



AOFS NEWSLETTER

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Issue 5



Asia Oceania Federation of Sexology

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2012-14 AOFS Committee members present at conference in Matsue

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Small photo gallery from Matsue —12th AOFs Conference 2-5 August 2012



The Adolescence Sexuality Health Education Guidance in China



The Adolescence Sexuality Health Education Guidance in China was edited and is being trialed by the China Sexology Association Adolescence Sexuality Health Education Committee 2012. This guide's function is to improve and unify China's sexual health education, in content and methods. And at the same time bring out China Sexology Association's "Series of model lesson plans for the pilot version of sexuality health education guidance in China" as a uniform guide book for the training of sexual health education instructors.

In order to improve this guidance the emphasis was put on the quality of teachers' training. An adolescence sexuality education expert was invited from the Netherlands to train primary and middle school teachers. Training for teachers is very important in the promotion and implementation of guidance. Sexuality education teachers should be provided with new ideas and methods about sexuality education, the chance to learn from the advanced experience of sexuality educators in different countries, and help should be given for them to understand and be able to use the new guidance. Dutch experts are very good at spreading the idea of sexuality education and also very good at combining theory and practice together.

In consideration of the urgent demand for sexuality education teachers and especially for primary and middle school students, China Sexology Association decided to invite a Dutch expert to give systematic training for sexuality education to teachers in primary and middle schools. The aim was to help frontline teachers learn the knowledge and methods from experienced sexuality educators so they could then deliver comprehensive sexuality education.

Two things are very important in systematic training for teachers: first, is to give training step by step; and second is to give teachers time to practice and implement. Discussions were held with the Dutch expert to reach a consensus. Finally, China Sexology Association decided to implement the training. Three training steps were developed for each stage, and after each step the participants were to be selected and numbers reduced. Five to six months were to be given to practice and implement each step. That is, Step I was a wide spread training process and then 75 participants were to be selected. After Step I, all the teachers had 5-6 months to implement their learning. Then the best 25 teachers from the 75 participants were chosen to progress to Step II training. After 5-6 months implementation, this number would be cut to 10. This master group will have Step III training.

The Adolescence Sexuality Health Education Guidance in China—continued

The 10 teachers who participate in all 3 steps of training will be required not only to be good at giving sexuality education, but also to have the ability to give sexuality education training for other teachers. After the whole training project, the teachers in master group, who have advanced experience and good methods for sexuality education, can be the core teachers in the China Sexology Association. Then, they can co-operate with each other and use their own abilities to give sexuality education training for teachers in China. Also, the teachers in the master group can use the advantages of their respective jobs to promote more sexuality education training activities in China. This will improve the whole teaching level of sexuality education teachers in China.

The whole systematic training is separated into 3 steps, Step I (Foundation level), Step II (Upgrading level), and Step III (Master level). Level 2 is now beginning. In the Level 1 training, participants learned many sexuality education methods and clarified many concepts. All the participants found this training exciting and very useful. And they all hope that this kind of training can be organized time and time again. The teachers felt that this kind of training is also relevant for kindergarten teachers.

Korean Association for Sexology

The autumn Congress of the Korean Association for Sexology (KAS) 2012 was held at Busan starting Sunday Nov 4. Prof Wonhoe Kim and presented a 3 hour pre-congress workshop on female sexual dysfunction with particular focus on sexual desire.

29th Indian National Conference of Sexology

The annual conference of the Council of Sex Education and Parenthood International has been changed so as to not clash with the WAS conference in Alegre Porto, Brazil.

Date: 23-25 August 2013

Venue: Hotel Katria Towers, Somajiguda, Hyderabad, India.

Title: Sexual Health—Podium to Practice

Website: sexconindia.com

Email: Dr Godha Venkata Romana: aidsandsex@rocketmail.com



AUSTRALIAN NEWS !!!!!

The Australian Society of Sexuality Educators, Researchers and Therapists (ASSERT National) Inc. is changing its name to Society of Australian Sexologists (SAS) Ltd.

Very briefly the Australian story is:

- The first national Australian conference on Sex Therapy took place in Brisbane organized by the Psychology Department of the University of Queensland in 1974.
- Then in June 1977, a small group of clinicians with a specific interest in sexuality met in Sydney and ASSERT was born. Initially conceived as AASECT (Australian Association of Sex Educators Counsellors and Therapists) the acronym morphed to AASERT out of deference to our American cousins, and subsequently to ASSERT, the Australian Society of Sexuality Educators Researchers and Therapists.
- Psychologist Greta Goldberg was the prime convener of AASERT and its first president. The core group included Dr Derek Richardson, Dr Jules Black, Ms Bettina Arndt, Dr Warwick Williams and Dr Derek Llewellyn-Jones. And a bit later senior citizens like Dr Martyn Baker and Dr Margaret Redelman.
- The first national conference of AASERT was held in Canberra, in November 1980.
- Forum magazine, edited by Bettina Arndt, did much to change the sexual landscape in Australia.
- In 1983, under Derek Richardson, it was decided to develop ASSERT into a national organisation.
- However, by 1985 it was decided that ASSERT should return to a co-operative with autonomous state bodies due to tensions in aims between the states.
- There was further disappointment for ASSERT NSW when the Australian bid in Delhi in 1985, headed by Drs Jules Black and Martyn Baker, to host the 1989 WAS Congress in Sydney was not successful.
- By the late 1990s a new wave of national co-operation was born and a new National Council of ASSERT was established in 1998.
- The newly reformed ASSERT National had a clearly formulated mission and plan to develop a national constitution, a code of ethics, national professional standards and accreditation, and to encourage conferences on a regular basis across the nation.
- The main goals for ASSERT National changed slightly from an organization with a dual focus on community needs and professional needs, to one with the main focus on professional needs.
- ASSERT National developed a unified national accreditation policy for: Sexuality Therapist, Sexuality Educator and Sexuality Researcher.
- Diploma of Sexual Health Counselling that ASSERT NSW had set up with the Australasian College of Venereologists was taken up by Sydney University under Dr Patricia Weerakoon.
- Australia now had 2 sexuality programs run by Curtin University and Sydney University.
- In Cuba 2003, ASSERT National was successful in bidding to host the 2007 WAS Congress in Sydney. A very successful congress.
- By 2011, once again, differing state needs, in this case for a unified national accreditation standard, meant that there was dissension between the national committee and a state body. The ASSERT National committee decided to rebrand under SAS Ltd. as a national organisation with state branches, so that a unified Constitution, Code of Professional Practice and Accreditation could be implemented.

- A stringent professionally valid accreditation process has been developed so that the term ‘sexologist’ means something. That having SAS accreditation will tell patients and clients about the standard of service provided. Many of the accreditation criteria have been incorporated overseas from overseas accreditation programs so that there can be parity with Europe and America.
- Having a peak national organisation means that work towards professional recognition at government level is possible.
- SAS Ltd will also provide a strong collegiate community for networking and continuing education such as this conference.

Some members of the new SAS Ltd executive committee:

Lynda Carlyle, Susan Barr, Chris Fox, Matt Tilley, Kathy Bond, Margaret Redelman, Dianne Ervine, Di Luckhurst-Smith, Jocelyn Klug



The new SAS Ltd national president is Jocelyn Klug

Jocelyn is a Sex Therapist/Educator and Relationship Counsellor. Jocelyn holds a BA Nursing, Certificate in Sexual Reproductive Health and a Graduate Diploma in Couple Therapy. She has been in private practice for the last ten years was President of ASSERT Queensland Inc. and Vice President of ASSERT National. Jocelyn has delivered sexuality programs to a wide range of community & professional organizations.

ASSERT National Conference 13/14 October 2012 Melbourne

Title: Beyond difficulties, definitions and diversity

This biannual multidisciplinary national conference was hugely enjoyed by all participants. The range of topics discussed was varied, as was the enthusiastic audience participation. The smaller number of 80 or so registrants created a warm inclusive atmosphere allowing easy networking and sharing of ideas. Also hugely important in our collective conference running skills, was that a small profit was made.

The international keynote speaker was Dr Marty Klein from the USA who also gave workshops in Sydney, Adelaide as part of the national conference. He has kindly agreed to return to Australia to participate in the 2014 AOFs Conference.

Pre-conference workshops were presented by Jacqueline Hellyer - Coaching & Tantra: Integral Aspects of an Effective Contemporary Approach to Sex Therapy and Dr Marty Klein- (1) Is there such a thing as a sexual problem? and – (2) Narratives of Kinky Sex—Who Has the Problem? How Do We Treat It?

The social program added to the creativity of the conference with a guided visit to a purpose built kink club in Melbourne. In view of the worldwide explosion of “50 Shades of Grey”, this was very interesting.



Dr Marty Klein



Participants at the ASSERT National conference with committee mem-

Recreational use of ED drugs by healthy young men

According to a study by Harte and Meston healthy, young, recreational users of ED drugs may eventually lose confidence in their erectile abilities. And this loss of confidence may lead to erectile difficulties at a later time.

PDE5 medication has become popular with recreational users who don't have ED. Studies have shown that such recreational use is often associated with riskier sexual behavior, such as unprotected intercourse.

How recreational use of ED drugs might affect men on a psychological level, particularly their confidence in their erectile function has not been studied.

An anonymous web-based survey and the IIEF was used to collect information from over 1,200 American sexually-active undergraduate men. The participants' mean age was 21.9.

Of 1,207 men, 92% had never used ED drugs, 6% had used them recreationally and 2% had used them according to a doctor's prescription.

Recreational users and non-users reported similar levels of sexual function. "In fact, recreational ED drug users showed healthy erectile functioning profiles and were well above the cutoff used to distinguish those experiencing ED of a clinical nature," the authors said.

However, the recreational users' confidence levels were similar to those of prescribed users. Both groups reported significantly less confidence than the non-users.

Two possible interpretations: (1) lower erectile confidence is a psychogenic risk factor for ED, and could prompt performance anxiety and psychological dependence on the drugs. In other words, the men might feel they need the drugs to get a satisfactory erection because they don't think they can get one on their own; or (2) some men may have satisfactory erections on their own. However, when using the drugs, these erections might be slightly firmer and longer-lasting and become the new norm. Men may feel that their erections without drugs are inadequate and lose confidence because their standards have changed.

The suggestion is that healthcare providers should tell patients about the possibility of psychological dependence on ED drugs.

The Journal of Sexual Medicine

Harte, Christopher B., PhD and Cindy M. Meston, PhD

"Recreational Use of Erectile Dysfunction Medications and Its Adverse Effects on Erectile Function in Young Healthy Men: The Mediating Role of Confidence in Erectile Ability"

(Full-text. First published online May 8, 2012)

<http://onlinelibrary.wiley.com/doi/10.1111/j.1743-6109.2012.02755.x/abstract>

My Health News Daily via MSNBC.com

Cox, Lauren

"Young men who take erection pills for fun often feel down"

(May 17, 2012)

http://www.msnbc.msn.com/id/47468740/ns/health-mens_health/#.T7phiNxYs_d

OB/GYNs and Discussions on Sexual Health

Many OB/GYNs in the United States don't address sexual issues as thoroughly as they could, according to a study from the University of Chicago.

Researchers surveyed over 1,100 practicing OB/GYNs to learn more about their communications with patients.

63% routinely asked about sexual activities

40% asked about sexual dysfunction

29% addressed sexual satisfaction

28% asked about sexual orientation and identity

14% addressed sexual pleasure

In addition, 25% expressed disapproval or disagreement with a patient's sexual activities.

Demographics contributed to some key differences eg female OB/GYNs were more likely than male OB/GYNs to ask about sexual activity and doctors under age 60 were more likely than those over 60 to ask about sexual orientation and identity.

The Journal of Sexual Medicine

Sobecki, Janelle N., MA, et al.

"What We Don't Talk about When We Don't Talk about Sex: Results of a National Survey of U.S. Obstetrician/Gynecologists"

(Abstract – First published online March 22, 2012)

<http://onlinelibrary.wiley.com/doi/10.1111/j.1743-6109.2012.02702.x/abstract>

The University of Chicago Medicine

"What we don't talk about when we don't talk about sex"

(Press release – March 22, 2012)

<http://www.uchospitals.edu/news/2012/20120322-sex-screening.html>

Invitation to participate

Our region, Asia covers a wide area and many diverse cultures. In order to achieve our goals of increasing the sexual well-being of our region we need to unite through networking, education and participation in joint ventures. This Newsletter is one way for us to work together in sharing information on activities happening in the region and what individual sexual health professionals are doing.

We ask that all members of AOFS contribute to this newsletter by submitting their country's Sexology Conference and educational meetings information, information on special education/professional development programs, outcomes of sexological or education programs, acknowledgement awards given to members of AOFS, fun activities held by members and anything else that you feel would be of interest to other members of AOFS. Photos are welcome. We are planning 3 editions per year.

There will be a regular section on each member country to introduce what is happening there.

Please send contributions to the Newsletter to Margaret Redelman at:

AOFShnewsletter@gmail.com

Warm regards

Dr Margaret Redelman, Australia

Editor

Regional conference

Australasian Sexual Health Conference

23-25 October 2013

Darwin, Australia

Web: www.shconference.com.au

Email: info@shconference.com.au

Back to back with the Australasian HIV & AIDS Conference



This annual conference is presented by ASHA (Australasian Sexual Health Alliance) which aims to support improvements in sexual health in Australia and neighbouring countries.

Alliance executive members include:

- Australasian sexual Health & HIV Nurses Association
- Australian Society for HIV Medicine
- Family Planning New Zealand
- New Zealand Sexual Health Society
- Sexual Health & Family Planning Australia
- RACGP, special interest group in sexual health
- Sexual Health Societies of Queensland & Victoria
- Society of Australian Sexologists