



AOFS NEWSLETTER

July 2013

Issue 7



AOFS News

Website

At our last AGM we discussed the need for AOFS to have its own dedicated website to promote ourselves and provide a point of communication for our members and potential new members. This is necessary to grow our brand and thereby have influence in policy and in the content of sexuality knowledge and information in our region.

The website is now being developed and all members are asked to contribute with content and ideas.

The **13th AOFS Conference** is being held in Brisbane, Australia 22-25 October 2014. It is time to start thinking about the contribution you, your organisation, university or research centre would like to make. The quality of the conference reflects not only the committee's efforts but also the contribution that member's make.

The committee is currently developing its major conference themes, for example

1. obesity, metabolic syndrome and sexual difficulties
2. fertility, infertility and sexual agenda
3. sexuality education for children, young people and the elderly
4. sexual issues with disease and chronic conditions

We want to explore a multidisciplinary perspective in therapy and application of knowledge using symposia.

We already have some fantastic speakers and leaders in their field lined up.

If you have any suggestions please write to us.

This is our regional conference. Let's work together.

Dr Margaret Redelman

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Inside this issue

Council of Sex of Education and Parenthood (International)

Is organizing its 29th National Conference of Sexology at Hyderabad, India on 23rd – 25th August 2013.

The quality of each person's sexual life, better represented by the term Sexual Health, is a requisite for having a healthy life and a dignified existence. Sexology, the searching for solutions for sexual problems and ways to prevent situations that deteriorate health is the best panacea, sexually speaking. Sexology has come of age, and its tools and accumulated knowledge represent valuable contributions to creating a better world.

Sexology, the scientific study of sexuality has thus become imperative to promote sexual health. Scientific knowledge, thus gained, has to be shared with the health care fraternity so that the public will be benefited. Hence the National Conferences.

Many times evolving research is presented at the conferences. While it is important for a Health Care Professional to be updated, the practicing clinician may be bewildered by the debates and yet to be ratified information. The clinician may be befuddled as to how to apply/use this knowledge in day to day clinical practice. Hence the National Conferences.

This conference theme *From Podium to Practice* will strive to bridge the gap between acquisition of knowledge and its clinical application.

Experts in the field of Sexuality – Dr. Barry McCarthy, USA and Dr. Margaret Redelman, Australia will be conducting special workshops at the conference.

The conference programme is designed to cater to the immediate needs of Healthcare Professionals. It will be of special interest to family practitioners and experts in medical, urological, andrological, gynecological, psychiatric, behavioral and social sciences.

The Conference is being held at Hyderabad a 450 years old city, known in modern times as city of medical tourism. Hyderabad is known worldwide for Pearls, Bridal Bangles & Dum Biryani.



Dum Biryani is an Indian chicken and Basmati rice recipe that is cooked on Dum over slow heat.

There are a number of tourist attractions in and around the Historic city of Hyderabad. Delegates can quench their thirst for knowledge and also enjoy the cultural heritage.

AOFS members will be considered on par with CSEPI members and will be offered a discounted privilege in registration.

Website: www.sexconindia.com

Welcome to India and the 29th
National Conference of Sexology.

Dr. D. Narayana Reddy
Chairperson – CSEPI
Membership Secretary – AOFS

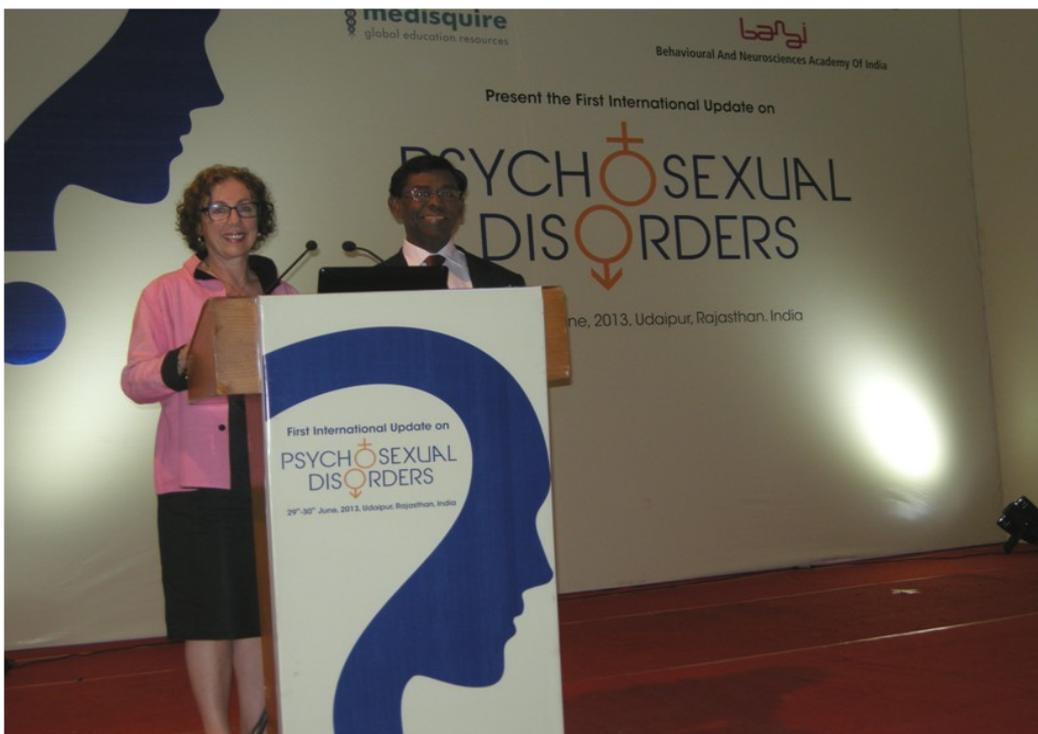


Hyderabad from Char Minar

MEMBER'S ACTIVITY

Drs Ganesan Adaikan and Margaret Redelman recently presented in Udaipur, India at the First International Update on Psychosexual Disorders to over 170 psychiatrists, many of whom are professors or heads of their hospital or clinic units from around India. The 2 day meeting was very well received by the extremely interested audience who greatly appreciated information of psychosexual disorders and their management.

It was heartwarming to see sexuality information being addressed in India with a group of health professionals who are often at the frontline of addressing sexual difficulties.



Dr Margaret Redelman
Dr Ganesan Adaikan

INTERESTING ARTICLE

“There’s a Man in My Bed”: The First Experience of Sex Among Modern-Orthodox Newlyweds in Israel¹

Abstract

The first experience of sex is a significant life event for men and women. Studies investigating first-time sex focus largely on relationships at a young age and among teenagers, whereas studies of that experience in the context of marriage are extremely sparse and focus mainly on clinical population of unconsummated marriage.

The authors explore the individual and mutual emotional effect of first-time intercourse among Modern-Orthodox newlywed couples in Israel. In-depth interviews with 36 men and women during their first year of marriage revealed unique challenges and difficulties related to sexuality in general and to first sex experience in particular.

The findings indicate that first sexual intercourse is experienced by men and women as associated with emotional and behavioral difficulties, which appear to be rooted in the traditional nature of the religious Modern-Orthodox society in Israel. The authors explore reasoning and justifications for these challenges and detail different coping strategies—of the individual and of the couple. The findings might be relevant for other traditional societies in which couples experience sex only after marriage.

The findings might also support professionals and sex therapists in addressing newlywed couples’ needs in similar traditional populations.

Interesting points

The first sexual experience on the wedding night is especially meaningful and formative because it symbolizes the consummation of the marriage.

However, the stark transition following a very stressful and tiring period may cause sexual difficulties as the individuals are still under the prohibitions pertaining to modesty and may be unfamiliar with their own and the partner’s anatomy and psychosexual needs. The transition from forbidden to ‘must have’ sex may cause tension ².

The couples reported feeling trepidation before the experience, fear, and in some cases, aversion, during the experience, and confusion, self-doubt, and the sense that something was wrong with them afterwards. The couples reported that that not only was the sudden transition from no touch to full intercourse difficult but the transition to living intimately with another person increased tension.

The article explores ways in which the individuals sought ways of coping with the anticipatory fear before the act and the subsequent experience of failure. Consulting close friends who were married for longer and non religious/non conservative friends was a common strategy of women and also accessing the internet.

The article may have good application to conservative Christian and Moslem populations and may inform therapy.

¹Shalev O, Baum N & Itzhaki H. 2013. “There’s a Man in My Bed”: The First Experience of Sex Among Modern-Orthodox Newlyweds in Israel. *Journal of Sex & Marital Therapy*, 39:40–55, 2013

²Ribner DS & Rosenbaum TY. 2005. Evaluation and treatment of unconsummated marriages among Jewish orthodox couples. *Journal of Sex & Marital Therapy*, 31: 341-353.

The 4th World Sexual Health Day (WSHD) is on 4th September 2013

The slogan is "To achieve sexual health, picture yourself owning your sexual rights".

If your organisation is planning an activity please take some photos, write a short blurb and send it in so that we can all know what is happening in the AsiaOceania community.

"Love Matters"

<http://www.lovematters.in>

"Love Matters" is mentioned in the latest WAS Newsletter. This international site is targeted for a non-Western population and has a website in Hindi. Great resource for our patients and clients to get good information with anonymity.

REGIONAL CONFERENCES 2013-14

If your country is planning conferences for 2013-2014 please forward details to the editor.

29th National Conference of Sexology at Hyderabad, India

Location: Hyderabad, India

Date: 23-25 August 2013

Australasian Sexual Health conference

Location: Darwin, Australia

Date: 23-25 October 2013

<http://www.sexualhealthconference.com.au>

6th Multidisciplinary Sexual Dysfunction Conference

Location: Sydney, Australia

Date: 25-27 April 2014

Venue: Menzies Hotel

www.sexualdysfunctionconference2014.com

13th AOFS Conference

Location: Brisbane, Australia

Date: 22-25 October 2014

Venue: Mercure Hotel

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. PLEASE CONTRIBUTE.

Society of Australian Sexologists NSW

was privileged to have Gila Bronner, a prominent Israeli sex therapist present at an education meeting and supervision group in Sydney. Gila was invited to Sydney as Faculty for the Skills Workshop session: "Urological and sexual dysfunction in Parkinson's Disease" at the 17th International Congress of Parkinson's Disease and Movement Disorders in Sydney, Australia 16-18 June 2013.



Gila Bronner

SAS NSW education meeting held 20 June 2013 was titled "The Contribution of Sex Therapy to Sexual Medicine Interventions".

Gila stressed the importance of taking a detailed sexual health history in combination with an understanding of the client's current medication history and an understanding of the disease process. Gila was able to provide very interesting clinical examples from her experiences with Parkinson's patients that allowed us to learn how we can include a wider understanding of how to deal with a client who presents with a diagnosable illness and sexuality issue, and the importance of how counselling can provide the rehabilitation aspects required.

She stressed the importance of partner counselling so that a positive outcome can be achieved for the couple. She also stressed the importance of working in a multi-disciplinarian team that allows for all health professionals who deal with the client to be sensitive to a whole person response.

Reference's

Bronner G, Hassin-Baer S. Exploring Hypersexual Behavior in Men with Parkinson's Disease: Is it Compulsive Sexual Behavior?

Journal of Parkinson's Disease 2012; 2(3):225-234

Bronner G, Vodusek DB (2011) Management of sexual problems in Parkinson's Disease Patients. Ther Adv Neurol Disord. 2011 ;4(6):375-83.

Bronner G.(2011) Sexual problems in Parkinson's disease:

The multidimensional nature of the problem and of the intervention.

J Neurol Sci. 310:139-143

Bronner G, Royter V, Korczyn AD, Giladi N. (2004) Sexual dysfunction in Parkinson's disease. J Sex Marital Ther. 2004 Mar-Apr;30(2):95-105.

Summary provided by Elaine Harvey

SAS NSW Supervision group meeting Friday 21 June 2013

Gila presented her "OSEC" (Open Sexual Communication Module), a 4 step intervention model on "**How to talk about sex?**"

1. open sexual communication,
2. evaluate sexual problem & identify sexual dysfunction,
3. treatment and
4. follow-up

She spoke about the various ways that patient's/clients can be engaged:

1. Indirect approach - passive invitation by physician (leaflets)
2. Direct approach - active invitation by physician (procedures, intake)
3. Patient's active invitation

Open ended positive questions are best while being sensitive to the subject matter, and any cultural, age related, gender etc values.

Step 1

When did the sexual problem start?

How did it start?

Did you have previous treatment?

What does your partner think about it?

What do you want to do with the problem?

Step 2

Use of validated questionnaires: e.g., ASEX (Arizona Sexual Experience Scale), or SHIM (Sexual Health Inventory for Men).

Step 3

Discuss treatment options

Make appropriate referrals

Patient education

Medication usage and adherence

PDE 5-inhibitors usage and optimizing PDE5-inhibitor success.

Step 4

Follow-up

The OSEC is presented in:

Bronner G. (2009) Practical strategies for the management of sexual problems in Parkinson's disease. *Parkinsonism Relat Disord.* 2009 Dec;15 Suppl

And also in the intervention section of the review on Multiple Sclerosis:

Bronner G, Elran E, Golomb J, Korczyn AD (2010). Female sexuality in multiple sclerosis - the multidimensional nature of the problem and the intervention (Review). *Acta Neurol Scand.* 2010; 121: 289-301.

Summary provided by Dr Vijay Ramanathan