What is self-care?

The World Health Organization (WHO) defines self-care as the ability of individuals, families and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a health worker.

What are self-care interventions?

Self-care interventions are evidence-based, quality medicines, devices, diagnostics and/or digital products which can be provided fully or partially outside of formal health services and can be used with or without the direct supervision of a health worker.

Ensuring continuity of access to health services

- It is estimated that there will be a shortage of 10 million health workers by 2030, mainly in low- and middle-income countries.
- Over half of the world’s population lack access to essential health services.

During humanitarian crises or emergencies, including pandemics, routine health services are disrupted and existing health systems can be over-stretched.

For certain health services, incorporating self-care interventions can be an innovative strategy to strengthen primary health care, improve universal health coverage (UHC) and help ensure continuity of health services that may otherwise be disrupted due to humanitarian emergencies or lack of access to health-care facilities or health workers.

WHO guideline on self-care interventions for health and well-being

In 2022, WHO revised the global normative guidance on self-care interventions for health and well-being, with each recommendation based on extensive consultations and a review of existing evidence.
**Sexual health**

- WHO’s working definition describes sexual health as a “state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity”

- Sexual health requires a positive and respectful approach to sexuality and sexual relationships, and the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.

- Achieving and maintaining sexual health and well-being requires: access to comprehensive, good-quality information about sex and sexuality; knowledge about possible risks of unprotected sexual activity; ability to access quality sexual health care; living in an environment that affirms and promotes sexual health.

- Sexual health cannot be achieved and maintained without respect for, and protection of, certain human rights, which include, among others, the rights to information and education; the rights to equality and non-discrimination; and the rights to the highest attainable standard of health (including sexual health) and social security.

- Sexual health has relevance for all people across the life course, as their needs evolve and change.

**Lubricants**

- Lubricants (also called personal lubricants) are usually liquid gels that can be used by individuals during sexual activity.

- A variety of lubricants in sachets or bottles are generally available without a prescription from health-care facilities, pharmacies and drug stores.

- There are many reasons that people of all ages, gender identities and sexual orientations may opt to use lubricants, including to enhance the ease and comfort of intimate sexual activities, such as vaginal or anal sex.

- Lubricants, including topical vaginal lubricants (for use during sexual activity), are listed as interventions for “care of sexual functioning and well-being” for people starting in later adolescence/early youth (15–19 years) through until later adulthood (age 65 and older), in WHO’s UHC Compendium, a database of evidence-based strategies and health services that are designed to assist countries in making progress towards UHC.

- Lubricants play a role in sexual and reproductive health and rights (SRHR) and are relevant to the efforts of countries to achieve the United Nations Sustainable Development Goals, to implement the International Conference on Population and Development (ICPD) Programme of Action, and to meet targets to end the AIDS epidemic and eliminate HIV and other sexually transmitted infections (STIs) by 2030.

A systematic review of peer-reviewed literature that informed the inclusion of lubricants in the WHO guideline on self-care interventions identified some of the many reasons why individuals liked or chose lubricants, as listed in the figure below.

- reduced dryness, pain, discomfort
- increased pleasure (for themself or their partner)
- a partner’s preference, more fun, curiosity
- reduced risk of tearing the vulva/vagina/anus
- easier to feel aroused, increased readiness for sex, reciprocity
- reduced chance of condoms drying out/breaking, and making condom use more enjoyable
IMPORTANT:
• The provision of lubricants is an important component of sexual and reproductive health services to support sexual health and well-being. This includes contributing to the prevention of STIs, including HIV.

Lubricants, on their own, do not protect against STIs, including HIV, or unintended pregnancy. Correct and consistent condom use is recommended to prevent exposure to STIs. Condoms and a variety of contraceptive methods can prevent unintended pregnancies.

Types of lubricants
• Lubricants can be water-, oil- or silicone-based. There are many different lubricant formulations – users should select one that meets their needs.

Oil-based lubricants should not be used with condoms as they can cause breakage and slippage. Many condom manufacturers supply a range of water-based or silicone-based lubricants, which are condom-compatible.

Although some people may use household products – such as cooking oils and body lotions – as lubricants for personal use, some have a damaging effect on latex and should not be used with natural rubber latex condoms, including the following:

- dairy butter
- cooking oil
- fish oil
- palm or coconut oil
- baby oil
- mineral oil
- suntan oil
- burn ointment
- haemorrhoid cream
- petroleum jelly (Vaseline)
- body/hand lotions

Satisfying, effective and safer – what the evidence tells us about lubricants
• Evidence has shown that lubricant use is associated with improved female sexual well-being, including sexual pleasure and sexual satisfaction, as well as reduced sexual pain and discomfort.

• Lubricants may also be helpful for individuals experiencing vaginal dryness associated with menopause.

• Lubricants have been associated with lower pain during insertive and receptive anal sex, as well as significantly lower condom breakage rates during anal sex.

• The correct and consistent use of condoms with condom-compatible lubricants is a health intervention that has been demonstrated to have a direct preventative impact on STIs, HIV and viral hepatitis among key populations.

WHO recommends making lubricants available for optional use during sexual activity, among sexually active individuals.

The correct and consistent use of condoms with condom-compatible lubricants is recommended for all key populations to prevent sexual transmission of HIV and STIs.

Recommendations

Information and support for the use of lubricants
Accurate and clear information should be provided on how lubricants can facilitate improved sexual health and well-being, including how they can reduce sexual pain and provide improved comfort, safety and sexual pleasure. Health and care workers can help clients to see lubricants as relevant to their sexual health and well-being across the life course, including before and after reaching menopause and following cancer treatment, for example.
Current challenges to health systems providing lubricants

- Accessibility, availability and affordability of lubricants varies across settings, and prevailing social and gender norms pose additional challenges for access and use, especially in rural settings\(^7\).

The role of supportive health systems

- **Quality products:** In settings where condom-compatible lubricants are not available, people may resort to using oil-based products that are not safe for the body and can cause damage to latex condoms\(^6\). Having quality lubricants available within health-care facilities as essential products, along with condoms and other contraceptives, will be critical to facilitate access to lubricants and to foster improved sexual health and well-being of the population, including during pandemics like COVID-19\(^{11}\).

- **Policy and regulatory frameworks:** Relevant regulatory agencies should ensure that quality products are available in adequate quantities and are part of essential commodity security plans\(^1\). Sexual and reproductive health policies should be reviewed and adapted to include services and commodities that are relevant to sexual health and well-being, such as lubricants.

- **Enabling access to personal lubricants:** Lubricants are already widely available in many countries, especially in the private sector, including at private pharmacies and grocery stores. The cost of lubricants is generally borne by the end-user through out-of-pocket payments. More could be done to ensure that condom distribution programmes include free lubricants. Additionally, lubricants should be seen as facilitating sexual health and well-being for all sexually active individuals, not just for those of a certain age or gender or for those engaging in specific sex acts.

References


