



# Culture, Health and Sexuality

insights and perspectives from a rapidly changing field

Never Stand Still

Arts & Social Sciences

Centre for Social Research in Health

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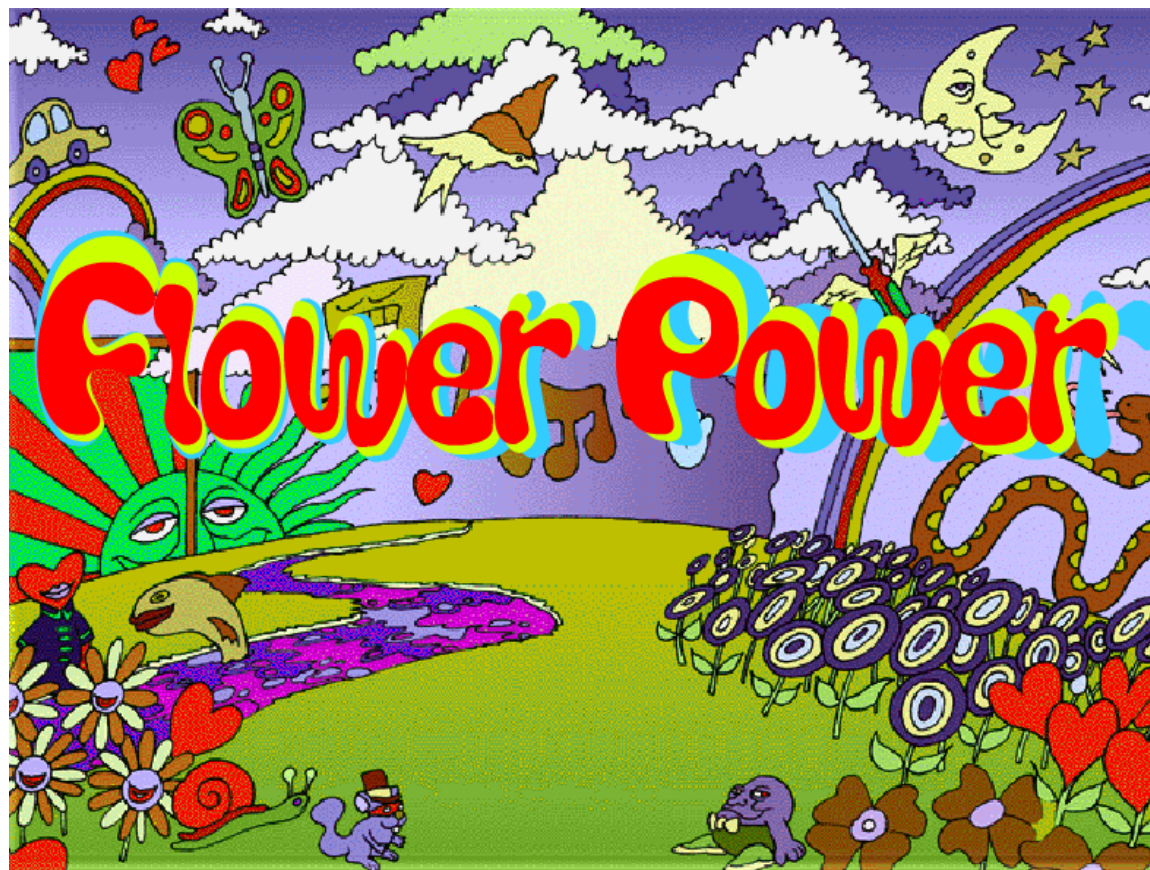
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# Perspectives from a rapidly changing field

- Before the 1960s
  - Silence and prevarication
  - A ‘specialist’ interest and topic
  - Shame and embarrassment

# The 1960s

- Changing attitudes towards marriage, fidelity and same-sex relationships
- Arrival of the contraceptive pill
- Free love, 'flower power'
- Growth of the women's and LGBT movements
- Demography
- Sexology
- Anthropology

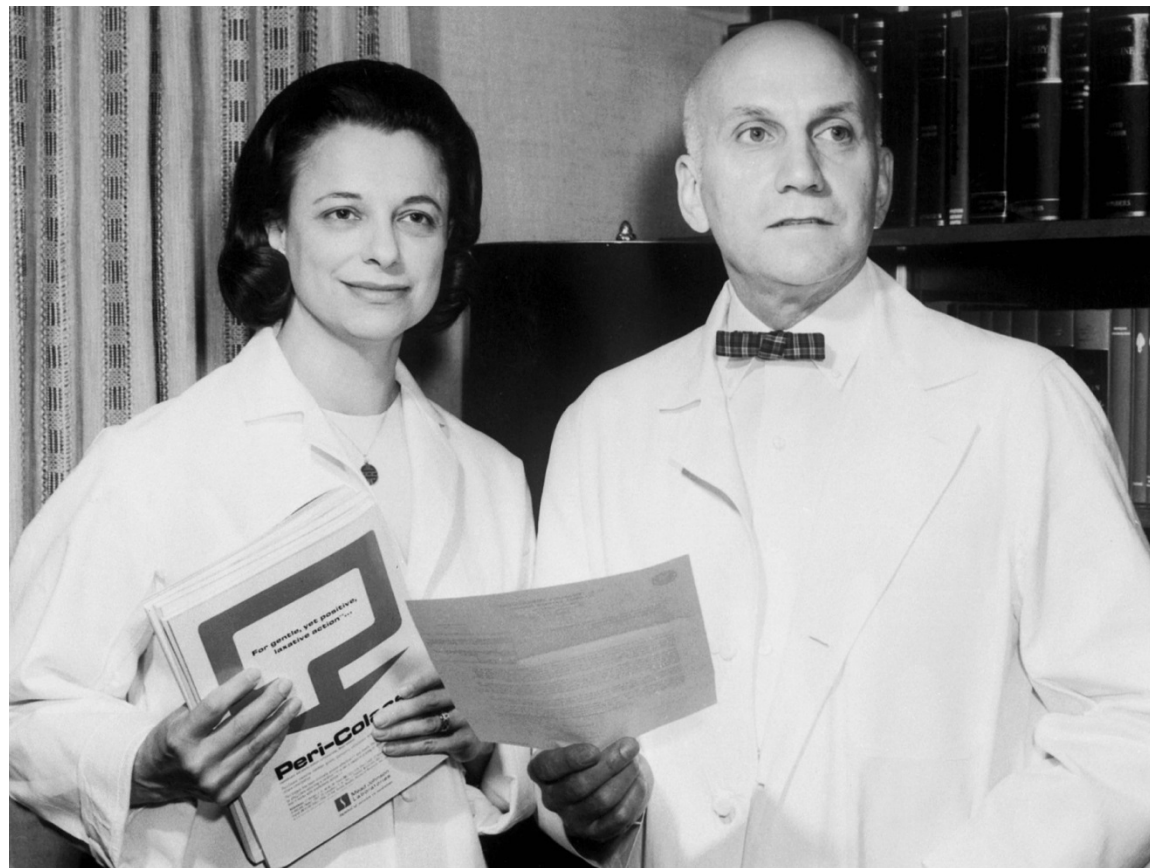


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# The 1970s and 1980s

- Growing interest in sexuality and the ‘sexual’, both popularly and scientifically
- Social sciences began to show interest
  - Political studies
  - History
  - Sociology
- Parallel growth of social movements
  - Feminist and LGB(T) movements
  - Population and development and reproductive health movements

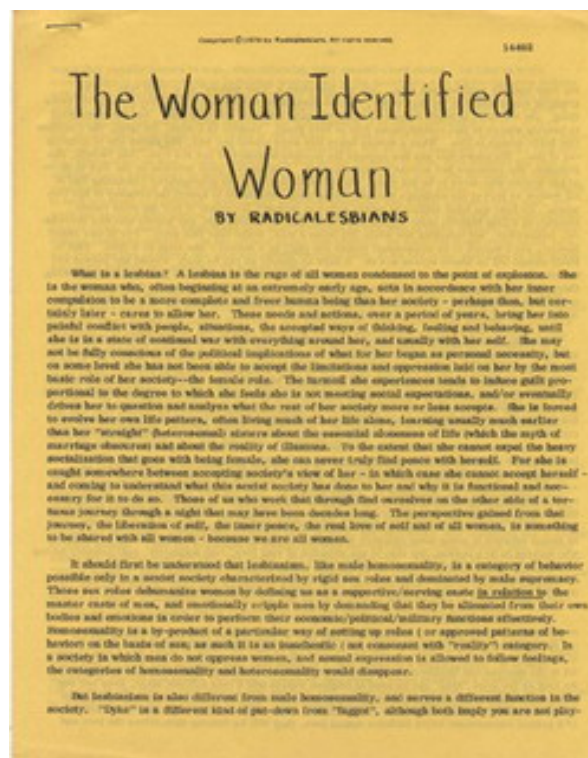


William Masters and Virginia Johnson



Kate Millett - Sexual Politics

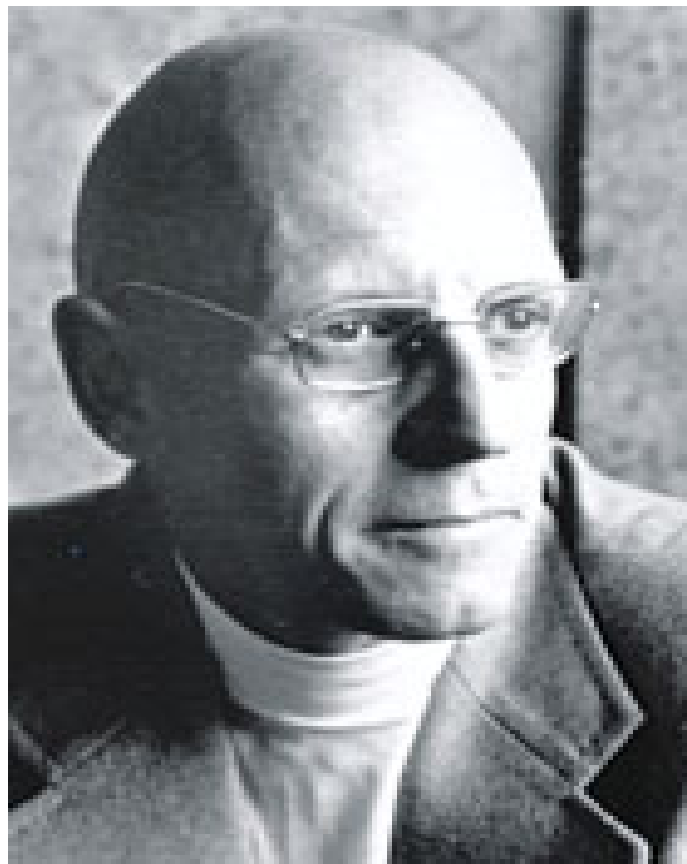




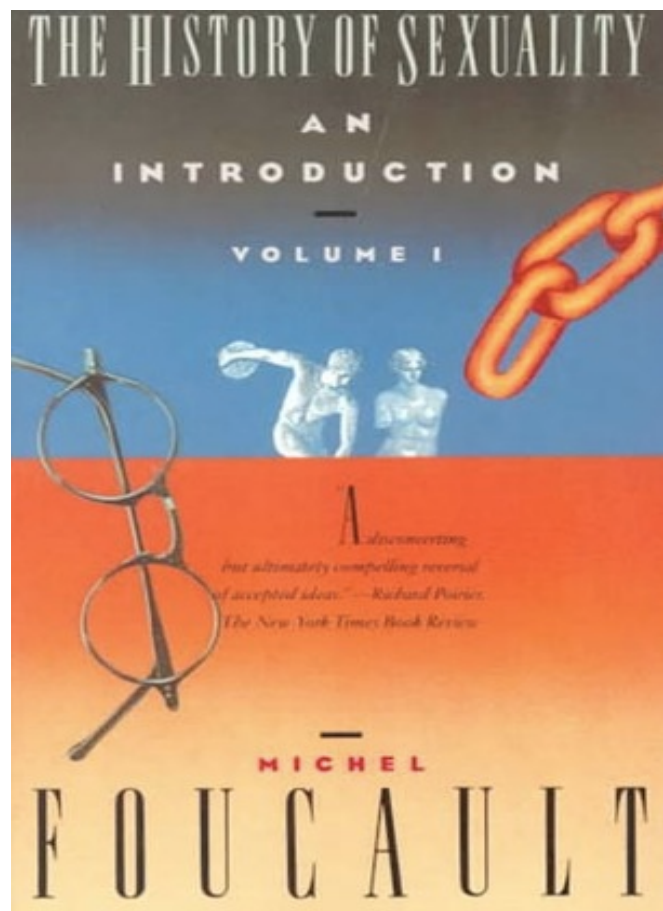
## The Woman Identified Woman -- Radicalesbians



Stonewall and its aftermath



Michel Foucault





Growth of the Social Movements



# Advent of HIV and AIDS

- Risk groups and blame
  - Gay men
  - Sex workers
  - Drug users
- Everyone is at risk
  - [Don't Die of Ignorance](#) (UK)
  - [Grim Reaper campaign](#) (Australia)
- Denial – 'it won't affect me'
- Growth of 'counterpublic' movements
  - [ACT UP](#)
  - Gay Men's Health Crisis

# The move to sexual health

## 1975 definition

“[Sexual health involves] the integration of the somatic, emotional, intellectual and social aspects of sexual being in ways that are positively enriching and that enhance personality, communication and love”  
(World Health Organization, 1975)

# Sexual health

## 2006 definition

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

*(World Health Organisation, 2006)*



# The 'structural' turn

- From individual risk to social vulnerability
- From opportunity to constraint
- Sexuality and power
- Sexual rights

# Sexual Rights

- Sexual rights encompass
  - the right to the highest attainable standard of sexual health
  - the right to seek, receive and impart information related to sexuality
  - the right to respect for bodily integrity
  - the right to decide to be sexually active or not
  - the right to consensual sexual relations
  - the right to decide whether or not, and when, to have children
  - the right to pursue a satisfying, safe and pleasurable sexual life

World Health Organisation (2006)

# Parallel growth of Queer theory

- Queer theory was originally associated with the radical gay politics of ActUp, Outrage, and other groups which embraced “queer” as an identity label that pointed to non-assimilationist politics.
- Queer theory challenges either/or, essentialist notions of homosexuality and heterosexuality within mainstream discourse (the “binary sexual regime,” to use George Chauncey's phrase), and advances understandings of sexuality that emphasize shifting boundaries, ambivalences, and constructions that change depending on historical and cultural context.
- "To queer" is to render “normal” sexuality as strange and unsettled, to challenge heterosexuality as a naturalized social-sexual norm and promote the notion of “non-straightness,” challenging the hegemony of mainstream ideologies

Adapted in part from P. Brooker (2003) *A Concise Glossary of Cultural Theory*. Bloomsbury.

Cited at: <https://faculty.washington.edu/mlg/courses/definitions/queer.htm>

# Kickback, fight-back and where we are today

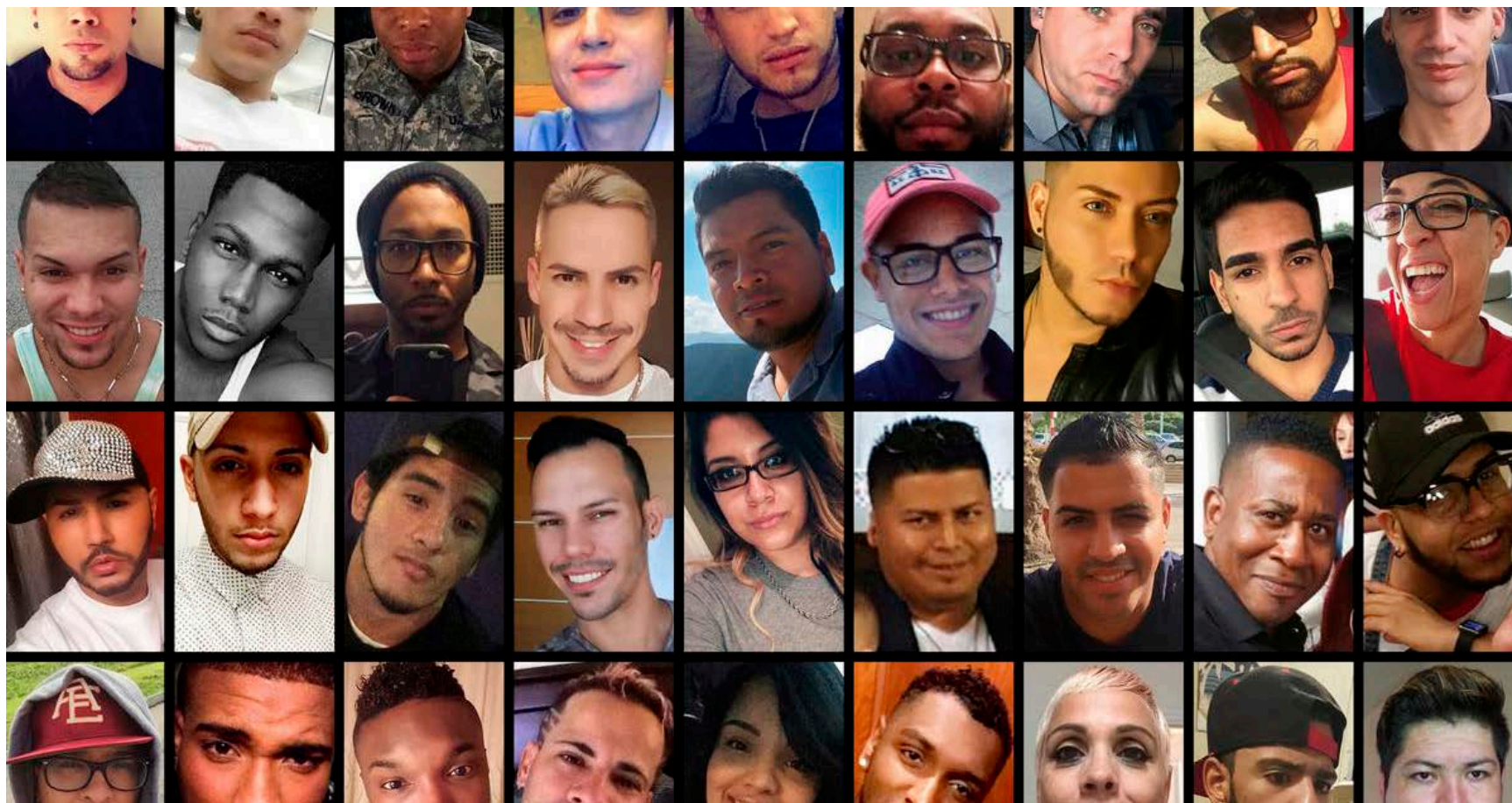
- There is nothing more dangerous than
  - Whig History, or ‘a story characterised by inevitable progression towards even greater liberty and enlightenment’
  - ‘Victory blindness’ (Signorile 2015) – the dangerous illusion that we’ve almost won when it comes to sexuality and sexual rights







# Orlando nightclub massacre



# Heated debate

- homosexuality and the military
- sex and relationship education ('none', abstinence only, abstinence plus, 'comprehensive', pleasure-focused, rights-focused)
- access to sexual and reproductive health services including for the termination of pregnancy
- role of parents in sex education
- pornification of sex and sexual relations
- sexualisation of children and youth



# How best do we understand?

- Move beyond
  - single issue accounts
  - single discipline explanations
- Recognise the importance of
  - the personal
  - the political, and
  - the cultural dimensions of sexuality
- Engage seriously with
  - structural factors
  - cultural influences
  - power of resistance

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# ***Culture, Health & Sexuality***

(first published in 1999 by Taylor and Francis [Routledge])

- an international settings for the analysis of culture and health, health beliefs and systems, social structures and divisions, and their implications for sexual health, and individual, collective and community wellbeing
- an environment where the policy and practice implications of research in the fields of culture and reproductive and sexual health, can be considered
- a setting for critical scholarly debate about how best to analyse the cultural dimensions of reproductive and sexual health issues

# Some emerging issues

- Trans\* issues and concerns
- The refusal of gayness and the growth of heterosexual fluidity
- How to engage with colleagues whose strongly held beliefs (religious or otherwise) make it hard for them to engage professionally with clients

# Trans\*

- **Transgender** people are people who have a gender identity or gender expression, that differs from their assigned sex.
- **Transgender** is also an umbrella term: in addition to including people whose gender identity is the *opposite* of their assigned sex (trans men and trans women), it may include people who are not exclusively masculine or feminine (people who are genderqueer, e.g. bigender, pangender, genderfluid or agender).
- Other definitions of **transgender** include people who belong to a third gender (e.g. *hijra*), or conceptualize transgender people as a third gender
- People who are neither transgender nor genderqueer — people whose sense of personal identity corresponds to the sex and gender assigned to them at birth — are termed **cisgender**

# Recent papers

- Growth into manhood: identity development among female-to-male transgender youth
- Imagining parenthood: the possibilities and experiences of parenthood among transgender people
- ‘They wrote “gay” on her file’: transgender Ugandans in HIV prevention and treatment
- Queer periods: attitudes toward and experiences with menstruation in the masculine of centre and transgender community
- Health impact of chest binding among transgender adults
- Perceptions of cervical cancer risk and screening among transmasculine individuals

# Growing heterosexual fluidity



## Secretly Have Sex With Each Other

*Sexuality is one of the few areas where women are afforded more leniency than men.*

By [Carrie Weisman](#) / [AlterNet](#)

October 10, 2015

 325 COMMENTS

At this point, lesbian sex (the porny kind) is practically considered vanilla. But when it comes to two self-identified straight *guys* getting together, we tend to stiffen up, and not in the fun way.

The term “bro job” generally refers to sex acts taking place between heterosexual men. The phenomenon



Photo Credit: Shutterstock

# Inclusive masculinity theory

Eric Anderson



Deceased homophobia has led to a softening of heterosexual masculinities.

This allows young men to kiss, cuddle and maintain 'bromances' with other men, while also leading to semi-sexual behaviours between men and an increased recognition of bisexuality.



# So what have we learned?

# So what have we learned?

- Come a long way in a short period of time
- New 'openness' together with growth of resistance
- Continuing debate over e.g. LGBTQ rights, abortion, sexual and reproductive health and rights
- Importance of culture and context
- Value of diversity and respect
- Need to recognise that our work is only just beginning .... and
- Applying new understanding is often harder than we expect

Thank you

And what remains to be done?

# Lack of inclusion in the workplace

[In the workplace], listening to, or overhearing, homophobic language and the derision of lesbian, gay and bisexual people leads to poor morale, increased stress levels and higher absenteeism. Ultimately, it can also lead to a poorer service for clients because practitioners are not able to be themselves, which can result in them not interacting comfortably and may lead to clients' needs not being met.

When staff do make complaints about homophobia, many managers do not know how the law works and do not recognise it as an equality issue. “Managers don’t feel confident enough about dealing with the issue because of a lack of knowledge and training,”

Hunt, Ruth., Cowan, K. and Chamberlain, B. (2007) *Being the gay one: Experiences of lesbian, gay and bisexual people working in the health and social care sector*. London: Stonewall

# Lack of inclusion in the workplace

Four in ten social workers believe that homophobia is a problem in the profession with some claiming that colleagues have been “hounded out” due to their sexuality

It’s regrettable that homophobia, racism, prejudice, oppressive and discriminatory practice and bullying is rife in social work . . . though I would admit that this is not from every social worker.”

*Community Care, 31 July 2012*

# What can we do?

- Better training for managers to understand the law, and the duties they have to protect staff
- More robust and accessible policy on equality and inclusion
- Increased visibility of gay, lesbian, bi, trans\* and queer people as role models
- More effective disciplinary procedures to ensure individuals are not victimised if they make a complaint
- Support networks at local and national level to reduce isolation
- Work with employers in the sector to help them become exemplars of best practice
- More conferences and meetings such as this!