considered below.

⁶ For example, the 1993 Vienna Declaration calls for elimination of sexual violence; the Platform of Action of the International Conference on Population and Development of 1994 declares that people should 'be able to have a satisfying and safe sex life'; and the 1995 Fourth World Conference on Women Platform for Action states that women's human rights include the right to 'have control over and decide freely and responsibly on matters related to their sexuality.'

3.2.1 The Economy

Women who conform to norms around sexuality, for example by agreeing to marry a man approved by their family, may be entering into a both economically and sexually unequal relationship. Women who do not conform, for example if they are considered unchaste, stay single, do not marry a man approved by their family/community, or have a same sex relationship, may be excluded from economic opportunities – through labour market discrimination, exclusion from agricultural community support or land rights. This may lead to a more general social or legal undermining of their confidence and support systems, which will in turn affect their economic opportunities. Men who do not conform may also face such obstacles. Transgender individuals in many regions may have high levels of involvement in sex work, in part due to exclusion from other economic opportunities.

Many people use their sexual assets as a commodity of exchange, a source of income, and a livelihood, whether through marrying into a richer family, or selling sex. One example is ‘fish for sex and sex for fish’, a well reported phenomenon in Kisumu, Kenya, where women are expected to sleep with fishermen as part of the payment for fish which they then take to market to sell. Sometimes a woman fish trader will hook up with a fisherman for a season, becoming his lover and buying his fish. The exchange could also be more short term, with women offering one session of sex in exchange for the opportunity to make one purchase of fish.

Many people use their sexual assets as a commodity of exchange, a source of income, and a livelihood, whether through marrying into a richer family, or selling sex.

Sometimes the role of sex in economic exchange is clear-cut. In other instances, love and money are so entwined that to talk in terms of “transactional sex” is to deny the other dimensions of those relationships (Cornwall 2002). There may be “no romance without finance” (Mills and Ssewakiriyanga 2005). Care must be taken about transposing judgements from one cultural context onto another – such as labelling as ‘prostitutes’ women whose lovers may give them gifts of money or who may take lovers in order to get some help with household expenses.

Relationships in which young people are involved with their peers or with older people that include economic or another type of exchange should not be understood too simplistically. They may be experienced as abuse. But they may also include affection as well as exchange, and not be experienced as abuse. One female high school student in Kenya submitted an anonymous question during their sexuality education session: “I am in love with a sugar daddy who is married. I love him with all my heart. What can I do?” (Centre for Rights, Education and Awareness, 2007 Report).

Economic exchange for sex is a reality, and one which must be addressed by programming on the informal sector, income generation, economic growth and poverty reduction.

Recommendations:

- Activities aiming to support income generation, for example microfinance, must recognise and challenge the exclusion from economic opportunities related to sexuality.
- Recognise the importance of transactional sex in income generation and the informal economy. Understand the diversity in forms of transactional sex, and that these kinds of relations are not necessarily experienced as abusive.

3.2.2 SRHR including HIV/AIDS

The acronym SRHR (Sexual and Reproductive Health and Rights) emerged in Cairo and Beijing in the 1990s, out of the former family planning, mother and child health, and population agendas. The new label SRHR represented a paradigm shift from a concern about demographics to a concern about individual well-being. It shifted from a focus only on health to an inclusion of rights as well, and a recognition that sexuality is important in itself, as well as in relation to reproduction. However, this paradigm shift is incomplete, and currently hampered by the present global backlash on sexuality and SRHR from the present US administration and other fundamentalist and conservative forces.

In SRHR work in practice, female sexuality in particular, tends to be subsumed under reproduction, with rights sidelined in favour of services, and women's rights sidelined for mothers' health concerns. This tendency is reinforced by efforts to counter or mediate oppositional forces, as it may be more "acceptable" to talk about sexuality in relation to HIV prevention, for example, rather than in terms of rights in and of themselves.

...the existing sexual and reproductive rights discourse... more often than not has allowed activists and advocates to conflate the two concepts and use them interchangeably. This is particularly so in many contexts, such as in Asia, where matters of sex and sexuality are deemed taboo. Yet doing so is problematic on several accounts. For example, the indiscriminate use of the terms has contributed to a lack of clarity on what constitutes sexuality rights. At best, the concept is understood within the narrow confines of sexual health or violence against women; at worst, the interchangeable use of the two terms has perpetuated the invisibilisation of sexuality rights within initiatives that are meant to do otherwise. As noted by Ali Miller, the framework of sexual and reproductive rights does not take into account "both non-procreative heterosexual practices and non-heterosexual persons and their acts – and effectively removes them from the sphere of rights protection" associated with sexual and reproductive rights (IWRAP Asia Pacific 2007:2)

In SRHR work in practice, female sexuality in particular, tends to be subsumed under reproduction, with rights sidelined in favour of services, and women's rights sidelined for mothers' health concerns.

For this reason, the need continues to emphasise sexuality and sexual rights as important in themselves and not only in connection with sexual and reproductive health.

Similarly, the response to HIV/AIDS created important possibilities for more open discussion of sexuality, and related social change, such as challenging gender inequality in sexual relations within and outside marriage, addressing the links between masculinity and risk taking, and building LGBT communities. However, this opening has remained limited, with several key issues sidelined such as the relation of sexual pleasure to condom use, the importance of positive attitudes to bodies and sexuality, and the ability to negotiate safer sex. In recent years, the emphasis has shifted from social and behavioral change to a more narrow medical model emphasizing the supply of antiretroviral drugs over the preventive approach.

The response to HIV in recent years has returned to a predominantly medical framework. Renewed efforts in medical research and trials (such as on vaccines, microbicides and circumcision) reflect a desire for immediate biological solutions independent from the complex realities of people's lives (Edstrom and MacGregor, 2007:1)

In response to this shift, calls have been made by key actors in the field to revive attention to sexuality in HIV/AIDS work (Berger 2004, Boyce et al 2007).

Recommendations:

- Renew the emphasis on sexuality in HIV/AIDS and SRHR work, i.e. put the ‘S’ back in SRHR! Ensure that sexuality is addressed as a right in itself, and is not subsumed under reproduction. Ensure that rights are not subsumed under health.
- Recognise that technological measures will not in themselves solve sexual and reproductive ill-health and HIV/AIDS. The solutions are as much social and political.

3.2.3 Security including Gender Based Violence

The Sida Gender Based Violence (GBV) action plan 2008–2010 targets several explicit sexuality issues: female genital mutilation (FGM), violence in the name of honour, violence against LGBT and intersex persons, domestic violence, and sexual abuse in conflict and post conflict situations.

In conflict, sexual violence against women often increases, and can lead to serious physical and psychological problems as well as contribute to the transmission of HIV/AIDS and other sexually transmitted diseases. Men may be generally less vulnerable to sexual violence than women, however they are not immune from sexual abuse. A review of studies of childhood sexual abuse from 20 countries, found roughly three times more sexual violence against girls than boys. In all countries, the offenders were overwhelmingly male when the victim was female (above 90 percent), while studies varied on the sex of the offender when the victim was male (Finkelhor D. 1994). It is clear that in conflicts such as the war in ex-Yugoslavia, and in the current conflict in Iraq, and in DRC (Congo) that sexual violence against both women and men has been used as a weapon of war.

It is widely agreed that rape was a systematic rather than incidental part of the war [in Yugoslavia]. Women and girls were sexually assaulted in the presence of family members, sequestered in rape camps, forced into sexual servitude, intentionally impregnated, and subject to genital mutilation. There are also accounts of sexual abuses suffered by men and boys, including injuries to sex organs, castration, rape, and forced sex among imprisoned male relatives (Ward 2002:81).

Sexual violence against men and boys not only traumatises them, but furthermore is understood as undermining their masculinity, and discrediting themselves, their community or nation (Petchesky 2005). For this reason sexual violence against men often goes unreported. Sexual violence against women not only traumatises them, it also shames them and their male partners and relatives. Women’s chastity is valued, and women’s bodies are seen as belonging not to themselves, but are instead repositories of honour for men and the community or nation. “*Sexual violation of women erodes the fabric of a community in a way that few weapons can... The harm inflicted on a woman by a rapist is an attack on her family and culture, as in many societies women are viewed as repositories of a community’s cultural and spiritual values*” (UNICEF 1996). Transgender people worldwide report facing exceptionally high levels of violence, particularly sexual violence from police.

To effectively combat such violence, the underlying norms around sexuality and gender must be understood and challenged.

Conservative conceptions around women's sexuality and reproduction which lie at the heart of FGM must be challenged. For example, around women's chastity, and the underlying belief that women's bodies, sexualities and offspring must be controlled by men, their families or society.⁷

Recommendation:

Challenge conceptions of sexuality of women that can exacerbate their vulnerability to sexual violence. Recognise and challenge sexual violence against men. Challenge marginalisation of transgender people which can leave them vulnerable to abuse by state and other institutions.

3.3 The Environment and Climate

Environmental degradation may make girls and women more vulnerable to sexual assault due to the need to travel further to source fuel, wood and water. Women may be more likely to drown than men in the case of floods, because they have not been taught to swim due to societal norms about exposing their bodies.

In areas affected by the tsunami, women and girls were not typically taught to swim. They were also more likely to be wearing clothing that weighed them down, such as long saris, and to look for children before running away. As a result, in many areas more women and girls drowned than men and boys.⁸

In regard to international humanitarian aid responses to the tsunami:

Female survivors were unable to freely discuss their needs with male relief workers. Large quantities of sanitary napkins in camp stores remained undistributed. It is taboo to talk of body-related issues like menstruation in India and Sri Lanka. The very need was therefore not openly expressed and remedial action was not attempted. The lack of sanitary clothing exposes women and girls to serious health hazards.⁹

A forthcoming study by IPPF Africa and the World Conservation Union (IUCN) on the relation between HIV/AIDS and the environment may yield further information on the connections in this area.

To effectively combat Gender Based Violence, the underlying norms around sexuality and gender must be understood and challenged.

⁷ Action Plan for Sida's Work Against Gender-Based Violence 2008–2010, p10

⁸ Gender and Disaster Network 2005, Gender and Disaster Network: http://online.northumbria.ac.uk/geography_research/gdn/

⁹ Minutes of the 9th KOFF Gender Roundtable, 3 February 2005, KOFF/ swisspeace, Bern, KOFF, gender & disaster relief.

How sexuality is used to attack women's organising

Accusations around sexuality used to undermine women's contributions in any area, including in relation to the environment. Three women employees of the United Nations Environment Programme in Kenya, one of whom was named as the ex-wife of a cabinet minister, became the centre of a media scandal in 1997 faced with accusations of running a 'lesbian sex ring'. The Director of Kenya's criminal investigation dept ultimately claimed that there was no substance to the allegations and the young girl said to have made the initial charges subsequently denied the story. The campaign may have been an attempt to discredit a party rival of President Moi, attack the UN in Kenya, and set the pattern for further anti sexual rights campaigns, such as a campaign led by the churches against sexuality education proposals later that year. Whatever the underlying motive however, what is clear is that homophobia was an effective tool in undermining women, whether working on environmental or other issues.

(Rothschild, C, 2005, Written Out: How Sexuality is Used to Attack Women's Organising, The International Gay and Lesbian Human Rights Commission (IGLHRC) and the Center for Women's Global Leadership, p3–4).

Recommendations:

- Incorporate sexual health and rights concerns into preparedness for natural disasters.
- Challenge underlying norms around sexuality which can make women more vulnerable to the impacts of natural disasters.
- Support more research on the connections between sexuality and the environment.

3.4 Health

Issues of discrimination and access apply throughout the health sector not only in relation to SRHR. Unmarried women and young people may be assumed not to be having sexual relations and as such be denied information and services around sexual health. Transgender groups in India report that they are sometimes refused treatment of any kind simply because of the way they look, even though they have the money to pay. Some interventions respond to such exclusions, for example the Chengdu Gay Men's Community Care Organisation in China trains doctors to offer appropriate and respectful treatment to men who have sex with men.

When questions concerning sexuality are discussed in international contexts, the debate often focuses on problems and negative effects. In many cases, positive, life-affirming and life quality enhancing factors are ignored. The Swedish Government would prefer to emphasize that the goal of good sexual health is that all people shall have equal opportunities, rights and conditions to enable them to accept and have a positive attitude to their sexuality, and to decide over their own bodies (Sweden's SRHR policy 2006:7)

Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so...It also includes sexual health, the purpose of which is the enhancement of life and personal relations, and not merely counselling and care related to reproduction and sexually transmitted diseases (International Convention on Population and Development, Programme of Action, Article 7.2)

The above statements suggest a broad view of sexual and reproductive health as including freedom and power to make decisions over one's own body, and positive attitudes to sexuality with possibilities for a satisfying sex life and enhanced personal relations. This implies going beyond issues of health systems and access to services, to consider self-esteem and empowerment, and how social values around sexuality might affect these concepts. It has been understood that to promote safer sexual behaviour and improved health of vulnerable groups such as women, transgender, young people, men who have sex with men, drug users and sex workers, much work is needed to build community and self-esteem, challenge stigma, and improve legal rights and justice.

Recommendations:

- Recognise that good health includes positive attitudes to sexuality, and possibilities for a safe and satisfying sex life for all- whether women, men, transgender, adolescents, HIV positive or negative, with or without disabilities etc.
- Challenge discrimination around sexuality and relationship status in access to health services, attitudes of providers, and content of care.
- The health sector should seek to raise awareness in and work with other sectors in a more comprehensive approach to sexuality issues.

To promote safer sexual behaviour and improved health of vulnerable groups such as women, transgender, young people, men who have sex with men, drug users and sex workers, much work is needed to build community and self-esteem, challenge stigma, and improve legal rights and justice.

3.5 Education, in Particular Sexuality Education

Sexuality related discrimination can affect access to and quality of education. For example, teenage mothers may lack the support to continue schooling. At the same time, sexually active young women and men may be denied access to contraceptive advice and provision. Girls may stay away from school during menstruation due to social stigma, lack of sanitary towels, and adequate school toilets. Feminine boys tend to be bullied more in school, drop out and end up in poverty. There are also reports of girls being ridiculed in mixed-sex sexuality education classes. And girls may face sexual harassment more generally.

Educational policies and schools themselves need to tackle these issues. Sexuality education can provide one forum in which to do so. Sexuality education can enable individuals, through information, skills building, and values clarification to make choices about their sexuality and be in charge of their sexual lives and build self-esteem. Sexuality education can be offered as a discrete activity or can be integrated into other activities, programs, and services depending on the context. Content and methodology are hugely important, otherwise sexuality education can become counter-productive as the following comment reminds us:

*Sexuality education can be a vehicle for propagating the status quo and socialising young people into hetero-normative stereotypes. The school syllabus I studied under presented sex as only between man and woman, vagina and penis. There was nothing else, and other material had to be found through unofficial channels which were labelled dirty, sinful, etc. So, how can conventional sexuality education be recreated so that it is not another means of subordinating alternative sexual practices?*¹⁰

Most of the time, the messages that young people receive about sexuality centre around its negative aspects and evoke feelings of tremendous uncertainty, fear, shame or guilt. Most programmes deal only with the

¹⁰ Stella Nyanzi, commenting on a draft version of this concept paper

physical safety aspects of sexuality without acknowledging the fact that pleasure and intimacy is an equally important aspect of sexuality. Using a positive, affirming and rights based approach to sexuality, rather than one based on fear, can address both the pleasure and safety aspects of sexuality. It is important to proactively include all children and young people with age appropriate information. It is equally important to include those likely to be marginalised such as LGBTI, the physically and mentally disabled and displaced persons in conflict situations. And sexuality education is not only for children and young people but relevant for many adults who still lack information, or enter new situations and relationships which require new kinds of knowledge.

Sexuality education can give all people improved self-esteem and greater capacity to decide over their own lives and bodies. Lack of it impoverishes people and decreases quality of life.

Recommendations:

- Tackle sexuality related discrimination to access to education, and sexuality related bullying and harassment in schools.
- Incorporate sexuality education as an important element into national curricula from the age of 10 years. Explore possibilities for both standalone sexuality education and for embedding these issues into diverse school subjects.
- Introduce out of school opportunities for sexuality education through formal and informal settings.
- Make sexuality information available to adults regardless of marital status.
- Content of sexuality education and information should be progressive, affirmative and diverse.

Sexuality education can give people improved self-esteem and greater capacity to decide over their own lives and bodies. Lack of it impoverishes people and decreases quality of life.

3.6 Infrastructure

Urban planning can create safer sexual neighbourhoods. Slums may be areas of high levels of sexually transmitted diseases (STIs), and as such might be suitable locations for sexual health clinics. Street lighting and policing mechanisms can help tackle sexual violence and encourage reporting. However, police may also be perpetrators of such violence, particularly against groups such as sex workers and LGBTI people.

Water, sanitation and hygiene have dire implications for sexual health particularly for girls and women in relation to menstruation cleansing. Use of male or female condoms or other safer sex devices may be problematic where people have to fumble around for matches, hurricane lamps, or candles in order to insert and later dispose of these products. An electricity supply and a light bulb creates many possibilities!

Housing may be cramped and inadequate, allowing couples little time or space for sex, let alone safer sex. Women may be dependent on husbands for housing, and as such be forced to stay in the marital relationship whether they want to or not. LGBTI family members may be forced to hide their desires in order to be allowed to stay in the family home. The NGO Gays and Lesbians of Zimbabwe reports homelessness as one of the key issues facing their members, who risk being thrown out by their families.

Some Sida supported infrastructure programmes are already taking steps to address sexuality issues. In Kenya, the Nyanza feeder roads programme includes HIV/AIDS training and condom distribution for labourers, and contracts female and male labourers locally for each

stretch of road, not only to create a sense of local ownership for the roads, but also so that they can go home to their families in the evening.

Recommendations:

- Explore how infrastructure interventions can impact on people's sexualities. Seek to promote positive impacts (e.g. greater freedom and equality), and mitigate negative impacts (e.g. increase in unsafe sex).
- Seek to understand how needs and priorities around infrastructure differ for different genders. Create space to explore sexuality related issues.

3.7 Agriculture

Sexual and domestic violence, relationship status, and power relations within the family, affect access to and control of resources such as land, water, or agricultural extension information, which in turn affects who benefits from agriculture. People excluded from families or communities due to sexuality related discrimination will also lose out on opportunities to benefit.

People may use their sexuality as a means to access or maintain agricultural resources, through marriage, or for example a widow agreeing to widow inheritance so as to maintain access to her farmland. Or in-laws may use the threat of widow inheritance in order to try to take the land. In Kisumu (Kenya), NGOs talked about commercialisation of widow cleansing, with some young men taking up the job of having unprotected sex with a widow soon after her husband's death (so as to "cleanse" her with semen). Some women were willing to pay for this because of the fear that if the ritual is not performed then her children will suffer. Some men were reportedly taking this up as an income generating activity.

HIV/AIDS has in some cases reduced rural male populations, as has rural to urban migration¹¹, which can be motivated in part by the desire to seek new possibilities for sexual interactions not available in one's home village (see the following section 3.8). Approximately one-third of all rural households in sub-Saharan Africa are now headed by women. Studies have shown that women heads of household tend to be younger and less educated than their male counterparts. They also generally have less land to work and even less capital and extra farm labour to work it with. However, in other circumstances, the contrary may be the case. In some border areas in China 'bachelor villages' populated largely by poorer men have arisen as women migrate out due to opportunities for marriage to richer areas, or making money from sex work in border towns.

Recommendations:

Agricultural development initiatives must seek to understand local contexts including sexuality practices, and ensure people are not excluded from accessing benefits due to sexuality or relationship status.

3.8 Migration

Individuals may migrate out of the desire for a better life, or to escape poverty, political persecution, or social or family pressures – including around sexuality. There are often a combination of factors, which may play out differently for women, men and transgender individuals.

¹¹ <http://www.fao.org/GENDER/en/agrib2-e.htm>

Sexuality can be a factor in both forced and voluntary migration, although it can be difficult to distinguish between the two.

Norms around sexuality can influence migration: it may be less acceptable for women to move about and travel on their own due to ideas around chastity and reputation, so women may find it more difficult to migrate, or migrate shorter distances than men, internally, or within the region (as is the case in Africa). It may be the norm for women to move to husbands' families upon marriage. Single women, widows and divorcees may migrate to escape social stigma. Young women migrate to escape restrictions on their freedom, pressure to marry, or to remain chaste until marriage. LGBT may migrate to escape family pressures, and/or state persecution, and to find LGBT communities in urban centres or abroad, and thereby reduce their isolation and personal vulnerability.

Sexuality can be a factor in both forced and voluntary migration, although it can be difficult to distinguish between the two. To what extent individuals' migration was coerced or by choice is sometimes debatable. Some examples are: a Bangladeshi woman divorced by her husband who is sent back to her parents' village; a woman fleeing feared rape and violence from the militia to a displaced people's camp in Darfur; an English boy who runs away from home to escape sexual abuse; a Serbian woman who has willingly migrated for sex work, but has been deceived to believe that she will earn good money rather than be trapped in conditions of virtual slavery; or the experience of Ms. Zhou a rural to urban migrant in China, below:

The custom of "Marry a chicken, follow a chicken; marry a dog, follow a dog" was to me like a huge black net in which all my dreams and aspirations would be swallowed up. ... I was just a 24-year-old woman with rural household registration in a remote mountain village. In the countryside, I should long ago have become someone's wife or mother. But I didn't want that. When my mother lost patience and gave me an ultimatum, I couldn't go along with it, but I could also no longer say no. All I could do was run away (Zhou 1998).

The broad category of trafficking is often used to cover a wide spectrum between forced and voluntary migrants. Increasingly sex work is equated with trafficking, for example in some U.S. government policy discussions. There is a connection in that some people are trafficked for sex work. However, many sex workers are not trafficked, and many people are trafficked for other kinds of labour such as domestic work. People trafficked for whatever purpose may suffer horribly. However, the huge concern about trafficking in current policy debates does not necessarily help these people. The idea underlying much of the concern is that both sex workers and migrants are victims, and should not be here at all. Policies follow which continue to treat these groups as victims, rather than as people who may have the capacity to make their own decisions, and whose opinions should be respected. Accusations of trafficking are used to justify deportation of migrants, and denial of visas or entry into the country for young women. Other approaches have been recommended to tackle the problem of trafficking, which avoid falling into these traps. For example, mobilising around 'migrant rights' and 'sex workers rights' which would include challenging forced labour where this is occurring, but not assume that these people are all passive victims (see discussions by the Global Alliance Against Traffic in Women www.gaatw.net).

Migration can provide new opportunities to improve people's lives, escape from oppressive relationships, and find new and happier possibilities to live out the sexual lives that people desire. However, migration can

also entrench inequalities and expose people to new vulnerabilities, including sexual harassment, as the result of precarious legal status, exclusion and isolation (BRIDGE 2005).

Recommendations:

- Migration initiatives should recognise that sexuality may play a part in people's motivations to migrate. Oppressive norms and laws around sexuality should be challenged in the places of origin to relieve pressure on people who migrate to escape these norms. At the same time opportunities for safe migration should be enhanced for those who do choose to move.
- Care should be taken when tackling trafficking to ensure that measures taken do not make life more difficult for sex workers and migrants.

4. Challenges and Dilemmas in Work on Sexuality

4.1 Whose Reality Counts?

In 2005, the Africa Groups of Sweden set up a programme of trainings linking gender and HIV to issues of sexuality, power and empowerment. A recent evaluation gave an overall very positive verdict on the project achievements: “The initiative is welcomed by the vast majority of those that had a chance to participate in the trainings. The project has achieved changes in attitudes, particularly regarding sexual rights, and there is a clear commitment within the target group to continue to work on these issues” (Holmberg et al. 2007).

However, one thorny issue was raised by the evaluation: ‘Sexuality and Swedishness’: ‘The project has a strong position on sexual rights and on issues that are considered taboos in most societies...It was done in a conscious and open way and it seems that the participants were aware of their exposure to norm building. This did not stop some of them from feeling that the ideas of the workshops were somewhat imposed. It is hard to know if the “Swedishness” in the approach, addressed several times in the responses, actually differs from alternative positions in African societies, or if it is a question of power relations and who has the right to define the “right way” of thinking. One participant expressed frustration over “a group of Swedish girls who regard their sexual practices normal or ideal and the African sexual practises abnormal.” Another said: “They brought in dimensions about sexuality that made us as Africans feel primitive and backward. I believe that sex is a human right but should be done in a way that is acceptable in society.”’

Other participants felt differently, and there was no consensus on this issue.

This brings out the classic dilemma for donors. On the one hand, we aim to build local capacity and leadership, and to act in ways that are participatory, democratic, and accountable, and facilitate people finding their own solutions rather than imposing our own models. On the other hand, we are promoting a particular set of ideas about how the world ought to work that we believe are good and right – such as poverty reduction, narrowing economic inequalities, good governance, gender equality, and sexual rights. It is difficult to escape the tensions of this contradiction, but it is still possible and necessary to learn lessons as from the above evaluation.

Recommendations:

- Couple democratic decision-making mechanisms that involve primary stakeholders, and locate decision making within the community/country/region with an emphasis on rights and the principles of inclusion, participation, transparency and non-discrimination that guide Swedish development co-operation
- Learn about the variety of local/national cultures, including those that promote more openness or equality in sexuality – for example traditions of sexuality education in Uganda (Tamale 2006), or pre-colonial transgender cultures in Peru (Campuzano 2006). Recognise also that the ways people perceive and present culture is political.
- Recognise that engaging with sexuality issues in this way is about trying to construct new norms and deconstruct old norms, and do so sensitively, in collaboration with local partners, starting from where people are, but not stopping there!
- Recognise that Swedish experiences/models may sometimes be inspiring and worth learning from, and at other times be irrelevant or inappropriate. Recognise that Sweden itself is still struggling with some sexual rights issues.
- Appeal to regional or international commitments relating to sexuality, human rights, women's rights, and HIV/AIDS that have been endorsed by national or local bodies. Draw on applications of existing human rights agreements on sexuality issues, such as the Yogyakarta principles, which apply international human rights frameworks to LGBT.

Proposed basket fund to support LGBTI in East Africa

One practical mechanism to ensure that support is relevant, appropriate and genuinely responding to local realities is the proposed basket fund for support to LGBTI in East Africa. This basket fund has been proposed by Ford Foundation and Open Society Institute to ensure donor coordination, with decision making on distribution to be managed by a human rights NGO in the region. In this way the money will not be managed directly from the north and will be situated closer to the end-users. Capacity to manage very small grants will be built up to avoid encouraging corruption or stifling fragile LGBTI organisations.

4.2 Taking Positive Approaches to Sexuality in Contexts of Violence and Coercion

When questions concerning sexuality are discussed in international contexts, the debate often focuses on problems and negative effects. In many cases, the positive, life-affirming and life quality enhancing factors are ignored (Sweden's SRHR Policy, 2006, p7).

Recognise and protect women's, girls' and LGBT people's right to control their bodies and sexuality. This requires adopting a positive approach to sexuality which demands not only an end to GBV but also seeks to empower women and girls to assert their bodily integrity.¹²

Negative approaches can be disempowering. They often reinforce an understanding of women as vulnerable which diminishes women's sense of their own power. Such approaches can also be ineffective in promoting safer sex. Often at least one partner is having sex for reasons of pleasure, enjoyment, or satisfaction. If condoms or other kinds of safety measures are perceived as obstructing these benefits, it can be difficult to

¹² Recommendation from the Action Plan from Sida's Work Against Gender-Based Violence 2008–2010, p22

Research has shown that ignoring pleasure risks making safer sex promotion ineffective. Thus, the pleasure-enhancing aspects of safer sex need to be promoted.

promote them. Yet most safer sex promotion initiatives focus only on risk reduction. A review of the research has shown that ignoring pleasure, risks making safer sex promotion ineffective (Philpott et al 2006). Thus, the pleasure-enhancing aspects of safer sex need to be promoted.

There are inspiring examples of more positive approaches – and much to be learnt from experimenting further with these and exploring what is effective.

Positive Approaches

The *Coalition for Sexual and Bodily Rights in Muslim Societies in Middle East and South East Asia* frames sexuality in terms of positive rights to sexual and bodily integrity, rather than simply taking positions against honour killings or content of personal codes. Women for Women's Human Rights in Turkey ran human rights training courses for over 5000 women in Turkey, including in areas of the country which reported over 50% of women experiencing marital rape. These trainings include a module on sexuality, with a session on 'sexual pleasure as a women's human right', which has proved to be the most popular session in the whole course.

The *Pleasure Project* has produced a global mapping of pleasure focussed projects which outlines a number of initiatives that use pleasure to promote safer sex particularly in resource poor settings (see <http://www.the-pleasure-project.org/Global%20Mapping%20of%20Pleasure.pdf>).

Some Sida supported programmes in Kenya are taking innovative and positive approaches to sexuality by talking about the life-affirming and pleasure potential of sexual interactions in trainings/community forums. For example, the FEMA magazine, (FEMINA-HIP) the Young Men as Equal Partners, (YMEP), and Centre for Rights, Education and Awareness, (CREAW) programmes in East Africa are designed to create an understanding of sexuality as not always about violence. They encourage men to seek pleasures of consensual sex, and women to have more possibilities to communicate about their own desires.

Recommendation:

Sexuality work must not only address problems. Positive and empowering perspectives and approaches are needed even in situations of violence and inequality.

4.3 Mainstreaming – Pitfalls and Promises

Almost all of Sida's areas of work have some impact on people's sexualities, and the ways people live out their sexualities will have an impact on all of Sida's programming.

Attention to sexuality must be integrated into each sector of work, as is the case for gender and environment. How can this be done effectively?

Lessons can be learnt from the contrasting experiences of mainstreaming gender and environment.

Where mainstreaming has had an impact on organizations, it has included many of the following:

- high level support in the organization;
- dedicated staff, with a budget and organizational clout;
- champions strategically placed in different parts of the organization who will actively promote gender and hold their departments to account;

Attention to sexuality must be integrated into each sector of work, as is the case for gender and environment.

- incentives and sanctions;
- opportunities to learn from others, through formal and informal learning and networking opportunities;
- appropriate materials, written in the language and responding to sector-specific concerns.

Where mainstreaming has failed, it is often because:

- it becomes a box to be ticked, a formality that no-one takes seriously;
- people don't identify with the need for it and find it hard to understand why it should matter;
- people don't understand the issues;
- people are afraid of admitting that they don't understand the issues and don't see why they are important;
- few resources are dedicated to staff to support it;
- those in positions of power in the organization do not seem to be concerned about it;
- no-one would notice or care if attention was not paid to it.

Recommendation:

Sexuality work can learn from other mainstreaming efforts. Sexuality needs to be integrated into different sectors, but must not be reduced to a technical fix or an add-on that is done because a box needs to be ticked. To avoid this, more work needs to be done across the organization to enable staff at all levels to recognize the sexuality-development implications of the work, and how they might best address issues arising from this.

5. Recommendations for Sida

Influence international policy

- *Increase efforts to take a leading role internationally, within the UN System, and in the European Union in the area of sexuality encompassing all relevant areas therein. Take the lead on putting the sexuality dimension into country collaboration strategies and, hence, onto the agenda in country programmes.* More conservative forces in Europe and in some developing countries are now emerging threatening the hard won victories in the field of sexuality, sexual health and rights and in other sexuality related areas. US policies are undermining sexuality education, rights to abortion, condom provision, and sex worker resistance to police violence. Sweden's role in this area is increasingly important in the face of current opposition to sexuality and sexual rights.
- While recognizing that Sida's role is primarily development cooperation, it is also *vital that Sida systematically interacts with Swedish Ministry of Foreign Affairs to contribute to relevant sexuality, development and human rights debates* underway in these institutions, as well as to infuse Swedish external policy guidelines with the concepts and principles addressed in this concept paper. Sida also has a key role to play in supporting civil society organisations domestically and internationally in engaging in these debates.

Better implement Sida commitments

- *Recognize sexuality and its role in development by initiating a process of information dissemination and discussion within Sida around Sida's many policy commitments on sexuality and sexual rights, and how these fit together.* Aim to increase understanding, coherence and coordination, and improve quality of implementation, since sexuality concerns many dimensions that are cross-sectoral. This would include concrete hands on knowledge of the situation in partner countries, and how to talk and engage in a political dialogue on issues of sexuality, as well as issues related to colonialism, prejudice and power relations. Possible mechanisms could include a Sida cafe, short visits to team meetings by sexuality experts from within or outside Sida, reading weeks/training courses on sexuality tailored for Sida staff, or participation in external sexuality trainings for selected Sida staff.

- *Develop strategies and a follow up system to implement the Swedish policy on Sexual and Reproductive Health and Rights (2006).* To date no comprehensive strategy has been put forward to address all aspects of SRHR or sexuality holistically and as issues in themselves.
- *Explore the connections between sexuality and poverty reduction and programme outcomes in each sector. Commission research in this area. Explore mechanisms for integrating sexuality issues into each sector.* Learn from gender mainstreaming by ensuring that the issue is not depoliticised in the process. There is a need to support an understanding of the politics of sexuality, and the links between sexuality and power relations. Support a perspective that is pro sexual rights. Sida has done a good job of promoting sexual health, but the work on sexuality needs to be broadened beyond the health perspective by looking at sexual rights and sexualities as part of democracy, human rights, security and development work.
- *Establish a tracking mechanism within Sida for budget follow ups on sexuality and sexuality related issues.* It has proved difficult to track what Sida is actually doing on sexuality and sexuality related issues in terms of financial spending. This becomes increasingly difficult when more and more funding is channelled through sector and budget support.

Support civil society and foster democratic decision making processes

- *Create mechanisms to enable a range of sexuality and sexual rights organisations to access funding.* Basket funds based in and administered by the regions themselves, in democratic and transparent ways, can enhance access to support for smaller and more innovative sexual rights organisations. Directly build southern institutional capacity rather than only fund work in developing countries through institutions based in the North.
- *Take the lead from Southern partners rather than imposing a Swedish model.* Recognise that Swedish experiences/models may sometimes be inspiring and worth learning from, and at other times be irrelevant or inappropriate.
- *Learn about the variety of local/national cultures, including those that promote more openness or equality in sexuality* – for example traditions of sexuality education in Uganda (Tamale 2006), or pre-colonial transgender cultures in Peru (Campuzano 2006). Recognise also that the ways people perceive and present culture is political. Support social anthropological research initiatives in order to fully appreciate the cultural diversities that influence sexual behaviour, identities and relationships. Support Sida staff to learn from the findings of this work, and use it to seek greater understanding of the complexities of working effectively to promote sexual rights in different cultural contexts.
- *Develop democratic decision making mechanisms which involve primary stakeholders and are genuinely inclusive,* and locate decision making within the community/country/region. Recognise that southern based organisations may be no more democratic or grassroots than northern organisations.

Support empowering, positive and pleasure-inclusive approaches to sexuality.

Support development and introduction of empowering and comprehensive sexuality education within country programmes whenever and wherever possible.

Support positive empowering approaches to sexuality

- Support empowering, positive and pleasure-inclusive approaches to sexuality with the purpose of promoting safer sex, encouraging men to seek pleasures of consensual sex, women to have more possibilities to communicate their own desires, and transgender people to find satisfaction and well-being. This could be furthered by an audit of Sida's sexuality and gender work to see if and where positive approaches are being used, and how positive approaches could be strengthened. Sida could also support organisations promoting such approaches – for example supporting the Pleasure Project to take forward the research agenda outlined in the Lancet exploring how pleasure focussed approaches can enhance the effectiveness of safer sex interventions (Philpott et al 2006).
- Support development and introduction of empowering and comprehensive sexuality education within country programmes whenever and wherever possible.
- Sponsor a high profile conference on 'Re-conceptualizing Sexuality' which would bring together some of the most reputed thinkers on this issue. This should include academics who also engage with policy and practise internationally, policy makers from Sida, Sida partners, and beyond. The reputed thinkers should include the most renowned academics in this field from both south and north such as Anne Fausto-Sterling, Judith Butler, R.W. Connell, Mauro Cabral, Rosalind Petchesky, Richard Parker, Sonia Correa, Sylvia Tamale, Chi-Chi Undie, Ratna Kapur, Jeffrey Weeks, Ken Plummer, Arvind Narrain, amongst others. This would provide an opportunity for more in-depth thinking on how to address this issue in intelligent and effective ways. This could potentially have a great impact and put Sweden/Sida on the map as a progressive and innovative player in this field.

6. References and Further Reading

- Arnfred, S., (ed), 2004, Re-thinking Sexualities in Africa, Uppsala, Sweden. Nordic Africa Institute.
- Aken'Ova, D, 2004, 'Women, Sexuality and HIV/AIDS', *Sexuality in Africa* magazine, vol. 1, issue 4.
- Armas, H., 2007, *Whose Sexuality Counts? Poverty, Participation and Sexual Rights*, IDS Working Paper 294, Brighton: IDS.
- Baobab for Women's Human Rights (BAOBAB), 2003, *Sharia Implementation in Nigeria: The Journey so far*. <http://www.baobabwomen.org/Sharia%20&%20BAOBAB%20publication.pdf>
- Berger, J., 2004, Re-sexualising the epidemic: desire, risk and HIV prevention, in *Development Update*, 'From disaster to development? HIV and AIDS in Southern Africa', Vol. 5, No. 3.
- Boyce, P., Huang Soo Lee, M., Jenkins, C., Mohamed, S., Overs, C., Paiva, V., Reid, E., Tan, M., Aggleton, P., 2007, 'Putting sexuality (back) into HIV/AIDS: Issues, theory and practice', in *Global Public Health*, January 2007, 2:1, 1-34.
- BRIDGE, 2007, 'Gender and Sexuality', Cutting Edge Pack, Brighton: IDS. http://www.bridge.ids.ac.uk/reports_gend_CEP.html#Sexuality
- BRIDGE, 2005, 'Gender and Migration' *Cutting Edge Pack*, Brighton, IDS. http://www.bridge.ids.ac.uk/reports_gend_CEP.html#migration
- Campuzano, G., 'Reclaiming Travesti Histories' in Cornwall, A., and Jolly, S., 2006, (ed), 'Sexuality Matters', IDS Bulletin 37.5, Brighton: IDS.
- Centre for Rights, Education and Awareness, 2007, 'Youth Taking Charge of Their Sexuality Programme'.
- Chambers, R., 2005, *Participation, Pluralism and Perceptions of Poverty*, paper for The Many Dimensions of Poverty conference, Brazil, August.
- Cornwall, A., Correa, S., and Jolly, S., (eds), 2008, *Development with a Body: Perspectives on Sexuality, Rights and Development*, London: Zed Books.
- Cornwall, A., Harrison, E. Whitehead, A. (eds) 2007, *Feminisms in Development: Contradictions, Contestations and Challenges*, Zed books: London/ New York.

- Cornwall, A. and Jolly, S., 2006, (ed), 'Sexuality Matters', *IDS Bulletin* 37.5, Brighton: IDS.
- Cornwall, A. 2002 'Spending Power: Love, Money and the Reconfiguration of Gender Relations in Ado-Odo Southwestern Nigeria', *American Ethnologist*, Vol 29(4):963-980.
- Edstrom, J., and MacGregor, H., 2007, 'Taking the lead on HIV/AIDS requires taking a leap'. <http://www.ids.ac.uk/index.cfm?objectId=8AD10C92-9CD0-1722-E63A08AD2A1A6B3C>
- Hawkes, S., Coleman, E., Corona, E., Vanwesenbeeck, I., Castillo, E., Mazin, R., Ilkkaracan, P., Esiet, U., Rubio-Auriolles, E. (2006) 'Sexual Health, Rights and the MDGs: International Perspectives'.
- Holmberg, Annika & national co-evaluators, Narciso Benjamim Faduco, Mozambique, Nomkhitha Gysman, South Africa, Bethino Mbirimujjo, Namibia, Celestine Tsatsi, Zimbabwe, Natália Pinto, Angola, 2007, Making Sexuality and Gender Visible: Preventing HIV and Aids through gender equality and sexual rights, An Evaluation of the Methodology Project on Gender and HIV/AIDS, The Africa Groups of Sweden 2005–2007.
- Human Rights Watch, IGLHRC, 2003, *More than a name: State-sponsored homophobia and its consequences in Southern Africa*.
- Huq, S., in Cornwall, A. and Jolly, S. (eds) 2006 *Sexuality Matters*, IDS Bulletin 37.5.
- IWRAW (International Women's Rights Action Watch) Asia Pacific, 2007, *Exploring the Potential of the UN Treaty Body System in Addressing Sexuality Rights*, IWRAW Asia Pacific Occasional Papers Series, No. 11.
- Jolly, S., 2007a, Looking at Sida Work in Kenya from a Sexuality Angle, Trip Report September 26-October 11 2007. <http://www.siyanda.org/search/summary.cfm?nn=3506&ST=SS&Keywords=jolly&SUBJECT=0&Donor=&StartRow=1&Ref=Sim>
- Jolly, S., 2007b, *Why the Development Industry Should Get Over its Obsession with Bad Sex and Start to Think about Pleasure*, IDS Working Paper 283, Brighton: IDS. <http://www.ids.ac.uk/go/sexualityanddevelopment>
- Jolly, S, 2006a, 'Not So Strange Bedfellows: Sexuality and International Development', *Development* 49.1. <http://www.palgrave-journals.com/development/journal/v49/n1/full/1100208a.html>
- Jolly, S, 2006b, 'Sexuality and Development', *IDS Policy Briefing* 29, 2006, Brighton: IDS. http://www.ids.ac.uk/UserFiles/File/publications/policy_briefs/PB29.pdf
- Kulick, D., 1998, *Travesti – Sex, Gender and Culture among Brazilian Transgendered Prostitutes*, Chicago and London: The University of Chicago Press.
- Mills, D., and Ssewakiryanga, R., 2005, "'No Romance without Finance": Commodities, masculinities and relationships amongst Kampalan Students', in Andrea Cornwall (ed.) *Readings in Gender in Africa*, London: James Currey.
- Misra, G., CREA and Chandiramani, R., TARSHI, *Sexuality, Gender and Rights: Exploring Theory and Practice in Southeast Asia*, 2006. <http://web.creaworld.org/items.asp?CatID=1>
- Organisation for Economic Co-operation and Development (OECD) Development Assistance Committee's Network on Gender Equality, 2004, *Why Gender Matters in Infrastructure*.

- Petchesky, Ros, 2005, 'Rights of the Body and Perversions of War: Sexual Rights and Wrongs Ten Years Past Beijing', UNESCO's *International Social Science Journal*, special issue on Beijing+10 Vol 57.
- Philpott, A., Knerr, W., and Maher, D., 2006, 'Promoting Pleasure and Protection: Amplifying the effectiveness of barriers against sexually transmitted infections', *The Lancet*. http://www.thepleasureproject.org/content/File/Pleasure_Lancet_Dec06.pdf
- Runeborg, A., 2002, Sida, *Sexuality – a Super Force: Young People, Sexuality and Rights in the era of HIV/AIDS*. http://www.Sida.se/Sida/jsp/Sida.jsp?d=118&a=2440&language=en_US&searchWords=sexuality
- Sexual and Reproductive Health and Rights: A Cornerstone for Reducing Poverty and Achieving the Millenium Development Goals*. Stockholm Technical Meeting, 5–6 October 2004. Background paper for High-level Roundtable (background to Stockholm Call to Action).
- Tamale, S., 'Eroticism, Sensuality and "Women's Secrets" Among the Baganda', in Cornwall, A., and Jolly, S, 2006, (ed), 'Sexuality Matters', *IDS Bulletin* 37.5, Brighton: IDS.
- UNICEF, 1996, 'Sexual violence as a weapon of war', The State of the World's Children News Feature, New York: UNICEF.
- Ward, J., 2002, *If Not Now, When?* Addressing Gender-based Violence in Refugee, Internally Displaced, and Post Conflict Settings: A Global Overview.' New York: The Reproductive Health for Refugees Consortium.
- Win, Everjice, 2004, in *Sexuality in Africa Magazine*, 2004, vol 1.
- World Health Organisation, 2006, *Defining Sexual Health*. http://www.who.int/reproductive-health/gender/sexual_health.html
- Zhou, R, 1998, *Leaving Huaihua Valley: A Sichuan Girl's Own Account of Being a Migrant Worker*, Perth: Murdoch University. <http://www.sshe.murdoch.edu.au/intersections/issue4/rencong.html>

Annex 1

Policies, Programmes and Studie

Swedish Government Policies

- Sweden's international policy on Sexual and Reproductive Health and Rights (Ministry of Foreign Affairs, 2006 <http://www.sweden.gov.se/sb/d/574/a/61489;jsessionid=a8SY71EuqUn4>)
- Investing for future generations: Sweden's international response to HIV/AIDS, 1999, http://www.Sida.se/Sida/jsp/Sida.jsp?d=425&language=en_US

Sida policies

- Action plan for Sida's Work Against Gender-Based Violence 2008-2010 (Sida 2007) http://www.Sida.se/Sida/jsp/Sida.jsp?d=118&a=33656&language=en_US&searchWords=action%20plan%20gender%20based%20violence
- Action plan for Sida's work on sexual orientation and gender identity in international development cooperation 2007-2009 (Deso Gender Secretariat, 2006) http://www.Sida.se/Sida/jsp/Sida.jsp?d=118&a=25657&language=en_US&searchWords=action%20plan%20gender%20based%20violence
- Policy Promoting Gender Equality in Development Cooperation, 2005 http://www.Sida.se/Sida/jsp/Sida.jsp?d=118&a=3584&searchWords=gender%2Cpolicy%2C&language=en_US
- The Rights of the Child in Swedish development cooperation, 2001, http://www.Sida.se/?d=118&a=2460&language=en_US
- Justice and Peace, Sida's programme for human rights, 1997, part A. Policy, http://www.Sida.se/?d=118&a=2085&language=en_US
- Perspectives on Poverty, 2002. http://www.sida.se/sida/jsp/sida.jsp?d=118&a=1490&language=en_US

Commissioned studies on sexuality and sexual health

- Ungdomars Sexuella Hälsa, (Young peoples sexual health), Socialstyrelsen, 2007
- Men Matter! AIDS, Gender and Masculinities, Sida, May 2007, HIV/AIDS secretariat, http://www.Sida.se/Sida/jsp/Sida.jsp?d=1542&a=32257&language=en_US
- 'Making the linkages – Sexuality, Rights and Development' Report from EGDI conference, 6 April 2006, Ministry of Foreign Affairs Swe-

den and Expert Group on Development Issues, <http://www.egdi.gov.se/pdf/Report%20from%20EGDI%20conference%206%20april.pdf>

- Patriarchal Violence – an Attack on Human Security: a Broad Survey of Measures to Combat Patriarchal Violence and Oppression, Particularly Acts Committed in the Name of Honour Directed at Women, Homosexuals, Bisexuals and Transgender Persons. Gerd Johnsson-Latham, 2006, Government Offices of Sweden, <http://www.sweden.gov.se/content/1/c6/05/68/94/42d6d51b.pdf>
- Sexual Orientation and Gender Identity Issues in Development: a Study of Swedish Policy and Administration of Lesbian, Gay, Bisexual and Transgender Issues in International Development Cooperation, 2005, Samelius, L. and Wagberg, E., Health Division, Sida <http://www.Sida.se/shared/jsp/download.jsp?f=Sida4948enSexual+Orientation+web.pdf&a=4855>
- Sexuality – a Super Force: Young People, Sexuality and Rights in the era of HIV/AIDS, Runeborg, A., 2002, Department of Democracy and Social Development, Health Division, Sida <http://www.Sida.se/Sida/jsp/Sida.jsp?d=118&a=2440&language=enUS&searchWords=sexuality>

A selection of Sida programmes

- FEMINA/HIP edutainment magazine in Tanzania, East Africa
- Straight Talk and Young Talk magazines in Uganda
- ‘Young Men as Equal Partners’ in Zambia, Tanzania, Kenya and Uganda
- Youth, gender and SRHR programmes in several countries including China and India
- A range of GBV programmes outlined in Peck, L., 2006, ‘Review of Sida’s work against Gender Based Violence’
- A range of LGBT programmes outlined in ‘An inventory of Swedish Development Cooperation: Sexual orientation and identity’, 2007, http://www.Sida.se/Sida/jsp/Sida.jsp?d=118&a=32313&language=en_US&searchWords=gbv%20inventory
- In Ukraine: ‘Reduction of HIV infection among youth’, ‘Sex Worker HIV/AIDS project’, ‘Men who have sex with men: HIV/STI prevention and support project’
- The ‘Methodology Project on HIV/AIDS’ for Africa Groups of Sweden focusing on trainings on the linkages between sexuality, gender and HIV/AIDS, <http://www.afrikagrupperna.org/cgi-bin/afrika.cgi?d=s&w=2572>
- International Training Programmes on ‘Sexual and Reproductive Health and Rights for Adolescents’ (West Africa and North Africa), ‘Strengthening Midwifery Competence in Sexual and Reproductive Health and Services’ (Africa), ‘Sexual and Reproductive Health and Rights’ (Europe), ‘LGBT and human rights (Asia)’ and a forthcoming training programme on ‘sexuality education’ 2009.

Halving poverty by 2015 is one of the greatest challenges of our time, requiring cooperation and sustainability. The partner countries are responsible for their own development. Sida provides resources and develops knowledge and expertise, making the world a richer place.



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