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Terence H. Hull PhD

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Sexual Pleasure and Wellbeing

Terence H. Hull, PhD

ABSTRACT. Pleasure may be the key to the successful working of the reproductive systems of humans. However, for all the enjoyment sexual relationships can provide, there are countervailing forces of guilt and disappointment at work on the individual psyche. Religious and social norms enforce limits on sexual expressiveness. These controls are defended as means to protect individuals and their partners from unhappiness due to infidelity. The contrasting balance of potential pleasure on the one hand and deeply felt self-controls on the other gives rise to many problems of sexual health. Couples with discordant expectations about sexual pleasures can find their relationships crumbling. Deeply planted understandings about inappropriate behavior can cause individuals to feel shame or fear when faced with choices about their sexuality and particularly their desires. People unable to achieve desired pleasures due to physical handicaps experience a loss of wellbeing that can be extremely distressing. Simultaneously society struggles to control the individual expression of harmful sexual behavior such as child molestation while protecting the rights of individuals to enjoy personal satisfaction. The recognition and promotion of sexual pleasure as an integral part of wellbeing is one of the most challenging elements on the sexual health agenda. Progress in this area will require extraordinary efforts by professional groups and political leaders to forge a forthright understanding of the meaning of pleasure in people's lives, and the priority of promoting healthy sexuality as a part of a global health agenda.

KEYWORDS. Sexuality, pleasure, sexual morality, harmful sexual practices

Sexual pleasure, wisely used and not abused, may prove the stimulus and liberator of our finest and most exalted activities. (Havelock Ellis, 1947, p. 68)

INTRODUCTION

The main components of the WAS Declaration "Sexual Health for the Millennium" deal with rights, ideals and needs related to illness, social disadvantage and the lack of specialized services (World Association for Sexual Health,

2005, 2007). They are aimed at helping people overcome problems and attain a high degree of sexual health. These are undoubtedly key issues of widespread concern. People around the globe struggle to alleviate pain and suffering, and thoughts of the word health are often couched primarily in concerns about illness. However, no less important for sexual health is the ability to attain sexual pleasure and satisfaction, which is recognized as a key element of overall wellbeing in the final statement of the declaration.

Unfortunately policy-makers and political leaders often see sexual pleasure as a biological

Terence Hull is the J. C. Caldwell Professor of Population, Health and Development at the Australian National University.

Address correspondence to: Terence H. Hull, PhD, Australian Demographic and Social Research Institute, ANU, Canberra, ACT 0200, Australia (E-mail: terry.hull@anu.edu.au).

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given, a matter of course, or a matter of chance, about which social intervention would seldom be required except to restrict individuals in their attempts to achieve pleasure. For many people and certainly most politicians, sexual pleasure is a terribly conflicted issue and a call for policies or programs to promote sexual pleasure invites ridicule and condemnation. The inclusion of a positive call for sexual pleasure in the WAS Declaration was a bold step.

Why should pleasure be identified as a priority in a world of HIV, unplanned pregnancy, and widespread gender-based violence? The reason is contained in the words of the eighth point of the WAS Declaration.

8. Achieve recognition of sexual pleasure as a component of holistic health and well-being

Sexual health is more than the absence of disease. The right to sexual pleasure should be universally recognized and promoted.

If more than the absence of disease, what more is it? And, to what degree is it more than a personal matter? If requiring recognition and promotion, what form of social institutions can be charged with these responsibilities, and who are the targets of promotional efforts?

The answer to these questions must be sought in the cultural foundations of norms and values related to sexual pleasure. Certainly it is difficult to find allusions to pleasure in the Millennium Development Goals (MDG) or many of the aspirations contained in documents of United Nations Conferences (e.g. the Cairo Programme of Action on Population and Development or the Beijing Conference on Women). In part this is because gatherings of world leaders tend to expound on goals in the sense of immediate problems to be overcome rather than the ultimate attainment of wellbeing.

The indicators used to track progress similarly focus on the problems—whether in terms of measuring the declines in morbidity and mortality, or more sophisticated measures of disability adjusted life years (DALYs). For instance a comprehensive tome on the *Health Dimensions of Sex and Reproduction* covers a wide range of illnesses and conditions, but has no mention

of impotence or sexual dysfunction (Murray & Lopez, 1998). The fact that *Viagra*® (sildenafil citrate—sometimes referred to as the “blue pill”) is such a common pharmaceutical product is an indication of the seriousness with which people treat failure to meet personal goals for sexual satisfaction, but that is apparently not sufficient to place sexual pleasure on the agenda of international health service planning.

IS PLEASURE NECESSARY?

Nations and cultures based on the Judeo-Greco-Christian heritage of the West have long displayed great ambivalence about sexual pleasure. On the one hand the injunction of the Old Testament to “be fruitful and multiply” is often read to promote sexual relations, at least within the bonds of marriage. At the same time many Jews read the reference to marriage and sex in that part of the Bible as promoting sexual pleasure while some Christian sects read essentially the same text as focusing on kinship and the economic dimensions of the family with little or no reference to sexual relationships.

In the New Testament the injunction for love expressed in the marital bond is often invoked as a teaching on sexuality condoning sexual pleasure arising in the form of a “sacrament” that states the relationship in a strongly hierarchical way. For example the oft quoted passage from Ephesians 5: 22–28 states:

Wives, submit to your husbands as to the Lord. For the husband is the head of the wife as Christ is the head of the church, his body, of which he is the Savior. Now as the church submits to Christ, so also wives should submit to their husbands in everything. . . . In this same way, husbands ought to love their wives as their own bodies. He who loves his wife loves himself.

This is not to say that the Bible is interpreted by Christians as a simple promotion of pleasure. In a letter often ascribed to St. Paul the Corinthians are warned of the dangers of sexual pleasure: “Now to the unmarried and the widows I say: It is good for them to stay unmarried, as I am. But if they cannot control themselves, they should

marry, for it is better to marry than to burn with passion” (Corinthians I 7: 8–9). Burning here conjures up images of the fires of hell.

The celebration of sexuality that is found in the cultural expressions and recorded behaviors of the Romans and Greeks (Foucault, 1984) stands in stark contrast with cultures of abstinence that developed in various cults and movements before and after the time of Roman dominance of the regions of present day Palestine, Israel, Egypt, Jordan and Syria. The Jesus cult was but one of many, and Christianity found its roots in conflicts among religious groups that had different notions of the relationships of humans as much as they did in the relation between humans and spiritual deities.

The Augustinian tradition elaborated a cautious view and looked upon sexual pleasure as a carnal act that placed the profane above the sacred. It must be controlled, as all lustful bodily desires must be controlled, through abstinence or the restraint fostered by temperance. Essentially this contrast between spiritual love and carnal delight created an ambiguity in many Christian teachings such that many people encounter feelings of guilt, conflict and social confusion when confronted with questions of sexual pleasure and sexual practice. The impact on human relationships is difficult to generalize. While there have undoubtedly been many Christians whose faith has given them comfort, motivation and strength to maintain a celibate or at least a highly temperate approach to sexuality, others have suffered under the social condemnation directed at them and deep-seated feelings of personal guilt. The corpus of European literature through the ages reflects such tensions and records various interpretations about the moral stance of society in different situations. Similarly other religious traditions produced creative works of poetry, fable and visual art in celebration of sexual pleasures while reflecting on the challenges represented by marital customs, patriarchy and property rights. The *Kama Sutra* remains a classic today. In China, and throughout the Muslim world there are similar collections in praise of pleasure (see especially Ilkharacan, 2000).

Traditions of Christianity are often associated with abstinence and temperance. That is a stereo-

type that has been applied to a broad sweep of largely European history despite the realities of sexual behavior and sexualities that dominated the societies. In contrast, at many times some key religious leaders have stressed the pleasurable side of love as a gift from God. The most recent manifestation of this is in Roman Catholic Church doctrine and was found in the first encyclical of Pope Benedict XVI entitled *On Christian Love*. There he speaks of a particular form of *eros* which the Greeks had described as “a kind of intoxication, the overpowering of reason by a ‘divine madness’ which tears man away from his finite existence and enables him, in the process of being overwhelmed by divine power, to experience supreme happiness” (Benedict XVI, 2005, para. 3–4). The problem for believers, he argued, is not the raptures of pleasure, which are to be welcomed, but rather the production of pleasure in degrading and destructive ways. For the faithful there are rules to be followed, but there are also pleasures to be enjoyed. The challenge is the identification of the balancing points between these alternatives.

One important perspective on sexual pleasure that puzzled many Europeans was the question of what purpose it could possibly play in the great scheme of life. Albertus Magnus, a German cleric of the 13th century, reflected on the Aristotelian notion that conception must be related to the sexual pleasure men gain in intercourse as a result of the emission of semen during ejaculation. According to Albertus the power of ecstatic release was a manifestation of the spark of life that men contribute for reproduction. More than a selfish notion of personal gratification this concept contained an argument of altruism. Philosophers through the ages had questioned how this might be so, given that it was well known that many women also experience pleasure during intercourse. Did this mean that women also produce semen? Did they share in the life force? Albertus replied with the observation that women likely gained their pleasure indirectly from men either through vaginal contact with the penis or the through the heat of the sperm in the womb (Cadden, 1993, p. 121). Women’s pleasure was a by-product of the male’s vital contribution to the creation of new life in the conception of a child. For both the male and the female, this pleasure

could be transporting, but in the minds of the philosophers and the religious leaders there was a natural gender order, and that shaped their understanding of the rights and wrongs of pleasure. Religion directed them to concentrate on the main purpose, reproduction, rather than personal gratification, but if there were to be any discussion of pleasure it would center on the source of the life force, the males.

The lessons of control promoted by Augustine certainly did not mean that Europeans totally turned away from the attractions of pleasure. Over two millennia there were constant reminders that sexual pleasure was pursued with vigor—witness Boccaccio's *Decameron*, Chaucer's *Canterbury Tales*, the stories of Casanova and Don Juan and the humor and the drama of Shakespeare's greatest plays. Such expressions of desire and delight were more than entertainments for an otherwise self-controlled audience. They were to some degree records of behavior in caricature form, and models of behavior for impressionable readers. Even as the novelists and playwrights were promoting sexual delights, legislators and judges were recording the punishments to be meted out to those who indulged. Perhaps the most well known of the cultures of control were the settlers of the Massachusetts Bay Colony in America, who have provided us with the term *puritan* to describe the moral policing that made pleasure into a crime (D'Emilio & Freedman, 1988, pp. 15–38). In Australia the term *wowser* has taken on an even harsher tone than *puritan* and has established itself firmly in the national culture as the enemy of worldly pleasures (see http://www.anu.edu.au/andc/res/aewords/aewords_sz.php for an authoritative definition).

The key to the seeming contradiction between stories of lusty sexuality and injunctions to abstain from sex lies in an understanding of the gaps between normative environments and social behavior. As Hera Cook argues in her long-term view of sexuality in Britain, the desires for sexual pleasure were there, but so was “considerable anxiety regarding unwanted pregnancies and venereal disease and a broad social acceptance of emotional and sexual self-control as an ideal to be aimed for” (Cook, 2004, p. 265). The pursuit of sexual pleasure is balanced by the

fear of unwanted childbearing, illness, or moral condemnation. Over time this balance shifts, as has undoubtedly been the case with the so-called sexual revolution of the 1960s and the safe-sex attempted revolution of the 1990s, but the shifts in behavior have probably been less important than the changes in attitudes that have characterized the age. Pleasure is always with us, but sometimes it doesn't feel as welcome or as free as at other times.

From the viewpoint of social cohesion, the role of sexual liaison can often be very distant from concerns over sexual pleasure. As Greenberg argues (1995, p. 244), the use of marriage as a means of building alliances and accumulating land meant that pleasure was not the key to a relationship. Similarly it meant that the pursuit of pleasure was not always confined to the marital relationship. In modern times, as arranged marriages have given way to romantic love, pleasure has been described in terms of mountaineering where breathless ecstasy is found at the pinnacle of love. But to Greenberg the rise of romance has not necessarily meant that sexual relationships would always be linked to love. Rather, in reference to both heterosexual and homosexual relationships, he points to casual sex, unstable unions, and changing expectations as setting up cultural clashes between those who “think that love is an essential prerequisite to sex” and those who are happy to pursue pleasures as a form of personal recreation (Greenberg, 1995, p. 245). The inference he draws is that pleasure is at the heart of discussions of fidelity and monogamy, and will continue to be so in future, but there is not likely to be any simple resolution to the tensions.

For Freud, ever the classical scholar as well as the source of much modern understanding of the workings of the mind, pleasure was the offspring of *psyche* and *cupid*—*thought* and *love*—and was neither a natural or common state of being. Just as he sought insights from the troubled people who came to him for help, so today we often seek understanding of sexual health by examining those with illnesses or anxieties. Even Kinsey, who presumed to collect an encyclopedic understanding of the human male and the human female through interviews with thousands of Americans, filled his books with words

from his biological training rather than the reflections of emotion found in everyday life. His book on the *Human Male* (1948, pp. 158, 800) has only one mention of pleasure in the index, and that refers to the description of orgasm including a long paragraph which describes the pleasure of the act as: “an increase in so-called nervous tension, some degree of rigidity of some part or of the whole of the body at the moment of maximum tension; and then a sudden release which produces local spasms or more extensive or all-consuming convulsions.” Five years later the index of *Sexual Behavior in the Human Female* contained no entry for pleasure (Kinsey, Pomeroy, Martin, & Gebhard, 1953).

The ambivalent position of sexual pleasure in many cultural, literary and political traditions makes debate about pleasure particularly fraught. Is pleasure something too subtle, too personal, for biological or social analysis? If pleasure in itself provokes shame and policymakers regard lack of sexual pleasure as a minor inconvenience for individuals rather than a social problem, then there would seem to be little purpose to put this positive aspect of sexuality on a social or political agenda. In the perceptions of many social leaders, sexual pleasure is ephemeral. Lack of orgasms is not fatal, and they regard failure to achieve a deep spiritual connection with a sexual partner as a private inconvenience rather than a tragedy.

However, the truth is that individuals around the world pursue pleasure with vehemence, and treatment of the failure to experience sexual satisfaction is a central part of the practices of specialists in sexual health. Sexuality is fueled by pleasure. In the effusive words of Joseph Tenenbaum in *The Riddle of Sex* (1930, p. 243):

Like a vast ocean which receives a constant supply from far-off streams, lakes and watersheds, so too, the sexual desire is fed from various far-off sources. Sex is multi-form, comprehensive and deep. The sexual pattern is knit from many skeins and interwoven with threads of many shades and hues.

It is the very complexity of sexual desire and sexual pleasure that poses the greatest problem for

the advocate and the analyst. If pleasure were simply the response to the yes/no question of a survey it would be relatively easy to measure people’s satisfaction levels and advise on steps to overcome any shortcomings. The nature of pleasure is not so simple. In addition to the “plumbing” issues of biology that refer to the responses of organs to hormones, nervous systems and blood flows, pleasure is based on the activity of the brain/mind, with perceptions, imagination and memory all playing complex and important roles in producing the ecstatic outcomes referred to by Kinsey above. Problems in experiencing pleasure are sometimes amenable to biological interventions but this is seldom the whole picture. Instead the mind plays a determining role in many situations, whether it is manifest in the anxiety people have over the prospect of failures in sexual performance, or the guilt someone might feel if embarking on a premarital or extra-marital relationship, or the images of dangerous relationships that cloud the thoughts of a person contemplating socially unacceptable behavior. To the degree that pleasures arise from thought, the responses to difficulties attaining pleasure must similarly work through thought to bring about changes in the afflicted mind.

If pleasure is a matter for the mind, it is also a matter of cultural creation and experience. Tuzin’s (1995, pp. 265–268) reflections on the anthropology of sexual experience raised many questions about the methodologies used to understand the purpose and nature of pleasure in different societies. Taking examples from Melanesia he described how a number of practices are found by participants to produce pleasure, but are explained in terms of social, symbolic or metaphysical meanings that go well beyond biological reactions. Melanesia is often portrayed as a place of very unusual sexual practices, including the ritual hygienic cutting and bleeding of the penis which men sometimes jokingly describe as their “menstruation.” The practice is found to be not only of symbolic importance, but also the source of pleasure. Tuzin found reports of cunnilingus to be more common in Melanesian society than had been reported by previous ethnographers and his colleagues “expressed wonderment” at this detail since the societies in which they worked are notorious for

beliefs concerning the ritual pollution associated with women. On a revisit to his study site he undertook more detailed interviews and found a wide range of responses, from men who said the practice was very common to others who denied it could ever happen. Tuzin's conclusion (1995, p. 265) was that this represents "the kind of behavioral and attitudinal variation which typifies the findings of sex research in Euroamerican society. But rather than despair over ever arriving at satisfactory general characterization of sexual behavior in a given society, we should consider the highly interesting fact of the variation itself." Not only was there variation in sexual activities, but also in the meaning and pleasure reported by the actors.

Sexual pleasures, whether anticipated or experienced by men or women, are in part the biological motivations that reinforce reproductive behavior of mammals who reproduce sparingly and who for long periods of evolution suffered high rates of loss of offspring. The power of pleasure ensured that sexual intercourse would be frequent, and the powers invoked by pleasure served as one of the forces cementing the reproductive units of society, the families. Irrespective of the hormonal foundations of pleasure and pleasuring, the social constructions arising out of norms, values and attitudes are probably the greater influence on how people construct their sexuality, and are thus the key to our understanding of sexual health. Not surprisingly, though, the attempt to compile a compendium of issues and problems associated with the recognition of sexual pleasure will often force us to look at both the biology and the psychology. More challenging though, it forces us to look at the politics of sex.

THE ISSUES AND PROBLEMS

Pleasure: From the Personal to the Policy

At the heart of the international discussion of pleasure must be the realization that the recognition and promotion of pleasure as an element of sexual health is a social rather than a personal matter, but the personal is always the focus for defining pleasure and the values attached to it.

As mentioned above, politicians are loath to acknowledge that citizens might have an interest in improving those aspects of sexual health dealing with pleasure. An AIDS victim will pose a picture of suffering and death and it is argued that a sense of humanity demands an intervention (though the call is not always heeded). A patient with a sexually transmitted disease will similarly be portrayed as potentially infective, so the arguments for public health intervention seem obvious: to prevent further social suffering from what is seen as an individual responsibility. But if political leaders talk of premature ejaculation (instead of a clinician's term rapid ejaculation), impotence (erectile dysfunction), frigidity (anorgasm or orgasmic disorder), or simply painful intercourse (dyspareunia) they conjure up images of individuals who should simply get on with their lives rather than people needing assistance. There is not a ready social benefit to be identified. The fact that people with such conditions are unable to enjoy the pleasures that others take for granted is bad luck, but not a case for recognition or assistance. Science reveals that these are serious issues strongly related to age and sex (Laumann et al., 1999) and likely to become even more relevant to sexual health status as populations age in a time of falling fertility levels (Lindau et al., 2007). In the latter cited study of Americans aged 57 to 85 over half of all sexually active persons reported at least one bothersome sexual problem (low desire and difficulty with lubrication among women, erectile difficulties for men) and the prevalence of sexual activity declined rapidly from 73% for those aged 57 to 64, 53% for those 65–74, to 26% for those 75–85. In a setting where most respondents report a high value associated with sexual activity and sexual pleasure, this constitutes a major loss of wellbeing that is amenable to prevention and treatment if appropriate resources are mobilized to promote sexual health.

For the politician, the greatest danger in speaking out for sexual health is that any mention of pleasure could conjure up visions of sexual peccadilloes in the minds of voters. Such fears would be related directly to the degree of social conservatism in the electorate. If it is impossible for leaders to mention the words sexual pleasure for fear of a voter backlash, it will be difficult to

launch a campaign to recognize and promote an understanding of the role of pleasure in sexual health.

The Difference Gender Makes to Pleasure

Throughout the last century quantitative social scientists tried to work out the essential differences between male and female concepts of sexual pleasure. Wellings, Field, Johnson, and Wadsworth (1994, p. 270) summarized their findings of a large national survey of Britain as: “men attach greater importance to orgasm in sexual satisfaction for either sex than do women, and both men and women see orgasm as more essential to men’s satisfaction than to that of a woman.” This was not a surprise to the researchers since the results follow on decades of work by Kinsey, Masters and Johnson, Hite and other largely American sex researchers. It is the common material of Euro-American comedy that men want to sleep after making love while women want to cuddle. The internet joke portrays men as the simple on/off switch, and women as the complex circuit system. Such characterizations imply two basic concepts of pleasure, one for men and one for women.

Such generalizations, though, seem tied to an essentially biological paradigm that is relevant to individuals’ sex rather than their gender. Gender is not the characteristic of a chromosome so much as it is a product of learning, thought and understanding. There may very well be strong hormonal processes at work to produce erections, lubrication, and orgasm, but these are set in a body where the mechanisms of perception and interpretation are cognitive. Pleasure and pain result from impulses carried on the nervous system, but when received by the brain are registered as impressions and loaded with meaning as part of the interaction with memory. For some men the delicacy of touch may conjure up exquisite pleasure, while for some women the moment of orgasm might represent a moment of inestimable pleasure after which sleep is a welcome postlude. The stimuli for these transporting moments may be found in deep love for their partner, or possibly not. They may be found with partners of the other sex, or the same sex,

or even alone. What seems obvious is that the perceptions they have concerning their experience are shaped by their upbringing—the gender that has been constructed in the formation of the mind. What is remarkable is that the gender they achieve is to a large degree unique, yet compatible with so many other individuals in their own or even other cultures and societies.

From the viewpoint of the sexual health practitioner, the challenge of gender is to identify the links between perceived problems of sexual performance and elements of the person’s gender identity that may be amenable to modification. It is much easier to prescribe a blue pill to dilate some blood vessels than it is to explore the expectations of physical intimacy that may be unrealistic in any given social context.

Gender represents an even more problematic issue in discussions of morality and religion. Depending on belief systems the gender roles ascribed to men and women can contain expectations of sexual performance that can be very inequitable. To the degree that a case can be made for rights to sexual pleasure, surveys tell us that women are more likely to suffer from violations of their rights than do men. For that situation to change requires a combination of sex education to break down disadvantageous gender constructs and social advocacy to promote comprehensive reproductive health services, including sexual health services. In a world increasingly characterized by dogmatic religious belief systems this may pose a great challenge. The first step to changing social attitudes on pleasure may be the suspension of some very powerful beliefs.

Metrics for Pleasure

Our argument is that the right to sexual pleasure should be recognized and promoted as an element of human wellbeing. This opens the issue of how pleasure should be measured, and the degree to which the promotion should be monitored scientifically as opposed to the personal, but arbitrary, assessments that would form the basis of most common sense ideas about sexuality. Is there a “sexual pleasure index” that could be used to categorize countries much as the Human Development Index is used to reveal national economic standing? Psychologists

TABLE 1. Common Indicators of Sexual Pleasure used in Small-scale Surveys and Clinical Practice

Measure	Full name	Source
SII	Sexual Interaction Inventory	LoPiccolo & Steger (1974)
GRISS	Golombok Rust Inventory of Sexual Satisfaction	Rust & Golombok (1986)
BISF-W	Brief Index of Sexual Functioning for Women	Taylor, Rosen, & Leiblum (1994)
IEMSS	Interpersonal Exchange Model of Sexual Satisfaction	Lawrance & Byers (1995)
SAQ	Sexual Activity Questionnaire	Thirlaway, Fallowfield, & Cuzick (1996)
IIEF	International Index of Erectile Function	Rosen, Riley, Wagner, Osterloh, Kirkpatrick, et al. (1997)
DISF/DISFSR	Derogatis Interview for Sexual Functioning	Derogatis (1997)
FSFI	Female Sexual Function Index	Rosen, Brown, Heiman, Leiblum, Meston, et al. (2000)

specializing in issues of sexuality, including many members of the World Association for Sexual Health, have attempted to develop research tools for measuring pleasure and satisfaction. Sometimes their objective has been to compare measures of pleasure between cultures (Renaud, Byers, & Pan, 1997). More commonly, though, the instruments have been used to assess sexual dysfunction, particularly of women, within a cultural setting (LoPiccolo & Steger, 1974; Meston & Derogatis, 2002; or Thirlaway, Fallowfield, & Cuzick, 1996). Once formulated, the measures are often applied to different national populations. Table 1 provides a list of some of the more prominent measures used in recent studies.

The great shortcoming of such indicators is the lack of cultural comparability. It is frequently said to be impossible to ask questions arising out of a liberal cultural setting in a place where people are more conservative. A good example of this issue is the attempt to apply the BISF-W questionnaire in Tehran, Iran (Shokrolahi, Mirmohamadi, Mehrabi, & Babaei, 2005). The questions on masturbation, sexual orientation, and oral and anal sex were all omitted. While this may not have seriously disrupted the researchers' exploration of sexual dysfunction, it did undermine any attempt to make cross-national comparison of results, and eliminated dimensions of sexual pleasure that would be vital to any holistic understanding of sexual health. Without much stronger frameworks for measuring pleasure across cultures and social classes it

will be difficult to establish a knowledge base for advocacy and clinical services.

Capability: Where the Body Fails

Among all the justifications for social intervention to assist people to experience sexual pleasure perhaps the clearest, yet frequently ignored, are the needs of individuals who suffer some form of physical handicap or inadequacy. It is easy to imagine a wide range of conditions that fit under this heading, from paraplegia to severe mental disorder, and from impotence to ascribed orgasmic disorder. However, even to begin drawing up such a list is to risk the trap of stereotypes and presuppositions. It is true that many people lack what others might regard as normal functioning of their sexual organs, and that they might require assistance through the use of alternative forms of pleasuring or pharmaceuticals, or guidance to adapt to the constraints of their situation. At the same time the impositions of standards of pleasure formulated for people of a particular kind of capability risks ignoring the range of pleasure that may be regarded as appropriate, and appreciated, by others. An excellent example of this contrast is found in a study in Sweden (Kreuter, Sullivan, & Siosteen, 1994) where 49 people with spinal cord injuries (SCI) and their partners were administered an 80 item questionnaire on their quality of life. Over four-fifths of the partners considered their sexual relationship to be satisfying. Nearly half regarded their current sex life to be

as good as or even better than their sex life before the injury. The items they identified as important for this high degree of satisfaction were the varied repertoire of sexual expressions, the high degree of concern the SCI partner had for the able-bodied partner and a feeling of emotional closeness and mutual concerns. It would be a brave or foolhardy person who would argue that those couples had a sex life in any way inferior to people who are not physically handicapped.

Lack of professional appreciation of the issues of sexual health of paraplegics is a major concern of Mitchell Tepper, a strong advocate for the disabled. At the heart of his argument is the statement that “when we do not include a discourse of pleasure we perpetuate our asexual and victimization status” (Tepper, 2000, p. 288). What is most powerful about this assertion is that it could equally be applied to many other groups who are assumed to be asexual—the single or widowed or others who are not in a socially acknowledged partnership. The logic of Tepper’s argument is: don’t presume, don’t dismiss. As a generalization it is an attitude of tolerance that could be promoted in a wide range of social settings.

Sometimes the failure of the body may be less obvious, and more controversial, than the loss of sensation as a result of paraplegia. In the last decade the discussion of female sexual dysfunction has brought to the general public the issue of sexual dysfunction, but with a variety of reactions, from calls for better medication to overcome the problems, to dismissive comments that the claimed condition is imaginary and of marginal importance. The range of dysfunctions that are recognized by the medical profession would cast doubt on such cynicism. They include: hypoactive sexual desire disorder, sexual aversion, female arousal disorder, female orgasmic disorder, dyspareunia, and vaginismus, all of which are characterized by a lack or loss of pleasure in sexual relationships. In developed countries significant investment has been made into ways of treating these problems, and the use of various hormonal therapies has become popular in some communities. However, if a population perspective is applied on a global scale, there is no doubt that the disorders suffered

by women and men are grossly under-recognized and under-treated.

Of course there are some studies in developing country contexts that deserve recognition and replication. As mentioned above, Shokrollahi et al. (1999) modified some standard international questionnaires to apply to Iranian culture. They administered these to 300 female clients of family planning centers across Tehran. Over half the women were found to have “a conservative attitude toward sexuality,” but 51% reported that their overall sexual relationship was satisfactory. Still one-third of the women were found to have at least one identifiable sexual dysfunction such as inhibited desires, lack of lubrication, dyspareunia, or vaginismus. A “conservative attitude was associated with more sexual dysfunction” (Shokrollahi et al. 1999, p. 211). Importantly, reported spousal satisfaction was negatively associated with experience of sexual dysfunction, particularly lack of lubrication, and the woman’s failure to reach orgasm. The healthier women are less conservative and they have the happier relationships, though the direction of causality is not obvious.

Many People are Afraid of Pleasure, Particularly Other People’s Pleasures

Why is there a link between conservatism and pleasure? One way to see this issue is to reflect on the concept of pleasure as a gift, and a blessing. In the transaction that constitutes the sexual relationship there is a need for generosity of spirit if there is to be a real sharing of pleasure. Anxiety, fear, and jealousy are barriers to such generosity. It is difficult at both the personal and the social level to be generous if there is a simultaneous fear of loss—loss of self, loss of respect, or loss of connection. In recognizing the need for pleasure as a component of sexual health we are essentially arguing that people need to attain such generosity of spirit so as to support their sexual partners, and acknowledge a personal need for support in return. To promote this in practice we need to develop and teach the tools people can rely on to build such generosity of spirit, whether this comes through relationship education, self-awareness, or spiritual renewal.

RECOMMENDATIONS

Placing Individual Pleasure in Cultural Perspectives

If pleasure is an individual perception of a shared practice, the way in which individuals interpret their own experiences would seem to be paramount in considering the definition of sexual health. What is the position of culture—the norms, attitudes and programmed behaviors that bind individuals to large groups? The logic of freedom would say that culture has a very problematic position indeed. Certainly there are strong protective beliefs that people share across most cultures. The pursuit of individual desires should not harm others, adults have a responsibility to protect the interests of children, and the rights of individuals imply the responsibility to respect others' rights—as observed in the principle of civil equality. It would be rare to find an argument against these responsibilities on the grounds that they violate the rights of individuals to pursue their personal definitions of happiness. Instead the social contract would imply that such responsibilities are an integral part of the guarantee of individual rights. Without such protections, there can be no realization of the positive value of pleasure as a component of wellbeing.

The challenge is to define the balance between these responsibilities and the rights they protect. This is an area on which tolerant people may disagree and intolerant people might come to blows. Thus in the context of promoting sexual health it will be vital for advocates to create the venues and the environment for healthy discussion of issues surrounding the balance of rights and responsibilities related to sexualities. These must include, but not be limited to, the issues of gender, protection of children, sexual health services, cultural and religious norms, and the position of people whose sexuality is influenced by some form of physical or mental handicap. In essence this means that we need to face up to cultural constraints and bring disagreements out into the open to be evaluated in terms of the values and principles that we hold highest in the formation of our global humanity. This will be uncomfortable to those who look to time-honored

tradition, authoritarian religion, or narrow ideology for the foundation of their own self-esteem, but it may be a liberating process for those willing to expose themselves to the truths of others.

Awakening Personal Explorations of Pleasure

The PAHO Document on *Promotion of Sexual Health* (PAHO, 2000) contains a very useful set of perceived needs related to eroticism that are the foundation of a key recommendation for recognizing and promoting pleasure in sexual health. They are:

- Need for knowledge about the body, as related to sexual response and pleasure.
- Need of recognition of the value of sexual pleasure enjoyed throughout life in safe and responsible manners within a values framework respectful of the rights of others.
- Need for promotion of sexual relationships practiced in safe and responsible manners.
- Need to foster the practice and enjoyment of consensual, non-exploitive, honest, mutually pleasurable sexual relationships.

While these could be read as a justification for sex education in schools—or the more conventional notion of family life education—the more effective interpretation is to see this as a call for an awakening on a mass social, yet very personal, level. The three topics of knowledge, recognition and promotion are central to the attainment of better sexual health. So this recommendation is directed to all people, not just the “usual suspects.”

The challenge, though, is to develop mechanisms to encourage such a program of enlightenment. This does not mean a simple development of an advertising campaign or a handbook or a curriculum. Rather it requires a strategy to reach adults in their places of learning—whether it be the workplace, the houses of worship, or the neighborhoods and recreation venues. The aim is to open the mind to new ideas of respectful and egalitarian sexual relationships.

Education for the Billions

If pleasure is primarily in the mind, and if education is the key to forming the mind, then the first priority in the recognition and promotion of a better understanding of pleasure in sexual health must begin in the schools as the central formal sites for teaching the young. One of the most authoritative sources of information on comprehensive sex education is SIECUS (Sexuality Information and Education Council of the United States; see <http://www.siecus.org/>). In recent years this group, like many progressive American organizations, has been busy opposing the US government's ideologically driven abstinence based programs of sexual education and services. It would seem obvious that multicultural and multi-religious societies like the USA would need to address sexuality issues in a broad, non-judgmental way, but the power of ideology and particular religious beliefs has grown strong over the years, carrying with it the control over many local school programs and the policy arms of the national government. SIECUS works to promote a more progressive approach, and produces a variety of teaching materials in English and Spanish.

Another organization with a view of sex education that attempts to be comprehensive and non-ideological is the International Planned Parenthood Federation (IPPF; see <http://www.ippf.com/>). Through their member organizations in 180 countries the IPPF promotes both education and services, with a strong emphasis on the needs of adolescents. Groups such as the IPPF experience the many challenges of discussing sexuality issues in a cross-cultural framework. The Federation has a strong commitment to the principles of the International Conference on Population and Development (ICPD), including a rights-based approach to services, and a keen awareness of the gender dimensions of sexual health issues.

Zeidenstein and Moore's (1996) global perspective on sexuality opens many of the doors that are normally closed in conventional sex education discussions. Pleasure is related to a gender-based understanding of cultural differences. The potential for linking sexuality concerns with national family planning programs is

canvassed, and the need to address the problems of men as well as women, and homosexuality as well as heterosexuality, makes for a comprehensive approach. The challenge is to convert such radicalism into a reformist agenda that will be accepted around the world and adopted by national governments. This was the biggest disappointment of ICPD. While very progressive statements were made about gender and sexuality, by and large the implementation experiences of nations did not turn the policy statements into practical interventions. There has been slow progress on some fronts, but a current assessment would note that most of the inequities of 1994 remain with us. In part this is because the implementation plans were less than forthright, but to the degree that they broke new ground they often sparked backlashes from conservative forces. To meet the challenge of widespread acceptance a sexual health agenda must argue for more than DALYs saved or rights promoted, and imbue the discussion of sexual health with a palpable sense of benefit for all people, young and old, rich and poor, educated and uneducated. This will require a marshaling of evidence and logic that goes further than we have seen in health discussions to the present time.

CONCLUSION

Sexuality is an important, if intimate, part of life. Pleasure is a key element of the motivation for and major outcome of sexual behavior. These two propositions should be enough justification to include sexuality in the pantheon of components of personal wellbeing, along with food, housing, and security. Unfortunately there are many ways in which individuals' access to pleasure is curtailed. Social constraints, personal guilt or shame, physical disability, and confusion over proper relationships are all forces that affect women and men around the world. The commitment to open people's minds and their hearts to more pleasurable, equitable and healthy sexual relationships requires governments and social groups to overcome these constraints. The strategies for doing so will not be welcomed by all sectors of society, in part because the control of sexuality is an element of power relations

in authoritarian social groups. If we can work to promote sexual pleasure as a component of sexual health, it will also promote a key dimension of personal liberation.

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