Dear AOFS Colleagues,

Many of you have already hosted AOFS and other professional conferences and meetings and you know the work involved in the preparation.

SAS has started on the journey for our next conference with choosing the date and the venue. We will have 4 full days with Sunday free to continue your holiday in Australia or return home ready for the next working week. We will be holding 4 full days of symposia and talks.

Brisbane is a beautiful dynamic city and the hotel/conference centre we have chosen is situated right in the heart of the city with easy access to all its amenities and a large range of accommodation options within easy distance. The Mercure Hotel offers us an intimate professional venue which we hope will enhance everyone’s experience of this conference. We already have ideas for a fun social program.

However, as President of the 13th AOFS Congress I ask you to start thinking of the intellectual material you would like to bring to Brisbane to share with your colleagues. What research has been done in your country that you would like disseminated among colleagues in other countries? What clinical experience have you had that you would like to share? On the other hand, what information or knowledge would you like to be presented at this conference for your professional development? Please let us know so we can deliver content that meets your needs.

All conferences work best with the enthusiastic participation of as many members as possible. I ask that we all work together for the growth of AOFS and our growth as sexologists.

With warm regards

Margaret Redelman, M.D., MPsychotherapy
President 13th AOFS Congress
**Dr Narayana Reddy was awarded the Lifetime Achievement Award**

The Tamilnadu Dr.MGR Medical University, Chennai has conferred the "Lifetime Achievement Award" on Dr Reddy. The award was presented on Friday 23rd November 2012, during the Silver Jubilee Celebrations of the Medical University. The Governor of Tamilnadu (a province in India) who is the Chancellor of the University presented me with the citation.

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**CSEPI Conference, Hyderabad, 23-25 August 2013**

Council of Sex Education and Parenthood International (CSEPI), the premier Sexology Association in India will be holding its 29th National Conference at Hyderabad, India on the 23rd, 24th & 25th August 2013.

There will be three workshops to be conducted by:

- Barry McCarthy - USA
- Sara Naserdeh - USA
- Margaret Redelman - Australia

The conference website www.sexconindia.com will be regularly updated with information.

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**REQUEST FROM THE EDITOR**

IF YOU HAVE READ AN INTERESTING ARTICLE PUBLISHED IN OUR REGION OR HAVE HELD OR PLAN TO HOLD AN INTERESTING MEETING PLEASE SEND INFORMATION TO THE EDITOR SO WE CAN GROW THIS NEWSLETTER AND MAKE IT RELEVANT FOR THE REGION.

IF YOU WOULD LIKE TO HAVE YOUR COUNTRY FEATURED IN THE NEWSLETTER PLEASE LET THE EDITOR KNOW.
Featured country : Hong Kong

Hong Kong Sex Education Association

The Association was founded by Dr. Emil M.L.Ng and his colleagues from various disciplines in 1985. It was the first association in the world for Chinese communities dealing with sexual health and education. Its activities have included:

Local Activities
- Periodic courses/seminars/workshops for the training of doctors, psychiatrists, nurses, etc. with the Hospital Authority, Hong Kong
- Collaborating with the HK Government Education Bureau in producing the Sex Education Guidelines for Schools in 1986 and 1997.
- Collaborating with the School of Professional and Continuing Education, University of Hong Kong in running the Postgraduate Diploma in Principles of Sex Counseling and Therapy, and the Postgraduate Diploma in Principles of Sex Education
- Assisting Radio Television Hong Kong in producing a sex education drama series for public television broadcasts (a total of 12 series up to now). Many of the episodes have received international awards.
- Advising government policies on sex
- Organizing public sex education shows and exhibitions such as the Sex Cultural Festivals. A total of six up to now.

International activities:
- Society member of WAS, AOFS, WACS (World Association of Chinese Sexologists)
- Regular consultative work for WHO, WAS, the Magnus Hirschfeld Archive for Sexology and the Humboldt University, Germany.
- Organized the Certificate Course in Sex Education with Millennium College, Macau.
- Collaborated with the Graduate School of Human Sexuality, Shu-Te University, Taiwan in offering a sex education course on the web for Masters of Human Sexuality.
- Organized the Certificate Course in Sex Education with Millennium College, Macau.
- Organized, in Collaboration with the Centre of Asian Studies, the University of Hong Kong, the 1st Asian (AOFS) Conference on Sexuality 1990.
- Hosted the 14th World Congress of Sexology (WAS 1999)

Other Organizations/Groups in Hong Kong working on matters related to sex education and sexual health

On AIDS
- Hong Kong AIDS Information Network
- Hong Kong AIDS Foundation
- Aids Concern
- TeenAids
- Red Ribbon Centre, Health Department of HKSAR Government

On Family Planning
- Hong Kong Family Planning Association

On Gender Equality/Women Rights
- Equal Opportunity Commission
- Women’s Commission, Government of Hong Kong
- Hong Kong Association for the Survival of Women Abuse,
- Hong Kong Women Workers' Association,
- Hong Kong Women's Coalition on Equal Opportunities,
Other Organizations/Groups in Hong Kong working on matters related to sex education and sexual health continued:

On Homosexual rights:
- Hong Kong 10% Club
- Rainbow of Hong Kong
- Rainbow Action
- Pink Alliance
- Tongzhi Community Joint Meeting of Hong Kong

On Prostitution rights
- Zi Teng
- Action For Reach Out
- Midnight Blue
- Youth Sex Education
- Mother’s Choice
- Education Television Online, Radio-Television Hong Kong

On General Sex Education and Sex Therapy
- Hong Kong Association of Sexuality Educators, Researchers & Therapists

On Sexual Violence
- End Child Sexual Abuse Foundation
- Against Child Abuse (Hong Kong)
- Association Concerning Sexual Violence Against Women

Christian Groups:
- The Society for Truth and Light
- Hong Kong Sex Culture Society

Profile of Professor Emil M.L. Ng

Honorary Professor and Associate Director, Hong Kong University Family Institute.
Formerly Professor of Psychiatry, University of Hong Kong.

Professor Ng received training in psychiatry in Maudsley Hospital, University of London, UK in 1976-77. Subspecialty training in sex therapy and psychotherapy of the psychoanalytic type. Research and publication interests have been on these subspecialties. Has authored or co-authored more than 20 Chinese books, 7 English books and 100 papers on these topics.

He served as the Course Coordinator of the Human Sexuality Course in the Faculty of Medicine, University of Hong Kong; the Head of the Sex Clinic, Queen Mary Hospital, Hong Kong and trainer on psychotherapy and sex therapy for psychiatric trainees.
He was the founding President of the Hong Kong Sex Education Association (1985) and Asian Federation for Sexology (1990). He was President of 14th World Congress of Sexology (1999). He has been a Consultant in various local, international governmental and non-governmental organizations, including Harmony House (HK), Family Planning Association of Hong Kong, and the World Health Organization. He is a recipient of the "Sexologist of Asia" award from the Asian Federation for Sexology (1994) and the "Gold Medal in Sexology" from the World Association for Sexual Health (2003).

Although a harsh critic of the monogamous marital system prevalent in our modern societies and a firm supporter of a pluralistic system, he has been happily married with his one and only love and sex partner for over 40 years. For their 40th wedding anniversary, he published his love letters from Hong Kong to his wife in Vietnam during the period 1989 to 1972, when they could meet for the first time and for one week only in 1971 in Vietnam. The book has become a popular book in China as a live demonstration and education material on how love-sex relationships should be taken care of as one’s life vocation.
Selected sexology publications:

- Pei YX, Ho SYP, Ng ML (2006) Studies on women’s sexuality in China since 1990: a critical review. The Journal of Sex Research, 44:2, 202-212
Advances in Chinese sexual science

By Professor Peicheng Hu M.D, Past president of AOFS

A comprehensive introduction to the general situation of Chinese Sexology Association (CSA) and the Chinese Journal of Human Sexuality.

There are two important points:

1. Chinese human sexuality has a long history, about 5 thousand years and a short period of modern developments, maybe 3 decades.

2. Chinese people are still controlled by feudal ideas. This means that there are many rules affecting sex in China although Chinese sexual experts are making big efforts to promote sexual science.

This presentation comes from my work as the former General Secretary of CSA (1999 to 2008) and the Chief-editor of the Chinese Journal of Human Sexuality (2010 to 2013).

The CSA was established in 1986. But government registration by the Civil Affairs Ministry did not happen till 1994. Now there are six thousand registered members. There are 8 branches: Sexual Medicine, Psychology, Culture, Sexuality Education, Young Sexuality Education, Sexual Chinese Medicine, Mass media focus on sexual science and Sexually Transmitted Diseases.

Now, I will talk about basic research and clinical work in sexual science, mostly in the direction of sex therapy and sexual psychology.

1. Basic research of sexual science

1.1 A series of sexual science books were translated from foreign languages, mainly English into Chinese.

It was very important for Chinese professionals to understand what was happening in the world. Professor Peng Xioahui had already translated one of the best websites of Dr. Haeberle in Germany into Chinese. I organized professors and students to translate a series of books: “The Science of Orgasm” written by Barry Komisaruk, Carlos Beyer-Flores, and Beverly Whipple; “Exploring the dimensions of Human Sexuality” written by Jerrold Greenburg, Clint Bruess, and Sarah Conklin into Chinese.

1.2 Using medical equipment to explore the sexual science of human being.

What is the rhythm of sexual desire during monthly menses for females is still controversial. In order to find the answer, we used fMRI on young female subjects looking at different photos including sexually arousing pictures (international standard). Our results showed that during the monthly menses there is a period of lower desire for sexual activity at ovulation time. This result was published in the Journal of Behavioral Brain Research. “Brain activation evoked by erotic films varies with different menstrual phases: An fMRI study” <Behavioral Brain Research> (ISSN 0166-4328) Xun Zhu (my PhD student), 2010 (January): Vol. 206(2); pp 279-285 (SCI: IF:3.22).
This result was also reported in the newspaper of Health and different Chinese mass media and became the fourth greatest news from Peking University. This strong response occurred because the finding was very different from the traditional ideas.

1.3 Several interested research experiments in sexual science

1.3.1 Pain and sexual psychology

We put ice and water into a bucket so the temperature was nearly 0°C. There were two very attractive university students: one male and one female as the examiners. Eighty volunteer university students were divided into 4 groups, each group 20 students, two groups were female and two groups were male. We asked the 80 students put one hand into the icy water in front of the beautiful examiner. The results showed that the male students tolerated the cold water for longer periods in front of the beautiful girl. There were no differences for females in front of a male examiner with other groups. This experiment showed that boys like to appear brave before beautiful girls.

1.3.2 The male and female sexual arousal experiment

Sexual arousal is a sensitive topic in sexual science. We selected 24 subjects, 12 female and 12 male. We asked them to watch three sections on a DVD. The first part was a nature scene (15 minutes), the second part a humorous essay (15 minutes) and the third part was a couple making love (20 minutes). A wire was attached to the surface of the genitals to detect temperature change. The temperature was automatically collected. The results showed that under sexual stimulation, male and female subjects’ genital organ temperature increased. The difference was statistically significant. The males’ penis temperature rose higher than females’ genital temperature. (Journal of Chinese Human Sexuality: Vol.15, No.11, p15-17)

1.3.3 The research of body smell preference

What is the reaction to the opposite sex’s body smell? We selected 40 boys and 42 girls. The average age was 20.2 years old. They were all university students. We asked 3 boys and 3 girls to wear 6 T-shirts for 42 hours each. The 6 T-shirts were put into 6 bottles with the armpits on the top. We asked the 82 boys and girls to smell the T-shirts, in the 6 bottles without telling them which were male or female T-shirts. They were asked which T-shirt had the better smell? After a 5 second smell, they preferred the smell of the opposite sex’s T-shirts (64% male and 59% female).

This experiment suggests the presence of a pheromon. (“The Journal of Chinese Sexuality”, Vol.13, No.10, p8-9)

2. About the clinical research in Sexual Science

We opened the first modern formal outpatient department for psychological counseling and psychotherapy (this is a new term to Chinese people) in China in the 1980’s (in Xian, Guangzhou and Beijing). We set up a formal sex therapy clinic in the 1990’s (Beijing, Chongqing and Shenzhen).

2.1 Survey in the sexual health and sexual cognition to female

In order to know the real sexual situation in China sexual sociology research needed to be conducted. Professor Liu Dalin and Professor Pan Suiming collected 20 thousands cases at the Research Center of Sexual Sociology established 30 years ago. One of their questionnaires consisted of 16 questions about sexual knowledge, attitudes and communication. We selected 180 women from two areas in China to answer these questions in 2005.

The results showed 75% women were against masturbation. This result shows that China is still a conservative country.
2.2 A questionnaire of quality of sexual life for Chinese adult males and females.
After 5 years of effort by 4 doctoral and master degree students, and some of professors, we created an assessment tool. The tool was trialed on the “Sina” website to a million adults. We have the patent right of this software in China. (The Journal of Chinese Mental Health Vol. 22, No.6, p447-450, 2008 and The Journal of Chinese Behavior Medical Science Vol.16, No.8, p750-752, 2007)

2.3 American Sex therapy introduced into China
From the end of the 20 century and the beginning of 21th century, we invited several well known sex therapists from USA such as Professor William Granzig to give the lectures, speak at conferences and participate in master degree courses. More than 200 Chinese medical doctors and clinical psychologists attended these training programs and got certificates as sex therapists. Some of gained the American AASET and ABS. These training programs were very influential to the development of Sexology in China.

2.4 The first outpatient department for teenagers was set up in China in 2002
With the aid of the American Ford Foundation, the first outpatient department for teenager’s sexual problems was set up in the 2nd Beijing Hospital in 2002. I was the chief adviser and psychotherapist for this program. It was free for teenagers from all over the country to receive counseling. We received more than 5000 calls and 1000 cases were treated in one year. This program lasted for 5 years and was widely reported in the Chinese media. This program achieved a good reputation and promoted the development of sexuality education in China.

3. Writing books, giving lectures, training students to promote the popularity of Sexual Science
3.1 Writing and editing books about sexual science were important in our Association
Writing and editing books are important to promote the development of sexual science. From 1980’s more than 1000 books focused on sexual science were written or edited by Chinese experts. For example “Sexual Medicine” in 1982 by Wu Jieping, “Youth and Sex” (1994), “Sex Analysis” (2004) and “Sexual Encyclopedia” (1998).

3.2 Sexual health courses were offered to Chinese students in universities and middle schools
Sexuality education in China is a big problem. Since 1988 the Chinese government supports sexuality education from 3 ministries. However, the situation is not uniform or consistent in all schools. As the experts in the field of sexual science we are invited to give lectures in schools but not every school has regular courses for young people.

3.3 Training the master and doctoral students in sexual science
From the end of 20th century, some universities have a program for training postgraduate students in sexual health, including sex therapy, sexual counseling and sexual assessment (e.g. Huazhong Normal University, Beijing Medical University). Dr. Zhen Hongli headed a successful program and was welcomed by the hospitals and society.

3.4 To do TV shows, Radio programs, website services and so on to spread sexual health knowledge
On radio and TV programs, sexual health is one of the hot topics in China. From the 1980’s, Chinese experts were invited onto radio and TV shows to give talks, and answer different questions. For example The BTV-3, “Life, love and sexuality” program, Tianjin “Qiaoqiao Hua” and so on.
In 2005, I announced on CCTV-1 that there were 5 million male homosexuals in China. It was a surprise to the Chinese population. In 2008, I presented a case of transsexualism on CCTV-2. This was also a shock to the Chinese public.
4. The work of The Chinese Journal of Human Sexuality

I am the forth chief-editor of the Chinese Journal of Human Sexuality (established in 1992). It is the only journal about sexual science in China. Through our efforts, in 2012, our journal finally became a key journal. In this journal, we have many items such sexual medicine, sexual health, sexual psychology and sex therapy, sexual sociology, sexual culture, sexual anthropology and so on. We encourage you to send your articles to our journal and we will translate them into Chinese to allow our professionals to understand your work.

Let Chinese and Asia-Oceania experts unite to promote the contribution of Sexual Health in the world.

INTERESTING ARTICLE ON SEX IN ON DEMAND SITUATION FOR MEN AROUND FERTILITY

Erectile Dysfunction and Extramarital Sex Induced by Timed Intercourse: A Prospective Study of 439 Men

CHONG WON BAK, SANG WOO LYU, HYUN HA SEOK, JAE SANG BYUN, JEE HAN LEE, SUNG HAN SHIM AND TAE KI YOON

Abstract

During the fertile window of a woman's menstrual cycle, the effect of impending timed intercourse (TI) on the psychological well-being and behavior of male partners has not been thoroughly investigated, despite the fact that men comprise one half of each couple endeavoring to achieve natural conception. This prospective study consisting of 439 men was conducted during a 3-year period between July 1, 2008, and June 30, 2011. Various characteristics were evaluated, including newly acquired erectile dysfunction (ED); extramarital sex (EMS); intake of soft drinks (SD); levels of hormones, such as follicle-stimulating hormone (FSH), luteinizing hormone (LH), testosterone (T), prolactin, and estradiol (E2); and semen parameters. A total of 188 men (42.8%) experienced ED and 47 men (10.7%) engaged in EMS. As the number of TI episodes increased, the number of men with ED and EMS and those who wanted to avoid TI also increased (all, \( P < .0001 \)). All 47 men who reported EMS experienced ED with their spouses. Men who consumed SDs produced significantly smaller volumes of semen (\( P = .0363 \)). Among the hormones investigated, the levels of LH, T, and E2 were significantly lower in men with ED (all, \( P < .05 \)) whereas the level of FSH was higher in contrast to E2, which was significantly higher in men who had EMS (both, \( P < .01 \)). TI imposes a great deal of stress on male partners evoking ED and, in some cases, causing these men to seek EMS. Physicians and clinicians should acknowledge the potential harmful effects of TI on men. Furthermore, both female and male partners should also be cautioned about the increased possibilities of ED and EMS as TI incidents increase.

Key words: Hormones, semen, sexual dysfunction

http://www.andrologyjournal.org/cgi/content/abstract/33/6/1245

Sent in by Dr Michael Lowy
Indian Men’s Penis Size Survey Report  (original research)

This survey was a joint initiative between SSS Centre for Sexual Health, an Indian based centre of excellence for sexual health care and research (www.sexualhealthindia.org) and a popular nationwide health website called Health.India.com. Dr Vijaysarathi Ramanathan, an Australian trained sexual health physician and sexuality therapist, and the Founding Director of the centre conducted this online study.

There is paucity of information about the penis size of Indian men, and what exists, is limited to either clinic samples and/or small sample sizes. Anecdotally, and from clinical experience, concerns around penis size (both length and girth) are among the major sexual concerns of Indian men. The current survey was initiated to address this knowledge gap. The current survey is not scientific research. The objectives of this survey were to explore penis size measurements of Indian men, assess the self-perception and importance of penis size, and understand Indian men’s help-seeking attitudes specific to penis size. The survey was designed to be a pilot study with the intention of conducting further research in the near future based on some of the present survey findings.

The online survey was launched in November 2012 and data was collected over four months (until Feb 2013). The survey was launched and promoted through the Health.India.com website along with an information article about penis sizes. As it was not a scientific study ethics approval was not required. However, all necessary efforts were taken to maintain ethical standards of data collection. The survey was self-funded and there was no conflict of interest. Duplicate survey responses were identified from IP address record and deleted. No personally recognisable data or contact details were collected.

Findings:
About 2300 visits were recorded for the survey page and 1670 contributed to the survey (i.e. 70% response rate). The average age was 30.4 years and the vast majority of respondents were university graduates (83%). About one in three (36%) men were married while the rest were either single and in a romantic relationship (21%) or not in a romantic relationship (41%). About one in three (36%) men were married while the rest were either single and in a romantic relationship (21%) or not in a romantic relationship (41%). About 89% of men responded that they are sexually attracted to women while the rest were attracted to men (4%), both (6%) or none (1%). Over three-fourth of the men (77%) had measured their penis size in the past. One-third of men reported using a measuring tape (37%), plastic/metal ruler (36%) and thread and ruler (13%) to measure the size of their penis while the rest did so by visually calculating the size (14%). The length and girth (mid-point circumference) of the erect penis were requested and respondents were able to enter these measurements in the survey in either centimetres or inches. This data was examined post-survey for missing values and typographical errors, and the data in inches was converted to centimetres using standard conversion (1 inch = 2.54 cm). After careful examination, valid data for length of penis was available from 1275 respondents. The average length of the penis was 13.9 cm ranging from 1cm to 30cm (Graph Fig 1). Valid data on girth was available for 1090 men and the average girth was 7.9cm ranging from 1cm to 23cm.

When questioned how they perceived their penis size, 31% of all respondents were totally fine with their size, whereas 52% and 34% respectively reported that they wished their penis to be longer or thicker. About 9% reported that they were fine with their penis size but their partner was worried about it. About 15% reported that they were distressed about their penis size. A large proportion of men responded that the length (59%) and girth (63%) of their penis was either important or very important to them. On the other hand, men reported that the length and girth of their penis was important for their sexual partners in 43% and 45% of cases respectively.
About one in two men reported that they have some concerns about their penis size and for one-third of these men (i.e. those who have concerns); the level of concern was serious, very serious or distressing. However, a large proportion (43%) of all men reported that they would not seek professional help regarding their penis size, while 38% reported that they would if needed and 7% have sought professional help in the past. Specialist medical doctors ie sexologists seem to be the most preferred source of help (49%), followed by online help (43%). About 10% said that they have or will purchase penis enlargement products from online. Embarrassment (43%) and financial constraints (38%) were the two most commonly reported barriers to seeking help.

Many of these findings are the first of their kind to be generated in India. The exploratory pilot survey has provided some valuable data about penis size, insight about how Indian men think and feel about their penis and also about their help-seeking attitudes for penis size specific sexual concerns. The penis size measurements were self-reported and there is high probability for errors in measuring or reporting driven by social desirability to report socially acceptable values. The measurement aspect of this study needs further qualification through standardised measurement techniques using a community sample, which in itself is a great challenge.

The above is a synopsis of data provided by Dr Ramanathan. Dr Ramanathan can be contacted on vram4831@uni.sydne.edu.au for access to full data and to discuss research collaboration.

**Disclaimer:** The data is the intellectual property of Dr Ramanathan and Health.India.com and not to be re-published without written permission from Dr Ramanathan.

**Acknowledgement:** Health.India.com

**Conflict of interest:** None