

**World Association for Sexual Health (WAS)**  
**STRATEGIC PLAN OF ACTION**  
**2011 – 2017**

**THE VISION, MISSION AND LONG-TERM GOALS OF THE WORLD ASSOCIATION FOR SEXUAL HEALTH**

➤ **Vision Statement**

The World Association for Sexual Health (WAS) will be a leading global professional organization working in partnership with others to ensure sexual health and sexual rights for all.

➤ **Mission Statement**

The World Association for Sexual Health (WAS) promotes and advocates for sexual health and sexual rights throughout the lifespan and across the world by advancing the field of sexology, sexuality research, comprehensive sexuality education, and clinical care and services, all of these informed by evidence and scientific enquiry.

➤ **Sexual Health for the Millennium**

The World Association for Sexual Health (WAS) declares that the realization of sexual health and sexual rights is central to attainment of human wellness and well-being and the achievement of sustainable development, as outlined in the Millennium Development Goals.<sup>1</sup> WAS is committed to changing the approach from a problem-focused model to one that is affirming of sexuality as a positive part of the human experience. By fostering individual and social responsibility, advancing human rights and promoting equitable gender norms, improving sexual health and rights contributes to addressing many of the pressing issues of our day. Therefore we urge all governments, international agencies, private sector and academic institutions, society at large and, particularly, all member organizations of WAS, to work toward the following eight goals:

*1. Recognize, Promote, Ensure and Protect Sexual Rights for All*

Sexual rights are an integral component of basic human rights and therefore are inalienable and universal. Sexual health is an integral component of the right to the enjoyment of the highest attainable standards of health. Sexual health cannot be obtained or maintained without sexual rights for all.

*2. Advance Toward Gender Equality and Equity*

Sexual health requires gender equality, equity and respect. Gender-related inequities and disparities of power deter constructive and harmonic human interactions and therefore the attainment of sexual health.

*3. Condemn, Combat and Reduce all Forms of Sexuality Related Violence*

Sexual health cannot be attained until people are free from stigma, discrimination, sexual abuse, coercion and violence.

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<sup>1</sup> The Millennium Development Goals (MDGs) adopted by world leaders in 2000, set development goals in eight areas.

*4. Provide Universal Access to Comprehensive Sexuality Education and Information*

To achieve sexual health, all individuals, including youth, must have access to comprehensive sexuality education and sexual health information and services throughout the life cycle.

*5. Ensure that Reproductive Health Programs Recognize the Centrality of Sexual Health*

Reproduction is one of the critical dimensions of human sexuality and may contribute to strengthening relationships and personal fulfilment when desired and planned. Sexual health is a more encompassing concept than reproductive health. Current reproductive health programs must be broadened to address the various dimensions of sexuality and sexual health in a comprehensive manner.

*6. Halt and Reverse the Spread of HIV/AIDS and other Sexually Transmitted Infections*

Universal access to effective prevention, voluntary counselling and testing, comprehensive care and treatment of HIV/AIDS and other STI are equally essential to sexual health. Programs that assure universal access must be scaled up immediately.

*7. Identify, Address and Treat Sexual Concerns, Dysfunctions and Disorders*

Since sexual concerns, dysfunctions and disorders all have an impact on quality of life, general and sexual health; they should be recognized, prevented and treated.

*8. Achieve Recognition of Sexual Pleasure as a Component of Well-being*

Sexual health is more than the absence of disease. Sexual pleasure and satisfaction are integral components of well-being and require universal recognition and promotion.

## **GOALS AND STRATEGIC AREAS FOR ACTION FOR 2011 - 2017**

From July 2011 to July 2017 WAS will work in the following strategic areas in order to accomplish its mission in the long term:

1. Advocating for sexual health and sexual rights
  - Goal: Achieve changes in public policies and social norms that foster sexual health and advance sexual rights.
2. Developing the field of sexuality, sexual health and sexology
  - Goal: Gain expanded recognition and professionalization of the fields of sexuality, sexual health and sexology.
3. Facilitating the dissemination and exchange of information, ideas and experiences
  - Goal: Reach expanded and diversified audiences with comprehensive and gender-sensitive knowledge about sexuality, sexual health, and sexual rights, informed by evidence and scientific enquiry.
4. Strengthening the organization
  - Goal: Build the reach, presence, visibility, influence and efficiency of WAS.

Under each long-term goal, WAS has identified specific lines of action – or strategies – that we will pursue in order to achieve those goals and fulfil our mission. Under each line of action,

WAS has established objectives for the six year period and expected outcomes to be attained by the end of the next two years.

➤ **Strategic Area 1: Advocating for Sexual Health and Rights**

The goal of our advocacy work is to achieve changes in public policies and social norms that foster sexual health and advance sexual rights. In the following six years, we will pursue the following lines of action toward this long-term goal:

**a) Identify, strengthen, and expand strategic partnerships with relevant international, governmental and nongovernmental organizations, including joint programming and co-sponsorship of effective activities, programs, meetings.**

Objectives by 2017:

- WAS is working in partnership with leading international organizations to influence public policies and social norms, including International Planned Parenthood Federation (IPPF), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Population Fund (UNFPA), the World Health Organization (WHO), and the Pan-American Health Organization (PAHO), among others.
- WAS maintains its formal official relations status with WHO and is building on previous collaborative work on sexual health and rights. By 2017, this collaboration includes refining concepts, developing indicators and participating in research, as well as continuing WAS representation on WHO advisory bodies and serving as technical consultants.

Outcomes within next two years:

- WAS has acquired consultative status with United Nations Economic and Social Council (ECOSOC), strengthened its links with WHO and PAHO, increased collaboration with the IPPF, and established formal relationships with UNESCO and UNFPA. Collaboration with UNESCO includes working with the UNESCO Sexual Health Chair.
- WAS has a clear picture of the international institutional terrain and has identified and prioritized other nongovernmental organizations with which we intend to work over the six year period. These organizations include research, academic, advocacy groups and those that can advance our effectiveness with specific populations, including youth, women, people of diverse sexual orientations and gender identities, and those living with disabilities, chronic diseases and HIV.

**b) Achieve greater recognition among public health, reproductive health and HIV organizations, both governmental and nongovernmental, of the role of sexual health and gender equality for improving health and quality of life.**

Objective by 2017:

- Sexual health is integrated into the work of key international actors working in health, due in part to the work of WAS.

Outcomes within next two years:

- WAS has a clear picture of organizations and opportunities with the greatest potential for integrating sexuality into other health concerns, and has established priorities among them.
- A funding mechanism supports members to act on behalf of WAS at important meetings and conferences, for example, those on women's health, sexuality research, HIV/AIDS, sexuality education and other relevant fields.

**c) Achieve greater recognition of sexual rights as a basic human right among public health, reproductive health and HIV organizations, both governmental and nongovernmental.**

Objective by 2017:

- Major public health, reproductive health and HIV organizations recognize and support sexual rights, using WAS documents as essential references and tools.

Outcomes within next two years:

- The sexual rights declaration of WAS is reviewed and a technical document is developed to argue for sexual rights as a human right.
- This technical document is approved at the WAS World Congress in Rio de Janeiro in 2013, guides the use of the WAS sexual rights declaration, and is being used by other organizations.

**d) Facilitate the development, implementation and sustainability of national comprehensive sexuality education programs, based on principles of human rights and gender equality, in all regions of the world.**

Objectives by 2017:

- WAS contributes, through partnership with WAS members and other key actors (e.g. ministries of health and education), to the establishment of national sexuality education programmes in at least three countries.
- Five countries that are implementing comprehensive national sexuality education programs are utilizing the WAS International Standards of Practice for Sexuality Educators and Sexual Health Promotion<sup>2</sup>, and other technical guidance from WAS.

Outcomes within next two years:

- WAS identifies five countries where, through partnership with WAS members and other key actors (e.g. ministries of health and education), we see promising opportunities to help establish national sexuality education programs.
- WAS has identified tools and mechanisms for building or strengthening national sexuality education programs.

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<sup>2</sup> See WAS website at <http://www.worldsexology.org/sites/default/files/standardseducation.pdf>.

- The WAS website offers educational tools that are being used by national organizations for the development of national sexuality education programs.

e) **Provide training in advocacy to WAS members.**

Objective by 2017:

- WAS offers advocacy workshops at regional federation meetings and global conferences on an on-going basis, as well as an on-line advocacy training program.

Outcomes within next two years:

- The WAS advocacy training manual, currently being developed in Spanish by WAS in partnership with PAHO, is available in English and French.
- WAS conducts advocacy education at all regional meetings, plus the Middle East, using this opportunity to prepare other educators.
- Each region has at least two WAS advocacy educators.

f) **Promote concepts of sexual health and rights informed by evidence and scientific enquiry and advocate for rights among the general population.**

Objective by 2017:

- Eighty per cent of the more than 50 countries where WAS has members celebrate “Sexual Health Day,” with public recognition by government and major media in 25 per cent of those countries. (Sexual Health Day, successfully launched in 2010, fosters discussion of sexual health and sexual rights, in order to change the tone of the discourse to one that is rights-based and positive, and to influence policy-makers and opinion-makers.)

Outcomes within next two years:

- WAS provides a template in multiple languages to WAS members and other partners who want to implement Sexual Health Day in their countries.
- Sexual Health Day is celebrated in 40 countries, and mentioned in the media in at least 50 per cent of those countries where it is celebrated.

➤ **Strategic Area 2: Developing the Field of Sexuality, Sexual Health and Sexology**

The goal of this area is gain expanded recognition and professionalization of the fields of sexuality, sexual health and sexology. In the following six years, we will pursue the following lines of action toward this long-term goal:

a) **Disseminate widely and encourage adoption of the WAS Guiding Ethical Principles and the WAS minimum standards for the qualification of professionals in sexuality-related professions.**

Objective by 2017:

- The regulatory bodies of a specific number of countries and professional organizations (the target number to be determined by mapping the possibilities)

follow WAS ratified International Professional Standards<sup>3</sup> of Practice, as well as recognizing WAS Ethical Guidelines.

Outcomes within next two years:

- All WAS partners and members are aware of the Standards and many use them in their work.
- WAS Standards and Ethical Guidelines are up-dated, translated into Spanish, French, Portuguese and Farsi, and are promoted in the WAS Journal and website.
- WAS has identified other relevant opportunities for sharing our Standards through professional publications and linking to other web sites.

**b) Establish guidance for developing and strengthening diverse educational curricula in order to contribute to achieving WAS minimum standards for the qualification of professionals.**

Objectives by 2017:

- Universities and training institutions use WAS guidance for the development and implementation of curricula in at least five areas of professional education and research: counselling and psychotherapy; education and health promotion; medicine; anthropology and sociology.
- WAS has a tool or approach for evaluation of the impact of our curricular guidance.

Outcomes within next two years:

- WAS guidance for at least two of the areas of professional education are available and translated into a minimum of two languages other than English.
- WAS has mapped the universities and training institutions that we most want to reach with the curricular guidance.
- WAS begins to develop approach or tool for evaluation of the impact of our curricular guidance.

**c) Clarify the definition, dispel misunderstandings and improve the reputation of the field of sexology in academia, the media and with professional organizations.**

Objective by 2017:

- The WAS definition of sexology is utilized by major universities and professional organizations around the world.

Outcomes within next two years:

- WAS maps the audiences and institutions to be reached with our definition of sexology.
- The definition is translated into X (TBD) major languages.
- The definition is published in our own journal and on our website, as well as available through web links and other publications.

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<sup>3</sup> See WAS website <http://worldsexology.org/resources>

**d) Assist in the creation and development of new Sexology and Sexual Health associations in all regions.**

Objective by 2017:

- A WAS manual for the establishment of associations of sexology is disseminated widely.

Outcome within next two years:

- WAS assesses the need for the manual and best ways to develop it.

**e) Develop a clients' Bill of Rights**

Objective by 2017:

- The WAS "Clients' Bill of Rights" is widely available and is a reference for clients of sexuality therapists, clinicians and educators.

Outcome within next two years:

- Over the next two years, a "Clients' Bill of Rights" is drafted and presented at the WAS World Congress in 2013.
- The Bill of Rights is ratified by the General Assembly.

➤ **Strategic Area 3: Facilitating the Dissemination and Exchange of Information, Ideas and Experiences**

The goal of this area is to reach expanded and diversified audiences with comprehensive and gender-sensitive knowledge about sexuality, sexual health, and sexual rights, informed by evidence and scientific enquiry. In the following six years, WAS will pursue the following lines of action toward this long-term goal:

**a) Organize high quality global meetings.**

Objective by 2017:

- Cost-effective and well-attended global meetings are organized on a regular basis by WAS, contributing to expanded knowledge and information exchange and building the field.

Outcome within next two years:

- WAS determines alternative models to the current world congresses, starting with a survey of participants in the 20<sup>th</sup> World Congress on Sexual Health (WCSH) in July 2011.
- Initial changes are instituted for the 21<sup>st</sup> WCSH, to be held in Rio de Janeiro in 2013.
- For the 22<sup>nd</sup> WCSH, an alternative model (or models) is (are) piloted.

**b) Communicate critical information about global developments in sexual health.**

Objectives by 2017:

- The WAS website is a major source of information on sexual health and sexual rights.
- WAS has adequate staffing to manage the website and other major information channels, such as social networking.

Outcomes within next two years:

- The WAS website provides important and reliable sources for obtaining information on developments in sexuality, sexual health and sexual rights.
- WAS expands use of social networking (Facebook, Twitter, etc.) for disseminating information.

**c) Communicate and disseminate information about research in sexuality.**

Objectives by 2017:

- WAS has a database that provides up-to-date information on sexuality research, becoming the principal source for scholars and activists.
- The WAS official journal has an impact factor (IF)<sup>4</sup> of at least 3.

Outcome within next two years:

- Over the next two years, WAS finds the best ways to develop and sustain a database of sexuality research, and creates a plan for using it.

➤ **Strategic Area 4: Strengthening the Organization**

The goal of this area is building the reach, presence, visibility, influence and efficiency of WAS. In the following six years, we will pursue the following lines of action in pursuit of this long-term goal:

**a) Increase and strengthen membership (organizations, individual, student, etc.) in diverse regions of the world.**

Objective by 2017:

- The organizational membership of WAS has grown from 117 to 150.

Outcomes within next two years:

- The database of members is up-dated.
- WAS strengthens the membership committee.
- WAS develops new categories and criteria for membership.
- The World Congress and Sexual Health Day are used to find new members and to expand membership.
- Explore and expand use of social networking (Facebook, Twitter, etc.) for member recruitment.
- WAS launches a new membership campaign.

**b) Expand WAS membership among young professionals and advocates.**

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<sup>4</sup> Impact factor is a measure reflecting the average number of citations to articles published in a journal.



Objectives by 2017:

- WAS has a system for reaching and mentoring young people, and youth are engaged in all aspects of WAS (governance, policy-making and activities).
- WAS holds a consultation on sexual health and youth, in partnership with youth-led or youth-focused organizations.

Outcomes within next two years:

- Build the new youth committee of WAS.
- Explore the possibility of a student membership category and outreach to student groups.
- WAS maps youth-led or youth-focused organizations with whom to collaborate.
- Young people become involved in WAS through Sexual Health Day and the World Congress.

**c) Improve clarity and functioning of WAS committees (statutory and *ad hoc*) and increases the active participation of all committee members.**

Objective by 2017:

- The WAS committee structure is working well. Toward that end, improved mechanisms (e.g. on-line training courses and systematic mentorship) serve to increase motivation, accountability and responsibility of committee members.

Outcomes within next two years:

- The committee structure is brought into line with the new strategic plan.
- The pipeline of hard-working and responsible people for future WAS committee membership is expanded.
- All WAS committee chairs follow the committee terms of reference (ToR).

**d) Improve relationships with the regional federations.**

Objective by 2017:

- WAS continues to develop good partnerships with the regional federations.

Outcome within next two years:

- WAS works with the regional federations to clarify and to strengthen their working relationships.

**e) Increase and modernize internal communication (e.g. web conferencing).**

Objective by 2017:

- WAS uses social networking and information technologies to improve internal communication and to reduce costs.

Outcomes within next two years:

- A listserv is created and is managed efficiently.

- WAS better utilizes existing forms of communication, such as the WAS President's Occasional Bulletin and the Newsletter.
- The use of Facebook is expanded and Twitter is being used.
- WAS starts to use web-based conferencing for internal communications and decision-making.

**f) Create infrastructure support.**

Objective by 2017:

- WAS has acquired sufficient revenue to carry out the work encompassed in this six-year plan.
- The necessary infrastructure for efficient and cost-effective functioning is established.

Outcomes within next two years:

- The new strategic plan is reviewed and priorities for funding are identified.
- Analysis of the budget requirements to carry out plan is done, e.g. looking at costing for the minimum infrastructure (salary for an administrator or director, funds for travel by WAS members to carry out advocacy and educational activities, and money for communications, materials development and dissemination and the website).
- Potential donors (private foundations, corporate sponsors, bilateral and multilateral donors and individual contributors) are identified, as well as other sources of income, such as increased contributions from members and participants in the World Congresses.
- A decision is made on whether to hire a fundraising consultant.