

GENDER and SEXUALITY

Supporting Resources Collection

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Contents

A	cronyms	V
1.	Introduction	1
2.	Concepts and definitions	2
	2.1 Sexuality	2
	2.2 Glossary of terms: gender identities and sexual orientation	3
	2.3 Sexual rights charters and declarations	5
3.	Sexuality and the Millennium Development Goals (MDGs)	9
4.	Latest thinking, new discussions	12
	4.1 Why does sexuality matter for development?	12
	4.2 Sexual orientation and gender identity in international development policy	12
	4.3 Is it possible to move beyond gender binaries?	13
	4.4 Beyond victim approaches	14
	4.5 Re-casting rights to bodily integrity in the shadow of US aggression	15
	4.6 Re-working traditional forms of sex education	16
	4.7 Sexual rights for men	16
5.	Case studies: sexuality training	18
	5.1 Promoting women's pleasure as a human right in Turkey	18
	5.2 'Unfreezing' personal beliefs about sexuality among CARE staff in India and Vietr	າam20
	5.3 The Pleasure Project: making safer sex sexy	22
	5.4 Working with religious leaders in Mozambique to improve sex within marriage	
	5.5 Working with men in Zambia	24
	5.6 The first ever Institute for Trans and Intersex Activist Training (Latin America)	26
6.	Case studies: mobilisation, activism and advocacy	28
	6.1 The International Community of Women Living with HIV/AIDS	28
	6.2 Lesbian, gay, bisexual, transgender and intersex organising in East Africa	30
	6.3 Defending women's human rights in Nigeria	31
	6.4 Challenging marriage norms in China	32
	6.5 Breaking the silence on abortion in the Arab region	34
	6.6 Sex workers in Europe ask for their rights	35
	6.7 Resisting United States repression of sexual rights	35
	6.8 Catholics for a Free Choice – Condoms4Life campaign	36
	6.9 Reconciling Muslim faith with sexuality in South Africa	37
7.	Tools and manuals	39
	7.1 Advocacy	39
	7.1.1 A guide to the work of the UN treaty monitoring bodies on sexual rights	39
	7.1.2 A youth activists' guide to sexual and reproductive rights	
	7.1.3 Improving access to safe abortion	
	7.1.4 Religious perspectives on sexuality	40

	7.2 Programming	41
	7.2.1 Tackling sexual violence against refugees	41
	7.2.2 Working with men and boys to end gender-based violence	42
	7.2.3 HIV/STI prevention for men who have sex with men	42
	7.2.4 Youth-focused HIV prevention programmes	43
	7.2.5 HIV/AIDS prevention programmes for sex workers	43
	7.2.6 Introducing the female condom	44
	7.3 Training and teaching	44
	7.3.1 Making choices about sexuality: a guide for young people in Africa	44
	7.3.2 A training package in HIV/AIDS, communication and relationship skills	45
	7.3.3 Promoting gender-equitable behaviours among young men	46
	7.3.4 Reducing homophobia among adolescents	46
	7.3.5 Lesson plans for sexuality educators and advocates	47
	7.3.6 Rights and desire: a facilitator's manual to safer sexuality	47
	7.3.7 Teaching resources: bibliography on sexuality	
	7.3.8 A sexual rights training module	
	7.3.9 Sexual rights curriculum: moving beyond identity politics	
	7.3.10 A sexual and reproductive rights training curriculum for health programmers	
	7.4 Self-education	
	7.4.1 A health guide for women	
	7.4.2 An erotic safer sex DVD	
	7.4.3 An information kit for HIV-positive women	
	7.4.4 Information resources for gay men	
_	7.4.5 Information on sexuality and disability	
8.		
9.		
	9.1 Global	55
	9.2 Africa	58
	9.3 Asia and the Pacific	60
	9.4 Europe	60
	9.5 Latin America and the Caribbean	62
	9.6 Middle East	63
	9.7 North America	63

Acronyms

ABC Abstain, Be faithful, use Condoms

AWID Association for Women's Rights in Development

CEDAW Convention on the Elimination of All Forms of Discrimination against Women

CFFC Catholics for a Free Choice

CHANGE The Center for Health and Gender Equity

DAWN Development Alternatives with Women for a New Era

EU European Union

FGM Female genital mutilation GBV Gender-based violence

HERA Health, Empowerment, Rights and Accountability

ICPD International Conference on Population and Development (Cairo 1994)

ICRW The International Center for Research on Women

ICW The International Community of Women Living with HIV/AIDS IGLHRC International Gay and Lesbian Human Rights Coalition IPPF The International Planned Parenthood Federation

ISOFI The Inner Spaces, Outer Faces Initiative IWHC International Women's Health Coalition Lesbian, gay, bisexual, transgender

LGBTI Lesbian, gay, bisexual, transgender, intersex

LGBTQI Lesbian, gay, bisexual, transgender, questioning, intersex

MDGs Millennium Development Goals MSM Men who have sex with men NGO Non-governmental organisation

PEFPAR President's Emergency Plan for AIDS Relief (President of the United States)

PLA Participatory learning and action SGBV Sexual and gender-based violence

SIDA The Swedish International Development Cooperation Agency

SRC Supporting Resources Collection SRH Sexual and reproductive health

SRHR Sexual and reproductive health and rights

STI Sexually transmitted infection THT Terrence Higgins Trust

TIC The Inner Circle UN United Nations

UNAIDS The Joint United Nations Programme on AIDS

UNIFPA United Nations Population Fund UNIFEM United Nations Fund for Women

VAW Violence against women

WAS World Association for Sexual Health

WHO World Health Organization WHP Women's Health Project

WWHR Women for Women's Human Rights

YWD Young Women's Dialogues

1. Introduction

What is in this Supporting Resources Collection?

Mobilising around sexuality is not new. Activists and practitioners have long been working on issues such as HIV/AIDS; sexual violence; abortion; sex work; and lesbian, gay, bisexual and transgender rights. What is new is the integrated, affirmative approach to sexuality which is increasingly being adopted. This collection provides summaries of writings and initiatives that reflect these new approaches.

- Section one presents a range of definitions of sexuality, sexual orientation and gender identities, and sexual rights, illustrating diverse understandings of sexuality.
- Section two summarises key texts reflecting new thinking in this area.
- Section three outlines practical examples of sexuality training from around the world.
- Section four provides case studies of activism and programming around sexuality.
- Section five summarises toolkits and manuals designed to facilitate advocacy, programming, training and self-education in relation to sexuality.
- Section six lists useful web resources.
- Section seven provides networking and contact details for the organisations featured in this Cutting Edge Pack.

The summaries that make up this collection outline the key points in each resource or case study. Details of how to obtain copies or download the full texts are provided with each summary. Most of the resources in this pack are available to download free from the Internet. The access date for all documents is November 2006. If you are unable to download the texts, refer to the contact details section for information on how to order hard copies from the organisation or author.

This Supporting Resources Collection (SRC) forms part of the Cutting Edge Pack on Gender and Sexuality. The pack also includes an Overview Report and the Sexuality In Brief newsletter. The Overview Report focuses on sexual rights, while the SRC addresses issues around sexuality more broadly. Download copies from http://www.bridge.ids.ac.uk_or contact BRIDGE (bridge@ids.ac.uk) for more information.

New resources

New resources on gender and sexuality are continually being produced. The Siyanda website, hosted by BRIDGE, features all the resources in this collection as well as new materials. We welcome suggestions and submissions of materials on gender and sexuality to be included on Siyanda. See http://www.siyanda.org.

2. Concepts and definitions

2.1 Sexuality

The concept of 'sexuality' is understood by different people in different ways. For some, sexuality is seen as an essential or biological 'drive' or 'instinct'. For others, sexuality, like gender, is understood as being socially, culturally and historically *constructed* by power relations, including gender power relations. Many people take a position somewhere in between these two perspectives. This section presents a range of definitions of sexuality which reveal the variety of understandings that exist.

The view of sexuality as a biological phenomenon (often referred to as the 'essentialist' approach to sexuality) has been used to argue that only socially approved forms of sexuality are 'natural'. What is considered acceptable varies between and within different societies. One example of 'acceptable' sex might be sex within marriage initiated by the man when the woman is not menstruating. However, other forms of sexuality, such as homosexuality or women being too sexually assertive, were (and sometimes still are) seen as a perversion of nature. This 'essentialist' approach has been challenged by arguments that sexuality is socially and culturally constructed – the 'constructionist' approach to sexuality.

Constructionists argue that gender and other power relations influence the way that sexuality is expressed and can lead to the exclusion of, or discrimination towards, those with less socially approved forms of sexuality. Some essentialists, however, have re-formulated their position to argue that it is in fact 'natural' to have a diversity of sexualities (see, for example, the quotes by Anna Runeborg and Carin Jamtin below). From this perspective, gay people could be seen as being born this way. Within either approach to sexuality there is a diversity of perspectives, and whether someone approaches sexuality from a more biological or social perspective does not necessarily determine their position on sexual rights.

Sexuality - a biological instinct?

Sexuality exists as a powerful inner force right from infancy and childhood...Sexuality has its foundations in biology and instinct.

Runeborg, A. (2004) 'Sexuality – a Super Force: Young People, Sexuality and Rights in the Era of HIV/AIDS', Sida: 13, http://www.sida.se/shared/jsp/download.jsp?f=SIDA1633en.pdf&a=2440

Sexuality lies at the core of human life, of what makes us fully human.

Carin Jamtin, Swedish Minister for International Development Co-operation, cited in Cornwall, A. and Jolly, S. (2006)

'Sexuality Matters', IDS Bulletin 37:5, p.2

Sexuality - a social and cultural construct?

When a child plays with its genitals, is this 'sexual'? When a person excretes, is this sexual? When a man kisses another man publicly, is this sexual? When a couple are naked together, is this sexual? When a girl takes her clothes off in public, is this sexual? When a lavatory attendant wipes down a toilet seat, is this sexual? When a morgue attendant touches a dead body, is this sexual? When a social worker assists her client, is this sexual? When a man and woman copulate out of curiosity or out of duty, is this sexual? The list could be considerably extended; but the point I hope is made. Most of the situations above could be defined as sexual; they need not be. Sexual meanings are not universal absolutes, but ambiguous and problematic categories.

Plummer, K. (2002) 'Symbolic Interactionism and Sexual Conduct', in C. Williams and A. Stein (eds) *Sexuality and Gender*, Oxford: Blackwell Publishers: 25

Referring to the Huaorani people in Amazonian Ecuador:

Sensuality in this culture is not centred on genitalia, nor is it the exclusive domain of adult heterosexuality; it should not, therefore, be assimilated to "sexual pleasure"...No distinction is made between the pleasure and contentment felt during sexual intercourse, the pleasure and contentment of a 3-year-old caressing the breast of a woman from whom she or he is feeding, the merry feeling of someone stroking gently the body of a caressing companion, the gratification caused by the action of delousing someone's head, or the pleasure of being deloused by someone's expert hands...Sexuality as an objectified domain referring to the physical relations between the sexes does not exist as such.

Rival, L., Slater, D., and Miller, D. (1998) 'Sex and Sociality: Comparative Ethnography of Sexual Objectification', *Theory, Culture and Society* 15 (3-4): 306-309

Sexuality - somewhere in between?

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.

World Health Organization, Working Definitions, http://www.who.int/reproductive-health/gender/sexual health.html#2

Sex/sexuality *does* tend to represent the full spectrum of positions between the most intimate and the most social, the most pre-determined and the most aleatory, the most physically rooted and the most symbolically infused, the most innate and the most learned, the most autonomous and the most relational traits of being.

Eve Kosofsky Sedgwick (1990) *Epistemology of the Closet,* Introduction: Axiomatic, Berkeley: University of California Press: 5

2.2 Glossary of terms: gender identities and sexual orientation

Sexual orientation means different things to different persons, from sexual desires, feelings, and practices to identifications. For some people it is a basis for identity and for others it is a practice...Our gender dichotomy, man – woman, is too narrow to describe the varying experiences and expressions of gender identity in the (real) world.

Samelius, L. and Wagberg, E. (2005) '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', Swedish International Development Cooperation Agency (Sida) Health Division: 68,

http://www.sida.se/shared/jsp/download.jsp?f=SIDA4948en Sexual+Orientation+web.pdf

Although there are no commonly agreed definitions of different sexual orientations and gender identities – as shown by the above quote – the table below, adapted from the study cited above and prepared for the Swedish International Development Cooperation Agency (Sida), provides one useful set of definitions. For alternative definitions, see: Urgent Action Fund Report (2005) 'LGBTI Organising in East Africa: The True Test for Human Rights Defenders': 6, http://www.whrnet.org/docs/LGBTI-Report.pdf.

Sexual orientation and gender identities: some definitions

Homosexual women and men (in the Western world often referred to as gay men and lesbian women) have a sexual orientation towards persons of the same sex.

Heterosexual women and men (in the Western world often referred to as straight persons) have a sexual orientation towards persons of the opposite sex.

Bisexual women and men have a sexual orientation towards persons of the same as well as of the opposite sex.

Transgender is a term that can include transsexual persons and transvestites (see below). [Transgender can also be taken to encompass regional or local identities such as *hijras* in South Asia and *travestis* in Latin America (see the *Overview Report* and *In Brief* for more detail). There are different views about these terms, however. For example, some transsexuals see themselves as the 'opposite' sex and not as transgender.]

Transsexual persons are individuals whose sexual and/or gender identity differs from the norm of the biological sex that was ascribed to them by birth. A transsexual person can be male-to-female or female-to-male. Transsexual persons can have a homosexual, heterosexual or bisexual orientation when it comes to preference of sexual partners.

Transvestites are persons who, to different extents and with different regularity, dress in clothes traditionally ascribed to persons of the opposite sex. A transvestite can be male-to-female or female-to-male. Transvestites may have a homosexual, heterosexual or bisexual orientation. Transvestites are sometimes called cross-dressers.

Intersex is a general term used for a variety of conditions in which a person is born with a reproductive or sexual anatomy that does not fit the conventional definitions of being only male or only female. A person might be born appearing to be female on the outside, but having mostly male-typical anatomy on the inside, or a person may be born with 'mosaic' genetics, so that some of the person's cells have XX (female) chromosomes and some of them have XY (male) chromosomes.

Source: Samelius, L. and Wagberg, E. (2005) idem: 11-12

Esplen, E. (2006) 'Gender and Sex: Concepts and Definitions', *BRIDGE Report No. 70*, Brighton: Institute of Development Studies

http://www.bridge.ids.ac.uk/reports/R70_gender_sex_categories.doc (Word) http://www.bridge.ids.ac.uk/reports/R70_gender_sex_categories.pdf (PDF)

There has been much debate regarding the meanings of 'gender' and 'sex'. Gender is most commonly used as a contrasting term to sex, as that which is socially or culturally constructed as opposed to that which is biologically given. Yet for many people the sex categories of female and male are neither fixed nor universal, but vary over time and across cultures. This short paper presents a range of definitions of gender and sex, which reveal the diversity of the individual and institutional understandings that exist of these much-debated terms.

2.3 Sexual rights charters and declarations

Working definition of sexual rights from the World Health Organization (WHO)

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.

World Health Organization

This working definition was elaborated as a result of a WHO-convened international technical consultation on sexual health in January 2002, and subsequently revised by a group of experts from different parts of the world. It does not represent an official WHO position. It is available at

http://www.who.int/reproductive-health/gender/sexual_health.html#2

Health, Empowerment, Rights and Accountability (HERA) definitions of sexual rights

Sexual rights are a fundamental element of human rights. They encompass the right to experience a pleasurable sexuality, which is essential in and of itself and, at the same time, is a fundamental vehicle of communication and love between people. Sexual rights include the right to liberty and autonomy in the responsible exercise of sexuality.

Sexual rights include:

- The right to happiness, dreams and fantasies.
- The right to explore one's sexuality free from fear, shame, guilt, false beliefs and other impediments to the free expression of one's desires.
- The right to live one's sexuality free from violence, discrimination and coercion, within a framework of relationships based on equality, respect and justice.
- The right to choose one's sexual partners without discrimination.
- The right to full respect for the physical integrity of the body.
- The right to choose to be sexually active or not, including the right to have sex that
 is consensual and to enter into marriage with the full and free consent of both
 people.
- The right to be free and autonomous in expressing one's sexual orientation.
- The right to express sexuality independent of reproduction.
- The right to insist on and practice safe sex for the prevention of unwanted pregnancy and sexually transmitted diseases, including HIV/AIDS.
- The right to sexual health, which requires access to the full range of sexuality and sexual health information, education and confidential services of the highest possible quality.

Health, Empowerment, Rights and Accountability (HERA) (1999) Action Sheets: 27, http://www.iwhc.org/docUploads/HERAActionSheets.PDF

The Action Sheets are also available in French, Portuguese, Russian and Spanish from: http://www.iwhc.org/resources/heraactionsheets.cfm. To order a copy of the HERA Action Sheets in Chinese, e-mail Jennifer Kidwell at jkidwell@iwhc.org.

World Association of Sexology Declaration of 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.
- 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.
- The right to sexual privacy. This involves the right for individual decisions and behaviours 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.
- 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.

World Association of Sexology Declaration of Sexual Rights (Adopted in Hong Kong at the 14th World Congress of Sexology, 26 August 1999 and reaffirmed at the 17th World Congress of Sexology, Montreal 2005), http://www.worldsexology.org/about_sexualrights.asp

For more definitions of sexual rights, see:

The International Planned Parenthood Federation (IPPF) Charter on Sexual and Reproductive Health and Rights, approved in 1995, http://www.unfpa.org/swp/1997/box8.htm

The International Gay and Lesbian Human Rights Commission (IGLHRC) Sexual and Reproductive Rights Agenda, drafted at the 2005 Institute for Trans and Intersex Activist Training in Argentina: 22-23, http://www.iglhrc.org/files/iglhrc/LAC/ITIAT-Aug06-E.pdf

The South Africa-based LoveLife Programme 'Know Your Rights' webpage, http://www.lovelife.org.za/youth/index.html (go to 'love facts')

The Women's Health Project (WHP), based in South Africa, Sexual Rights Charter, http://www.wits.ac.za/whp/sex-rights-charter.doc

A Declaration of Sexual Rights, produced at the National *Sex Panic!* Summit in San Diego, California in November 1997,

http://www.managingdesire.org/sexpanic/sexpanicpressrelease.html

The Declaration of the Rights of Sex Workers in Europe, which was endorsed at the European Conference on Sex Work, Human Rights, Labour and Migration, 15-17 October 2005, Brussels, Belgium, http://www.scot-pep.org.uk/declaration.pdf

The Sex Workers in Europe Manifesto, which was also endorsed at the European Conference on Sex Work, Human Rights, Labour and Migration, 15-17 October 2005, Brussels, Belgium, http://www.scot-pep.org.uk/manifesto.pdf

Women and HIV/AIDS: The Barcelona Bill of Rights, XIV International AIDS Conference, Barcelona, Spain, 11 July 2002, http://www.aids.net.au/aids-women-bill-of-rights.htm

The International Community of Women Living with HIV/AIDS (ICW) 'Twelve Statements' to improve the situation of women living with HIV and AIDS throughout the world, http://www.icw.org/node/11/

See the Overview Report for information on UN Agreements relating to sexual rights.

3. Sexuality and the Millennium Development Goals (MDGs)

UN Millennium Project (2006) 'Public Choices, Private Decisions: Sexual and Reproductive Health and the Millennium Development Goals'

http://www.unmillenniumproject.org/documents/MP_Sexual_Health_screen-final.pdf

Apart from being important in and of itself, ensuring universal access to sexual and reproductive health and rights (SRHR) is instrumentally important for achieving many of the Millennium Development Goals (MDGs). This report brings out the linkages between the Programme of Action from the 1994 International Conference on Population and Development (ICPD) and the MDGs. It provides an overview of the state of sexual and reproductive health (SRH) over time and across regions, highlighting areas and groups – both within and between countries – that have had particularly adverse SRH outcomes. The paper shows how ensuring universal access to SRHR is critical to achieving each of the MDGs. In the case of MDG3 on gender equality, making access to SRHR services more widespread would enable women to satisfy their desire for spacing or limiting children, enabling them to better balance household responsibilities with activities outside the home, including economic, political and educational activities. Finally, the report discusses the policies, interventions and investments needed to ensure that all people have access to SRHR care and treatment, and considers how such access should be included in national strategies to achieve the MDGs.

Hawkes, S., Coleman, E., Corona, E., Vanwesenbeeck, I., Castillo, E., Mazin, R., Ilkkaracan, P., Esiet, U., Rubio-Aurioles, E. (2006) 'Sexual Health, Rights and the MDGs: International Perspectives' (currently unpublished).

E-mail Sarah Hawkes to obtain a copy: sarah.hawkes@lshtm.ac.uk.

The MDGs address issues of gender equality and empowerment (MDG3), maternal mortality (MDG5), and HIV/AIDS and sexually transmitted infections (STIs) (MDG 6) but do not refer to sexual health. To address this gap, the 17th Congress of the World Association of Sexual Health (Montreal 2005) identified eight goals for achieving sexual health. This paper outlines each of these goals and looks at their relationship to broader development goals. Goal three, for example, urges the elimination of all forms of sexual violence. Women who are victims of violence are also less likely to exercise control over their sexual and reproductive lives and seek help and treatment, thus increasing the risk of unwanted pregnancies and the spread of HIV/AIDS. Eliminating sexual violence is thus directly relevant to achieving the MDGs related to infant and maternal health and mortality, combating HIV/AIDS, achieving gender equality and the empowerment of women, eliminating poverty, and ensuring primary education for all. The other sexual health goals are: recognise and promote sexual rights for all; advance

gender equality; provide universal access to comprehensive sexuality information and education; ensure that reproductive health programmes recognise the centrality of sexual health; reverse the spread of HIV/AIDS and other STIs; identify and treat sexual concerns, dysfunctions, and disorders; and recognise sexual pleasure as a component of well-being.

Family Care International (2005) 'Millennium Development Goals and Sexual and Reproductive Health: Briefing Cards'

http://www.aidsmedia.org/files/1385_image_MDGsandSexualReproductiveHealth_cards.pdf (English)

http://fci.expressiondev.com/UserFiles/File/pdfs/MDG-cards-FR.pdf (French) http://fci.expressiondev.com/UserFiles/File/pdfs/MDG-cards-SP.pdf (Spanish)

Universal access to SRH education, information, and services is key to achieving the MDGs. Protecting the sexual and reproductive rights of women is central to achieving MDG3 on gender equality and women's empowerment, for example, as women's ability to make decisions about their sexuality has a profound effect on their prospects in terms of education, employment, political participation and involvement in social and cultural life. This set of eight reference cards provides information on the links between SRH and the MDGs. Each card includes commitments made by governments at prior international conferences as well as statistics and quotes. Recommended actions are outlined, such as: make sexuality and reproductive health education a mandatory part of school curricula and accessible to out-of-school youth; give priority to meeting the SRH needs of poor and marginalised groups, including adolescents and people living with HIV/AIDS.

United Nations Population Fund (UNFPA) (2005) 'Stockholm Call to Action: Investing in Reproductive Health and Rights as a Development Priority'

http://www.unfpa.org/upload/lib pub file/418 filename stockholm-call-to-action.pdf

The United Nations Population Fund (UNFPA) and the Government of Sweden convened the high-level roundtable, 'Reducing Poverty and Achieving the Millennium Development Goals (MDGs): Investing in Reproductive Health and Rights' on 11 and 12 April 2005 in Stockholm. The roundtable was intended to draw global attention to the need for increased investments in reproductive health and rights and to build on progress made in reproductive health policies and programmes in many countries. Participants affirmed their commitment to the attainment of the MDGs and agreed on ten specific actions. Action three, for example, called on the international community to invest in efforts to increase women's decision-making power in all aspects of their lives, including reproductive health, and to strengthen institutional mechanisms and socio-cultural practices that protect and promote the human rights of women and girls. Participants also emphasised the need to secure financial commitments made at

the 1994 ICPD Programme of Action, and advocate for an increase in official development assistance and a higher proportion to support human rights, gender equality, and reproductive health.

For information on agreements relating to sexuality at the United Nations, see the *Overview Report*.

4. Latest thinking, new discussions

4.1 Why does sexuality matter for development?

Cornwall, A. and Jolly, S. (2006) 'Sexuality Matters', IDS Bulletin 37:5

Sexuality matters for development because it matters to people. And it matters because the silences, taboos and societal expectations that surround sex reinforce unhelpful gender stereotypes that can be as problematic for heterosexual men and women as they are for lesbians, gays, bisexuals and transgendered (LGBT) people. (p.4)

This *Bulletin* addresses a theme that mainstream development has persistently neglected: sexuality. Why is sexuality a development concern? Because sexuality matters to people and is an important part of most people's lives. Because development policies and practices are already having a significant – and often negative – impact on sexuality. And because sexuality and the social norms that seek to contain and control it – such as the assumption that women are sexually vulnerable and that men are not supposed to talk about fears or vulnerability around sexuality – in turn have a significant impact on poverty and well-being. Development needs to move beyond the current limited and negative approaches to embrace the significance of sexuality for development in more affirmative ways. We need to go beyond victim approaches that consider only rights to be free from violation. Positive approaches, which include the right to ask for or say 'yes' to the pleasures we seek as well as 'no' to that which we do not desire, can be an entry point to challenging social and economic inequalities. This *Bulletin* offers a wealth of inspirational examples of how this might be done.

4.2 Sexual orientation and gender identity in international development policy

Samelius, L. and Wagberg, E. (2005) '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', Swedish International Development Cooperation Agency (Sida) Health Division

http://www.sida.se/shared/jsp/download.jsp?f=SIDA4948en Sexual+Orientation+web.pdf

Any rights, gender and sexuality policy that does not mainstream homosexuality and transgender issues has severe deficiencies in its construct and theoretical framework. There should be no reasonable argument to reduce sex to men and women only, and sexuality to heterosexuality only. (p.51)

Homosexual and transgender persons are often excluded from international SRH work. This report is based on a study of Swedish policy and administration of lesbian, gay, bisexual, transgender (LGBT) and intersex issues in international development cooperation. It is the first report of its kind to be conducted by a governmental donor organisation. Definitions are

provided of homosexual, bisexual, transgender, and intersex persons (see section 2.2 of this document), as well as an explanation of how identities may differ between and within the North and South. An assessment of the life situations of LGBT and intersex persons is given through case studies in South Africa, India and Moldova, and specific recommendations are outlined. A number of general recommendations are also made to Sida and the Ministry for Foreign Affairs that emphasise the importance of recognising and respecting expressions of same-sex sexual relations and gender identities that differ from the West. Other general recommendations included: regard LGBT issues as an integral part of a gender equality and social equity agenda, and integrate intersex persons in the LGBT agenda.

4.3 Is it possible to move beyond gender binaries?

Monro, S. (2005) Gender Politics: Citizenship, Activism and Sexual Diversity, London: Pluto Press

Gender categorisation can be best described as a large machine with lots of pins that dig into the sense of self and tear the mind to pieces. And in my situation, having been 'surgically treated' as a child, to me I see...a lot of malice behind it. (p.47)

'Is it possible to move beyond the male-female gender binary system?' This book begins with this question. It seeks answers from theoretical debates, as well as from research done by the author on populations in the UK that do not easily fit these gender binaries: intersex people who do not match the medical criteria for male or female at birth; transgender people who identify as neither male or female; transsexuals who may wish to identify as male or female but whose bodies and legal identities do not initially match the sex category they feel fits them best; bisexuals whose desire is not limited to one sex category; and sadomasochists and fetishists whose sexual desires may also disrupt gender binaries. An important part of the argument is that gender binaries are problematic, not only for those who are intersex, transgender and bisexual. Monro challenges the 'sex is biological, gender is social' mantra that we are so fond of in the 'Gender and Development' world. She makes the case that sex categories are also partly constructed by social and political forces, and that these categories fail to account for the reality of human diversity around sexuality.

So is it possible to move beyond the male-female gender binary system? This book shows that the cost of *not* doing so is the violent exclusion of several sectors of the population, and the shoring up of a sex system that regulates us all. But how do we move beyond this system? While Monro recognises that there are no easy answers, she does outline several promising ways forward. Gender pluralism can be a useful conceptual framework to start from – 'conceptualising gender as "fields" or "groupings" of – in some cases overlapping – masculinities, femininities, and gender diverse identities' (p.38). Monro applies this framework to social policy and spells out some of the ways it might be implemented. She also advocates

'rainbow alliances' between different sex and gender minorities to build political strength for change, and mobilisation around sexual citizenship and democracy.

4.4 Beyond victim approaches

Kapur, R. (2005) *Erotic Justice: Law and the New Politics of Postcolonialism*, London: Glasshouse Press

My hope is that this book will contribute to the development of a theory of erotic justice that would bring erotically stigmatised communities from our respective worlds into an inclusive conversation. (p.11)

In India, the law reform campaigns of the women's movement over the past few decades have focused in part on sexual wrongs, including rape, domestic violence and dowry murders, sexual harassments, obscenity and trafficking. Likewise, the international women's movement has given much attention to violence against women. The campaigns, both in India and internationally, have had some extremely important and beneficial consequences for women. Yet, despite all the efforts, violence against women continues to occur on a staggering scale.

This is due in part to the paradoxes of the women's movement: their continual portrayal of women as victims, a strategy which cannot fundamentally challenge the victimhood of women; and the constant focus on wrongs, in an attempt to promote rights. These contradictions have limited the success of the women's movement, stopping them from presenting a more fundamental challenge to the current hierarchies of gender and sexuality. It has also made possible the co-option of their work by the Hindu right in India, which has drawn on arguments against violence against women to support efforts framed in terms of protecting Hindu women's honour against rape by Muslim men. Internationally, the focus on violence against 'third world' women has fed into the myth that these women are victims of their 'backward' cultures.

This book argues that, instead of these victim approaches, we need to create a space for 'the erotic subject'. In other words, we should recognise that it is possible for women, including 'third world' women, and 'sexual subalterns' (those excluded by norms around sexuality, such as homosexuals and sex workers) to be not only objects of violence, but also, or instead, subjects of their own erotic desires. Grounding our strategies in this perspective can be empowering and enable a more fundamental challenge to the prevailing sexual and gender order.

4.5 Re-casting rights to bodily integrity in the shadow of US aggression

Petchesky, R. (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

The idea of dignity and rights in the body is powerful and can unify coalitions across groups that for too long have worked in fragmented ghettos: LGBT and trans groups; reproductive health and rights groups; disability rights, HIV/AIDS and treatment access groups; feminists mobilised around violence against women and female genital mutilation; sex workers, Central American banana workers challenging use of harmful pesticides; and prisoners' rights groups fighting sexual and other forms of torture and degradation. (p.315)

Much groundbreaking work has been done by the movement against Violence against Women (VAW). At the same time, however, the emphasis on violence has produced an image of 'Third World women' as helpless victims of culture, which dovetails with right-wing rhetoric about preserving women's chastity. For example, President Bush has justified waging war in Afghanistan on the grounds of protecting women, and in UN speeches he has linked the 'war on terror' with efforts to combat the 'sexual slavery of girls and women'. In contrast to women, sexual violence against men has been less visible. However, with Abu Ghraib, the sexual humiliation and torture of Iraqi men became visible throughout the world. This was partly a strategy of war, designed to spread far and wide the images of what US 'intelligence' had identified as particularly humiliating images in terms of Muslim cultural phobias, and in terms of the views of the US Christian right itself: presenting men as less than men, or as 'homosexualised'.

This 21st century perpetual war and the new possibilities of sexual rights mobilisation call for a re-casting of the bodily integrity rights formulated in Cairo and Beijing. We need to move beyond approaches that cast women as victims and men as invulnerable. We need to forge alliances between women's movements and others mobilising for sexual and bodily rights such as LGBT, sex workers, people living with HIV/AIDS, and intersex people. We need to move beyond the exclusive focus on violence to ask for positive rights as well.

4.6 Re-working traditional forms of sex education

Tamale, S. (2005) 'Eroticism, Sensuality and "Women's Secrets" among the Baganda: A Critical Analysis', *Feminist Africa*: 5

http://www.feministafrica.org/05-2005/feature-sylvia.htm

The evolution of Ssenga practices has allowed Baganda women to negotiate agency, autonomy and self-knowledge about their sexuality. This illuminates the liberatory value of indigenous institutions, and represents a very different perspective to their idyllic or nostalgic portrayals as repositories of "tradition".

African women are often seen as victims of sexual oppression, a portrayal that is both inaccurate and disempowering. This paper contests this assumption through an analysis of the institution of Ssenga among the Baganda people of Uganda. Ssenga is a form of sexual initiation, in which traditionally the paternal aunt tutors young girls in a range of sexual matters. The institution of Ssenga can reinforce patriarchal power over women's bodies, yet it also represents new opportunities for women to challenge sexual control. Many contemporary Ssengas promote messages about women's autonomy and economic independence, and some instruction includes lessons in oral sex, masturbation and female ejaculation. In contrast to widespread representations of indigenous institutions as oppressive, this paper reveals how traditional institutions and customs around sexuality can be reworked over time to become empowering.

4.7 Sexual rights for men

Greig, A. (2006) 'Sex and the Rights of Man', in Cornwall, A. and Jolly, S. (eds), 'Sexuality Matters', *IDS Bulletin* 37:5

http://www.siyanda.org/docs/Sex_and_the_Rights_of_Man-Greig.doc

What can men's interest be in the social and sexual revolution being proposed by advocates for sexual rights? (p.2)

This article explores the subject of sexual rights and the claims about such rights as they are made by and for men. It argues that some men's sexual rights have long been violated. Those men who 'betray' their gender through their 'feminine' representation and/or sexual relations with other men are especially vulnerable to such violation. Violence maintains the gender and sexuality hierarchy by keeping the men 'who are not man enough' in their place. But what about the men who appear to be, or strive to be, 'man enough'? What can be said of their sexual rights? Perhaps the most basic demand of advocates for sexual rights is that people be free to live their sexual lives without coercion. Even men who do conform to stereotype may suffer sexual violence, as shown by figures on non-consensual heterosexual

experience reported by boys and men. Furthermore, gender socialisation (the process by which individuals learn and teach others about the roles and behaviours that are expected of a woman or man in a given society) may inhibit men's ability to experience joy, dignity, autonomy and safety in their sexual lives. For example, gender socialisation dictates that men should be confident and take control in sexual relations, leaving no space for admission of the anxieties that many men feel.

5. Case studies: sexuality training

5.1 Promoting women's pleasure as a human right in Turkey

Female genital mutilation and honour killings are only the tip of the iceberg...You cannot eliminate such practices if you do not work on campaigns and programs that support women's sexual and bodily integrity. Suppose you want to tackle honour crimes. We have honour crimes because of the political and religious control of women's autonomy and because of economic factors in semi-feudal settings. Working for sexual and bodily integrity and for economic empowerment of women – that's what will eliminate honour crimes.

Pinar Ilkkaracan, Director of Women for Women's Human Rights, Association for Women's Rights in Development (AWID) Conference in Thailand, 2005

Background

Women's sexuality remains a strong taboo in Turkey, as in many countries. Patriarchal norms and conservatism around women's sexuality – such as women's perceived duty to preserve their virginity until marriage and the underlying cultural belief that women's bodies and sexuality belong to men, their families, or society – continue to legitimise human rights violations in the domain of female sexuality. For example, field research conducted in eastern and southeastern Turkey between 1996 and 1997 revealed that 51 per cent of women had been married against their will, 67 per cent believed that if they committed adultery they would be killed by their husband and/or family, and 52 per cent had been subjected to marital rape. Moreover, most women have little or no access to information on sexuality, leaving them illequipped to deal with sexual relations and develop safer, more satisfying sexualities.

A Human Rights Education Programme for Women (HREP)

It is for these reasons that the Turkish women's rights organisation, Women for Women's Human Rights (WWHR)—New Ways, runs a Human Rights Education Programme For Women, which explores how taking a positive approach to sexuality can open up spaces for women to claim their sexual rights. The modules on sexuality are designed to deconstruct misconceptions around sexuality, challenge taboos, and empower women to take control of their sexuality. In the programme, sexuality and sexual rights are discussed separately from sexual violence and reproductive health and rights in two training sessions deliberately conducted towards the end of the 16-week-long programme. This serves several purposes: it establishes an empowering approach to sexuality after a thorough training on women's human rights, and it provides space to disassociate sexuality from coercion and oppression. It also challenges the idea that women's sexuality is constructed around, and limited to, reproduction.

As in other modules of the programme, trainers are encouraged to share their own experiences to help ease tensions and create a sense of trust and support. The women and sexuality modules begin with participants sharing their experiences of how their sexuality is controlled or ignored. These discussions include questions not only about how men and the family control women's sexuality, but also about how sexuality is controlled by public institutions, workplaces, schools, the state and society. This is followed by a session on female sexual organs and their functions, aiming to demystify sexuality and introduce the right to pleasure. The second module asks participants what first comes to mind when they think about women's and men's sexuality. It aims to identify and change misconceived ideas about female sexuality which is often associated with concepts of 'duty', 'motherhood', 'virginity' and 'being oppressed'. It also seeks to challenge assumptions around male sexuality.



Women participating in the Human Rights Education Programme run by WWHR. Photo courtesy of WWHR.

What impact has the programme had?

Over a decade, the programme has reached provinces in all regions of the country, and over 5,000 women have participated in the programme to date (as of 2006). WWHR's ongoing work on sexuality has helped to create spaces for women to speak the unspeakable, to share things that would otherwise be silenced, and to know themselves and each other in new ways. The transformation and awareness that has come about, as well as women's determination, is best reflected in their own words:

Until I participated in this training, I didn't know that girls or women can feel sexual pleasure. Now I say, when women don't want to they can say no. You want it, I don't and right now I'm not available. Men have to respect that. When it is forced, it is like rape. There is such thing as marital rape. Women should know that they have the right to go to court. Even if he's her husband, she has the right not to make love. They have to know it.

I think women should first discover their bodies and ask what the woman wants. Not what the man wants. Sexuality is something created by nature, it can't exist without the woman.

Sources:

Ercevik-Amado, L. (2006) 'Promoting Sexual Rights through Human Rights Education: Experiences at Grassroots in Turkey', in Cornwall, A. and Jolly, S. (eds) 'Sexuality Matters', *IDS Bulletin* 37:5

Ercevik-Amado, L. (2005) 'The Human Rights Education Programme for Women (HREP): Utilising State Resources to Promote Women's Human Rights in Turkey – A Tactical Notebook', The Centre for Victims of Torture, New Tactics in Human Rights Project

5.2 'Unfreezing' personal beliefs about sexuality among CARE staff in India and Vietnam

We can only work with target groups [on gender and sexuality] if we can break the iceberg inside ourselves.

Director of the Youth Union of Vietnam, p.9

We've realised that we needed to change 'us' before we [could] advocate change in communities.

Field perspective from India, p.16

Background

Initiating a dialogue around sex and sexuality was identified as a priority need by CARE reproductive health programme staff working in India and Vietnam. In their experience, field staff would promote condoms and talk about birth spacing or the prevention of sexually transmitted infections (STIs), while overlooking the importance of intimacy in sexual relations and the reality of gendered power relations.

The Inner Spaces, Outer Faces Initiative (ISOFI) – a collaborative learning partnership between CARE and the International Centre for Research on Women (ICRW) – was initiated in India and Vietnam to respond to this concern. ISOFI is anchored in the idea that practitioners need space to explore their own values, attitudes, experiences and beliefs about gender and sexuality, and that personal learning and change in relation to gender and sexuality is crucial to enhancing organisational effectiveness in addressing these sensitive issues. In other words, asking field-staff to promote gender-sensitive or gender-transformative

principles is only possible when they have had an opportunity to integrate those principles into their personal lives.

Activities

A heavy emphasis on 'unfreezing' personal beliefs took place, particularly in the early days of the initiative:

- Gender and sexuality training challenged staff participants' preconceived notions of gender roles and sexual identities.
- Reflective dialogues were held at the country office level where staff were
 encouraged to process observations and learning around gender and sexuality, and
 explore how learning links to change at the personal, professional, and organisational
 level. The dialogues provided 'safe spaces' for collective reflection on the integration
 of gender and sexuality into the project's strategies and interventions.
- Personal learning narratives were facilitated, based on in-depth interviews, which allowed staff to think through the effect of learning around gender and sexuality on their personal lives.
- Participatory Learning and Action (PLA) exercises used social and vulnerability
 mapping, body mapping, Venn diagrams and cartooning to achieve greater depth and
 commitment to transformation in the area of gender and sexuality.

ISOFI laid the groundwork for CARE staff to promote change in the community. For example, CARE staff in India designed activities to promote couple communication, such as engaging newly married couples in role plays relating to gender. ISOFI teams organised picnics outside the village setting where newly-weds felt less constrained to try these new roles. They also initiated storytelling exercises to share personal narratives, as well as body mapping exercises.

What impact has the programme had?

Personal change took place across all ISOFI sites in India and Vietnam. These changes affected not only CARE staff but also their families, communities and the CARE organisation itself. Many staff stated that, before ISOFI, they avoided discussing matters related to sex, but as the project progressed this began to change. One CARE Vietnam staff member reported, 'I am more comfortable to discuss sexuality...I do not feel shy or embarrassed any longer'. Gradually staff extended these conversations to their families. As one member of staff revealed, referring to her spouse, 'I need to be more expressive about my desires'. Ultimately, CARE staff members were able to move from the transformation they experienced personally

and organisationally to actions and interventions with the community, opening a public space for the creation of empowering sexuality and gender transformation.

Source: CARE and the International Center for Research on Women (ICRW) (2006) 'Walking the Talk: Inner Spaces Outer Faces – a Gender and Sexuality Initiative', http://www.icrw.org/docs/2006_isofi.pdf

5.3 The Pleasure Project: making safer sex sexy

Background

Traditional expectations of female chastity and passivity often dictate that women should be silent about their sexual desires. Other groups are also not supposed to enjoy or express their sexualities – such as people living with HIV/AIDS, disabled people, young and old people, gay men, lesbians, bisexuals, and transgender or intersex people. Heterosexual men, by contrast, are often portrayed as selfishly taking their sexual pleasures without paying attention to what the woman wants. Yet in reality the pursuit of pleasure is not without obstacles for most men. Gender norms influence how and where men are supposed to take their pleasures, for example finding pleasure in tenderness and intimacy may be discouraged by ideas around what it takes to be a 'proper man'. Instead, the emphasis may be on male sexual prowess or skill, which is often associated with risky sexual behaviour. This can encourage unsafe sexual practices that have an adverse impact on men's sexual health and on that of their partners.

Activities: a global mapping

The Pleasure Project builds bridges between the pleasure/sex industry and the safer sex world by ensuring that erotic materials include discussions of safer sex, and that sexual health and training materials include pleasure as a key element. It aims to help sex education programmes and the 'pleasure' industry communicate that sex can be positive, liberating and pleasurable while also being healthy and safe. The Pleasure Project conducted the *Global Mapping of Pleasure* to identify projects or organisations worldwide that promote pleasure in safer sex initiatives, and those that include safer sex in sexually explicit media. The *Global Mapping of Pleasure* presents these initiatives, including: programmes that eroticise male and female condoms; sex-positive books for teenagers; work with Churches to improve sex among married couples; erotica designed for HIV-positive people; and pleasure and harm-reduction counselling for sex workers. Twenty-seven initiatives are briefly outlined, along with contact details of the organisations involved. Find the global mapping at http://www.the-pleasure-project.org/GlobalMappingofPleasure.pdf.

5.4 Working with religious leaders in Mozambique to improve sex within marriage

Religion, by and large, has made sex the problem. The Vida Positiva programme suggested that religion could use sex as the possible solution.

Background

One of the most innovative and successful projects featured in The Pleasure Project's *Global Mapping of Pleasure* is Empowerment Concept's Vida Positiva (Positive Living) in Mozambique. One aspect of this training programme aimed to promote safer sex among married couples by tackling one of the reasons that married men were having sex outside of their marriages: because they were bored with their sex lives at home. When asked whether better sex at home would change their behaviour with regard to extra-marital sex, many men said 'yes'. When the wives were asked why they refuse to have sex other than in the standard position, their response was 'I am never asked what I like in sex, if I like sex and if I even want sex, so why should I do anything that gives him pleasure?' Sometimes, when a man asks his wife to have sex in anything but the standard man on top, woman underneath position, she accuses him of treating her like a sex worker and is offended. Family and community members may also view this as a sign of disrespect. So the man justifies having sex outside his marriage by saying 'I want better sex with my wife, but she won't let me have it.'

Through the Vida Positiva programme, the question was raised: what if we use the structure of religion to teach people in committed relationships how to have better sex? To address this problem head-on, Vida Positiva trainers advocated for local churches – including Catholic churches – to teach couples better sex by getting both partners to talk openly about what they like and do not like about sex. 'Make sex amazing within the relationship,' they reasoned, 'and men will not stray as much.' Thus, the number of sex partners can be reduced – one means of lowering sexually transmitted infections (STI) and HIV transmission.

Activities

Vida Positiva trainers explained to church-affiliated participants the importance of talking more openly about sex and helped them understand that open dialogue among married couples about sex and pleasure is not a threat to culture, religion or people's sensibilities. Vida Positiva trainers also worked to increase religious leaders' knowledge of and comfort with sexual topics and information. One exercise was a 'build your own dildo (or artificial penis) competition' which required all participants to create a dildo for condom demo purposes out of a variety of materials. The Catholic nuns won the competition hands-down!

A variety of activities were used to promote dialogue about what partners like and do not like sexually. One exercise was role-switching: husbands and wives switched roles for an entire weekend, and the women acted like the men and vice versa. At another session, the women

complained about their husbands, addressing a 'penis' at the front of the room. Meanwhile, the men sat at their feet. Some women slapped the penis or flicked it. It was a powerful, provocative and humorous learning method through which the wives were able to vent their feelings, some for the very first time!

The men, on the other hand, were shocked at how they were viewed by women. This was a valuable lesson for men to finally hear – from women – how they are perceived...smelly, demanding, selfish, etc. The women's clearing process was painful and liberating for most of the participants. At first, the men were not as open to the idea of honestly discussing what they like and do not like, but after a time they also opened up.

What impact has the programme had?

At first, both church-affiliated participants and the couples were reserved. But once the Vida Positiva leaders established trust with them, most participants, with the exception of only a few, opened up and participated. Not only did the Vida Positiva trainers get people talking about sex in Mozambique, they inspired churches to such a degree that the local Catholic bishop began doing the 'blessing of the condoms' as a regular Sunday night feature. Even the crucifix in the church was made up of unopened condom packages. According to the Bishop, he has to follow what he knows is right, and if God gets upset with him, he will take it up with God when he is in Heaven. The Vida Positiva programme also had strong support from the government in Mozambique, and President Cissano himself endorsed the programme at an extraordinary session of the Parliament.

Source: Adapted from The Pleasure Project (2004) 'Pleasure and Prevention Case Study Number One', http://www.the-pleasure-project.org/VidaPositiva_CaseStudy.pdf

5.5 Working with men in Zambia

Background

Programmes that focus on empowering women to negotiate safer sex are likely to have limited impact in societies where it is men who are expected to make the decisions about sex. Moreover, constructions of masculinity (the culture-specific ideas, roles and behaviours that men are supposed to conform to in order to become accepted members of their own communities) that equate risky sexual behaviour with 'manliness' are a major factor driving the rapid spread of HIV. In Malawi, for example, men boasted about the likelihood of being HIV positive, since having HIV would act as a 'badge' of manhood before their peers (Kaler, 2003, cited in Barker and Rosaldo, 2005). Spurred on by the recognition that men's attitudes and behaviours are absolutely pivotal to the success of sexual and reproductive health

programmes, many development agencies and non-governmental organisations (NGOs) have designed initiatives to encourage positive male involvement (Esplen, 2006: 10).

Activities

Thandizani, based in Lundazi District in Zambia's Eastern Province, is one of the few NGOs in Zambia that is integrating gender and sexuality into its HIV/AIDS work. Thandizani supports men to organise themselves into post-test clubs (numbering 22 now with around 100 members each), whose membership is based on taking an HIV test, irrespective of result. Thandizani staff train and support post-test club members to become community AIDS educators, who then provide education and basic counselling on HIV/AIDS and the HIV test to other community members. Other post-test club members are trained as carers, who provide care and support to club members and others who are sick with AIDS. Together with Thandizani staff, community AIDS educators and youth peer educators organise group discussions with their target groups, highlighting issues of gender inequalities, HIV/AIDS vulnerability and resisting gender stereotyping, and discussing ways to address these issues.

What impact has the programme had?

As a result of this work, people have become more willing to talk about and report men's violence against women, and there is a greater openness in talking about sex. Some married couples have reported that they are communicating more openly about sex, and women are more able to refuse sex if they do not want it. Men's sense of entitlement to sex seems to be changing slowly, and both women and men say that men are showing more respect for women's wishes and rights.

Sources: International HIV/AIDS Alliance (2003) 'Working with Men Responding to AIDS: Gender, Sexuality and HIV – A Case Study Collection', http://synkronweb.aidsalliance.org/graphics/secretariat/publications/wwm1103_working_with_men.pdf

Barker, G. and Ricardo, C. (2005) 'Young Men and the Construction of Masculinity in Sub-Saharan Africa: Implications for HIV/AIDS, Conflict and Violence', Social Development Papers: Conflict Prevention and Reconstruction, Paper No. 26/June 2005, Washington: The World Bank, http://www.promundo.org.br/Pesquisa/Young%20Men%20SubSaharan_Web.pdf

Esplen, E. (2006) 'Engaging Men in Gender Equality: Positive Strategies and Approaches, Overview and Annotated Bibliography', *Bibliography 15*, BRIDGE

5.6 The first ever Institute for Trans and Intersex Activist Training (Latin America)

We believe it is indispensable to deconstruct the binary sex/gender system that shapes the Western world so absolutely that in most cases it goes unnoticed. For 'other sexualities to be possible' it is indispensable and urgent that we stop governing ourselves by the absurd notion that only two possible body types exist, male and female, with only two genders inextricably linked to them, man and woman. We make trans and intersex issues our priority because their presence, activism and theoretical contributions show us the path to a new paradigm that will allow as many bodies, sexualities and identities to exist as those living in this world might wish to have, with each one of them respected, desired, celebrated.

IGLHRC (2005) 'Institutional Memoir of the 2005 Institute for Trans and Intersex Activist Training': 7-8, http://www.iglhrc.org/files/iglhrc/LAC/ITIAT-Aug06-E.pdf

Background

In November 2004, the International Gay and Lesbian Human Rights Commission's (IGLHRC) Latin American and Caribbean Programme organised the first ever Institute for Trans and Intersex Activist Training to be held in South America. The two-week Training Institute was held in Cordoba, Argentina, and was planned, coordinated and run by trainers from South America. It involved a seven-member coordinating team and 19 activists and advocates from 14 countries.

The Institute for Trans and Intersex Activism had a three-part agenda, structured around:

- Trans and intersex theory and politics: exploring 'performative' concepts of gender which see gender as a 'work in progress' rather than a fixed identity linked to biology
- Organisational development: designed as a practical approach to the various challenges that trans and intersex political activist groups face in the region
- Human rights: focusing on the international and inter-American human rights system, with a special emphasis on the introduction of trans and intersex issues, and on the documentation of human rights violations suffered by trans and intersex persons.

Activities: three examples

a. Allies and enemies

In the first session, each participant, using his or her country and community as examples, told the group about the 'best' and 'worst' aspects of each. Most commonly cited as the 'best' were: family, friends, activist groups, as well as anti-discrimination laws and the possibility of getting surgery and hormone treatment. For the 'worse' many cited loneliness and lack of contact with peers; exclusion and domestic and social violence; employment discrimination; the marginalisation of trans and intersex activists within the contexts of LGBT groups; and 'experts' having a huge influence on their lives, particularly psychiatrists and lawyers.

b. The sharing of experiences

This class, described as the most difficult and emotional of the whole curriculum, involved each participant and trainer telling their own individual story to the group – stories of domestic abuse and abandonment, of stigma and social invisibility, as well as stories about activism and empowerment.

Telling personal stories (p. 15)

When they see you they tell you you're a freak, an aberration.

The marginalisation, the discrimination, the lack of understanding are also the fuel that make you start to fight for your rights.

I knew I was a travesti because of the label society puts on you, but not because I decided to call myself that, and once I met other lady colleagues I started to turn what I knew upside down and to construct myself as a travesti with a different conception of it.

c. Trans and intersex agenda

Towards the end of the training the participants produced a list of objectives, priorities and rights for a trans and intersex agenda. On the basis of this agenda, participants issued an eight-point statement – La Falda Declaration – to serve as guiding principles for work on trans and intersex issues throughout Latin America and the Caribbean. The declaration features the following statement:

Taking into account the specific needs expressed by the various trans and intersex gender corporalities, sexualities, expressions and identities, we affirm the need to reformulate and/or broaden current judicial and biomedical concepts applied to the following:

- a. the autonomy to make decisions regarding one's own body,
- b. maternity or paternity,
- c. legal recognition for the identity that each person feels is their own,
- d. socially recognised expressions of masculinity and/or femininity,
- categorization of persons according to gender at institutions, including the educational, health and prison systems.

What impact did the training have?

The final session was dedicated to an oral and written evaluation of the Institute. The very existence of the Institute, with its open meeting space, dialogues, exchanges and reciprocal learning processes, was the most positive aspect signalled out in evaluations. The aspects of the training rated negatively included the inadequate treatment of certain important topics for trans and intersex communities, such as the conflation of the concept of men who have sex with men (MSM) with trans.

Source: International Gay and Lesbian Human Rights Commission (IGLHRC) (2005) 'Institutional Memoir of the 2005 Institute for Trans and Intersex Activist Training', http://www.iglhrc.org/files/iglhrc/LAC/ITIAT-Aug06-E.pdf

6. Case studies: mobilisation, activism and advocacy

6.1 The International Community of Women Living with HIV/AIDS

Background

HIV-positive women's right to healthy, satisfying sex lives is rarely recognised by society, including by health care providers. HIV-positive women may find that choices related to their sex lives can be constrained by the lack of power that is often inherent in their relationships with sexual partners – a lack of power that is further compounded by their HIV-positive status. The International Community of Women Living with HIV/AIDS (ICW) is the only international network run by and for HIV-positive women and has members in 134 countries. ICW works to ensure that the rights of HIV-positive women are respected, protected and fulfilled. This includes the right to 'a fantastic and healthy sex life that is full of choice' (Sophie Dilmitis, ICW member, speaking at the International AIDS Conference in Toronto in 2006).

Activities

A major part of ICW's work is to build the advocacy skills of HIV-positive women and provide ongoing support for their advocacy efforts. In April 2004, for example, ICW began a series of Young Women's Dialogues (YWD) in Africa for HIV-positive young women to develop a common advocacy agenda for young HIV-positive women, based firmly on the realities of their lives. The YWDs have the following vision: that all young women living with HIV and AIDS have access to their sexual and reproductive rights and are supported in exercising these rights. The young HIV-positive women who took part in the YWD in Durban prioritised six sexual and reproductive health rights:

- The right to sexuality education in and out of school
- The right to reproduce and have children
- The right to safe termination of pregnancy, and the right not to be forced into termination of pregnancy or sterilisation
- The right to protected sex
- The right to sexual pleasure
- The right to choose our sexual partners.

ICW (2004) 'ICW Vision Paper 1: HIV Positive Young Women', http://www.icw.org/publications

ICW also supports HIV-positive women to speak in policy forums and conferences by working with them on issues of concern, backed up by ICW's research by and with HIV-positive women and by the testimonies of individual members from around the world. At the recent International AIDS Conference in Toronto, for example, HIV-positive women from Uganda, Zimbabwe and Namibia spoke out about 'love, sex and abstinence' in their lives – and urged

that all women, regardless of their HIV status, must have the right to choose when, how, where and with whom they have sex.

What impact have they had?

ICW's work has increased:

- the recognition of HIV-positive women's sexual rights by policymakers and within programmatic responses to HIV and also by HIV-positive women themselves
- the understanding that violations of HIV-positive women's sexual rights undermine their ability to access care, treatment and support
- the number of HIV-positive women involved in advocacy work and the recognition that their involvement at all levels is crucial to an effective response to the epidemic.

However, getting those in positions of power to engage with HIV-positive women in ways that are equitable, respectful and productive for all involved has not proved easy.

We're weary of being asked to attend meetings as an after-thought, to stand up and provide a personal testimony but little else. The issue of 'how I got infected' matters far less than 'what I did next'. We want to be included from the outset in deciding agendas, taking decisions and ensuring their implementation.

ICW member from the UK



ICW members at the 2006 International AIDS Conference in Toronto. Each day they wore pink tabards and danced the Conga to distribute their conference messages.

Source: http://www.icw.org/

6.2 Lesbian, gay, bisexual, transgender and intersex organising in East Africa

The very fact that women who love women are meeting at a bar and organizing is revolutionary in a country where women are not meant to meet in bars, and most importantly are not meant to love each other.

Karugu Nguru, Co-founder of Uhuru Wazobia, cited in Urgent Action Fund Report (2005) 'LGBTI Organising in East Africa: The True Test for Human Rights Defenders': 9, http://www.whrnet.org/docs/LGBTI-Report.pdf

Background: Political, cultural and religious fundamentalisms have played a powerful role in suppressing sexual pluralism in East Africa, as in many regions. Sexual activities and identities that go against the grain of mainstream heterosexuality and expected gender behaviour – most notably lesbian, gay, bisexual, transgender, and intersex (LGBTI) – are frequently subject to social repression in the form of verbal abuse, silence, hate crimes, 'corrective rape' of lesbians, honour-related violence and forced marriage.

Activities: Various strategies have been adopted by LGBTI groups in Kenya, Tanzania and Uganda to promote the human rights of LGBTI persons, including the following.

Political activism: In Tanzania, for example, LGBTI groups have lobbied to support their members in seeking elective parliamentary representation with a view to amending the repressive laws which criminalise homosexuality. LGBTI activists in Kenya submitted reports to the Constitution of Kenya Review Commission and lobbied the government through consultations with the Attorney General. (Despite these efforts, however, the final draft constitution that was presented to Kenyans at the referendum explicitly banned same-sex marriages).

Public awareness raising: Efforts have been made to sensitise the public and mainstream human rights and women's rights organisations on LGBTI issues, through meetings, radio and print media.

Umbrella groups: Umbrella organisations like Sexual Minorities Uganda (SMUG) have provided forums for LGBTI groups to come together to work collaboratively, creating opportunities for sustained initiatives.

Internet organising: A number of gay websites have helped create safe spaces for LGBTI people to share experiences, information and challenges.

Lessons learned

The lessons learned were drawn partly from the organisational experiences of Southern African LGBTI groups, such as South Africa's Behind the Mask and Namibia's Rainbow Project, and include the following:

- LGBTI groups should explore ways to engage faith-based and human rights organisations in securing non-discrimination of sexual minorities. Groups should identify and capitalise on existing allies.
- The need to challenge repressive legislation is important. This requires a collaborative approach between diverse groups.
- However, it is important to be realistic and strategic about the advocacy agenda.
 Tackling laws outlawing sodomy in Kenya right now, for example, may provoke a backlash.
- Most importantly, people need to be educated about their sexual rights. That is the basis for the LGBTI movement.

Source: Urgent Action Fund Report (2005) 'LGBTI Organising in East Africa: The True Test for Human Rights Defenders', http://www.whrnet.org/docs/LGBTI-Report.pdf

6.3 Defending women's human rights in Nigeria

Background

'Sharia' refers to principles which are generally accepted by Muslims to be Allah's will for human societies. Yet, while the principles are broadly agreed, there are variations in how they are interpreted. Sharia provides codes of ethics, social interactions, and legal systems. In 1999 Sharia legal codes were passed in the Zamfara state of Nigeria, which instated the crime of 'zina' or illicit sexual intercourse. Sex outside of marriage is treated as zina, and even if a woman is raped, she can be charged with zina.

Activities

Between 2000 and 2003, Baobab, a non-governmental women's human rights organisation in Nigeria, supported several women who were charged with zina and threatened with being stoned to death (despite the fact that the Koran does not condone punishment by death for zina), whipping or imprisonment. Baobab offered legal support, specifically making arguments based on Muslim laws. Most of those charged under these laws are poor women and men, rarely the elites. The most famous case is that of Amina Lawal, initially convicted of zina in 2002 and sentenced to death by stoning. After several appeals she was acquitted. Much

international outcry was mobilised at her initial sentence, however protest letters sometimes included inaccurate information, demonising of Muslims, and provoked anger and retrenchment from authorities within Nigeria. Legal support from within Nigeria, specifically based on Muslim laws, is more effective in supporting women like Lawal.

Guidelines for international supporters

Baobab provides guidelines on how international supporters can be constructive rather than risk causing further harm. These are paraphrased below:

- Check the accuracy of information with local activists before circulating petitions or responding to them.
- Do not buy in to dominant Western media representations of Islam (and Africa) as the barbaric and savage 'other'.
- Liaise with those whose rights have been violated and/or local groups directly involved, to discuss strategies of solidarity and support before launching campaigns.
- Help is needed in mobilising funding for credible organisations working on these issues.

Source: Baobab (2003) *Sharia Implementation in Nigeria: The Journey so far*, http://www.baobabwomen.org/Sharia%20&%20BAOBAB%20publication.pdf

6.4 Challenging marriage norms in China

The purpose of our wedding was to show that marriage can take many different forms, including being a joke, fun, a training session. We also wanted to challenge the norms of heterosexuality and monogamy, and open a space to talk about the realities of our relationships and sex lives, and how to make these safer. We do not care who marries who, or with what gender people marry or have sex. We can seek to be what we want to be, to do what we like to do, and create our own forms of relationships, in spite of what social norms say about gender and sexuality.

Xiaopei He, 2006, My Unconventional Wedding

Background

In China, as in many cultures, marriage is the norm. In Chinese society, many people get married, including gay men marrying women (straight or not), for reasons of convenience and under social pressure, but also for reasons of pleasure and through choice. However, gay men who marry women are often blamed by the gay community for not being gay enough, or by health authorities for transmitting HIV and endangering society.

Activities and impact

In an effort to increase space for homosexual, non-monogamous, and other non-conforming relationships, activist Xiaopei He decided to organise a fake wedding. She proposed marriage to a long-time male friend who was a gay activist and to a lesbian woman whom she had just met – and both agreed to marry her. Three other people were invited to be 'parents' in the wedding: a lesbian woman played the role of 'father', and two gay men were the 'mothers' of the groom and the other bride. Over 60 guests attended the wedding, including lesbian and gay activists, and AIDS trainers and activists, as well as researchers on sexuality and marriage and members of women's groups. The wedding was held in a Beijing gay restaurant with home-style Chinese food. The guests sat at the tables, while the brides and groom performed the wedding, inviting questions on HIV/AIDS and relationships. People had many questions to put to the brides, groom, their parents, the Master of Ceremonies and to each other, on the topics of marriage, sadomasochism, gender, homosexuality, and AIDS prevention in the context of multiple relationships, provoking a lively discussion.

Source: Xiaopei He (2006) My Unconventional Wedding

To obtain a copy of the paper, email Xiaopei He: happygirliam@hotmail.com.



Xiaopei He on her wedding day

6.5 Breaking the silence on abortion in the Arab region

Background

The right to have control over one's own body is a basic human right. Despite this, women in many contexts lack the ability to decide on a personal matter as important as whether or not to bear a child. Abortion is prohibited in most Arab World countries unless a woman's life is in danger. Women sometimes resort to illegal abortions, most often performed under hazardous conditions. The following examples highlight projects undertaken by International Planned Parenthood Federation (IPPF) Member Associations in 2004 to raise awareness about abortion, to train service providers on safe abortion, to ensure decision makers are aware of the public health consequences of unsafe abortion, and to enable them to make informed decisions about legislation.

Activities

The Syrian Family Planning Association organised a seminar to discuss the practice of unsafe abortion, legislation on abortion and the social impact of unsafe abortion. The seminar was attended by the regional medical team, members of the Association's Board, and representatives from a syndicate of lawyers, the Ministry of Health, the media and the Obstetrics and Gynaecology Society. The meeting resulted in a consensus to launch advocacy campaigns to review national laws, and to include post-abortion services within the national sexual and reproductive health programme.

The Iraqi Reproductive Health and Family Planning Association conducted an orientation seminar on the national abortion law for 150 service providers and is also working with the Ministry of Health to integrate abortion-related services within the national sexual and reproductive health programme.

The Palestine Family Planning and Protection Association, in coordination with partner organisations, is advocating for the review and liberalisation of abortion laws, and the IPPF Member Associations in Bahrain, Lebanon and Yemen have started conducting awareness-raising activities on the consequences of unsafe abortion, while integrating post-abortion services into their sexual and reproductive health programmes.

Source: IPPF (2004) 'Annual Programme Review 04-05', Chapter Three: Abortion: 71-73, http://content.ippf.org/output/ORG/files/12793.pdf

6.6 Sex workers in Europe ask for their rights

In 2002, a group of Dutch sex workers and allies took the initiative to organise a European Conference on Sex Work that would challenge the current neo-conservative political debate on sex work and trafficking. The European Conference on Sex Work, Human Rights, Labour and Migration was held in October 2005 in Brussels, Belgium. More than 200 delegates, sex workers and allies in the fields of human rights, from 30 countries, came together to make their demands known and share their experiences about working in the sex industry. At the conference the Declaration of the Rights of Sex Workers in Europe was finalised, as well as the Sex Workers in Europe Manifesto (see section 2.2 for links to the declaration and manifesto) which sets out what these sex workers want in their societies and communities. The manifesto demands: the recognition of prostitution as legal labour; better working conditions; enjoyment of full citizenship rights; and legal and judicial protection both for local and migrant sex workers. This conference provided a starting point for an ongoing process to create a network across Europe, which could map the effects of repressive migration, prostitution and trafficking policies on sex workers in Europe and lobby for sex workers' rights.

6.7 Resisting United States repression of sexual rights

Background

Under the influence of religious and conservative NGOs, the Bush administration in the United States has heavily promoted HIV prevention programmes which focus on sexual abstinence and marital fidelity. Funding for such programmes under the President's Emergency Plan for AIDS Relief (PEPFAR) increasingly replaced comprehensive HIV prevention in fiscal years 2004 and 2005, and the United States is sending fewer condoms abroad today than in 1990. Shifts in policy are especially acute in sub-Saharan Africa, the region hardest hit by the HIV epidemic.

Activities

The Center for Health and Gender Equity (CHANGE) is a US-based NGO dedicated to promoting accountability of US international policies, programmes and funding on the sexual and reproductive health and rights (SRHR) of women and girls in Africa, Asia, and Latin America. Much of their work is focused on examining the implications of funding restrictions within current US law and policy which dictate that the majority of US funding for HIV/AIDS must go to 'ABC' programmes (Abstain, Be faithful, and, where appropriate, use Condoms). CHANGE was the first organisation to report that nearly 60 per cent of US funding for the prevention of HIV/AIDS was going to abstinence-only programmes (in fiscal years 2004 and

2005). CHANGE is working to mobilise opposition to these restrictions within the US government and abroad.

CHANGE has also conducted extensive groundwork in Bangladesh, Brazil, Cambodia, Nigeria, Thailand and Vietnam, as well as at the global level, on the harmful effects of the prostitution loyalty oath. This 'oath' requires organisations receiving US global HIV/AIDS funding to adopt specific organisation-wide positions opposing prostitution. CHANGE has issued policy briefs on the impact of this restrictive policy on the rights and public health needs of sex workers. It will release a full report on the impact of the prostitution loyalty oath in early 2007.

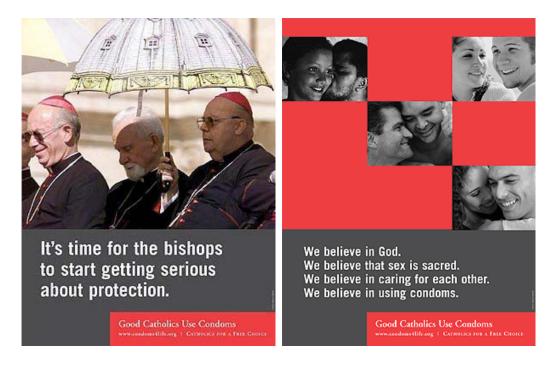
Source: adapted from a case study written by Jodi Jacobson, Executive Director of CHANGE

6.8 Catholics for a Free Choice - Condoms4Life campaign

Catholics for a Free Choice (CFFC) serves as a voice for Catholics who believe that the Catholic tradition supports a woman's moral and legal right to follow her conscience in matters of sexuality and reproductive health. Condoms4Life is a worldwide public education effort sponsored by CFFC and its partners, designed to raise public awareness about the devastating effects of the Catholic Church's ban on condoms. The campaign was launched on World AIDS Day 2001 with the display of billboards and advertisements in subways and newspapers saying, 'Banning Condoms Kills'. The advertising campaign in the United States, Mexico, the Philippines, South Africa, Kenya, Chile and Zimbabwe was the first phase of an effort to change the Vatican's policy and challenge its aggressive lobbying against availability and access to condoms in areas of the world most at risk.

The Condoms4Life website contains facts on HIV/AIDS and on the Catholic hierarchy's opposition to condoms around the world. It also includes web banners and camera-ready advertisements, as well as various HIV/AIDS resources. The site provides tools enabling citizens to interact with others – including electronic postcards featuring campaign messages (meant to be sent to friends) and a letter meant to put public pressure on the Catholic Church. Action alerts enable the public to send individual letters and to use the e-mail network to lobby local and national elected officials as well as international policymakers asking them to withhold funds from any church agency that does not inform clients about the importance of condoms in preventing the transmission of HIV/AIDS.

Source: Condoms4Life campaign website: http://www.condoms4life.org/.



Some of the advertisements used in the campaign.

CFFC in Brazil

In Brazil, CFFC and Associação Brasileira Interdisciplinar de AIDS (ABIA) – Brazil's leading NGO fighting AIDS – came together to launch a campaign on Valentines Day 2006, just before the tenth Sao Paulo Gay Pride Parade on 17 June. CFFC activists went to the gay pride parade carrying 40 banners above their heads and distributing 20,000 postcards in bars on the gay and lesbian circuit. The postcards were designed to reflect racial diversity and avoid the stereotype of gays and lesbians being white and middle class. An interesting discussion evolved among the partners as the postcards were being planned. Originally the proposal was to use the phrase 'For God all forms of love are sacred'. However, ABIA felt that 'God' was culturally specific, so instead they chose the slogan 'All forms of love are sacred'.

6.9 Reconciling Muslim faith with sexuality in South Africa

Background

The Inner Circle (TIC) is a South Africa-based organisation catering to all lesbian, gay, bisexual, transgender, questioning and intersex (LGBTQI) communities that identify with the struggle to reconcile their Muslim faith with their sexuality. The organisation believes that Islam is not opposed to homosexuality, for there is no unequivocal and distinct reference to 'homosexuality' in the Qur'an. They note that the Qur'an, like the Bible and the Torah, refers to the destruction of the cities of Sodom and Gomorrah, where sex between men was

practised. However, they argue that the destruction was due to their abuse of power and sexual exploitation, not due to their homosexuality.

Activities

TIC provides education to members of the organisation and to the public in the form of newsletters, weekly study circles called Halaqaat, annual Islamic retreats, and workshops with other organisations and interfaith programmes. TIC seeks to raise awareness and understanding around LGBTQI issues and Islam and to remove myths and stereotypes as well as to sensitise the general public on issues related to the LGBTQI community. A variety of workshops and training programmes are offered to members of the organisation, its staff, and the community. These include courses in personal growth, building self-esteem, counselling skills, safer sex, HIV/AIDS, gender, character-building, spirituality, team-building, life skills and media training. TIC also runs an outreach programme focused on the Muslim community and other religious communities within Cape Town, with particular emphasis on families and their relationship with their LGBTQI members. Here they assist the family in building and maintaining relationships with their LGBTQI member and how to reconcile their faith with their sexuality.

Source: The Inner Circle website: http://www.theinnercircle-za.org/

7. Tools and manuals

7.1 Advocacy

7.1.1 A guide to the work of the UN treaty monitoring bodies on sexual rights

Center for Reproductive Rights (2003) 'Bringing Rights to Bear: An Advocate's Guide to the Work of the UN Treaty Monitoring Bodies on Reproductive and Sexual Rights', New York

http://www.reproductiverights.org/pdf/pub_bp_brb.pdf

Six key human rights treaties provide the legal foundation for the international community's commitment to human rights: the Convention on Torture; the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW); the Convention against Racial Discrimination; the Economic, Social and Cultural Rights Covenant; the Children's Rights Convention; and the Civil and Political Rights Covenant. This report analyses how each of the six committees which monitor these treaties has incorporated reproductive and sexual health into its work. It highlights strategies for promoting reproductive and sexual rights by influencing the UN committees' recommendations. It also outlines a five-step strategy to facilitate working with UN committees, government, civil society and international organisations to give these standards practical effect and ensure their realisation through concrete measures at the national level. In addition, the resource provides practical user-friendly information on each of the committees.

7.1.2 A youth activists' guide to sexual and reproductive rights

Claudia, A. and Kowalski-Morton, S. (2006) 'A Youth Activists' Guide to Sexual and Reproductive Rights', The Youth Coalition

http://www.youthcoalition.org/DEV/mambo2/images/stories/SRRGUIDE/srr%20guide%20final%20version.pdf

This guide was written for young activists to provide an overview of the sexual and reproductive rights that are protected by international and regional human rights treaties and other agreements – such as the right to privacy or the right to be free from harmful practices – and to show how these rights apply to adolescents and young people. It also discusses ways that young people can advocate for their sexual and reproductive rights within their countries, regions, and globally, for example through petitions or letters, face-to-face meetings with government representatives and parliamentarians, briefings for government representatives

and parliamentarians, and media campaigns. It ends by outlining international and regional resources on sexual and reproductive rights. Summary adapted from the resource.

7.1.3 Improving access to safe abortion

Family Care International and IPAS (2005) 'Improving Access to Safe Abortion: Guidance on Making High Quality Services Available' *CD-ROM*

http://www.ipas.org/publications/CD/ADVPACK-X05/english/index.htm.

To purchase a copy of this publication go to:

http://www.fci.expressiondev.com/en/resources/publications_order, or to inquire about complimentary publications for organisations working in developing countries, e-mail fcipubs@fcimail.org.

This CD-ROM aims to enhance public discussion of the issues around unsafe abortion and encourage the provision of safe abortion services to the extent allowed by national law. The package includes advocacy tools in English, Spanish and Portuguese which can be used with a range of audiences – policymakers, health care providers, the media and individuals. The resource includes PowerPoint™ slide presentations available in five different versions depending on the context (global, African, Asian, and Latin American and Caribbean). The presentations include six modules: unsafe abortion in context; international agreements; the legal context; clinical services; management issues; and overcoming barriers to access. The CD-ROM also includes a user guide with tips on making presentations and using PowerPoint™. In addition, resource materials from the World Health Organization and NGOs are featured in English, French, Portuguese, Russian and Spanish, and a comprehensive list of additional references on issues related to abortion and unwanted pregnancy is provided.

7.1.4 Religious perspectives on sexuality

Green, M.C. and Numrich, P.D. (2001) 'Religious Perspectives of Sexuality: a Resource Guide', The Park Ridge Center, United States

http://www.parkridgecenter.org

Why is it important to understand the religious dimension of issues such as reproductive health, marriage and family, adolescent sexuality, homosexuality and the role of women? For many people sexuality cannot be separated from their religious beliefs and values. According to the Park Ridge Center, religious leaders and their communities remain an untapped resource for influencing public opinion and promoting change. This resource guide presents perspectives on sexuality from Protestantism, Catholicism, Judaism, Islam, Buddhism and Hinduism, including both official and alternative views within each religion. This study was

part of a response to the interaction between religion and sexuality at the 1994 International Conference on Population and Development (ICPD) in Cairo, where informal alliances between the Vatican and Muslim groups dominated the debate on reproductive rights and overpopulation. Progressive elements and forces are identified in the different religious texts and institutions, which can provide grounds for calls for change. This guide is primarily about North America, with examples of religious practice drawn from the United States, however it does have broader implications for work on sexuality.

7.2 Programming

7.2.1 Tackling sexual violence against refugees

United Nations High Commissioner for Refugees (UNHCR) (2001) 'How to Guide: Sexual and Gender-Based Violence Programme in Liberia'

http://www.unhcr.org/cgi-bin/texis/vtx/publ/opendoc.pdf?tbl=PUBL&id=3c4d6af24

How can sexual and gender-based violence (SGBV) be tackled in a refugee setting? This guide advocates for a multisectoral approach that brings together a range of organisations working in the medical, legal and security sectors, with the refugee community, to tackle SGBV in participatory 'survivor'-centred ways. The guide provides an example of how this approach was carried out in refugee areas in Liberia, and of the largely positive reactions of the refugee community. Practical tools are included, such as an outline of how to run a community awareness-raising campaign with women leaders, black leaders, youth leaders and refugee security. Steps needed in such a campaign start with discussions of how the situation was before the war, leading to a consideration of what violence is and how it is experienced, and building a shared understanding of sexual and gender-based violence, and how it can be addressed. Check-sheets are included for recording and analysing cases of rape, sexual harassment, domestic violence and early marriage in refugee camps. This is one of a series of guides on how to address sexual violence, combat female genital mutilation and promote reproductive health and safe motherhood in different contexts in Africa.

7.2.2 Working with men and boys to end gender-based violence

Family Violence Prevention Fund (2003) 'Online Toolkit for Working with Men and Boys to End Gender-Based Violence'

http://toolkit.endabuse.org/Home

In November 2003, the Family Violence Prevention Fund, an anti-violence NGO in the United States, launched an online toolkit for working with men and boys to end gender-based violence. It provides readings, case studies, handouts, exercises, and other resources in the form of a ten-lesson work plan. Issues addressed include: why work with men and boys; examples of good practices and programmes; work with young men and work with schools; and cross-cultural solidarity.

7.2.3 HIV/STI prevention for men who have sex with men

International HIV/AIDS Alliance (2003) 'Between Men: HIV/STI Prevention for Men Who Have Sex with Men', Key Population Series

http://synkronweb.aidsalliance.org/graphics/secretariat/publications/msm0803_between_men Eng.pdf

Sex between men is one of the primary ways in which HIV and other sexually transmitted infections (STIs) can be passed on. Yet official indifference or hostility means that there are few prevention and care programmes for men who have sex with men in developing countries. It also means that little research has been undertaken to discover how many men are at risk and how best to provide them with the information they need to protect themselves and their sexual partners. 'Between Men' gives an overview of basic issues for men who have sex with men. The booklet also provides ideas for developing prevention programmes with and for these men. It is intended for NGOs starting HIV/STI prevention work with and for men who have sex with men. The resource is structured into four main sections. The first section discusses why and how men have sex with men, and social and personal issues such as dealing with homophobia. The second section looks at sexual health and HIV prevention, and considers how to assess vulnerability and risk. It also discusses what to consider when designing HIV/STI prevention programmes for and with men who have sex with men - such as the need for skills-building in the use of condoms and lubricants. Section three outlines strategies and activities to enable men who have sex with men to develop HIV/STI prevention and care programmes themselves. The final section lists useful resources for further contacts and information.

7.2.4 Youth-focused HIV prevention programmes

Safe Youth Worldwide (2004) 'Programme Planning Materials and Training Resources: a Compendium', UNFPA and Margaret Sanger Center International

http://www.unfpa.org/upload/lib_pub_file/367_filename_compendium.pdf

This compendium of materials is intended as a tool for programme planners and health workers interested in improving their youth-focused HIV prevention programmes. Documents summarised in the compendium are drawn from a variety of organisations and institutions, and address global issues, rather than region-specific topics. Most documents are in English, although there are many in Spanish and several in French and Nepali. Most of the documents are training manuals, modules or curricula, as well reports and guidelines. Note, however, that only about half of the documents address issues around gender equity.

7.2.5 HIV/AIDS prevention programmes for sex workers

Evans, C. (2004) 'Sex Work Toolkit', World Health Organization

http://www.who.int/3by5/mediacentre/news28/en/

In many parts of the world, sex workers have been among the groups most vulnerable to and most affected by HIV since the beginning of the AIDS pandemic. This online toolkit is aimed at helping sex workers to protect themselves and their clients from infection by HIV and other STIs. The toolkit is a collection of more than 130 easily-accessible documents, manuals, reports and research studies, which are intended for use by people working with female, male and transgender sex workers. Included in the tool kit are practical 'how to' documents like 'Making Sex Work Safe', written by experienced sex worker groups to support programme managers in setting up and maintaining projects. 'Of Veshyas, vamps, whores and women', for example, is based on experiences from an Indian NGO and gives practical advice on how to build up a network of peer educators in brothels, deal with the brothel owners, set up condom distribution networks, and structure payment incentives for peer educators. The toolkit also includes valuable data and analysis which can be shared across regions and used to design better HIV/AIDS prevention programmes for sex workers. Each resource has been summarised to assist readers in deciding whether it is relevant to their particular needs.

7.2.6 Introducing the female condom

World Health Organization (WHO) and Joint United Nations Programme on HIV/AIDS (UNAIDS) (2000) 'The Female Condom: a Guide for Planning and Programming' http://www.who.int/reproductive-

health/publications/RHR_00_8/PDF/female_condom_guide_planning_programming.pdf

This guide shows how to integrate the female condom into already existing programmes and how to effectively promote the female condom and train providers to adequately educate potential users about it. The guide includes information for potential users, including a step-by-step guide to using the female condom, a comparison between the female and male condom, and lessons learned about negotiating safer sex.

7.3 Training and teaching

7.3.1 Making choices about sexuality: a guide for young people in Africa

Gordon, G. (1999) *Choices: A Guide for Young People*, Macmillan Education Ltd: London and Oxford

http://www.macmillan-africa.com/Books/Choicesintro.pdf - introduction http://www.macmillan-africa.com/books/Choiceschap1.pdf - chapter one

'Choices' is written for young people growing up in Africa today, and for peer educators, youth leaders, teachers, health workers and parents. It provides accurate information on sexual and reproductive health, and outlines activities designed to explore values and attitudes in relation to culture and the changing world and to build self-esteem. It also contains activities to help young people practice skills in communication, assertiveness, problem-solving, decision-making and advocacy. The book aims not to promote one sexual choice over others, but to give readers a wide range of choices, from abstinence to safe sex. For example, chapter four looks at relationships and at the importance of young men and women making good decisions about sex. Sexual pleasure is seen as a right for men and women and a way of enhancing marital relations. Chapter five deals with rape and sexual abuse and suggests ways to prevent them and to help those who have suffered from them. In chapter six, the book outlines how people can have 'children by choice, not chance' so that mothers, fathers and children lead healthy and happy lives. Chapter seven addresses the prevention and treatment of STIs and HIV/AIDS. The book is written in an easy-to-read style and is packed with illustrations, cartoons and activities.

7.3.2 A training package in HIV/AIDS, communication and relationship skills

Welbourn, A. (1999) 'Stepping Stones Training Package in HIV/AIDS, Communication and Relationship Skills', Strategies for Hope

http://www.steppingstonesfeedback.org

'Stepping Stones' is a training package on gender, HIV, communication and relationship skills. It is also a life-skills training package, covering many aspects of our lives, including why we behave in the ways we do, and ways in which we can change our behaviour if we want to.

The original training package consists of a 240-page manual for trainers and an optional accompanying workshop video. The training programme consists of 18 carefully sequenced sessions over three to four months. Training alternates between working with peer groups (separated by age and gender) and larger sessions when the peer groups are brought together to share their views. After two sessions on AIDS and safer sex, the training helps people to analyse why people behave as they do, concentrating on factors such as alcohol consumption, local traditions, the need for money, social expectations, and people's personalities. The final sessions help participants to think about how they can change their behaviour to be more assertive, and to take greater responsibility for their actions. The original manual and the accompanying video, filmed in Uganda, are available from TALC at http://www.talcuk.org. Address: PO Box 49, St. Albans, Hertfordshire, AL1 5TX, UK, telephone +44 (0)1727 853869, fax +44 (0)1727 846852. The manual has been adapted for different contexts.

Talent, who works in Zimbabwe for an organisation whose mission is to enhance community participation in health, shares her experience with using 'Stepping Stones':

Stepping Stones helps us know ourselves; to identify our needs; to analyse our own behaviour in order to know the reasons why we behave the way we do, so that we can change it where need be. For example, it is liberating to the girl child to know that there is certainly nothing wrong with having a desire for sex, because many a time as we grow up, we are made to feel extremely bad for having sexual desires! Through Stepping Stones, people just open up, for the environment is both conducive and supportive. How liberating to know that you are not the only one who masturbates. For you have kept it a secret all your life. You've always thought yourself a right off all this time. Stepping Stones enables us to question "if men can masturbate and its ok, what is so wrong about it if a woman does it?"...Stepping Stones enables the group to debate the very issue of virginity, giving hope to those who have lost it. Replacing the "for the man" tag attached to it, and replacing it with either, "what about me?" and or "for me!"

Source: e-mail correspondence from africaonline – http://www.africaonline.com/

7.3.3 Promoting gender-equitable behaviours among young men

Instituto Promundo, The Program H Manual Series

http://www.promundo.org.br/396

Program H stimulates young men to question traditional masculine gender norms (the culturally accepted definitions for being a man in a given society). It promotes discussion and reflection about both the 'costs' of traditional versions of masculinity for both men and women, and the advantages of gender equitable behaviours, such as better care of men's own health. Program H, which has been replicated in several parts of Brazil and throughout the world, has developed five training manuals which aim to support young men to question traditional gender norms. The five volumes are: Sexuality and Reproductive Health; Fatherhood and Care-giving; From Violence to Peaceful Coexistence; Reasons and Emotions; and Preventing and Living with HIV/AIDS. Each manual contains a theoretical introduction to each theme, a description of the group activities and a list of references for further research. Manuals are available in:

English: http://www.promundo.org.br/396

Spanish: http://www.promundo.org.br/396?locale=es

Portuguese: http://www.promundo.org.br/396?locale=pt BR

7.3.4 Reducing homophobia among adolescents

Instituto Promundo, Afraid of What? DVD/VHS

http://www.promundo.org.br/materia/view/354

This video is a tool to promote discussion on the topic of sexual diversity among groups of adolescents. Its aim is to stimulate critical reflections that contribute to increased respect for sexual diversity and the reduction of homophobia. Marcelo is a young man who, like most young people, has dreams, desires and plans. His parents, his best friend, João, and the community in which he lives also have expectations for him. But Marcelo's dreams and desires do not always match those expectations. What does Marcelo want? Both Marcelo and those around him are afraid of the answer. Afraid of what they do not know -- of what is unfamiliar, different. In general, people fear what they do not know well. It is this fear that creates prejudice and leads to various forms of discrimination. Homophobia is one of these forms of discrimination. This no-words cartoon video invites viewers to reflect on these fears and on how they can help to promote a more open and accepting society, one that respects rights and embraces diversity. To purchase this resource, available on VHS and DVD, go to http://www.promundo.org.br/materia/view/411.

46

7.3.5 Lesson plans for sexuality educators and advocates

Irvin, A. (2004) 'Positively Informed: Lesson Plans and Guidance for Sexuality Educators and Advocates', New York: International Women's Health Coalition http://www.iwhc.org/resources/positivelyinformed/index.cfm

A resource kit of lesson plans and guidance for comprehensive sexuality educators, 'Positively Informed' provides a selection of key available English-language sexuality education materials. The manual is intended to serve as a source of ideas, examples and inspiration for educators developing their own sexuality education curricula. The lesson plans use interactive teaching strategies and are adaptable to diverse cultural settings. The manual seeks to challenge discriminatory attitudes and behaviours, and presents sexuality as a positive part of life rather than something to be feared or hidden. The chapters focus on issues such as: gender and sexual rights; anatomy, physiology and puberty; reproduction; sexual orientation; intimate relationships; sexual behaviour and decision-making; STIs and HIV/AIDS; contraception, unintended pregnancy and abortion; and sexual violence and harmful cultural practices. These lessons are appropriate for 10- to 19-year-olds. Depending on the cultural context, level of community support, and students' level of knowledge and experience, some may need to be adapted to be relevant and effective.

7.3.6 Rights and desire: a facilitator's manual to safer sexuality

Ahmed, A. and Menon, S. (2006) 'Rights and Desire: A Facilitator's Manual to Healthy Sexuality', Breakthrough

http://www.breakthrough.tv/pdf/rights_and_desire.pdf

Our sexuality should be a place of pleasure, joy, intimacy and respect but is instead often associated with disease and violence. 'Rights and Desire: A Facilitator's Manual to Healthy Sexuality' is a resource tool for teachers and facilitators to generate positive dialogue about relationships, sex and sexuality. The tool – which was created for work with young people but can be adapted for other audiences – invites people to explore safer sexual practices which respect human rights through exercises, discussions and multimedia. In particular, it promotes access to rights by empowering young people who are vulnerable to contracting HIV/AIDS. The curriculum is made up of four main sections:

 Understanding our body (basic anatomy; understanding sexual terms; HIV/AIDS risk behaviours)

- Pleasure and safe sex (rights to pleasure; being comfortable with condoms and safe sex; effective communication and negotiation; rights of people with HIV/AIDS)
- Gender, power, and sexuality (sexual and reproductive health and rights; understanding gender; sexual violence)
- The cultural context of sexual identity (media and stereotypes; sexual diversity; sexuality and health).

Further information on running effective workshop sessions is included in the annexes, and handouts are provided on the Universal Declaration of Human Rights, male and female physiology of reproduction, and tips on correct male condom use, among others.

7.3.7 Teaching resources: bibliography on sexuality

Pereira, C., 'Teaching Resources: Bibliography on Sexuality'

http://www.gwsafrica.org/teaching/charmaine's%20essay.html

This bibliography seeks to encourage greater awareness of the links between thought and activism in African teaching and research on sexuality. It begins with a section on heterosexuality – focusing particularly on themes such as virginity, marriage, reproduction, and the relations between sexuality and gender. It then explores African women's thinking and activism around sexuality, indicating areas of focus as well as silence. The themes which have most often been addressed include sexual violence, female genital cutting, reproductive health and rights, and HIV/AIDS. Silence is greatest around the themes of eroticism and pleasure, and positive sexual identities. Other bodies of thought and activism are also outlined, including Euro-American feminisms, Freud, post-structuralism, and queer theory. The bibliography then looks at how sexualities are constructed across time and space, and in relation to culture, tradition and religion. Further sections include: the unconscious and desire; 'transgressive sexualities' (sexualities that in some way cross the accepted boundaries of what is considered 'normal'); and sexuality and pleasure. The resources covered include texts, websites and films/videos.

7.3.8 A sexual rights training module

Klugman, B., Fonn, S. and San Tint, K. (2001) 'Reproductive Health for All: Taking Account of Power Dynamics Between Men and Women – Training Manual', AIDOS and the Woman's Health Project, Module 3, Activity 2: 'Sexual Rights'

http://www.wits.ac.za/whp/aidos_module3.pdf

Sexuality is a central part of human experience and should contribute to our sense of well-being and towards strengthening our intimate relationships. Yet a lack of information about sexuality can undermine people's ability to understand their bodies and sexuality and hence to enjoy their sexual experiences. Inequality between sexual partners can also put the partner with less power – usually women – into a position where they are afraid to talk to their partners, for example to discuss the need to practice safe sex. For women to control their sexuality, unequal gender relations have to be challenged – even in the intimate area of sexual relations. The activities outlined in this module are designed to: distinguish between reproductive rights and sexual rights; identify how the denial of sexual rights increases people's (especially women's) vulnerability to HIV/AIDS and violence; and identify actions that governments, NGOs or individuals can take to promote sexual rights. For example, parliamentarians should talk about sexual rights in every talk they give; government officials should ensure that police and magistrates receive training to respect and promote women's equality; and teachers should promote equality between boys and girls in the classroom.

7.3.9 Sexual rights curriculum: moving beyond identity politics

International Gay and Lesbian Human Rights Commission (IGLHRC), 'Sexual Rights: Moving Beyond Identity Politics Curriculum', presented at the Amnesty International Global Rights Conference, October 2002

http://www.iglhrc.org/files/iglhrc/program_docs/3.%20Sexual_Rights.pdf

What comes to your mind when you think about sexual rights? This curriculum, presented by the International Gay and Lesbian Human Rights Commission (IGLHRC) at the Amnesty International Global Rights Conference in 2002, presents a range of statements of sexual rights and asks participants to think about how each of these statements is different from or similar to their own vision. It also outlines the foundations of sexual rights in international human rights treaties and in key conference declarations. One of the exercises looks at state regulation of sexuality through a discussion of the laws and policies used by governments to control sexuality, such as sodomy laws, age of consent laws, laws on prostitution, laws penalising those wearing clothing associated with the opposite sex, restrictive laws on registration of NGOs, and so on. Participants are asked: which of these laws have a particular impact on, or are used against, people within your communities (gay, lesbian, transgender, sexual minority etc.)? How can you build coalitions with other groups affected by discriminatory laws, policies or practices by the State? What are the advantages and disadvantages of using a sexual rights framework based on sexual autonomy and bodily integrity, as opposed to identity-based frameworks? The final exercise – the 'integration exercise' - is designed to promote discussion about the benefits and challenges of using

identity-based frameworks and non-identity-based frameworks to end discrimination and abuse on the basis of sexual orientation/expression or gender identity/expression.

7.3.10 A sexual and reproductive rights training curriculum for health programmers

World Health Organization (2001) 'Transforming Health Systems: Gender and Rights in Reproductive Health. A Training Curriculum for Health Programme Managers'

http://www.who.int/reproductive-

health/publications/transforming healthsystems gender/m3.pdf

Promoting human rights, including non-discrimination on the basis of sex, is an obligation of all countries and is vital for achieving reproductive and sexual health. This module is designed to enable participants to: become familiar with basic concepts of rights, including sexual and reproductive rights; understand how rights are defined in international human rights documents, and how they are used by various actors at the international and national levels; learn about institutions which are promoting, monitoring, implementing and enforcing human rights norms relevant to reproductive and sexual health; and be able to apply human rights concepts and methodology to analyse reproductive health programmes. Session five introduces the concept of sexual rights through discussions and handouts. Participants learn about the evolving content of sexual rights and the issues raised by their increasing recognition. The session is also designed to show participants that sexual rights are a requirement for the achievement of sexual health and gender equality. A final exercise gives participants the opportunity to discuss how sexual rights may be useful to their daily work.

7.4 Self-education

7.4.1 A health guide for women

Burns, A., Lovich, R., Maxwell, J., and Shapiro, K. (1997) Where Women Have No Doctor: A Health Guide for Women, Macmillan Education

This book was developed with the help of community-based health workers in more than 30 countries to help women care for their own health needs and to help community health workers to meet women's health needs. It uses simple English and numerous illustrations to help women from all backgrounds learn how to identify and treat common medical problems, recognising that poverty, discrimination and culture affect women's health and access to health care. The book includes chapters on: understanding our bodies; women with

disabilities; sexual health; infertility; abortion; STIs; AIDS; violence against women; rape and sexual assault; sex workers; and female circumcision, among many others. To order a copy of this book, go to http://www.macmillan-africa.com/contacts/ or e-mail MacmillanAfrica@macmillan.co.uk.

7.4.2 An erotic safer sex DVD

Modern Loving DVD

http://www.modernloving.com

Produced with safer sex advice from The Pleasure Project, *Modern Loving* is an erotic instructional video for heterosexual couples which features only safer sex. The video does not preach, but is designed to be sexy and improve viewers' sex lives. Rather than talking about STIs or HIV/AIDS, it shows safer sex as the norm and as a turn-on. *Modern Loving* (DVD/VHS) is available from all good video stores in the UK.

7.4.3 An information kit for HIV-positive women

ICW (1999) 'A Positive Women's Survival Kit'

http://www.icw.org/files/20706_ICW_Survival_Kit.pdf - survival kit http://www.icw.org/survivalkitfactsheets - fact sheets

The sexual desires and rights to pleasure of HIV-positive women are often totally ignored. As a result, information which addresses the specific needs of women living with HIV is scarce. 'A Positive Woman's Survival Kit' has been produced by and for women living with HIV/AIDS from all over the world. The first part of the kit focuses mainly on the voices of HIV-positive women and addresses topics such as: dealing with a positive diagnosis; disclosure; staying healthy; pregnancy, childbirth and breastfeeding; communicating with children; relationships; sex and sexuality; grief and loss; sex work; and human rights and HIV. The second part consists of fact sheets which provide information on specific subjects, including: tips for eating well; reducing mother-to-child transmission of HIV; drug use and harm reduction; condoms; and STIs. The kit is available in English, French, Spanish, Russian, Urdu, Thai, Kiswahili and Portuguese.

7.4.4 Information resources for gay men

Terrence Higgins Trust: Information Resources

http://www.tht.org.uk/informationresources/publications/

51

The UK-based Terrence Higgins Trust (THT) provides a range of information resources on how to lead a happy and safe sex life, targeted at gay men specifically, which can be freely downloaded from their website. For example, 'The Bottom Line', which was produced as part of a health promotion campaign for gay men in the UK, covers a wide variety of issues, including good anal health and how to enjoy good, safe anal sex. 'Below the Belt' is the 'brother' publication to 'The Bottom Line' and deals with the penis and testicles and how to stay healthy. Other resources include 'Should I Tell?', a booklet about disclosing your HIV status, and 'Agreements in relationships', which outlines key considerations to think about if you are considering having unprotected sex in the context of a long-term and trusting relationship. Booklets are available online as well as in gay bars throughout the UK.

7.4.5 Information on sexuality and disability

Parritt, S. and Harris, T., 'Information Leaflets for People with Sexual Problems', Association to Aid the Sexual and Personal Relationships of People with a Disability

This series of 15 short leaflets provides clear information and practical advice for people with disabilities in the UK. The leaflets cover issues such as disability and body image, physical disability and sexual intercourse, disability and homosexuality, sex with a heart condition, sex with multiple sclerosis, sex after a hip replacement, continence and sex, contraception for people with disabilities, and sex toys and disability – among others. Any further questions on personal issues like these can be addressed to the Outsiders' Sex and Disability Helpline: telephone +44 (0)7074 993527 (the helpline is open weekdays 11am to 7pm GMT) or e-mail outsiders@clara.co.uk.

8. Useful websites

The World Health Organization (WHO) http://www.who.int/topics/sexual_health/en/

The WHO site provides information, research tools and publications on a range of sexuality issues such as HIV/AIDS, contraception, gender-based violence, and sexual health.

Regional Sexuality Resource Centres:

Africa Regional Sexuality Resource Centre http://www.arsrc.org

Latin American Center for Sexuality and Human Rights http://www.clam.org.br

South and Southeast Asia Resource Centre on Sexuality http://www.asiasrc.org

United States National Sexuality Resource Center http://www.nsrc.sfsu.edu

These regional sexuality resource centres facilitate innovative discussion on a range of sexuality issues. The websites provide downloadable documents and room for online discussions.

Siyanda website (gender and development) http://www.siyanda.org

Siyanda, an online database of gender and development materials from around the world, contains lots of resources on gender and sexuality (search 'sexuality'). The site provides summaries of all the resources included in this collection.

International HIV/AIDS Alliance http://www.aidsalliance.org/sw1280.asp

The International HIV/AIDS Alliance's website provides information about how and where the Alliance works and contains links to online publications, CD-ROMS and toolkits.

The International Gay and Lesbian Human Rights Commission (IGLHRC) http://www.iglhrc.org/site/iglhrc/

The IGLHRC website contains press releases, human rights information by region, information about IGLHRC actions by region, and information on asylum.

Behind the Mask http://www.mask.org.za/index.php?page=home

Behind The Mask publishes a news website to give voice to African lesbian, gay, bisexual, transgender and intersex (LGBTI) communities and provide a platform for exchange and debate for LGBTI groups, activists, individuals and allies.

Network of Sex Work Projects (NSWP) http://www.nswp.org

The NSWP website provides access to a range of online resources on sex work, human rights and labour rights; migrant workers' rights and the 'anti-trafficking' debate; laws affecting sex workers, and much more.

9. Networking and contact details

This section provides contact details for all organisations featured in this Cutting Edge Pack.

The accompanying background on each organisation is gleaned from the related websites.

Please note that all website URLs and e-mail addresses are current as of November 2006.

9.1 Global

Catholics for a Free Choice (CFFC) 1436 U Street NW, Suite 301 Washington, DC 20009-3997 United States Tel: +1 (202) 986-6093 Fax: +1 (202) 332-7995 E-mail: cffc@catholicsforchoice.org Web: http://www.catholicsforchoice.org/default.asp	CFFC serves as a voice for Catholics who believe that the Catholic tradition supports a woman's moral and legal right to follow her conscience in matters of sexuality and reproductive health. CFFC educates opinion leaders, policymakers, the press and the public about the theological, ethical and political initiatives of the Roman Catholic Church – as well as pro-choice perspectives – along with their implications for the broader community, public policy, and the lives of women.
GAATW International Secretariat 91/41 Sivalai Condominium Soi 33, Itsaraphap Rd. Bangkok-yai Bangkok 10600 Thailand Tel: +66-(0)2 864-1427/8 Fax: +66-(0)2 864-1637 Web: http://www.gaatw.net/	GAATW is a network of NGOs from all regions of the world which take a sex workers' rights and migrants' rights approach to trafficking in persons. It works for changes in the political, economic, social and legal systems and structures which contribute to the persistence of trafficking in persons and other human rights violations.
International Centre for Reproductive Health (ICRH) Ghent University Hospital De Pintelaan 185 P3 9000 Ghent Belgium Tel: +32 (0)9 240-3564 Fax: +32 (0)9 240-3867 E-mail: info@icrh.org Web: http://www.icrh.org/news.aspx	ICRH seeks to improve the acceptability, accessibility and quality of sexual and reproductive health services globally. ICRH pays particular attention to the impact of gender inequalities on sexual and reproductive health.
International Centre for Research on Women (ICRW) 1717 Massachusetts Ave. NW, Suite 302 Washington, DC 20036 United States Tel: +1 (202) 797-0007 Fax: +1 (202) 797-0020 E-mail: Sarah Degnan Kambou skambou@icrw.org Web: http://www.icrw.org/index.html	ICRW promotes gender-equitable development. ICRW, in collaboration with CARE International, is creating an innovative methodology to address gender and sexuality constraints in reproductive health and HIV/AIDS programming.

International Community of Women Living with HIV/AIDS (ICW)

Unit 6, Building 1 Canonbury Yard 190a New North Road London N1 7BJ United Kingdom

Tel: +44 (0)20 7704-0606 Fax: +44 (0)20 7704-8070 E-mail: info@icw.org Web: http://www.icw.org/ ICW works to ensure that the rights of HIV-positive women are respected, protected and fulfilled by building the advocacy skills of HIV-positive women, providing ongoing support for their advocacy efforts, and supporting HIV-positive women to speak in policy forums and conferences. One of ICW's current projects focuses specifically on sexual and reproductive rights.

International Gay and Lesbian Human Rights Commission (IGLHRC)

80 Maiden Lane, Suite 1505 New York, NY 10038 United States

Tel: +1 (212) 268-8040 Fax: +1 (212) 430-6060 E-mail: iglhrc@iglhrc.org

Web: http://www.iglhrc.org/site/iglhrc/

IGLHRC works to secure full enjoyment of the human rights of all people and communities subject to discrimination or abuse on the basis of sexual orientation or expression, gender identity or expression, and/or HIV/AIDS status. A US-based non-profit NGO, IGLHRC effects this mission through advocacy, documentation, coalition building, public education, and technical assistance.

International HIV/AIDS Alliance (The Alliance)

Queensberry House 104-106 Queens Road Brighton BN1 3XF United Kingdom

Tel: +44 (0)1273-718900 Fax: +44 (0)1273-718901 E-mail: mail@aidsalliance.org

Web: http://www.aidsalliance.org/sw1280.asp

The Alliance promotes integrated responses to HIV/AIDS which combine HIV prevention and AIDS care and treatment. It adopts a gendered approach to the epidemic, acknowledging the role of both women and men in meeting the challenges of HIV/AIDS.

International Planned Parenthood Federation (IPPF)

4 Newhams Row London SE1 3UZ United Kingdom

Tel: +44 (0)20 7939-8200 Fax: +44 (0)20 7939-8300 E-mail: info@ippf.org Web: http://www.ippf.org/ IPPF works to ensure that poor and marginalised people are able to exercise their rights to make free and informed decisions about their sexual and reproductive health. Their priority areas of work include: making abortion safe; HIV/AIDS prevention and care; and promoting the rights of young people to sexual health services and contraception.

International Women's Health Coalition (IWHC)

333 Seventh Avenue, 6th floor

New York, NY 10001 United States

Tel: +1 (212) 979-8500 Fax: +1 (212) 979-9009 E-mail: info@iwhc.org Web: http://www.iwhc.org/ IWHC aims to build political will and influence the policies of governments, donors and international agencies to secure girls' and women's sexual and reproductive health and rights. It provides professional assistance and financial support to local organisations in Africa, Asia and Latin America, informs debates through policy analysis, and undertakes advocacy work. IWHC's priority issues include sexual rights and gender equality, HIV/AIDS and women, and access to safe abortion.

International Working Group on Sexuality and Social Policy at the Center for Gender, Sexuality and Health (IWGSSP)

International Working Group on Sexuality and Social Policy Secretariat

Center for Gender, Sexuality and Health Department of Sociomedical Sciences Mailman School of Public Health

Columbia University

722 West 168th Street, 9th Floor

New York, NY 10032

United States

Tel: +1 (212) 305-3286 Fax: +1 (212) 342-0043

E-mail: ssp_iwg@columbia.edu

Web:

http://www.mailman.hs.columbia.edu/sms/cgsh/iwg

ssp.html

NFI seeks to reduce the risks of STI/HIV transmission and improve the reproductive and sexual health of males who have sex with males in developing countries.

IWGSSP is hosted by the Columbia University

Mailman School of Public Health, and it plays a

key role in gathering and producing information

and influencing policy around sexuality. Inspired

IWGSSP 's mandate is twofold: to contribute to

sexuality-related global policy debates through

strategic policy-oriented research and analysis

between local, regional and global initiatives.

projects, and to promote more effective linkages

by local and international initiatives, the

Naz Foundation International (NFI)

UK Office

Kim Mulji, Executive Director Palingswick House, 241 King Street

London W6 9LP United Kingdom

Tel: +44 (0)20 8563-0191 Fax: +44 (0)20 8741-9841 E-mail: kim@nfi.net Web: http://www.nfi.net/

Network of Sex Work Projects (NSWP)

PO Box 13914 Mowbray 7705 South Africa

E-mail: secretariat@nswp.org Web: http://www.nswp.org The NSWP is an international organisation consisting of sex workers and sex worker organisations in over 40 countries. It aims to provide practical information and opportunities for information sharing among organisations which provide services to men, women and transsexuals who work in the sex industry; to raise awareness of the health and welfare needs of sex workers; and to advocate for sex workers' rights.

World Association for Sexual Health (WAS)

Tezoquipa 26 Colonia La Joya Delegacion Tlalapan Mexico D.F. 14000

Mexico

E-mail: eusebio@amssac.org

Web: http://www.worldsexology.org/index.asp

The WAS promotes sexual health throughout the world by developing, promoting and supporting sexual rights for all.

World Health Organization (WHO) Department of Reproductive Health and Research

1211 Geneva 27 Switzerland

Tel: +41 (22) 791-3372 Fax: +41 (22) 791-4189

E-mail: rhrpublications@who.int Web: http://www.who.int/reproductive-

health/gender/

WHO Department of Reproductive Health and Research promotes optimal sexual health and an affirmative view of sexuality for women, men and young people.

9.2 Africa

Africa Regional Sexuality Resource Centre (ARSRC) (Nigeria) 17 Lawal Street, Off Oweh Street Jibowu, Lagos Nigeria Tel: +234 (0)1 791-9307 Fax: +234 (0)1 342-5470

The Africa Regional Sexuality Resource Centre (ARSRC) is part of a Ford Foundation five-year grant-making initiative, and works to promote informed and affirming public dialogue on human sexuality in the African region. Activities under the initiative will focus on Egypt, Kenya, Nigeria and South Africa.

Baobab (Nigeria)

Physical Address 232a Muri Okunola Street Victoria Island, Lagos

E-mail: info@arsrc.org Web: http://www.arsrc.org/

Nigeria

Postal Address
PO Box 73630,
Victoria Island, Lagos

Nigeria

Tel: +234 (0)1 262-6267, 340-0484,

Fax: +234(0)1 262-6267

E-mail: http://www.baobabwomen.org/contact.html Web: http://www.baobabwomen.org/history.html

Baobab, a non-governmental human rights organisation in Nigeria, works for women's rights, including offering legal support for women who are charged with the crime of illicit sexual intercourse.

Behind the Mask (South Africa)

Physical Address

Office A06-11, 1st Floor: Administration Building

1 Kotze Street Women's Gaol Constitution Hill Braamfontein South Africa Postal Address PO Box 93843 Yeoville 2143

South Africa Tel: +27 (0)11 403-5566 Fax: +27 (0)11 403-5567 E-mail: info@mask.org.za Web: http://www.mask.org.za Behind the Mask is a communication initiative around lesbian, gay, bisexual, transgender and intersex (LGBTI) rights and affairs in Africa. Through journalistic activism, it strives to mainstream LGBTI interests and change negative attitudes towards homosexuality and same-sex traditions in Africa.

Vida Positiva (Mozambique) Empowerment Concepts

PO Box 13043 Nelspruit 1200 South Africa

Tel: +27 (0)13 752-2564

E-mail: David Patient david@empow.co.za Web: http://www.empowermentconcepts.com

Empowerment Concept's Vida Positiva (Positive Living) programme involved local churches in efforts to promote safer sex among married couples in Mozambique. They provide a variety of products and trainings for community empowerment.

LoveLife (South Africa) Physical Address 48 Wierda Road West Wierda Valley 2196 South Africa Postal Address PO Box 45 Parklands 2121 South Africa Tel: +27 (0)11 523-1000 Fax: +27 (0)11 523-1001 E-mail: talk@lovelife.org.za Web: http://www.lovelife.org.za/corporate/index.html	LoveLife is a joint initiative between government, NGOs and academic institutions which works to reduce HIV, other sexually transmitted infections, and unwanted pregnancy among South African youth.
Sexual Minorities Uganda (SMUG) PO Box 14256 Kampala Uganda E-mail: smug_2004@yahoo.com Web: http://www.smug.4t.com	SMUG is a non-profit NGO promoting legal and social equality for lesbian, gay, bisexual and transgender people in Uganda.
Thandizani (Zambia) Contact Person: Shuppie Nyirenda PO Box 530221 Drop-in Centre Lundazi Zambia Tel: +260 (0)64 80061 E-mail: thandizani@zamnet.zm	Thandizani is one of the few NGOs in Zambia that is integrating gender and sexuality in its HIV/AIDS work. It supports men to organise themselves into post-test clubs. Staff train and support post-test club members to become community AIDS educators, who then provide education and basic counselling on HIV/AIDS to other community members.
The Inner Circle (TIC) (South Africa) President, Muhsin Hendricks Tel: +27 (0)82 507-3412 E-mail: admin@theinnercircle-za.org Web: http://www.theinnercircle-za.org	TIC is a South Africa-based organisation for lesbian, gay, bisexual, transgender, questioning and intersex (LGBTQI) people who identify with the struggle to reconcile their Muslim faith with their sexuality. TIC provides support and education to members of the organisation and to the public.
The Rainbow Project (TRP) (Namibia) PO Box 26122 Windhoek Namibia E-mail: trp@iafrica.com.na	TRP is an NGO working for the recognition and promotion of the equal human rights of lesbian, gay, bisexual and transgender (LGBT) people in Namibia. The Rainbow Project runs Different Identities Group (DIG), a women's peer support and counselling group focusing on lesbian, bisexual and transgender issues. The project also runs a group for gay, bisexual and transgender men.
Women's Health Project (WHP) (South Africa) PO Box 1038 Johannesburg 2000 South Africa Tel: +27 (0)11 489-9917 / 05 Fax: +27 (0)11 489-9922 E-mail: womenhp@sn.apc.org Web: http://www.wits.ac.za/whp/	WHP aims to create a society in which all people, especially women, have access to and control over power and resources, enabling them to make decisions that contribute to optimal health. As part of its sexual rights campaign, WHP has developed a South African sexual rights charter and carries out sexual rights training workshops to raise awareness, educate and engage communities and service providers to promote and support sexual rights with regard to the issues of HIV/AIDS, violence against women and adolescent sexuality.

9.3 Asia and the Pacific

Breakthrough India (India) #104, Blue Apartments Safdarjung Ring Road New Delhi 110029 India Tel: +91 (11) 2617-6181 Fax: +91 (11) 2617-6185	Breakthrough is an international human rights organisation that uses media, education and pop culture to promote values of dignity, equality and justice. Its themes include: women's rights; sexual and reproductive rights; immigrant rights; racial, ethnic and caste equality; and religion and peace.
CARE India India Headquarters 27, Hauz Khas Village New Delhi 110016 India Tel:+91 (11) 2656-6060 / 2656-4101 Fax:+91 (11) 2656-4081 / 2652-9671 E-mail: Veronica Magar vbmagar@gmail.com Web: http://www.careindia.org	CARE is one of the world's leading humanitarian organisations fighting global poverty. CARE's mission in India is to facilitate lasting change in the well-being and social position of vulnerable groups, especially women and girls.
JAGORI (India) B-114, Shivalik Malviya Nagar New Delhi 110017 India Tel: +91 (11) 2669-1219 / 20 Fax: +91 (11) 2669-1221 E-mail: jagori@jagori.org Web: http://jagori.org/	JAGORI is a women's training, documentation, communication and resource centre which works to build awareness amongst women regarding their legal rights, health issues, and other issues central to women's empowerment, such as livelihood, education, and rights of the girl child.
South and Southeast Asia Resource Centre on Sexuality (India) TARSHI (Talking About Reproductive and Sexual Health Issues) 11 Mathura Road, First Floor Jangpura B New Delhi 110014 India Tel: +91 (11) 2437-9070 / 1 E-mail: resourcecentre@tarshi.net Web: http://www.asiasrc.org/	The South and Southeast Asia Resource Centre on Sexuality aims to increase knowledge and scholarship on issues of sexuality, sexual health and sexual well-being in this region. The Centre serves as a space for activists, advocates, practitioners and researchers, to better understand, examine and expand upon the complex issues surrounding debates on sexuality.

9.4 Europe

BRIDGE (UK) Institute of Development Studies (IDS) University of Sussex Brighton BN1 9RE United Kingdom Tel: +44 (0)1273 606261 Fax: +44 (0)1273 621202 E-mail: bridge@ids.ac.uk Web: http://www.bridge.ids.ac.uk/	BRIDGE supports gender advocacy and mainstreaming efforts by bridging the gaps between theory, policy and practice with accessible and diverse gender information in print and online.
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European Sexuality Resource Center (The Netherlands) p.a. IIAV Obiplein 4 1094 RB Amsterdam The Netherlands Tel: +31 (0)20 665-1318 E-mail: esrc@iiav.nl Web: http://www.europeansexuality.eu/	The European Sexuality Resource Center promotes networking and the sharing of information on issues related to sexual health, sexual rights and sexual well-being at the European level.
International Union of Sex Workers (IUSW) c/o Membership GMB Thorne House 152 Brent Street London NW4 2DP United Kingdom E-mail: misc.contact@iusw.org Web: http://www.iusw.org/	IUSW is a UK-based trade union for sex workers. It campaigns for the decriminalisation of prostitution and to have sex work acknowledged as viable labour. Some of the services offered by the union include self-defence classes, free legal advice, and training for members who wish to leave the sex industry. The union publishes a quarterly bulletin entitled 'RESPECT!'.
Outsiders (UK) BCM Box Outsiders London WC1N 3XX United Kingdom Tel: +44 (0)20 7354-8291 E-mail: info@outsiders.org.uk Web: http://www.outsiders.org.uk/	Outsiders is a UK-based organisation for people who feel isolated because of physical disabilities or social disabilities such as shyness, phobias or mental illness. Outsiders helps them gain confidence, make new friends and find partners. The organisation runs a sex and disability helpline, a group for disabled women, and a lesbian, gay, bisexual and transgender network.
SCOT-PEP (Scotland) 70 Newhaven Road Edinburgh EH6 5QG United Kingdom Tel: +44 (0)131 622-7550 Fax: +44 (0)131 622-7551 E-mail: voice@scot-pep.org.uk Web: http://www.scot-pep.org.uk/	SCOT-PEP was set up by and for sex workers and offers non-judgmental advice and support. It works to promote health, dignity and human rights amongst those involved in the sex industry.
The Pleasure Project (UK) General inquiries, info@the-pleasure-project.org Anne Philpott, anne@the-pleasure-project.org Wendy Knerr, wendy@the-pleasure-project.org Tel: +44 (0)7986 585-464 (United Kingdom) Tel: +66 70 282924 (Thailand) Web: http://www.thepleasureproject.org	The Pleasure Project promotes safer sex that's sexy. It aims to build bridges between the pleasure/sex industry and the safer sex world by ensuring that erotic materials include discussions of safer sex, and that sexual health and training materials include pleasure as a key element.
The Terrence Higgins Trust (THT) (UK) Terrence Higgins Trust 314-320 Gray's Inn Road London WC1X 8DP United Kingdom Tel: +44 (0)20 7812-1600 Fax: +44 (0)20 7812-1601 E-mail: info@tht.org.uk Web: http://www.tht.org.uk/	THT works to reduce the spread of HIV and promote good sexual health. It provides services to improve the health and quality of life of those affected by HIV/AIDS, and campaigns for greater public understanding of the personal, social and medical impact of HIV/AIDS.

9.5 Latin America and the Caribbean

Católicas pelo direito de decider (CDD) (Brazil)

Rua Prof. Sebastião Soares de Faria, 57

CEP 01317-010 São Paulo - SP

Brazil

Tel/Fax: +55 (11) 3541-3476 E-mail: cddbr@uol.com.br

Web: http://www.catolicasonline.org.br/

CDD raises awareness of the need for changes in social and cultural attitudes towards women, and to increase public involvement in this issue, especially by groups that work with sexual and reproductive health, education, human rights, communications media, and legislators.

Center for Gender, Sexuality and Health (CGSH)

Department of Sociomedical Sciences Mailman School of Public Health

Columbia University

722 W 168th Street, Suite 908

New York, NY 10032 United States

Tel: +1 (212) 305-3286 Fax: +1 (212) 342-0043

E-mail: cgsh-msph@columbia.edu

CGSH promotes research and training on the social and cultural dimensions of sexuality, as well as policy-relevant research on issues related to sexual health, sexual rights and sexual education. The Centre develops programmes related to diverse cultures and communities, including ethnic and sexual minorities, both in the United States and internationally.

Centro Latino Americano d Sexualidad y Derechos Humanos (CLAM) (Latin-American Center on Sexuality and Human Rights) (Brazil)

IMS/UERJ

R. São Francisco Xavier, 524

6° andar, Bl. E

20550-013 Rio de Janeiro - RJ

Brazil

Tel: +55 (21) 2568-0599

Web:

http://www.clam.org.br/publique/cgi/cgilua.exe/sys/start.htm?UserActiveTemplate=%5FEN&tpl=home

The Latin-American Centre on Sexuality and Human Rights produces and disseminates knowledge about sexuality from a human rights perspective to help combat gender inequality and contribute to the struggle against the discrimination of sexual minorities in the region.

Latin American and Caribbean Women's Health Network (LACWHN) (Chile)

Casilla 50610 Santiago 1 Chile

Tel.: +56 (2) 223-7077 / 9507 Fax: +56 (2) 223-1066

E-mail: secretaria@reddesalud.org

Web:

http://www.reddesalud.org/english/sitio/info.asp?O

b=1&ld=83

LACWHN is a network of organisations and individuals in the women's health movement working to promote women's health and the full exercise of women's human rights through research, training and advocacy.

9.6 Middle East

Women for Women's Human Rights-New Ways (Turkey)

İnönü Caddesi, 37/6 Saadet Apt.

Gümüşsuyu 80090

Istanbul Turkey

Tel: +90 (212) 251-0029 Fax: +90 (212) 251-0065

E-mail: wwhrist@superonline.com

Web: http://www.wwhr.org/_homepage_en

WWHR-New Ways, an autonomous women's NGO based in Turkey, works toward the promotion of women's human rights at the national, regional and international level. The organisation carries out advocacy and lobbying to bring about legal and policy changes; human rights training for women; networking; and action research and publications. WWHR runs a Human Rights Education Programme For Women, which explores how taking a positive approach to sexuality can open up spaces for women to claim their sexual rights, among other things.

9.7 North America

Center for Health and Gender Equity (CHANGE)

6930 Carroll Ave., Suite 910 Takoma Park, MD 20912

United States

Tel: +1 (301) 270-1182 Fax: +1 (301) 270-2052

E-mail: change@genderhealth.org Web: http://www.genderhealth.org/ CHANGE is a US-based NGO dedicated to promoting accountability of US international policies, programmes and funding on the sexual and reproductive health and rights of women and girls in Africa, Asia and Latin America.

Family Care International (FCI)

588 Broadway, Suite 503 New York, NY 10012

United States

Tel: +1 (212) 941-5300 Fax: +1 (212) 941-5563 E-mail: info@familycareintl.org Web: http://www.familycareintl.org FCI works to ensure that women and adolescents have access to life-saving services and information to improve their health, experience safe pregnancy and avoid unwanted pregnancy and HIV infection.

Family Violence Prevention Fund (FVPF)

Family Violence Prevention Fund 383 Rhode Island St. Suite #304 San Francisco, CA 94103-5133

United States

Tel: +1 (415) 252-8900

Tel: 800-595-4889 (toll-free in United States)

Fax: +1 (415) 252-8991 Washington, DC Office 1522 K Street, NW #550 Washington, DC 20005 United States

United States Boston Office

67 Newbury Street, Mezzanine Level

Boston, MA 02116 United States

Web: http://www.endabuse.org/

FVPF works to end violence against women and children around the world by reaching out to men and youth, promoting leadership within communities to ensure that violence prevention efforts become self-sustaining, and transforming the way health care providers, police, judges, employers and others address violence.

lpas

PO Box 5027

Chapel Hill, NC 27514

United States

Tel: +1 (919) 967-7052

Tel: 800-334-8446 (toll-free in United States)

Fax: +1 (919) 929-0258

Web: http://www.ipas.org/english/

National Sexuality Resource Center

2017 Mission Street, Suite 300 San Francisco, CA 94110

United States

Tel: +1 (415) 437- 5121 Fax: +1 (415) 621-3783 E-mail:nsrcinfo@sfsu.edu

Web:

http://www.nsrc.sfsu.edu/Index.cfm?SID=2A3E77D 85DDC2EB0FC0422A247D633F3&DSN=nsrc dsn

&Page=1

Ipas has worked for three decades to increase women's ability to exercise their sexual and reproductive rights and to reduce deaths and injuries of women from unsafe abortion. Ipas's global and country programmes include training, research, advocacy, distribution of equipment and supplies for reproductive-health care, and information dissemination.

The National Sexuality Resource Center (NSRC) gathers and disseminates the latest accurate information and research on sexual health, education and rights. Through active outreach to advocates, academics, researchers, policymakers and diverse communities, NSRC initiates constructive dialogues—both online and face-to-face—on sexuality.