



Promoting Healthy Sexuality as Sexual Violence Prevention: Prevention & Education Subcommittee Position Paper



Abstract

The Prevention and Education Subcommittee of the Attorney General’s Sexual Assault Task Force defines healthy sexuality as the expressed capacity to understand, enjoy, and control one’s own sexual and reproductive behavior. This includes considerations both of physical health and also of the social norms that shape our ideas about sexuality, our interactions and practices. Promoting sexual health is preventing sexual violence; thus we address the same toxic social norms in both. These unhealthy rules include rigid gender roles, which commodify women and entitle men to nonconsensual sex, and community norms that make sex, including discussion and education, a source of shame to be hidden and avoided. By contrast, promoting the language and practice of healthy sexuality supports positive norms and practices that include gender and health equity, and prevention of all forms of sexual violence.¹ Because healthy sexuality is not a part of our current cultural paradigm, it is critical to invest time, effort, and intention in promoting healthy norms, practices, and relationships as described in this paper.

I. Introduction

Healthy sexuality is the expressed capacity to understand, enjoy, and control one's own sexual and reproductive behavior in a manner that enriches one's self, relationships, and communities. Sexuality is an integral part of the human experience that incorporates physical, emotional, intellectual, social, and spiritual dimensions. A central component of healthy sexuality is both the absence of all forms of sexual violence or coercion, and the active presence of self-determination and the ability to choose when, how, whether, and with whom to make sexual and reproductive choices.²

Helping people identify and create opportunities to explore their own sexuality in a positive and healthy manner is crucial to achieving a culture in which sexuality is regarded as a normal and healthy component of each of our lives.³ Because the practice of healthy sexuality and relationships is not something that is part of our cultural paradigm, it is necessary to invest time, energy, and positive intention into that practice.

Often, when sexual health is discussed, the focus is placed on the *physical* aspects of health only: sexually transmitted infections, promotion of safer sex by using condoms or birth control, and pregnancy prevention. Our vision expands when we consider that

¹ The continuum of violence is described in a companion paper: *Primary Prevention of Sexual Violence* (3.11.14)

² AGSATF Prevention & Education Subcommittee, Sexual Health Work Group. *Philosophic Statement* (2012)

³ See, e.g., Sanchez-Fuentes, M.; Santos-Yglesias, P; and Sierra, J. *A Systematic Review of Sexual Satisfaction*. *International Journal of Clinical and Health Psychology* (2014) 14, 67–75, which, among other conclusions, posits that an increase in interest in the topic is likely associated to the World Health Organization 2002 study that highlighted the importance of sexual health. See footnote 4, below.

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those aspects of physical sexual health are just one component of what it means to be sexually healthy. The practice of healthy sexuality is encouraged when sexual health is discussed in connection with social and cultural norms and values that integrate models of consent, autonomy, and equality in all sexual relationships.

II. Healthy Sexuality and Social Norms Change

Promoting sexual health is a key factor in preventing sexual violence. When we define primary prevention of sexual violence⁴, the most critical piece of actually achieving prevention is creating social and cultural norms change. By placing a premium on the practice of healthy sexuality we are attempting to change the unhealthy attitudes and behaviors that cause sexual violence.

In primary prevention, we identify beliefs, attitudes, values, and norms that support the prevalence of sexual violence as risk factors. We identify socio-cultural changes implicit in healthy sexuality promotion as protective factors.

“Among the factors increasing the risk of a man committing rape are those related to attitudes and beliefs, as well as behaviour arising from situations and social conditions that provide opportunities and support for abuse.”⁵

These risk factors -- values, beliefs, and norms that support sexual violence -- can also be considered functions of oppression. That is, these values and beliefs are the ways in which oppression intersects, functions, and flourishes in our culture. Oppression exists in every facet of our society, and the norms, or risk factors that oppression creates are often unconsciously absorbed through various forms of media. If we do not analyze the ways these beliefs and values affect how we consider sexuality, they will impact the relationships we form.

a. Addressing Gender Roles

Stringent adherence to narrow gender roles and the performance of these traditional roles is linked to a culture in which sexual violence not only occurs, but is supported. Men in our society are often led to believe that sex is a conquest, something to be won or taken. Being successful in that conquest becomes an imperative to achieving ideal masculinity and may be associated with a sense of entitlement. This entitlement, a belief that one “deserves” sex purely based on the construct of being a “man,” lays a foundation for the possibility of one believing sex is something a person deserves, regardless of a partner’s willingness or ability to consent.

⁴ *Primary Prevention of Sexual Violence*, supra.

⁵ *World Report on Violence and Health*, World Health Organization (WHO), Geneva (2002).

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Conversely, young women in our culture are taught to see themselves as the “gatekeepers” of sex. A woman’s worth is often tied to her virginity or her perceived “purity.”⁶ These narrow cultural conceptions of gender contribute to the commoditization of sex and sexuality; sex becomes something that is taken, won, or given.

b. Educational Approaches to Encourage Open and Informed Discussion

Coupled with stringent and narrow gender roles, sex is often viewed as “dirty” or “wrong” in our society. For example, in *The Purity Myth*, Jessica Valenti describes a tool used for discussing sex in classes teaching abstinence-only sexual health:

“In another popular exercise, abstinence teachers use candy to make their ‘dirty’ points. These candy exercises often consist of teachers showing how the candy can’t fit back into the wrapper after being chewed/sucked/eaten. Another program in Nevada even used its abstinence-only state funding to run public radio service ads that girls will feel ‘dirty and cheap’ after having sex.”⁷

Society often teaches people that their bodies and their sexuality are things to be ashamed of. Whether due to the influence of religion, to varying cultural views of morality, or maybe because sexuality itself can be a scary thing to come to terms with, we view sex as something that should stay behind closed doors.⁸ Commonly used teaching methods such as those highlighted above avoid talking about sex as something that is normal and healthy. Educators’ use of heteronormative language, sometimes glossing over the sexuality of lesbian, gay, bisexual and transgendered students, also encourages unhealthy beliefs about sexuality. Even in comprehensive sexual health education, the focus remains on the ways in which sex can hurt someone, e.g., sexually transmitted infections or unplanned pregnancies, rather than the ways sex and sexuality can be positive, pleasurable and healthy.

Sex and shame are closely tied in our culture—sex itself is sometimes viewed as a problem. By redirecting our focus toward one of not only sexual health, but of healthy sexuality, we recognize that objectification and the way our culture views sex and sexuality are the real problem, not the sex itself.

⁶ Valenti, Jessica. *The Purity Myth: How America’s Obsession with Virginity is Hurting Young Women*. Seal Press (2009).

⁷ Valenti, Jessica. *The Purity Myth: How America’s Obsession with Virginity is Hurting Young Women*. Seal Press (2009).

⁸ Bessenoff, G. R. (2006). Absorbing society’s influence: Body image self-discrepancy and internalized shame. *Sex Roles*, 54(9-10), 727-731. doi: 10.1007/s11199-006-9038-7

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In order to prevent sexual violence, sexuality cannot be perceived as a commodity or be shameful—it is imperative that sexuality is accepted as a normal and healthy part of human development for everyone. Shifting these social norms means promoting and educating about sex, not as something that contributes to a person’s perceived value, but from the perspective that sex is valuable for all people, and can be, and often is, enjoyable and pleasurable.⁹ Instead of sex being a conquest, it becomes a collaboration that includes respect and appreciation.

“But instinctively knowing what feels good and what doesn’t—and being able to tell other people about it—is exactly what we need to do to feel safe in our bodies and to enjoy our sexuality. So how on earth do we get there from here?”¹⁰

Framing sex as something that is normal and healthy offers an opportunity to educate communities about what it means to achieve personal health as it pertains to sex, and thus to promote healthy sexuality. Harm can be caused by programs that focus on ways to reduce the risk of sexual violence occurring by focusing on actions potential victims “should” take. Placing responsibility with the victim results in victim-blaming. Moving toward a model that holds perpetrators accountable for using violence as a means of controlling the sexuality of another person is sexual violence prevention. We know that rape happens because there is a person who chooses to rape present, not because of a victim’s actions.

By contrast, and because they address the root causes of the violence, approaches that promote sexual health and healthy sexuality help to ensure that our community and the people in it are protected from sexual violence occurring. These approaches integrate and promote discussions of consent, communication, equity, and sexual autonomy.

c. Gender and Health Equity, Positive Communication, and Men’s Engagement

Research has established¹¹ that promotion of gender equality correlates with a decrease in the occurrence of sexual violence; ensuring that women have equal access to power, wealth, and status also indicates an increase in sexual health, resulting in a reduction in outcomes that have been determined to be unhealthy, such as high rates of sexual violence, sexually transmitted infections, and teen pregnancy.¹² This also harkens back

⁹ Friedman, Jaclyn and Valenti, Jessica. *Yes Means Yes: Visions of Female Sexual Power and A World Without Rape*. Seal Press (2008). See also, Sanchez-Fuentes, M et al., *supra*.

¹⁰ Friedman, Jaclyn. *What You Really Really Want: The Smart Girl’s Shame Free Guide to Sex and Safety*. Seal Press (2011).

¹¹ Switzerland. World Health Organization. Office of Violence Prevention. *Violence Prevention: The Evidence. Promoting Gender Equality to Prevent Violence Against Women*. World Health Organization, 2009. Web.

¹² Seager, Joni. *Penguin Atlas of Women in the World*, Penguin (2008).

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to the importance of addressing the dominant paradigm as related to a commodity or shame-based model of sexuality: the more we as a society value not only the promotion of women and girls as full human beings, but also equality and equity in all aspects of society, the more likely we are to achieve prevention of sexual violence. In their paper, “Establishing a Holistic Framework to Reduce Inequities in HIV, Viral Hepatitis, STDs, and Tuberculosis in the United States,” Centers for Disease Control and Prevention (CDC) describes this type of equity as the opportunity to “attain full health potential” where no one is “disadvantaged from achieving this potential because of their social position or other socially determined circumstance.”¹³

When implementing primary sexual violence prevention programs that address socio-cultural norms change, there are several issues that are important to consider: engaging men; promoting communication, autonomy, consent, and a pleasure-based model of sex; and addressing traditional gender roles. These are concepts largely present in promoting healthy sexuality. Studies have shown that incorporating positive messages of health, instead of using fear-based tactics, is more effective in promoting the adoption of healthy behaviors.¹⁴

What we talk about when we talk about sexual violence has consistently evolved over time, especially when it comes to prevention¹⁵. We are at a place where we understand the importance of the language we use to discuss what it means to practice healthy sexuality, and encouraging people of all genders to be involved in the discussion of what that means, and its vital nature for successful prevention work. In particular, this means focusing not on *how* sexual violence occurs, but instead on how we communicate about sex. For example, discussing consent as asking for and getting a “yes,” instead of just moving ahead until someone says “no,” is an effective way of reframing the conversation. This can be taken one step further, too, in discussing what a partner wants and needs, thus making sex a collaborative experience rather than something to be given or taken.¹⁶

¹³ : Centers for Disease Control and Prevention. *Establishing a Holistic Framework to Reduce Inequities in HIV, Viral Hepatitis, STDs, and Tuberculosis in the United States*. Atlanta (GA): U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; October 2010.

¹⁴ Rothman, A., Salovy, P., Antone, C., Keough, K., and Drake Martin, C. *The Influence of Message Framing on the Intentions to Perform Health Behaviors*, in *Journal of Experimental Social Psychology*, 29:408-433 (1993).

¹⁵ Valenti, Jessica. (October 16, 2013). “What We Talk About When We Talk About Rape.” *The Nation*. Retrieved from: <http://www.thenation.com/blog/176710/what-we-talk-about-when-we-talk-about-rape%C2%A0#>

¹⁶ Friedman, Jaclyn and Valenti, Jessica. *Yes Means Yes: Visions of Female Sexual Power and A World Without Rape*. Seal Press (2008).

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The importance of incorporating male perspective and voices into the movement to end sexual violence is also of primary importance. The Office of Violence Against Women, the Violence Against Women Act, and Futures Without Violence have all highlighted engaging men as a primary response to preventing sexual violence. In order to change the way masculinity is viewed in our society, men need to champion this issue even though many have not traditionally been involved in sexual violence prevention. In order for socio-cultural change to occur, everyone needs to be actively involved in reframing the conversation. Men can change conceptions of toxic masculinity, or unhealthy perceptions of what it means to be a man, by engaging in violence prevention with other men, especially youth.¹⁷ Through these methods, everyone can achieve their full health potential, and have better, safer, and more fulfilling sexual lives.

III. Conclusion

Sexual violence is a complex and preventable social phenomenon perpetuated and supported by our entire culture. In order to prevent sexual violence from occurring, we can refocus our educational efforts on creating healthier communities; this can be done by discussing the ways in which sex and sexuality can be healthy, pleasurable, and good for the people involved. Many methods used to address sexuality, and especially those focused on preventing sexual violence, have not gotten to the core of what it means to practice healthy sexuality, instead focusing on how rape and sexual assault happen. Preventing sexual violence does not mean telling people how to keep themselves safer; by changing our focus to help communities better understand what it means to have a consensual and pleasurable sex life, we begin the process of preventing sexual violence from happening.

¹⁷ See, e.g., <http://www.acalltomen.org/>, <http://www.mencanstoprape.org/> and <http://www.menstoppingviolence.org/>