
Abstract Book

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I - SUNDAY WORKSHOPS**WS2****CRUCIBLE APPROACH: INTEGRATED SEXUAL-MARITAL THERAPY**

Schnarch David M. (Marriage and Family Health Center of Evergreen, Colorado), Morehouse Ruth K. (Marriage and Family Health Center Evergreen, Colorado)

In the history of modern sex therapy theory and practice, the two most overlooked topics are (a) personal growth and (b) interpersonal conflict. These crucial issues greatly determine treatment outcomes, but dealing with them involves more than sensate focus exercises, communication skills, acceptance and forgiveness. The Crucible Approach is the first differentiation-based treatment for sexual dysfunction and desire problems. It harnesses inevitable conflicts about sex and intimacy and increases people's emotional balance and their capacity for love and intimacy. This workshop covers core principles, clinical example, and new research linking differentiation to sexual dysfunctions, foreplay, desire, and sexual relationship satisfaction. References: Schnarch, David (1991). *Constructing the Sexual Crucible; An Integration of Sexual and Marital Therapy*, Norton, New York. Schnarch, David (1998). *Passionate Marriage: Keeping Love and Intimacy Alive in Committed Relationship*, Owl, New York. Schnarch, David (2000) *Problems of Sexual Desire: A Systemic Perspective in Principles and Practice of Sex Therapy* (3rd edition), Leiblum, S. and Rosen, R. Eds. Guilford, New York Schnarch, David (2002). *Resurrecting Sex; Solving Sexual Problems & Revolutionizing Your Relationship*. HarperCollins, New York.

Conflict of Interest: The two presenters are also co-directors of a therapy center that sells books by one of the authors.
Financial Support/Funding:None disclosed

WS6**WHAT IT MEANS TO BE A SEX THERAPIST**

Miletski Hani G (Private Practice)

This workshop will begin with an introduction to sex therapy. A description of a typical day in the life of a sex therapist will follow: Various clients/patients and their presenting problems and issues will be discussed, as well as the treatment they receive and the outcome of the sex therapy. The training needed to become a sex therapist will be outlined, as well as the certification process by AASECT (The American Association of Sexuality Educators, Counselors, and Therapists). The audience will be encouraged to ask questions and to bring sex therapy cases for discussion. This workshop is designed for those who are interested in pursuing a career in sex therapy, as well as for those who are not sex therapists but are in the sexuality field, such as medical doctors, whose patients may benefit from referrals to sex

therapists. This workshop will enhance understanding of when to make referrals to sex therapists, and how to work together, as a team, with a sex therapist.

Conflict of Interest: None disclosed
Financial Support/Funding:None disclosed

WS7**SEXUAL ATTITUDE REASSESSMENT PROGRAM**

Stayton William (Morehouse School of Medicine), Bush Ginger (Florida Atlantic University)

The SAR is an intensive 10-hour workshop experience that gives participants the opportunity to explore and examine their own attitudes, values, and beliefs about various issues in sexuality. Research has shown that there is a lot of anxiety around sexuality issues. The SAR is one of the quickest, most effective ways to help people lower their anxiety and creatively reassess their attitudes, values, and beliefs. Utilization of sexually explicit films, small group discussion, and mini knowledge building sessions facilitates the process of producing greater comfort and learning. The large groups will utilize sexually explicit media to elicit reactions in participants, followed by small group discussions to promote exploration of these reactions. In small group discussions, participants have the opportunity to process their feelings in an atmosphere that promotes psychological safety through sharing and complete confidentiality in the group. Participants are expected to actively participate in the small group discussions. There will be sexually explicit media depictions and sexually explicit conversations; however, there is no live nudity or sexual activity during this training program SAR Modules in the beginning SAR cover common sexual issues throughout the life cycle: Intersexuality Self-health and self-pleasuring (Masturbation) Gender Identity and Expression Sexual Orientation (Heterosexual, Gay, Lesbian, Bisexual, Transgender) Sexuality and Aging Sexuality and Disability This SAR meets one of the AASECT requirements for Certification as a Sexuality Educator, Counselor, or Therapist.

Conflict of Interest: None disclosed
Financial Support/Funding:None disclosed

WS9**TRAUMA RELIEF: AN INTEGRATED APPROACH FOR WORKING WITH SEXUALLY ABUSED PATIENTS.**

Lindskog Anders (Med styring DA)

Introduction Sexually traumatized patients often have problems with flash-

backs, nightmares and avoidance. This workshop teaches an integrated method for trauma relief, combining knowledge from NLP, psycho dynamic therapy, cognitive therapy and modern trauma research. The method is based on the human memory storing system, which functions in the same way in all human beings. This means that the method easily can be used cross-culturally and for all gender combinations. Action The workshop consists of the theoretical background, a practical introduction with case studies, a training session and finally a group discussion. Outcome The goal of the workshop is that the participants shall be able to use the method and independently give sexually abused patients trauma relief. Discussions and

recommendations The method yields its best results when integrated in a therapeutic context but it is also possible to use it as a single intervention with good results. This means that the method can be recommended for education of “bare foot psychologists” in humanitarian aid projects. References The lecturer will refer to works of: Richard Bandler, Aaron T. Beck, Bob G. Bodenhamer, John Grinder, L. Michael Hall, Tad James, D. Min, Bessel van der Kolk and Wyatt Woodsmall

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

II - LECTURES AND PLENARY SESSIONS

Gold Medal Lecture M1

RESEARCHING WOMEN'S SEXUAL HEALTH: A SOCIAL RESPONSIBILITY

Heiman Julia R. (The Kinsey Institute for Research in Sex, Gender & Reproduction, Indiana University, Bloomington, Indiana USA)

Introduction & Objectives: More is known, and accepted as a matter of daily life, about how to sell a woman's sexuality than basic knowledge of what factors define its capacities to develop and change. Not surprisingly, women's sexuality is still seeking a legitimate place in scientific discourse, in spite of the fact that the sexual and reproductive issues women face worldwide include serious consequences to the physical and emotional health and welfare of women and their families. The present talk will selectively address these themes with data on sexual response, partner choice and sexuality in an aggressive world. **Methods:** A combination of laboratory (psychophysiology, MRI and fMRI) methods plus self report, summarized over several studies are described. **Results:** A combination of measures adds value to understanding women's sexual response capacity. No single measure is convincingly excellent but each provides incremental knowledge. **Conclusion:** In the past 10 years, more is known about women's sexual response yet the gaps in knowledge, particularly as they relate to sexual and emotional health in societies, are startling. Persistent efforts are needed from the scientific community and those they work with, in order to improve our knowledge base as it relates to measurement of behavioral, physiological, and interpersonal (couples) variables as they impact the key areas of women's sexual health and survival worldwide. The needs remain urgent.

Conflict of Interest: Pfizer, Bayer HealthCare, and Zestra Laboratories
Financial Support/Funding: zer, UW Reproductive and Sexual Medicine Clinic The Kinsey Institute for Research in Sex, Gender and Reproduction NIH

Gold Medal Lecture M2

FROM VISION TO REALITY

Dr. Irwin Goldstein (USA)

Where we stand today is interesting because of how we got here. As an engineer I studied circuitry and feedback systems. My lifetime has been spent pursuing the causes of various sexual dysfunctions, the effects of these dysfunctions, and potential treatments. In 1980 my department chair told me to become an expert in vasculogenic impotence. Bob Krane was already one of the earliest implanters, trained by Scott, so I agreed although I had no idea what that meant. It started me on a road of basic science research to understand the physiology of erection and pathophysiology of erectile dysfunction. It brought Michal to Boston to teach me penile revascularization surgery. It brought Pfizer to our basic science laboratory to understand why sildenafil worked. And when sildenafil came on the market it brought women to our clinic looking for initial medical treatment. Through Krane's guidance, Saenz de Tejada's basic science brilliance, interested fellows, my wife's support and the engineer within me, I have been at the right place at the right time. Team this with the need for the International Society for Sexual Medicine to have its own journal edited by someone with expertise in male and female, basic science and clinical research, I was named editor-in-chief of The Journal of Sexual Medicine. In five years we have grown to a monthly publication. I am honored to receive the WAS Gold Medal, but I hope to continue to contribute. I am committed to seeing sexual medicine recognized as its own discipline.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

Gold Medal Lecture M3

BRAZIL

Matarazzo Maria Helena (private practice)

Inserting Brazil in the geo-political map of the world how is sexuality being expressed in the beginning of the 21st century my own personal and professional trajectory (I will talk about it during my presentation). Brazil is one of the four “whale” countries of the world now called the BRICs (Brazil, Russia, India and China). The population is around 190 million inhabitants and the social differences are immense.

How is sexuality being expressed ?

Brazil is a tropical country, Europe is at the top side of the world, we are at the bottom, the differences are unthinkable. It's summer practically all year around and this has an enormous effect in our sexuality. People wear very little clothes due to the heat. Young women are incredibly attractive and dress in a very sexy way. For them “love is life's vacation”. In terms of colour and shape Brazilians have a darker skin colour and a fuller body that is very appealing to Europeans but unfortunately that creates “sexual tourism”. Sensuality is everywhere and can be felt on the air. Young people are very impulsive and tend to follow their instincts. “If not now, when?” to some extent they live in the “infinite present” and for them there is no day after. A few years ago there weren't many telephones available. Now there are at least 120 million cell phones and this has changed completely the way people communicate. For the young it is like a fever.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

John Money Lecture

THE ONGOING BATTLE FOR UNIVERSAL SEXUAL RIGHTS

Ehrhardt Anke A (Columbia University, New York, USA)

My presentation is dedicated to John Money, and it is an honor for me to give the first paper at this organization in his name and in his memory. John Money died in 2006, his death was considered by many as a great loss of a truly original thinker who had shaped the field for more than 50 years with his ideas, research and prolific writing. John Money was a pioneer in the true sense and committed himself to an area of research which previously had not existed - the field of psychoendocrinology. His studies with intersex patients and his research into the foundations of sexuality and gender changed the theoretical and clinical discourse world-wide. A tribute to John Money would fall short without mentioning his passionate commitment to the rights of the individual and the freedom of sexual behavior expression. In that spirit, this address will focus on the ongoing battle around sexual rights and individual freedom for everyone. Public health policies have a long history of being shaped by political and moral agendas rather than by established evidence and best practices. Specifically, ideology has prevented young people from having access to effective sexuality education and protection against sexually transmitted diseases and unwanted pregnancies. It also has provided the rationale for denying equal rights to persons in same sex partnerships. Most profoundly religious and ideological beliefs have been the major road block to achieving gender equity and sexual and reproductive rights for women all over the world.

Conflict of Interest: None disclosed

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Magnus Hirschfeld Lecture MH1

SEXOLOGY ? FROM BERLIN TO GÖTEBORG AND BEYOND

Haeberle Erwin J. (Archive for Sexology)

90 years ago, in 1919, Magnus Hirschfeld opened the world's first Institute for Sexology in Berlin. Only 9 years later, in 1928, Hirschfeld and Leunbach organized the founding congress of the World League for Sexual Reform in Copenhagen, the first world-wide sexological organization with members on all continents. The global orientation of sexology was further confirmed by Hirschfeld's lecture tour around the world from 1930-32. The Nazi dictatorship and the world war it started put an end to this pioneering phase of sexology, but thanks to Kinsey, Masters & Johnson and others, sexology was reborn in the United States and soon regained global significance. In 1978, the World Association of Sexology was founded in Rome and, since then, has regularly held World Congresses in many countries, since 2007 under its new name World Association for Sexual Health. The present congress in Göteborg poses a new challenge - promoting, protecting, and preserving sexual health everywhere in the world. The current electronic revolution has provided us with the tools necessary to meet the growing global demand.

References 1. E. J. Haeberle, The History of Sexology http://www2.hu-berlin.de/sexology/Entrance_Page/History_of_Sexology/history_of_sexology.html. 2. E. J. Haeberle, Sexology in the Internet - Our New Frontier <http://www2.hu-berlin.de/sexology/BIB/RomeSpeech.htm>

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PLENARY SESSION P1.1

Women's Sexual Health

P1.1-1

THE TREATMENT OF DYSPARENIA IN WOMEN

Bergeron Sophie (Canada)

P1.1-2

WOMEN'S SEXUAL HEALTH IN ASIA

Huda Sigma (Bangladesh)

P1.1-3

THE USE OF DRUGS AND TECHNICAL AIDS TO HELP EXPERIENCING ORGASM IN WOMEN

Laan Ellen (Netherlands)

PLENARY SESSION P1.2

Men's Sexual Health

P1.2-1

FATA MORGANA: HAUNTED MASCULINITIES AND MEN'S SEXUAL HEALTH

Buchbinder David (Curtin University of Technology, Western Australia)

Sex is not simply a biologically-driven activity; nor is sexuality merely a particular orientation of erotic desire. Rather, together they constitute a site on which gender, power and social identity are discursively and differentially constructed for the individual. For males, this site is understood as "masculinity," produced as the dominant sexual and social subjectivity within a patriarchal structure by a series of exclusions and disavowals which in turn generate a range of "others" subordinate to the masculine. These include the feminine and the homosexual, which then haunt the masculine as points of resistance and even of possible "infection" or substitution within the discourse by which the masculine is constituted. Using a cultural studies approach, this paper explores this context in order to understand, first, how it conditions male sexual attitudes and behaviours and, second, the dynamics underlying the marginalisation and oppression of sexual minorities.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

P1.2-2

MEN'S SEXUAL HEALTH CONCERNS: THE CRISIS OF MASCULINITY

Sharful Islam Khan (Bangladesh)

P1.2-3

RAY ROSEN (UK)

PLENARY SESSION P2.1

Sex and Love

P2.1-1

THE NEUROBIOLOGY OF LOVE

Bartels Andreas (Max Planck Institute for Biological Cybernetics), Wellcome Trust, London, UK)

Love is a highly rewarding experience – it bonds adult partners, parent and child. The biological mechanism mediating it is of existential importance for some species. My lecture will review – from a biological perspective – evolutionary, physiological and genetic fundamentals of partner selection and bonding. In particular I will review exciting research performed on pair-bonding animals, where simple pharmacological or genetic manipulations of the oxytocin or vasopressin system can induce or abolish their ability to form pair-bonds or mother-child attachments. I will then report the results of the first two functional magnetic resonance imaging (fMRI) studies on human love, showing that both romantic and maternal love involve the same brain regions that mediate attachment in animals, therefore bridging the gap between human and animal research. I will finally review the most recent evidence obtained from genetic studies in humans, that show how an allele of a single gene can double the probability of a man to divorce or not, or that children who experience a lack of love show a reduction of the neurohormone mediating attachment in animals. All in all, love appears to be mediated by a tightly controlled biological mechanism that can be manipulated in animals, and potentially also in the human. Human attachment seems thus to employ a push–pull mechanism that overcomes social distance by deactivating networks used for critical social assessment and negative emotions, and while it bonds individuals through the involvement of the reward circuitry, explaining the power of love to motivate and exhilarate.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

P2.1-2

SHAKESPEARE AND THE NATURE OF LOVE

Nordlund Marcus (University of Gothenburg)

This is love's paradox of sameness and difference: that it is universal and yet seems so infinitely variable. As human beings we are biologically disposed to seek love and affection, and to come into the world empty-handed may sentence us to dysfunction, depression, or worse. But it is equally true that the way we experience and conceptualise this basic need will differ according to culture, historical period, and individual experience. This diversity has been the source of much confusion over the years, but we may soon, in the philosopher Irving Singer's words, "be in a position to reconcile the

divergent theories about love, to reach conceptions that will be defensible both as philosophy and as science.” I will begin this talk by raising the question of romantic love’s universality from a perspective of Darwinian interactionism, which I believe is uniquely equipped to integrate the best insights of the natural sciences (traditionally concerned with “nature”) and the humanities (“culture”). My second step will be to briefly apply these ideas to some four-hundred-year-old works by William Shakespeare. Four centuries is a long time by most standards, but it is merely the blink of an eye compared to the vast expanse of evolutionary time. So what makes Shakespeare our universal next-door neighbour in the treatment of love? And what is the most important difference between his amorous world and ours?

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

P2.1-3

INTIMATE GAZE: HORMONES AND SEX DIFFERENCES IN RESPONSE TO SEXUAL IMAGES

Wallen Kim (Emory University), Center for Behavioral Neuroscience under the STC Program of the National Science Foundation under Agreement No. IBN-9876754., None, unreviewed!, 0.0/5, 0.0/5, 0.0/5

Men and women exhibit differential neural activation to photographs of human sexual activity with males showing increased amygdale activation (Hamman, et al., 2004). We don’t know whether men and women look at the same aspects of the sexual stimuli. We investigated sexual stimuli viewing patterns in men and women using eye-tracking, and whether women’s interest in sexual stimuli varied with her hormonal condition (Rupp and Wallen, 2007). Fifteen men, 15 normally cycling (NC) women, and 15 oral contracepting (OC) women viewed 72 sexually explicit photos at each of three sessions separated by at least a week. Subjects controlled their pace of viewing the sexual stimuli. NC womens’ sessions occurred during the follicular periovulatory, and luteal phases. OC women and men’s sessions occurred at comparable intervals. NC women were counterbalanced by cycle phase such that 1/3 started in each phase. Men and women differed in where they first looked at the sexual stimuli with men looking first at the stimulus women’s face. NC women first looked at genitals, and OC women looked first at context items. There was no overall effect of cycle phase on interest because the phase in which the NC women first viewed the stimuli predicted their interest on subsequent trials. Women first viewing sexual stimuli in the periovulatory phase showed continued high interest at the other phases, whereas luteal-first women showed reduced interest at all phases. Thus womans’ hormonal state when first experiencing sexual stimuli affects her subsequent response to such stimuli.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PLENARY SESSION P2.2 **Sexual Health, Gender and Human Rights**

P2.2-1

ADVANCING SEXUALITY AND SEXUAL HEALTH THROUGH HUMAN RIGHTS

Bahgat Hossam (Egypt)

P2.2-2

FROM DENIAL TO PUNISHMENT OF TEENAGE SEXUALITY IN CHILE

Casas Lidia C (University Diego Portales, Law School)

This presentation examines some crucial elements in integrating sex education in school curricula in Chile. While Chile provides an image as a country that has fully restored human rights since its return to democratic rule in 1990, sexual and reproductive policies, programmes, and public discourse lack a consistent human rights and gender focus. An assessment of the recent history of sexuality education in Chile and of related legislation, policies, and programmes reveals the gap between public rhetoric and concrete implementation. While sex education is resisted among school administrators because of, inter alia, religious-influenced conservatives, there are reported cases of active repression of teenage sexuality, adolescents expelled from schools because of an active sexual life or making evident a sexual behaviour that does not conform to heteronormativity. International human rights law have integrated sexual education among the obligations the States must comply with. The right to health and the right to education encompass the need to provide adolescents with information without censorship. However, often the lack of implementation of programmes are based on arguments that refer to right to parents to educate their children according their own beliefs. Legal institutions, like patria potestad or parental authority does not mean depriving fundamental rights of adolescents to receive information that is important to protect their body integrity, health and well-being. In fact, the concept of evolving capacities found in the International Covenant of the Right of the Child refers to the ability of children being capable of exercising such rights.

Conflict of Interest:

Financial Support/Funding: Some of these results come from a study done to UNICEF and the Chilean Ministry of Education

P2.2-3

SEXUAL HEALTH AND RIGHTS: EXPERIENCES FROM COMMUNITY ACTION

khanna renu (sahaj - society for health alternatives).

I am describing a series of community level interventions conducted over the last 8 years. These were supported by private philanthropic trusts - Sir Dorabji Tata Trust is the latest funding source., There is no potential conflict of interest

Introduction: Since 2004, SAHAJ a non-governmental organisation, has engaged with urban poor around issues of citizenship, rights and gender equality in Vadodara in Western India. A significant part of the work has been with different age groups on issues of sexuality and sexual health.

Action: We illustrate through two stories how sexual health of couples can be dealt with by well trained community health workers. Interventions with adolescent girls and boys - group sessions, public debates, premarriage counselling workshops - on issues like 'Knowing our Bodies', 'Sexual Harassment', 'Masculinities', 'Gender power Relations' are described. An action research on Child Sexual Abuse with boys and girls ages 8 to 13 years and adolescent girls ages 14 to 19 years, was conducted to explore experiences of sexual abuse.

Outcomes: Training curricula and manuals on Adolescent Sexuality and Child Sexual Abuse Informed and empowered adolescents Spaces at community level for discussions on sexuality City level Forum on Child Sexual Abuse.

Discussions and recommendations: The paper highlights that sexuality has a life cycle relevance. The challenges to open discussion - the right wing forces - have to be addressed. Sexuality has to be affirmed and not merely 'controlled'. Both power and pleasure are central in sexuality.

References: WHO, 2006. Defining sexual health: report of a technical consultation on sexual health, 28–31 January 2002, Geneva WOHTRAC, 2006. Combating Child Sexual Abuse: A WOHTRAC Initiative, WOHTRAC Report Series, No. 9, Women’s Studies Research Centre, MS University, Baroda. SAHAJ, Unpublished reports.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PLENARY SESSION P3.1 Sexual health and rights

P3.1-1

THE CONCEPT OF SEXUAL RIGHTS

Greer Gill B (IPPF)

‘IPPF envisages a world in which... sexuality is recognized both as a natural and precious aspect of life and as a fundamental human right.’ Universal, interrelated, interdependent and indivisible, sexual rights are a component of human rights, and they are an evolving set of entitlements that contribute to the freedom, equality and dignity of all people. Sexual rights are also a fun-

damental component of the right to the highest attainable standard of health. Good sexual and reproductive health is central to each of the health MDGs and overall health and well-being which in turn contribute to each of the MDGs. We cannot achieve this development framework without raising awareness of what sexual rights are and holding to account those governments which repeatedly neglect their responsibility to guarantee these rights. Furthermore, sexual rights go beyond the context of development; they are fundamental to all people. As part of its ongoing commitment to sexual rights, and to support the work of the 152 IPPF Member Associations which work to advance sexual and reproductive health and rights around the world, IPPF produced a Declaration of Sexual Rights in 2008. This resulted from recognition that there was a clear need for a framework specifically related to sexuality, as distinct from reproductive health, to guide programme delivery and inspire advocacy. The Declaration was developed by a panel that included international experts in sexual and reproductive health and it is grounded in core international human rights treaties and other instruments.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

P3.1-3

DISABILITIES AND SEXUALITY

Dr Daryl Higgins (General Manager (Research), Australian Institute of Family Studies)

The UN Convention on the Rights of Persons with Disabilities – came into force on 3 May 2008 (<http://www.un.org/disabilities/default.asp?navid=13&pid=162>). While the link between living with a disability and an individual’s risk of being disadvantaged or discriminated against is clear – the focus is often on issues of equity and access to employment and services, and the physical health needs of individuals. However, when focusing broadly on rights, the gender and sexuality of people living with a disability can easily be rendered invisible, or subjugated to other seemingly ‘higher order’ issues. A human rights perspective calls into focus the broader issues of a person’s sexual health, sexual identity, and sexual expression. This presentation will focus on research looking at the experience of sexual assault and sexual victimisation, homophobia, and gender-based discrimination. Child rights and child protection issues will also be explored in terms of both parental disability (and its connection to parenting capacity, gender and attributions of responsibility), and child disability, and the vulnerability to maltreatment, including sexual abuse. Recognising and balancing these complex and sometimes apparent competing self-identities/roles is complex, yet inherent within a truly human rights framework.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PLENARY SESSION P3.2
Sexuality Education

P3.2-1

WHAT ARE THE PROMISES OF SEXUALITY EDUCATION FOR DEVELOPING COUNTRIES?

Esiet Adenike (Nigeria)

P3.2-2

HOW TO BUILD A BETTER COMPREHENSIVE SEX EDUCATION PROGRAM

Kirby Douglas B (ETR Associates), UNESCO Hewlett Foundation, None, unreviewed!, 0.0/5, 0.0/5, 0.0/5

People have multiple goals for comprehensive sex education programs, e.g., reducing teen pregnancy, reducing STD, and addressing adolescent questions and concerns about sexuality. This presentation will summarize the effects of 85 studies of sex and STD/HIV education programs around the world. It will demonstrate that some programs reduce sexual risk behavior and others do not. It will then identify a few of the characteristics of effective programs, e.g., focusing on specific behaviors; giving a clear message about behaviors; identifying situations that might lead to unwanted and unprotected sex and how to avoid them; addressing perceptions of risk, attitudes about condoms and contraception, perceptions of peer norms, self-efficacy to avoid unprotected sex and to insist on using condoms or other forms of contraception, and intentions; and finally incorporating many interactive experiential activities to change each of these factors. This presentation will then describe a promising intervention that is designed not only to reduce sexual risk behavior, but also to increase the quality of sexual experience – to help young people have the kinds of sexual experience they would like to have and to avoid those they don't want to have. It is based on a model that will help them 1) identify more clearly what they want to do and not do sexually with different people and in different situations, 2) improve their skills to communicate to their partner what they want to do and not do sexually and 3) improve their skills to please their partner.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

P3.2-3

HUMAN RIGHTS AS THE FOUNDATION FOR SEXUALITY EDUCATION

Olsson Hans (RFSU - Swedish Association for Sexuality Education)

The standpoint for sexuality education is the right for education, knowledge and information about sexuality, referring to ICPD and RFSU:s three

fundamental principles: The right to choose, the right to be oneself and the right to enjoy. A rights-based, comprehensive sex education needs to recognize, address and accept children's and young peoples' needs and questions. But young people have different needs. Sex education also has to have an "inclusive perspective" regarding gender, sexual orientation or identity, ethnicity etc. It's cynical to deny young people knowledge. Some of them suffer, from diseases, discrimination, abuse - or ignorance. How can we support them? We can't avoid sensitive issues. Sexuality education has to be realistic, positive and non-judgmental. It needs to be norm-conscious, e.g. dare to question existing gender norms. We need to speak clearly and be specific. We can't hide behind the cultural curtain and refer to culture as a barrier - we can always do something. Our – professionals - approach to sexuality influence the work. Young people are falling in love, having sex, masturbate, harass each others, get infected, get abused - we can choose not to see reality with its consequences or work on it. Everyone agrees that sexuality education is important - but so far it has been much of lip service or stopped at some HIV-education. We must prepare ourselves better. Sex education is too much about moral instead of ethics, professionals' personal views than evidence-based knowledge, and conformed norms than diversity.

Conflict of Interest:

Financial Support/Funding:

PLENARY SESSION P4.1
PAHO - Sexual Health Approach to HIV prevention and care

P4.1-1

PROGRESS AND CHALLENGES IN THE IMPLEMENTATION OF HIV PROGRAMMING WITH A SEXUAL HEALTH FOCUS IN LATIN AMERICA

Carlos F. Cáceres, MD, PhD, Professor of Public Health, Cayetano Heredia University, Director, Institute of Studies in Health, Sexuality and Human Development

In most of the world transmission of HIV is predominantly sexual and, in a smaller proportion, perinatal. While notions of protected sexual activity to prevent the transmission of HIV and other sexually transmitted infections were built into the modern definitions of sexual health, the way health systems are organized in most countries, and the way international aid is delivered, have persistently undermined efforts of integrating HIV/STI prevention into sexual and reproductive health programs.

In this discussion we will draw upon examples of how these obstacles are configured and operate in Latin America. We will also discuss recent efforts to overcome such barriers and foster integration, both within the health sector and across governmental sectors (particularly across health and education).

Conflict of Interest: None disclosed
 Financial Support/Funding: None disclosed

P4.1-2
OPTIMIZING HIV PREVENTION AND CARE FOR MSM THROUGH A FRAMEWORK OF SEXUAL HEALTH PROMOTION
Jeff Dodds (Sexual Health & STI Section, Public Health Agency of Canada, Toronto, CA)

Significant efforts have been undertaken in parts of Canada to shift HIV Prevention and Care for MSM populations away from HIV-specific strategies and toward a more holistic, sexual health approach. This presentation will highlight a number of models being utilized in Canadian communities, ranging from strategies to improve individual sexual health practices to campaigns establishing healthy sexual behaviour as a community norm. Tensions have developed among those who see this shift as a threat to the ongoing prioritization of HIV prevention, including some members of the AIDS community, policy makers and service providers. However, preliminary results of adopting a more holistic approach indicate that overall sexual health practices have improved, likely resulting in a reduction of at-risk behaviours for HIV transmission/acquisition. Critical to the ongoing success of such efforts is the need for programmers, policy makers and governments to understand, adopt and appropriately fund sexual health approaches.

Conflict of Interest: None disclosed
 Financial Support/Funding: None disclosed

P4.1-3
PROMOTING HUMAN RIGHTS AND PROTECTING AGAINST HIV: EVIDENCE TO IMPROVE SEXUAL HEALTH OUTCOMES IN PAKISTAN
Hawkes Sarah J (London School of Hygiene and Tropical Medicine (LSHTM)), Collumbien Martine (LSHTM), Zaheer Hasan A (National AIDS Control Programme Pakistan), Lalji Najma (LSHTM), Platt Lucy (LSHTM), Buse Kent (UNAIDS)

We conducted a national survey stis and hiv among most at risk populations in Pakistan. These included populations of sex workers (male, female, transgender) and injecting drug users. Five key recommendations were arrived at based on the results of this multi-disciplinary research which included: geographical mapping of populations; bio-behavioural surveys; qualitative research; human rights analysis; and mathematical modelling. These five key recommendations were then subjected to political feasibility analysis which included interviews with key stakeholders from the policy elite. The results show a possible dissonance between the effectiveness of recommendations from a technical perspective, and their likely level of political palatability in Pakistan. This carries important implications for

planning future interventions, and development of strategies to address the high levels of risk and vulnerability found in these most at risk populations in Pakistan.

Conflict of Interest: None disclosed
 Financial Support/Funding: Department for International Development, United Kingdom

PLENARY SESSION P4.2
New Sexology Research

P4.2-1
PARAPHILIAS AND THE DSM-V: GENERAL DIAGNOSTIC ISSUES AND OPTIONS EXEMPLIFIED WITH PEDOHEBEPHILIC DISORDER
Blanchard Ray (Centre for Addiction and Mental Health)

The American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders is currently undergoing its fifth revision (DSM-V). The Work Group for Sexual and Gender Identity Disorders includes a Subworkgroup focusing on potential changes to the various paraphilia diagnoses. This talk describes some of the options being considered by that Subworkgroup. First, the Subworkgroup is considering a distinction between paraphilias and paraphilic disorders along the following lines: A paraphilia is any powerful and persistent sexual interest other than that in copulatory or precopulatory behavior with phenotypically normal, consenting adult human partners. A paraphilic disorder is a paraphilia that causes distress or impairment to the individual or harm to others. One would ascertain a paraphilia (according to actions and self-report, e.g., sexual attraction to amputees or inanimate objects) but diagnose a paraphilic disorder (on the basis of distress and impairment). In this conception, having a paraphilia would be a necessary but not a sufficient condition for having a paraphilic disorder. Second, the Subworkgroup is considering a replacement for the diagnosis of Pedophilia. The DSM-IV-TR defines pedophilia as sexual attraction to prepubescent children. A substantial body of evidence indicates that this definition excludes from diagnosis a sizable proportion of those men whose strongest sexual feelings are for physically immature persons. These are the hebephiles, that is, men whose strongest sexual feelings are for pubescent children (roughly, ages 11–14). One possible solution is to replace the diagnosis of Pedophilia with Pedohebephilic Disorder and offer three subtypes: Pedophilic, Hebephilic, and Pedohebephilic.

Conflict of Interest: None disclosed
 Financial Support/Funding: None disclosed

P4.2-2

NEW TRAITS IN GENETIC SEXOLOGY

Hamer Dean (USA)

P4.2-3

INTERSEXUALITY AND TRANSGENDER RESEARCH

Meyer-Bahlburg Heino F. L. (Columbia University)

This paper presents an overview of recent research on gender variants as represented by persons with somatic 'intersexuality' or from the 'transgender' spectrum. Nomenclature and clinical management of both are undergoing comprehensive review and revision by a variety of professional societies in the current decade. New genetic research has revealed a complex cascade of genetic and hormonal events in the sexual differentiation of the gonads and the reproductive tract, and the number of hormone-influenced genes involved in the sexual differentiation of the brain has swelled well beyond 100. In addition, improved understanding of epigenetic mechanisms that respond to environmental conditions adds new options for our future understanding of gender variant behavioral developments. Neu-

roanatomic studies of cadaver brains and especially the widening use of imaging of the living brain has led to a proliferation of findings on sex differences on all levels of human neuroanatomic organization. First findings on gender variant persons are gradually emerging, although their functional significance is yet to be delineated. In the absence of animal models of identity, our understanding of the development of gender identity and its variants lacks behind that of gender-related behavior. On the societal level, stigma and discrimination continue to be of major clinical concerns, and several recent studies have added to the systematic documentation of emotional and psychiatric consequences. The increasing emphasis on the human rights approach to the modification of public policy towards persons from the DSD and transgender spectra is therefore a necessary complement to scientific advances.

Conflict of Interest: None disclosed

Financial Support/Funding: This is an unfunded review, but some of my work I will be citing (in addition to that of others) has been funded by NIH (USA). Note that I was invited to prepare a REVIEW; it does not fit any of the abstract formats listed above.

III - SYMPOSIA

SYMPOSIUM S1.1
PASSM Symposium

S1.1-2

IMPACT OF THE METABOLIC SYNDROME ON THE MANAGEMENT OF ERECTILE DYSFUNCTION

Anis Tarek

Metabolic syndrome (MS) refers to the clustering of several cardio-metabolic risk factors, including abdominal obesity, hyperglycemia, dyslipidaemia, and elevated blood pressure. The experts of the National Cholesterol Education Program Adult Treatment Panel III created one of the widely accepted definitions of MS in 2001. In this definition, abdominal obesity, high blood pressure, and high fasting blood glucose (FBG), high triglyceride (TG), and low high-density lipoprotein (HDL) cholesterol levels have been suggested as risk factors for MS. The presence of any three of the five factors has been defined as MS. Recent studies support the notion that these metabolic abnormalities do indeed cluster beyond the effect of chance, and that a single factor may underlie the association. That insulin resistance and abdominal obesity, key components of this cluster, are also associated with perturbations in plasma adipokine levels, altered fatty acid metabolism, endothelial dysfunction, pro-coagulant state and systemic inflammation underscores the breadth and complexity of the patho-physiology of this clustering, which is still poorly understood. In addition to cardiovascular disease and diabetes, insulin resistance is also associated with a wide spectrum of clinical disorders, including polycystic ovary syndrome, non-alcoholic fatty liver disease, sleep-disordered breathing, hypogonadism, chronic kidney disease and certain cancers. The National Health and Nutrition Examination Survey 1999–2002 estimated the age-adjusted prevalence of MS in US adults aged 20 years and over to be 39.1%. Similar to erectile dysfunction, MS is more prevalent with increasing age, affecting half of adults aged 60 years and over. The prevalence of MS is increasing in

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S1.1-3

AN EVIDENCE-BASED PERSPECTIVE TO COMMONLY PERFORMED ERECTILE DYSFUNCTION INVESTIGATIONS

Ghanem Hussein M (Department of Andrology, Sexology & STDs, Cairo University)

Introduction and objectives: Currently there is no universally accepted gold standard diagnostic test to differentiate psychogenic from physical erectile dysfunction (ED). Instead, sexual health specialists rely on a detailed history, a focused physical examination and specialized diagnostic tests to decide the etiology of the ED.

Methods: We review the concepts of evidence-based medicine (EBM) in the area of medical diagnostic tests. We highlight four of the well-known diagnostic tests (penile duplex, phacoarteriography, pharmacocavernosometry/cavernosography [PHCAS/PHCAG] and nocturnal penile tumescence [NPT]) monitoring for ED evaluation within an evidence-based perspective.

Findings and discussion: While penile color Doppler has good evidence of supporting its use in the diagnosis of arteriogenic ED, data supporting its diagnosis of a physical disorder associated with cavernous venous occlusion dysfunction are lacking. PHCAS/PHCAG's main drawback is an unknown positive predictive value and a possibility of frequent false positive results. NPT has many advantages when differentiating psychogenic from organic ED, however, several questions related to its physiological mechanisms do exist

Recommendations: Several good diagnostic tests are useful in the evaluation of men with ED. However, modern evidence based concepts –mainly the Positive Predictive value and Likelihood Ratio- need to be assessed and applied to these tests to obtain their maximum clinical benefits.

References: 1. An Evidence-Based Perspective to Commonly Performed Erectile Dysfunction Investigations. Hussein Ghanem & Rany Shamloul. J Sex Med Volume 5, Issue 7, July 2008, Pages: 1582-1589 2. Broderick GA. Evidence based assessment of erectile dysfunction. Int J Impot Res 1998; 10 Suppl 2:S64-73.

Conflict of Interest: None disclosed

Financial Support/Funding: Cairo University

SYMPOSIUM S1.3

AASECT Symposium: The critical role of certification for sexuality professionals

S1.3-3

THE CRITICAL ROLE OF CERTIFICATION FOR SEXUALITY PROFESSIONALS

Miletski Hani, De Villers Linda, Bush Ginger Helen

A Day in the Life of a Sex Therapist - Hani Miletski Ph.D, MSW This pres-

entation describes a day in the life of a sex therapist certified by AASECT (the American Association of Sexuality Educators, Counselors, and Therapists). A description of various clients/patients seen in one day, the presenting problems and issues, a discussion of what is sex therapy, the training required to become a sex therapist, and the AASECT certification process will be described. We will discuss AASECT's various support systems, such as the listserv, supervision, and referrals available for those sex therapists encountering difficult cases. A Month in the Life of a Sex Educator and Supervisor - Linda De Villers, Ph.D This presentation addresses common experiences encountered in the professional work of an AASECT-certified Sex Educator, Supervisor, and Diplomate in Sex Therapy. It highlights the value of AASECT certification for professionals wishing to serve as sex educators, and the educational contexts in which sex education/training is offered. It describes the supervision requirement and how supervision significantly contributes to the effectiveness of a sex educator by deepening knowledge about effective sex education, addressing ethical issues that may arise, and providing an opportunity to address personal issues around sexuality that could compromise effective education. A Year in the Life of the President of a Certifying Organization Ginger Bush The AASECT President works nationally and internationally with the media, universities, medical, and judicial systems to promote understanding of the enhanced competence and reliability of certified sexuality professionals.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S1.4

New Opportunities for Counselors and Therapists within sexual Medicine

S1.4-1

NEW OPPORTUNITIES FOR COUNSELORS & THERAPISTS WITHIN SEXUAL MEDICINE

Perelman Michael A. (NY Presbyterian Weill Cornell Medical Center)

Better understanding of mind/body integration will inspire today's sexologist's most important future contributions to sexual health. There is considerable discussion, if not dissension within our own ranks, regarding our identity as sex counselors and therapists in the new millennium. Sex counselors and therapists can best provide enhanced services to individuals/couples with sexual concerns and the public at large, by unifying ourselves behind models that integrate an appropriate and judicious use of sexual pharmaceuticals within existing sex counseling/therapy theory and practice. We must embrace knowledge gleaned from our colleagues in cardiology, endocrinology, gynecology, primary care (PCP) and urology with the same enthusiasm, which we previously chastised them for not appreciating

our own wisdom. This symposium provides a multidisciplinary update to a medical/pharmaceutical psychosocial-cultural approach to the etiology, diagnosis and treatment of sexual disorders (SD). A panel of internationally recognized sexual medicine experts, who are also specialists in cardiology, gynecology, and urology respectively, will discuss their role in the diagnosis and treatment of SD. Their discussion will include the use of PDE-5, inhibitors, hormone augmentation, selective serotonin re-uptake inhibitors (SSRIs) and other medical therapies. Dr Perelman will chair and present a conceptual model, which integrates the use of sexual pharmaceuticals within existing sex counseling/therapy theory and practice. These talks will all suggest new opportunities for sex counselors and therapists within sexual medicine. The symposium will conclude with an interactive audience/panel question and answer period, focusing on ways to improve multidisciplinary communication, referrals and treatment.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S1.5

Psychosexual therapy in the context of three major world religions

S1.5-1

PSYCHOSEXUAL THERAPY IN THE CONTEXT OF THREE MAJOR WORLD RELIGIONS

Nasserzadeh Sara (Consultant), Stayton William R (Assistant Director Center of Excellence for Sexual Health Morehouse School of Medicine Atlanta), Ribner David S. (Director of Sex Therapy Training Program)

Introduction: Considering the theme of XIXth World Congress of Sexual Health; 'Sexual Health & Rights: A Global Challenge' and the increasing trend towards globalization, this symposium aims to bring together scholars from around the world each representing one of the world's leading religions and give them a platform to share their experiences with other international colleagues attending the conference. Format Contributing panelists are sexual health practitioners who have good working knowledge of the religion they represent as well as experience working with groups from those communities. Therefore, participants can benefit from rich and applied discussions followed by a question and answer session. Most commonly presented problems from each group will be discussed; comparisons among different religions and practical and achievable working strategies will be introduced. Participants should go away with foundation knowledge of how to work with common problems of their clients who practice one of the world's major religions. Who will benefit from this symposium? This symposium is beneficial for health care professionals who work in the context of sexual health services and therapy. In particular, this session will help psychotherapists, sex therapists or medical professionals who deal with

sexual concerns and dysfunctions of these communities and groups, to shape a better alliance with their patients/clients for more effective treatment compliance.

Conflict of Interest: None disclosed

Financial Support/Funding: N/A

SYMPOSIUM S1.7

ISSM symposium - What's New in Sexual Medicine?

Moderator: Craig Donatucci, M.D.

S1.7-1

PHARMACOTHERAPY OF ED: THE FUTURE

El-Meliegy Amr, Head of Andrology Unit, Dr. Soliman Fakeeh Hospital, Jeddah, Saudi Arabia, Professor of Andrology, Cairo University, Egypt, ISSM Website Director

S1.7-2

TREATMENT PARADIGMS FOR MEN WITH ED AND PE: ON-DEMAND VERSUS DAILY DOSING

Donatucci Craig, Professor of Urology, Duke University School of Medicine, President, Sexual Medicine Society of North America

S1.7-3

MANAGEMENT OF TREATMENT RESISTANT PE

ASSALIAN Pierre, Associate Professor, Department of Psychiatry, McGill University, Director Human Sexuality Unit, McGill University Health Center, Executive Director, Canadian Sex Research Center, Member Standards Committee, ISSM

S1.7-4

SEXUALITY AND LOWER URINARY TRACT SYMPTOMS: AN ASIAN PERSPECTIVE

*Soebady Doddy, Professor & Chairman, Dept. of Urology, Soetomo Hospital Airlangga University School of Medicine
President-Elect, Asia-Pacific Society for Sexual Medicine*

S1.7-5

HSDD IN WOMEN - A BIOLOGICAL OR PSYCHOSOCIAL PROBLEM

Blitzer Johannes, Chairman, Department of Gynecology and Social and Psychosomatic Medicine, University Hospital, Basel, Switzerland, Member Standards Committee, ISSM

S1.7-6

CIRCUMCISION FOR HIV PREVENTION IN AFRICA

Dabees Khaled, Assistant Professor of Urology, Tanta University, Egypt, President, Africa-Gulf Society for Sexual Medicine

SYMPOSIUM S1.8

Between Sexual Health, Sexual Medicine and Sexual Rights: Who are the Sexologist?

Chair: Alain Giami (France)

S1.8-1

SEXOLOGY AND SEXUAL HEALTH : BETWEEN GLOBALISATION AND LOCAL SPECIFICITIES

Giami Alain (Inserm, U822, Le Kremlin Bicêtre, F-94276, France)

Sexology is undergoing major changes in terms of development of international organizations, development of professional training, creation and use of international standards of professional certification, and development of peer review journals. It stands at a cross-road between sexual health, sexual medicine and sexual rights. Parallel to this development, we are currently confronted to the globalization of sexology and sexual health through a complex process of unification of the scientific and professional standards. Across countries, sexologies are anchored in different histories, which started at the beginning the XXth century and which allowed the development of original and specific traditions and orientations in this field. In each country there is a social organization of sexology including scientific and professional associations, specific training and professional certification, peer reviewed journals, and code of ethics. Each country is also participating regional (Flasses, Slams, EFS, ESSM) and global organization of sexology (WAS, ISSM, etc...) in a different manner. The objective of this international symposium is to open a discussion about the developments of sexology, as a profession, in different regions such as Latin America, Canada and Europe. This symposium is based on research programs on sexuality with a sociological and historical approach carried on by collaborating institutions in the different countries involved. Euro-Sexo involved 7 European countries, and the project "Sexuality, science and profession in Latin America" (CLAM/IMS/UERJ/Inserm) involves 5 Latin American countries.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S1.8-2

SEXOLOGY IN PERU: A DIFFUSE FIELD

Caceres Carlos F. (Cayetano Heredia University Inst of Health, Sexuality and Human Development), Villacorta Victoria (Cayetano Heredia University Inst of Health, Sexuality and Human Development), Caceres Carlos F. (Cayetano Heredia University Inst of Health, Sexuality and Human Development)

Introduction This study sought the reconstruction of the sexology field in Perú, based on testimonies of key actors and documents, seeking their boundaries, locations and changes throughout two decades.

Methods Two basic techniques were used: documentary analysis (i.e. review of documents and training curricula) and in-depth interviews focused on experiences and perceptions of Peruvian professionals.

Findings Sexology in Peru never fully constituted as a field throughout 20 years of "official" existence. Centered in Lima, it suffered fragmentations resulting from conflicts between those endorsing bio-medical or psychiatric paradigms and those with more integrated perspectives (e.g. including sexual health/rights and sex education), gradually losing institutional strength. After those schisms, it assumed the status of a predominantly therapeutic proto-field of physicians, psychiatrists and some psychologists, with moral perspectives ranging from 'technocratic' to ultra-conservative, evidenced through their significant presence in the media. At present, sexology practice in Peru still lacks cohesion, since a small group of professionals trained overseas coalesced with another of more "empirical" sex therapists. Seemingly it is led by urologists who, after the advent of Sildenafil, are promoting its transition into 'Sexual Medicine' and 'Andrology'.

Recommendations Sexology in Peru remains at a basic level of institutionalization, and its boundaries have become increasingly unclear. If the field is to advance, its institutional basis should be consolidated, and accredited training institutions should be established. Above all, however, a theoretical discussion is needed on the purpose of the field and its practitioners' understanding of human sexuality and sexual health.

Conflict of Interest: None disclosed

Financial Support/Funding: The Latin American Center for Sexuality and Human Rights, with funds from The Ford Foundation.

S1.8-3

CONTEMPORARY SEXOLOGY IN BRAZIL: THE TENSIONS AND COMPROMISES OF A PROFESSIONAL FIELD

Russo Jane A. (CLAM - Institute of Social Medicine - University of the State of Rio de Janeiro), Rohden Fabiola (CLAM - Institute of Social Medicine - University of the State of Rio de Janeiro), Torres Igor (CLAM - Institute of Social Medicine - University of the State of Rio de Janeiro)

Introduction: In this paper we present the results of a research made at the Latin-American Center on Sexuality and Human Rights in collaboration with INSERM (France) about sexology in Brazil. Its aim was to trace the

constitution of a professional sexological field in Brazil and its mechanisms of legitimation and control.

Methods: Using a qualitative approach, we explored four fields of investigation: (1) sites at the internet; (2) sexological journals; (3) interviews with 15 relevant professionals in the field; (4) participant observation in congresses.

Findings and discussion: Brazilian contemporary sexology emerged in the end of the 1970's and institutionalized itself in the 1980's. Although it emerged through the joint effort of gynecologists and psychologists, the so called sexual medicine appears to be imposing itself, nowadays, as the dominant trend in the field, controlled mostly by urologists. This inflexion in the sexological profession has an intimate connexion with the growing influence of pharmaceutical industry. Our observation shows that the tension between gynecologists and psychologists, on one hand, and urologists, on the other, can be articulated with the opposition between male and female sexuality, the first one being more "objective" and, for this reason, more easily interpreted in purely medical terms. Female sexuality, being more elusive and "mysterious", is less prone to be captured by the medical discourse. At the same time, gender and sexual rights themes, although present in the sexological discourse, are peripheral to the more pragmatic agenda of clinical practice, and are discussed mostly among educational sexologists.

Conflict of Interest: None disclosed

Financial Support/Funding: Ford Foundation

S1.8-5

SEXOLOGY AS A PROFESSION IN QUEBEC

Courtois Frédérique J (Université du Québec à Montréal), Boucher Sophie (Université du Québec à Montréal), Manseau Hélène (Université du Québec à Montréal), Levy Joseph J (Université du Québec à Montréal), Goulet Michel (Université du Québec à Montréal)

For the last forty years, the Sexology department of the University from Quebec in Montreal has contributed to the teaching and training of the educational sexologists and clinicians. In this context the identity associated with the sexologist's title is extremely different from other sociocultural contexts, such as the Canadian, American or European contexts. Given the presence of a multidisciplinary university training in sexology and the growing professional recognition of the sexologists' status in Quebec, it is unlikely that physicians, psychologists, or other health professionals will use this title without the corresponding training in our department. The presentation will describe the specificity of sexology in Quebec, both as a unique professional identity and as a unique expertise that significantly contributes to the public and scientific knowledge regarding human sexuality. The steps undertaken for the recognition of the professional sexologist in the Québécois' professional system will be also presented.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S1.9
EFS Symposium

S1.9-1

MALE AND FEMALE SEXUAL DYSFUNCTIONS: RESULTS OF FOUR YEARS OF CLINICAL ACTIVITY

Simonelli Chiara (University)

Introduction The main purpose of this study is to examine the requests presented by a sample of patients in an institute of clinical sexology in Rome. Action This study analyses the clinical reports of 380 patients, 184 women and 196 men, ages 17-70 years (mean=34.99; SD=10.767), attending the institute between 2004 and 2008. The sample was divided into groups, males and females who required consultation for themselves and subjects who asked for a couple's consultation. The valuation methods to classify sexual dysfunctions are referred to DSM-IV-TR. Descriptive statistics were used to analyze data.

Outcome The most common sexual dysfunctions in men are ED, PE, HSD (52%, 30%, 12% respectively); while women most frequently reported difficulties are vaginismus, anorgasmia, HSD (40%, 35%, 19% respectively). Couples requests are more related to Unconsummated Marriage, ED, HSD (31%, 25%, 18% respectively). Both men and women with sexual dysfunctions revealed a co-presence of psychological problems like anxiety disorder, relationship troubles, mood disorder. Discussion and recommendations Our findings revealed a partial accord to literature about the prevalence of sexual dysfunctions. The association between psychological problems and sexual difficulties confirms the need to follow an integrated approach to better manage the issues presented by patients.

References Basson, R, Leiblum, S, Brotto L, Derogatis, L, Fourcroy, J, Fugl-Meyer, K, Graziottin, A, Heiman, JR, Laan, E, Meston, C, Schover, L, van Lankveld, J, Weijmar Schultz, W. Definitions of women's sexual dysfunction reconsidered: Advocating expansion and revision. *J Psychosom Obstet Gynecol* 2003; 24:221-229.

Conflict of Interest: The Author has no financial or other potential conflicts of interest in the subjects of the manuscript.

Financial Support/Funding: There are no fundings for this research

S1.9-4

HELPING OLDER MEN WHO HAVE SEXUAL PROBLEMS

Kevan R Wylie MD DSM FRCP FRCPSych (Clinical Lead, Porterbrook Clinic, Sheffield.)

Sexual gerontology is the study of sexuality in the aging person. Improving the quality of life for aging people requires a multi-disciplinary and inter-disciplinary approach. Facilitating the opportunity for innovative in-

terventions including sex education and opportunities for intimacy despite fragility provides legitimacy for both research and proactive intervention of sexuality in aging men.

The evidence for physical disease affecting sexual function in men is well documented. The role of psychological, social and environmental factors can also have an important contribution towards overall sexual function and satisfaction. Developing strategies to ask about the sexual lives of their older patients requires skills and confidence by physicians and clinicians to be able to broach these matters in a sensitive, caring yet enquiring way. With evidence that sex does play an important role for many aging people, the onus is on clinicians to raise the matter with patients and to offer safe treatment options. Adopting coping strategies to deal with change is valuable. Prescribed medications may produce iatrogenic dysfunction.

Managing the expectations and demands in an era of well informed patients with psychosexual and sexual medicine problems means that clinicians must show a resolve to champion for this group of people.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S1.10
Sexuality and Ethics

S1.10-1

REGULATING SEXUAL BEHAVIOR AND ATTITUDES BY THE CRIMINAL LAW

Hermstad Knut

For symposium of sexual ethics. Most countries regulate sexual behavior and attitudes by the criminal law, stating that this is necessary to prevent people and to secure the stability of society. Frequent subjects for regulations are sexual offences, pornography, prostitution and different paraphilias. From an ethical point of view it could be questioned whether regulations should be maintained also in cases where no obvious harm is connected to the sexual activity. Protecting certain moral standards or values might be problematic to secular states. In this presentation I'll discuss the relations between sexual ethics and the criminal law in the light of The United Nations' Declaration of the Human Rights and the WAS statement about sexual rights. The WAS statement emphasizes that individuals should be free to develop their own sexual preferences, and – as far as no harm is caused to others – have the possibility to choose sexual behavior and attitudes based on personal moral standards. New laws in the Nordic countries prohibiting customers to buy sex however, support that legislation should be a tool to influence on peoples' moral attitudes and thinking. Consequences might be that moral aspects of sexual matters in some cases will be due to criminal investigation. On this background I'll use the WAS statement to

argue that the sexual rights must be granted for all people, and that the mixing together of law and moral raises serious ethical dilemmas. On the other hand local variations due to culture and religion must be tolerated on an individual

Conflict of Interest: No potential conflicts of interest

Financial Support/Funding: No special funding. Research work done as a part of my work at The University Hospital of Trondheim

S1.10-2

WOMEN'S BODYRIGHTS AND CHRISTIAN SEXUAL ETHICS

Boasdottir Solveig Anna (The department of theology and religious studies)

Dr. Solveig Anna Boasdottir Associate Professor Department of theology and religious studies, University of Iceland Reykjavik, Iceland solanna@hi.is **WOMEN'S BODYRIGHTS AND CHRISTIAN SEXUAL ETHICS** For at least twenty years, Western feminist theologians working in the field of sexual ethics have been wrestling with question about human sexuality. Critical of oppressive, androcentric perspective in traditional Christian sexual ethics, feminist scholars have argued for a comprehensive revision of Christian thought in sexuality issues, - a revision that would, instead of denying women the moral right to control their own bodies, affirm and respect women's bodyself and bodyright. In my presentation I concentrate on the concept of bodyright with reference to feminist ethicist Christine Gudorf arguing that Western Christian culture has failed to recognize the bodyright of women and children. One of the consequences of this failure is the evidence of pervasive sexual violence against women. Feminist theologians working in the field of Christian sexual ethics struggle to move Western Christian culture toward more complete respect for bodyright. The moral vision is that all sexual relationships would change if bodyright were respected. For this to occur all sexual unions would have to be based in mutuality. Feminist theologians in Western context have a valuable ethical contribution to make to global sexual ethics. Based on the moral principles of human rights, women's human rights and sexual rights are underlined through the concept of bodyright: the moral right that all humans have to be in charge of their own bodies

Conflict of Interest: None disclosed

Financial Support/Funding: not applicable

S1.10-3

SEXUAL ETHICS: HEALTHY SEXUALITY? – DISCUSSING NORMATIVE AFFILIATIONS OF THE CONCEPT

Paalanen Tommi

My research of philosophical sexual ethics aims at morally neutral and transparent conceptions in the field of sexuality. The concept of "healthy sexuality" is nowadays widely used in context of sexual well-being. Un-

fortunately the concept also carries normative potential that can be used to control and confine both personal expressions of sexuality and sexual culture in general. I analyse the concept using philosopher Alan Soble's work as a basis. Soble shows how the idea of health depends strongly on culture-related ideas of value, functionality, impairment and normality. I use contemporary examples of medical and public discussion to show how health-arguments are used inappropriately mixing values with factual claims. The most vulnerable area for misguided evaluation is mental health. Psychiatric definitions for mental disorders include several sexual preferences which are unusual. Healthy sexuality is too often correlated with value-laden idea of normality. For some groups and individuals health has become a smokescreen, which is used to further political or religious agendas against sexual minorities. As a result of my ethical research I present some suggestions, how the concept of sexual health should be handled. First, statistical normality or presumed naturality of sexual preferences cannot be a basis for evaluating health. Second, interfering in someone's sexuality must be guided by ethical decisions or patient's requests, not by patronising or referring to some view of healthy sexuality. Summing up, sexual health must be understood as a thin baseline of conditions that supports individuals capability to self-direct her sexuality.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S2.2

Love and sexuality on the internet

Chair: Sven-Axel Månsson

S2.2-1

LOVE AND SEXUALITY ON THE INTERNET: A FOLLOW-UP OF THE 2002 SWEDISH INTERNET STUDY

Daneback Kristian (University of Gothenburg), Månsson Sven-Axel (Malmö University)

Proposed symposium: Love and sexuality on the internet Love and Sexuality on the internet: A follow-up of the 2002 Swedish internet study The overall purpose of the present study was to follow-up the results from the Swedish study on love and sexuality on the internet conducted in 2002. More specifically our aim was to compare any changes or differences in user demographics, online activities engaged in, and reasons for using the internet for love and sexual purposes. Follow-up studies within the field are scarce and this was the first of its kind in Sweden. Data collection was carried out through a web questionnaire. We used a revised version of our 2002 instrument which was placed on the Swedish web portal Passagen. The self selected sample comprised respondents who visited the portal site. The results are discussed in relation to the 2002 study and are also discussed in relation to the internet as a constantly changing medium and its equally

changing user-demographics. The results are interpreted within a theoretical framework comprising Gagnon & Simons theory of sexual scripts and Baumans theory of liquid modernity.

Conflict of Interest: None disclosed

Financial Support/Funding: The Swedish National Board for Youth Affairs

S2.2-2

LOVE AND SEXUALITY ON THE INTERNET: "TEENAGERS GET UNDRESSED ON THE INTERNET" - YOUNG PEOPLE'S EXPOSURE OF BODIES IN A SWEDISH INTERNET COMMUNITY

Sveningsson Elm Malin (Media and Communication Studies, Karlstad University)

During recent years, Swedish media have paid attention to young people's presentations of self in Internet communities, claiming that these presentations are often sexually provocative. The present study aims at investigating young men's and women's presentations of self in Sweden's largest Internet community, focusing specifically on how bodies are displayed. This is done through quantitative and qualitative content analyses of the photos of 88 users. Results show differences in what parts of their bodies the young men and women show: women tend to focus on faces, while men focus on torsos. Results also contradict the image depicted by the media, as very few photos in the sample can be described as provocative. One explanation offered here concerns the specific Internet community's lack of anonymity, meaning that the interaction is steered by the same mechanisms and social pressures at work in offline environments.

Conflict of Interest: None disclosed

Financial Support/Funding: The Swedish Research Council

S2.2-3

LOVE AND SEXUALITY ON THE INTERNET

Sevcikova Anna (Faculty of Social Studies, Masaryk University)

To search for sexual contacts via Internet is a well known phenomenon. In this study the author focused on investigating one particular online application – free erotic contact sites (ECS) in Czech Republic. By using grounded theory it was aimed to explore the characteristics of ECS use and the meaning of why the informants' choose to seek sex online. The author interviewed 4 females and 13 males aged 23 – 56. All informants were recruited from ECS. There were differentiated 4 ways of ECS use: (1) seeking sexual contacts online, (2) seeking sex offline, (3) seeking sexual contacts both online and offline, (4) having at least virtual sex when finding a partner for sex offline is impossible. The internet provided a direct access to sex. The online anonymity and the text-based ECS formed an experience of the intimacy leading to disclosure of true sexual feeling and inner sexual desires. In the context of virtual sex, Czech participants de-

veloped a parallel between the Internet without endless possibilities and infinite sexual fantasizing online. An unclear border between sexual disclosure and sexual fantasy was related to experimenting with sexual longings and self-representation online. Results support the importance of online disinhibition for sexual disclosure and the quin-A-engine theory. It is necessary to integrate a developmental approach in order to study further what kind of sexual activities are preferred by whom.

Conflict of Interest: None disclosed

Financial Support/Funding: Czech Ministry of Education, Youth and Sports (MSM0021622406); Faculty of Social Studies, Masaryk University in Brno

S2.2-4

LOVE AND SEXUALITY ON THE INTERNET: ACCURACY OF INTERNET PROFILE INFORMATION ON HIV IN MSM AND TRANSMISSION RISKS WITH SEROSORTING

Ross Michael W (University of Texas)

We present data from two large samples, >3,000, of US MSM who use the Internet for sexual partner contact. Information on their profiles and the domains on which they have received inaccurate information, and given inaccurate information, is presented, with emphasis on HIV serostatus information. Data indicate that there respondents have lied to others about their HIV serostatus on average 8% of the time, but 20% have been lied to about HIV serostatus. Characteristics of inaccurate HIV information transmitters are described and the potential for HIV transmission through Internet-mediated partners examined.

Conflict of Interest: None disclosed

Financial Support/Funding: US NIH

S2.2-5

LOVE AND SEXUALITY ON THE INTERNET

Löfberg Cecilia M (Department of Education, Stockholm university)

This study focuses on how young people communicate norms, ideas and values about love and sexuality online and how girls and boys are being positioned in heterosexual discourses. Data was collected on a Swedish web community for young people. 143 discussions from three different discussion groups were analysed. The discussions were initiated by questions about love and sexuality from young people, age 12-15. Through identifying constantly recurring questions, statements and interactions, and variations of these, a deeper understanding of relevant aspects concerning the topics were revealed. Girls were depicted as more in touch with their feelings, and more disposed to relate emotionally to boys. Boys were presented as emotionally more immature or without skills to express emotions, even if this also was contradicted by ideas about the capacity for emotions as something individual. In young people's ambition to evolve sexually girl's

questions showed awareness for sex and sexuality both as a risk and as a potential while boys were interested in facts. They were also answered to differently by adults. Girls were given warnings and considerations while boys were encouraged in greater amount. Young people's ideas were expressed in a dynamic, mostly problematic, relation between a cultural "present" of their everyday life where offers about love and sexuality are mediated and varying and a historic context that holds specific notions about gender, age, love and sexuality established in adult society. Findings also show how heterosexual discourses are used to reinforce boys and restrict girls in sexual activity

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S2.3

ISSWSH Symposium: How providers make FSD worse

HOW PROVIDERS MAKE FSD WORSE

Annamaria Giraldi MD, PhD, Woet Gianotten MD, Irwin Goldstein MD, Anita Clayton MD and Sue Goldstein BA.

Introduction: Healthcare providers can precipitate or exacerbate sexual dysfunction in women.

Methods: Four members of the International Society for the Study of Women's Sexual Health present evidence-based and anecdotal information about female sexual dysfunction (FSD) and how providers sometimes make it worse.

Results: FSD is often iatrogenic, specifically with cancer therapies, hormonal contraception and antidepressant medications. Anti-estrogen therapies for breast cancer and gynecologic or abdominal cancer treatments can leave a woman with sexual dysfunction--particularly sexual pain. Hormonal contraception may increase sex hormone binding globulin (SHBG) reducing bioavailable testosterone, potentially impacting desire, arousal and/or orgasmic ability. Such problems can also occur with selective serotonin reuptake inhibitors (SSRIs), related to serotonin's inhibitory effects on desire via dopamine, norepinephrine, and testosterone systems, and through direct negative effects on arousal and orgasm. For some women, FSD treatment is not discussed because their providers believe sexual health problems to from psychological issues exclusively or due to stress and exhaustion.

Discussion: Achieving a balance among sex steroids and neurotransmitters in the brain may impact desire, and affect arousal and orgasm in the genitalia. Local estrogen treatment is an alternative for breast cancer survivors. Increasing systemic testosterone may counteract high SHBG. Changing antidepressants from an SSRI may be the answer for some women, or

adding an antidote such as bupropion or buspirone may reverse the negative effect on sexual function.

Conclusion: Health care providers may avoid or reverse iatrogenic-induced sexual dysfunction by considering treatment effects on sex hormones and neurotransmitters, and with specialist referral when indicated.

S2.3-1

EFFECTS OF CANCER TREATMENTS ON WOMEN'S SEXUAL FUNCTION

Woet Gianotten, MD

Introduction: Cancer and its treatment influence female sexuality. The disease itself can change sexual desire and the intimate relationship, but usually only the later stage emaciation directly harms the sexual response. The majority of sexual damage is caused by the various medical interventions. In genital and perigenital cancer surgery and/or local radiotherapy frequently decrease the sexual response potency (less lubrication, more dyspareunia and problems reaching orgasm). Total body irradiation or chemotherapy in blood and lymph cancer impair ovarian and adrenal androgen production, causing less sexual desire, less sexual arousability and less orgasm potential. Low androgen levels also happen in ovarian cancer after ovariectomy and chemotherapy shutting down the adrenal androgen production. Breast cancer is accompanied by surgery and radiotherapy with local sexual side effects in the breast area (loss of erogenous area, loss of attractiveness and lost erotic touch by lymphedema), whereas hormonal treatment has genital (vaginal atrophy) and general sexual side effects (reduced bioavailable androgen levels). Surgery for cervical and ovarian cancer and various chemotherapy treatments will finish fertility and be another cause for impaired sexual function. Cancer and its treatment are estimated to temporarily or permanently add FSD in 35-50% of all female cancer patients.

Conclusion: In the battle against cancer sexual damage is rather inevitable. Dealing with this iatrogenic FSD is important in quality-of-life care. Oncologists should address the reality of sexual damage and refer when needed. Sexologists should develop the necessary knowledge and skills to deal with this area of sexual medicine ('oncosexology').

There was no financial funding for my part .

There is no conflict of interest

SYMPOSIUM S2.4
Sexual rights

S2.4-1
FURTHERING REPRODUCTIVE RIGHTS OF WOMEN IN RURAL INDIA & THE IMPEDIMENTS

Bahuguna Pallavi (Rural Litigation and Entitlement Kendra)

Legal education in rural India which circumscribes rights of women with special focus on reproductive rights, rape laws, female feticide, domestic violence, child marriage etc. has played a pivotal role in translating these rights into practice. This has been possible through innovative legal education drives which have identified a set of para-legal women who act as reservoirs of knowledge and are adequately equipped to handle instances of violation of such rights. Further, grass-root democracy through institutions of local self-governance (Panchayats) have been accorded functions relating to health by the Constitution of India and when women have been elected to such bodies they have had a phenomenal positive impact on reproductive and other rights of women and empowerment of other marginalized communities. However, the impediments being the two-child norm policy which bars a persons from holding office if such person has more than two children in institutions of local self governance have adversely affected women participation in these institutions which is hampering their decision making power which in turn is impacting their social, economic and political rights. This has also resulted in sex-selective abortions, abandoning of children and wives etc. As a result such a law is hampering women empowerment in a country which has a patriarchal set-up and where women do not have a right to decide when and how many children to have.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S2.4-2
EFFECTS OF TRADITIONS AND CULTURAL BELIEFS ON SEXUAL HEALTH AND SEXUAL RIGHTS OF NIGERIANS

Okolie Ugochukwu C (Ebonyi State University, Abakaliki)

This study sought to identify various traditions and cultures in Nigeria and their negative effects on sexual rights and sexual health of Nigerians. The study was a descriptive survey guided by four research questions. A twenty (20) item questionnaire was administered to the population used. A four point modified Likert type scale was used for collecting data. Data collected were analyzed using mean. Items with mean scores above 2.50 were accepted. Five hundred and fifty people comprising of professors, health professionals, culture experts, Traditionalists, Community leaders, HIV/AIDS and Sexuality-based Organization workers, Activists, Policy makers, Re-

searchers, sexual health and sexual rights consultants from eleven states of Nigeria were randomly selected for the study. Literature reviews were conducted and the review covered numerous published books and articles, which have theoretical relevance to the study. Finding among others revealed that traditions and cultural beliefs of most Nigerians hinders their rights to sexual health and therefore must be restructured or abolished to enable people have their right to sexual health and education. Conclusion and recommendations were drawn from the findings of the study.

Conflict of Interest: Due to lack of access to quality sexuality education, most women and young girls in rural communities in Sub Saharan Africa are humiliated, abused and are deprived of their sexual rights.

Financial Support/Funding: I nominate the following foundations; Ford Foundations USA, Clinton Foundation, Swedish International Development Agency, Department for International Development Agency UK and Gates and Melinda Foundation USA.

S2.4-3
MAN, FAMILY PLANNING, EQUITY AND EQUALITY

Konecna Hana (University of South Bohemia, Ceske Budejovice, CR), Kubickova Adela (University of South Bohemia, Ceske Budejovice, CR)

Introduction: The woman's "pill" has contributed, according to sociologists, more than anything else to transformation of the society. The use of man's contraception methods has been declining worldwide. There is no reliable, safe and reversible contraception for men so far. Its development was almost stopped, allegedly because of absence of an interest group that would enforce the development. How do men plan their parenthood in the Czech Republic, a country where the woman's pill is easily accessible? **Methods:** Quality contents analysis (Grounded Theory) of semi-structured interviews made with 49 men and 92 women about family planning. Further, analysis of 2791 answers to the survey mapping the interest in man's pill.

Findings and discussion: Outright majority of men (46) consider parenthood an important part of life and family planning constitutes result of partner negotiation for them. In spite of declared participation in negotiation about parenthood, both men and women perceive contraception rather as a matter of the women. Men are aware of the risks this situation brings to them, but they seem to have resigned from them. They realize that their right to decide whether, when and with whom to have the child is limited, but they justify their lower powers in decision-making by the woman's higher investment into pregnancy and motherhood.

Recommendations: Negotiating about parenthood is extremely difficult in countries where "pill" is easily accessible. There should be programs to teach equivalent negotiation, focused particularly on men.

Conflict of Interest: None disclosed

Financial Support/Funding: This project was supported by the grant from Czech Science Foundation No. 406/07/0274

S2.4-4**THE INTRICACIES OF IMPLEMENTING INTERNATIONAL GENDER-RELATED POLICIES TO PROMOTE SEXUAL HEALTH AND RIGHTS IN INDONESIA**

Wardhani Lynda K (Australian National University)

The 1948 Human Rights Universal Declaration emphasizes the equality in dignity and rights including sexual rights. Sexual health and rights is affirmed in ICPD Program of Action (1994), CEDAW (1979), Beijing Platform for Action (1995) and MDGs. Indonesia has ratified the covenants upholding gender equality principles and has taken on the responsibility to put these principles into practice. This paper assesses Indonesia's endeavours to implement international policies to promote sexual health and rights. Methodologies applied centre on policy analysis of legal instruments on sexual health and rights and in-depth interviews with policy makers, program implementers, gender specialists, NGO activists, religious and community leaders. Preliminary findings suggest that critical issues hindering the integration of sexual health and rights relate to lack of commitment, inadequate management skills, misperceptions of financial costs, lack of skilled government officials, cultural values disrespecting women, and religious beliefs entrenching patriarchy. Sexual rights problems include rights to safe and satisfying sexual relationships, to be free from sexual violence, rights to prevention of unwanted pregnancy and unsafe abortion, and access to age-appropriate sexual health services. Success was declared for the family planning program proven effective in lowering total fertility rates, increasing contraceptive prevalence rates, and facilitating "Safe Motherhood" programmes, but this success has been muted by failures in controlling sexually transmitted diseases and assurance of sexual health and education for young people. Since fulfilling sexual health and rights for women is essential, greater priority has to be given to appropriate programs to protect universal sexual rights.

Conflict of Interest: None disclosed

Financial Support/Funding: Australian National University

SYMPOSIUM S2.5
RFSU Symposium**SYMPOSIUM S2.6****Nonformal sexual rights education and sexual pleasure****S2.6-1****NONFORMAL SEXUAL RIGHTS EDUCATION AND SEXUAL PLEASURE: EXPERIENCES FROM A GRASSROOT TRAINING PROGRAM IN TURKEY**

Kaynak Evre (Women for Women's Human Rights (WWHR) - New Ways and The Coalition for Sexual and Bodily Rights in Muslim Societies)

In the framework of the Coalition for Sexual and Bodily Rights in Muslim Societies (CSBR) experience to promote sexual, bodily and reproductive health and rights, this paper will explore women's approach to sexuality, sexual health, sexual rights, and sexual pleasure based on the experience of the Human Rights Education Program for Women (HREP) in Turkey, implemented in 42 cities. The paper will contextualize sexual health and rights in Muslim societies through a human rights approach, draw on experiences of grassroots women in Turkey, in a context where efforts to promote SRHR contend with patriarchal norms and taboos around sexuality. HREP addresses sexual and reproductive rights within the framework of the indivisibility of human rights. While three modules towards the end of the program cover specifically sexuality and reproductive rights, sexual violence is addressed within the scope of the three workshops on violence against women and strategies against violence. Devoting such a large portion of the program to issues of sexuality; emphasizing sexual rights and the right to bodily integrity as an essential human right; addressing sexual violence, sexual health and rights and reproductive rights in separate modules are all strategic choices to underline the centrality of sexuality in women's lives. The presentation will introduce conceptual, analytical and behavioural transformation in women's approach to sexuality and sexual health and rights following the program and draw strategies and recommendations in terms of promoting SRHR at the local level within the international framework of human rights.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S2.6-2**HOW SEXUAL RIGHTS WAS UTILIZED IN THE MAKING OF SEXUALITY EDUCATION: AN EXPERIENCE FROM LEBANON**

El-Kak Faysal (American University of Beirut & The Coalition for Sexual and Bodily Rights in Muslim Societies)

The growing interest in reproductive and sexual health education (RSHE) has been propelled by several global meetings and debates addressing re-

productive and sexual health, unmet needs of youth sexuality, and the challenges of MDGS. Promotion of sexuality and (RSHE) is central to actions that are necessary to promote sexual well-being. Lebanon is one of the countries where reproductive and sexual health school education is highly demanded and advocated for, not only in view of the international consensus around the education issue, but also due to the evidence related to sexual health status and youth vulnerability and lack of proper education on sexual and reproductive health in Lebanon. The objective of this paper is to document and reflect on the ongoing process of integrating education on reproductive and sexual health and gender in school curricula in Lebanon, and the expected outcomes. Framed in the context of sexual health and rights in Muslim societies, the WAS Montreal Declaration, the paper will present the Lebanese case to share strategies on curricula, policy and partnerships, and youth sexuality.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

SYMPOSIUM S2.7
FLASSES Symposium Sexual Health from Latin America: Issues and Controversies

S2.7-1
CUBA: FROM GENDER EQUITY TOWARDS LGBT RIGHTS
Castro Mariela (National Centre for Sex Education)

Introduction: The initiatives developed throughout the Cuban revolutionary process in the 60s and 70s to enhance the women's rights not only determined substantial change in the conditions of men and women, but also the further establishment of social policies which included a National Program for Sex Education, whose main benefits were oriented to women, girls, boy, adolescents and young people. Nevertheless, those aspects related to sexual orientation and gender identity found a stronger cultural resistance expressed also in politics and laws. These weak points of the National Program for Sex Education have achieved successes by the beginning of the Third Millennium. Action: A historical periodization of the National Program for Sex Education in Cuba is presented, having as the analysis point its scientific development (theoretical, methodological and practical) Outcomes: The results that prove progressive changes in favor of the rights of women, girls, boy, adolescents and LGBT population are presented in detail. Discussion and Recommendations: The sexual education focused on the exercise of the full rights of women, children and young people created conditions to move forward into other sexual rights, including those of the LGBT population. It has been shown that the implementation of laws and policies is not enough to guarantee the respect of sexual rights. These must be supported by educational strategies and constant social communication, all in constant evaluation.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

S2.7-2
DIAGNOSTIC MANUAL FOR SEXOLOGICAL DISEASES

Bianco Fernando (President. Centro de Investigaciones Psiquiatricas, Psicológicas y Sexológicas de Venezuela. A Research and Postgraduate Institute. Caracas, Venezuela.)

The Diagnostic Manual for Sexological Diseases is an operative Classification of the different pathologies existent in the field of Sexology. Back in 1992, The FLASSES General Assembly approved The Manual as an Official document of FLASSES. Its preparation began in 1985. After a much international discussion and analyses the final version was presented and approved in Belo Horizonte, during the VI General Assembly of FLASSES.

The Manual present a number of definitions, concepts and constructs that allow understanding the field of Sexology and the area of Clinical Sexology.

The Postgraduate Training Program in Medical Sexology, started in 1985, use the Manual as a main guide during the evaluation, diagnoses and treatment of patients with some kind of Sexological pathology. The classification is functional and operative.

The Manual meet the requirement in order to satisfy the demand of the Necessary Action 7.2 described in the document Sexual Health for the Millennium. A Declaration and Technical Document (WAS.2008).

Equally the Manual make a contribution in the consecution of the goals of Necessary Actions 7.1.7.3, y 7.5 described in the same document. Those are refer to identify, address and treat sexual concerns, dysfunctions and disorders.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

S2.7-4
SEXUAL HEALTH :. FROM LATIN AMERICA
Hernandez Ruben J (Was / Fllasses)

Films have been an extraordinary way to change attitudes on the general public. Examples are very clear : Rain Man, Eyes wide shut , etc. In this 15 minutes video we present several clips that showed up the importance of cinema in sex education and attitudes. A very controversial but useful tool must be used in Clinical and Educational practices. 7 Films are edited and may be discussed. This FLASSES presentation SEX and CINEMA are self explanation sof sexuality issues in today's sexual world. References: 1.Movies and Mental Health.Wedding,Boyd and Niemiec.Hogreffe Ed. 2005 2.Psychiatry and the Cinema. 2ed. Gabbard G and Gabbard K. APP.1999 3.The Healing Movie Book.Kalm M.,2004. 4.Psychiatry and Sexual Health. Mezzich JE, Hernandez S.R. Jason Aronson.2006

Conflict of Interest: Advisory Board Member Eli Lilly
Financial Support/Funding: None disclosed

SYMPOSIUM S2.8

Sexual Health and Law

S2.8-1

DECRIMINALISATION OF SEX WORK: THE NEW ZEALAND EXPERIENCE

Abel Gillian M (University of Otago, Christchurch), Fitzgerald Lisa J (School of Population Health, University of Queensland), Brunton Cheryl R (University of Otago, Christchurch)

Introduction and Methods: Sex work in New Zealand was decriminalised through the enactment of the Prostitution Reform Act (PRA) in 2003 which provided sex workers with the same legal, employment and health and safety rights as people in other occupations. Five years on, a review of the Act has concluded that it has been effective in achieving its purpose, which was to minimise the harm experienced by sex workers. This presentation will give an overview of the experience of decriminalisation in New Zealand and will draw on the findings of a survey of 772 sex workers and in-depth interviews with 58 sex workers. Findings There have been notable changes, specifically in management practices and in the ability of sex workers to negotiate safe sex. Despite dire predictions that there would be an explosion in numbers of people electing to work in the sex industry, this has not eventuated. However, in other areas, little change has occurred and this is largely due to the continuing stigmatisation of sex work.

Conclusion: It would be unrealistic to expect that social perceptions of sex work would change with the passing of legislation. It may be a number of years before any perceptible shift may be detected, where sex workers may enjoy less stigmatisation. Nevertheless, the findings lend support to the conclusion that there have been many positive outcomes from decriminalisation of the sex industry with no evidence of any negative consequences for the health and safety of sex workers.

Conflict of Interest: None disclosed
Financial Support/Funding: Health Research Council of New Zealand Ministry of Justice, New Zealand Government

S2.8-2

THE CRIMINAL-TOLERATION OF SEX WORK: CANADIAN OPPORTUNITIES FOR POSITIVE ACTION

Shaver Frances M. (Concordia University)

Introduction/Objectives: This presentation will provide a brief overview of the legislative approach to sex work in Canada, highlight some barriers

to action inherent in this approach, and describe some of the positive actions already in place and that will continue to arise in spite of the reluctance on the part of policy makers to accept the evidence before them.

Methods: The analysis is based on a review of my own research (e.g., Shaver 1985; 2005a), research conducted with several colleagues and community partners (e.g., Lewis et al. 2005; STAR 2005, 2005a), and the research of others (e.g., Jeffrey & MacDonald 2006; Lowman 1998).

Results: The buying and selling of sexual services is legal in Canada but, there are laws prohibiting a variety of activities related to sex work that are judged to be harmful. This approach is referred to as criminalization with toleration. Over the last few years many academic researchers—along with sex workers, their allies and their organizations—have presented evidence supporting the full decriminalization of sex work (e.g., Davis 2008; Lowman 1998; O'Doherty 2008; Shaver 1985, 2005a). In spite of this growing body of evidence, social and legal reforms have been slow to materialize.

Conclusion: In conclusion, I set out some guidelines and strategies for continuing to move forward (in spite of the current legal setting).

Conflict of Interest: None disclosed
Financial Support/Funding: Social Science and Humanities Research Council of Canada (SSHRC), the National Network on Environments and Women's Health (NNEWH), and Concordia University.

S2.8-3

"ON BEING AN INSPECTOR OR BROTHELS" - PUBLIC HEALTH AUTHORITIES AND NEW ZEALAND'S PROSTITUTION REFORM ACT

Brunton Cheryl (University of Otago, Christchurch), Abel Gillian (University of Otago, Christchurch), Fitzgerald Lisa (University of Queensland, Brisbane)

Medical Officers of Health are designated officers of the New Zealand Ministry of Health. They work in regional public health services, along with a variety of other public health staff who carry out health promotion and health protection activities, including enforcement of health-related legislation. The Prostitution Reform Act 2003 (PRA) made Medical Officers of Health Inspectors of Brothels and gave them powers in relation to that function, including the appointment of other inspectors. In relation to this role, Medical Officers of Health and the public health services in which they work have made submissions to local authorities on proposed bylaws under the PRA. One of the members of our research team (CB) is a designated Medical Officer of Health. She carried out in depth interviews with other Medical Officers of Health and other public health workers to explore their views about, and experiences of, their new roles under the PRA. The key themes identified from these interviews will be discussed, including a description of the variety of approaches taken to carrying out this new role. We also analysed the content of public health submissions on proposed bylaws under the PRA. This paper will also discuss the effect these submissions had (or in some cases, failed to have) on subsequent bylaws.

Conflict of Interest: None disclosed

Financial Support/Funding: Health Research Council of New Zealand Ministry of Justice, New Zealand

S2.8-4

THE HEALTH AND SAFETY OF SEX WORKERS IN A DECRIMINALISED ENVIRONMENT: THE NEW ZEALAND EXPERIENCE

Fitzgerald Lisa J (School of Population Health, UNiversity of Queensland), Abel Gillian M (Department of Public Health and General Practice, University of Otago, Christchurch), Brunton Cheryl (Department of Public Health and General Practice, University of Otago, Christchurch)

Introduction: In 2003, New Zealand became the first country in the world to decriminalise all sectors of the sex industry, with the enactment of the Prostitution Reform Act. Drawing on components of a multi-method study, 'The Impact of the Prostitution Reform Act (PRA) on the Health and Safety of Sex Workers' this paper will examine the health and safety of sex workers in a decriminalised environment.

Methods: Cross sectional survey with 772 sex workers and qualitative focus groups and in-depth interviews with 58 sex workers. Findings and discussion Most participants were aware they had increased employment, occupational health and safety as well as legal rights under the PRA and that these rights impacted positively on their health. Sex workers perceptions of increased rights in terms of greater powers of negotiation of safer sex with clients, the right to refuse clients, and to be protected from violent attacks, was psychologically enabling, thus allowing participants to feel supported and safe.

Recommendations: Decriminalisation of the sex industry in New Zealand has been beneficial to the health and safety of sex workers.

Conflict of Interest: None disclosed

Financial Support/Funding: Health Research Council of New Zealand Ministry of Justice New Zealand

S2.8-5

THE HEALTH COSTS OF STIGMA: THE EVERYDAY LIVES OF SEX WORKERS

Bass Michelle (University of Victoria), Benoit Cecilia (University of Victoria), McCarthy Bill (University of California Davis), Jansson Mikael (University of Victoria)

Introduction: This paper explores how stigma is enacted and felt in the work and private lives of a diverse group of female sex workers (N=18). The impact of stigma on their social-emotional wellbeing is examined.

Method: Our participants are drawn from a four wave longitudinal, comparative study. This qualitative study added a fifth wave of interviews with a representative sample of female sex workers.

Findings and discussion: Our results show that enacted and felt stigmas are

a major disruptive force in the lives of PWSI, but their effects are not uniform. Rather, they are dependent on a number of contextual factors; degree of immersion within the industry, ability to draw on social support networks and boundary setting. Participants who were immersed in the industry, but had a low status, because of addiction, experienced multiple stigmas both within their work and private lives. Participants who were immersed in the industry, but had a high status within the industry, experienced no stigma in their work lives. Stigma continued to be experienced outside of work, and the resultant isolation led these women to turn to their work relations for their sense of support and wellbeing. Consequently, their work and private lives became blurred and they had fewer resources to draw on. Other participants responded to stigma by drawing clear boundaries between their work and private lives, attempting to lead a double life. They employed a number of strategies to conceal their work identities, but the burden of doing so was costly to their health.

Conflict of Interest: None disclosed

Financial Support/Funding: CIHR

SYMPOSIUM S2.9 WHO Symposium Sexual Rights

S2.9-1

ADVANCING SEXUAL HEALTH THROUGH HUMAN RIGHTS

Kismödi Eszter (World Health Organization/Geneva), Cottingham Jane (World Health Organization)

Introduction: In order to foster the respect, protection and fulfillment of human rights related to sexuality and sexual health, WHO is undertaking to map out and explain existing human rights standards. The main assumption is that canvassing the authoritative standards articulated under international, regional and national laws and jurisprudence related to sexual health issues, can clarify normative guidance for states, and thus facilitate state efforts to improve protection of rights relating to sexual health.

Method(s): The research entails a review and analysis of relevant international, regional and country-specific human rights and legal instruments, as well as jurisprudence produced by international and regional human rights bodies and highest-level national courts all over the world.

Findings and discussion: The findings provide an exhaustive introduction to all relevant international and regional treaties and consensus documents and examples that demonstrate the recognition and application of human rights related to sexual health and sexuality. They also illustrate the diverse legal cultures and reveal trends and consistencies in the region that has an impact on the recognition of sexual rights.

Recommendations: • Human rights obligations and standards as they have been applied to sexuality and sexual health issues should be further promoted; • Governments and other stakeholders should be provided with a

better understanding of the meaning and content of sexuality-and sexual health-related rights and examples and ways in which they could be applied; • Gaps and challenges within and across international, regional and national authoritative standards should be identified

Conflict of Interest: None disclosed

Financial Support/Funding: WHO Open Society Institute Packard Foundation

S2.9-2

SEXUAL RIGHTS, LAW, HUMAN RIGHTS: CONFUSION, OPPORTUNITIES AND OBSTACLES WITHIN THE UNITED NATIONS SYSTEM

Rees Madeleine S (OHCHR)

Introduction: The intervention will be part of the WHO organised symposium following the sexual rights section of the programme. The presentation will address the impact of scientific research on law, the way in which it affects the United Nations Human rights mechanisms and the current status and extent of protection provided under international human rights law. Approach There is a vital nexus between scientific research and developments in the medical field relating to gender identity dysphoria, and inter sex conditions, and the impact that this has on law and its development. Cases decided in international courts illustrate how the teleological approach of international human rights law enables practitioners in these areas to have a direct impact on the way in which law evolves. The presentation will distinguish the approach and impact in two particular areas, that of transexualism and that of sexual orientation, and illustrate how the lack of understanding of the research has led to confusion as to the issues involved in securing rights. It will examine how these issues have been broadly dealt with within the human rights bodies of the United Nations, the lack of coherence that exists between them and how this could be ameliorated. Finally it will describe the approach of the Office of the High Commissioner for Human Rights

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S2.9-3

SEXUAL RIGHTS: AN IPPF DECLARATION

Meglioli Alejandra (International Planned Parenthood Federation, Western Hemisphere Region (IPPF/WHR)), Barroso Carmen (International Planned Parenthood Federation, Western Hemisphere Region, IPPF/WHR)

In commitment to promoting and advancing the belief that sexual rights are an inextricable component of human rights and that sexuality is a central aspect of being human, IPPF developed and adopted the Declaration of Sexual Rights in May 2008. The Declaration is a framework for understanding

the application of basic human rights to sexuality ensuring that everyone can fulfil and express their sexualities with dignity free from any coercion, discrimination or violence. IPPF's Declaration recognizes the differences between sexual and reproductive health issues and the critical need for a code of practice dedicated specifically to sexuality. The Declaration acknowledges sexuality as an evolving concept that encompasses sexual activity, gender identities, sexual orientation, eroticism, pleasure, intimacy and reproduction. It calls attention to preventing and protecting against discrimination based on gender identity and sexual orientation and addresses sexual pleasure stating that all people are entitled to experience and enjoy sex outside of reproduction. IPPF promotes the concept of the evolving capacity of children which recognizes children as active agents in their own lives who are entitled to protection in accordance with their vulnerability. The Declaration is a guide for service delivery and for advocacy and policy change; IPPF recognizes that organisations should not only be responsive and accountable, but should also pro-actively address root causes that affect sexual rights and health. IPPF intends that the Declaration will provide understanding and help governments and organizations make a commitment to the significant place of sexual rights within public health and international development.

Conflict of Interest: There are no conflicts of interest

Financial Support/Funding: The Ford Foundation is contributing to the implementation of the Declaration of Sexual Rights

S2.9-5

SEXUAL RIGHTS: AN IPPF DECLARATION

Wendoh Seri M (IPPF), Halford Stuart M (IPPF)

Advancing Gender Equity and Sexuality through Sexual Rights: IPPF's Declaration of Sexual Rights 'IPPF envisages a world in which ... sexuality is recognized both as a natural and precious aspect of life and as a fundamental human right.' The 2015 deadline for the achievement of the Millennium Development Goals is quickly approaching, yet progress towards the targets for universal access to reproductive health and to HIV and AIDS treatment remains elusive. Sexual health is essential to reducing poverty and improving the lives of millions, yet it cannot be obtained or maintained without achieving sexual rights. Gender-based violence often resulting in maternal and infant mortality is prevalent 60 years after the Universal Declaration of Human Rights. IPPF believes that attaining universal sexual rights is a prerequisite for universal sexual health. To this end, in collaboration with international experts in human rights and sexual and reproductive health, IPPF has developed a Declaration of Sexual Rights. Grounded in existing international agreements and consensus documents, the Declaration provides impetus to IPPF's vision and asserts that human rights are sexual rights related to sexuality. This paper discusses the internal and external strategies and approaches being undertaken to implement and propel the Declaration forward at community, national, regional and international levels. It concludes with anticipated activities for the future, which include on-going advocacy with socially con-

servative governments and their constituencies, and embedding sexual rights language in future UN agreements.

Conflict of Interest: None disclosed
Financial Support/Funding: IPPF

SYMPOSIUM S2.10

Sexual rights

S2.10-1

DEVELOPMENT OF A CHARTER OF SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS BY YOUNG EUROPEANS

Khizanishvili Gvantsa (YouAct, European Network for Sexual and Reproductive Rights, Utrecht, The Netherlands), Westling Kajsa (YouAct, European Network for Sexual and Reproductive Rights, Utrecht, The Netherlands), Kapsou Margarita (YouAct, European Network for Sexual and Reproductive Rights, Utrecht, The Netherlands), Hessel Mia (YouAct, European Network for Sexual and Reproductive Rights, Utrecht, The Netherlands), Michaelidou Despina (YouAct, European Network for Sexual and Reproductive Rights, Utrecht, The Netherlands)

Introduction: Several Human Rights documents include references to people's Sexual and Reproductive Health and Rights (SRHR), yet no unified document addresses SRHR from a youth perspective. The project aimed to produce a human rights based Charter that describes the common visions of young Europeans about SRHR. Action During a Study Session organized by YouAct and the Council of Europe young experts in the field of Human Rights agreed on common ideas and visions for SRHR in order to create a Charter. Differences in priorities and cultural views among the young experts were identified, discussed and resolved through plenary and group discussions and written recommendations. Outcome The resulting Charter consists of Chapters on specific topics within SRHR, relevant human rights, young people's needs and interests a unified vision for SRHR. Participants formed a vision focusing on the promotion of well being regarding sexuality, rather than merely on disease prevention and treatment. Discussion and recommendations The Charter is a unique product of the ideas and experiences of young people throughout Europe. It is intended to be used by young activists and human rights groups for national and European level advocacy. Next steps will include translation of the Charter in various European languages, paper and online publications, and presentations addressing officials and decision makers.

References: European Convention on Human Rights (1950), Protocol 1, Article 2. - Centers for Disease Control and Prevention. (1999). Research to Classroom Project: "Programs That Work." August 31, 2001, revised.

Conflict of Interest: None disclosed
Financial Support/Funding: The abstract submitted describes the process

of creating a Charter of Sexual and Reproductive Health and Rights for young Europeans. The Charter was written during a study session funded by the Council of Europe.

S2.10-2

ADVOCACY FOR A NEW UN TOOL TO ENSURE THE RIGHT TO HEALTH: AN INDIVIDUAL COMPLAINT MECHANISM

Olsson Lars (Swedish Association for Sexuality Education, RFSU)

The right to health is a feature of many human rights documents and also a foundation for, for instance, the Millennium Development Goal on reducing maternal mortality. To date, the possibilities of individuals to claim that their right to health has been violated before national or international rights bodies and courts have been limited. However, in December 2008 the United Nations General Assembly adopted a new human rights instrument, the Optional Protocol to the International Covenant on Economic, Social and Cultural Rights. The Protocol will be opened for signature in 2009 and is a long-awaited addition to the system of international human rights protection since it provides for the possibility to submit individual complaints about violations of rights such as the right to health to a UN committee. A description of RFSU's activities to promote the Protocol and its ratification in domestic and international fora and the outcome of this advocacy. This to be followed by a discussion on how advocacy for allowing individual complaints can be one of the tools to ensure a better compliance with, and a better understanding of, the right to sexual and reproductive health in different settings, including in countries that may not ratify the Optional Protocol. For more information on the instrument, see e.g. the United Nations Committee on Economic, Social and Cultural Rights: <http://www2.ohchr.org/english/bodies/cescr/index.htm>

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

S2.10-3

ARE WOMEN'S RIGHT HUMAN RIGHTS ?: THE NIGERIA SITUATION

Awoyemi Olawale Babatunde (Health and Sustainable development Association of Nigeria (HESDAN))

The international policy statement on human rights is convinced that the achievement of human rights for all people is a fundamental prerequisite for a caring world and the survival of human race" Nigeria is a long way from fully recognizing the human right and sexuality claims of women despite the ratification of international treaties designed to further their sexual, political, economic and social rights. Today, Nigeria has an unenviable record of being among countries in the world in the violation of the women's right as manifested in the nation's record of maternal mortality and estimated 37,000 maternal deaths per year (WHO,2004) and are entrapped in sexual

violation, rape myth, poverty, female genital mutilation, trafficking, amongst others. The objective of this paper is to provide a discussion around the issue of sexual rights of women in Nigeria. The paper explores the potential of international human rights documents to serve as catalysts for political, social and economic changes beneficial to women's sexuality. The idea of 'sexual rights' is being discussed and debated. An analysis is made of some problematic aspects of the documents. However, different meanings are attached to "rights". The argument in this paper mediates different interpretations of sexuality, society, and morality in the context of cultural relatively in Nigeria. It also addresses whether or not sexual rights discourses are the best way to advocate for social justice and bring about changes in socio-sexual attitudes in Nigeria. It is

Conflict of Interest: None disclosed

Financial Support/Funding: personal funding

S2.10-4

CLAIMING SEXUAL RIGHTS IN AFRICA, THE NIGERIA PERSPECTIVE

Oyelakin Oladayo Taiwo

Unsafe abortion and women in Africa
Accountability for action
Enabling women to claim their rights
The way forward
UNSAFE ABORTION AND WOMEN IN AFRICA
Globally, 19 million unsafe abortions in developing countries each year
Annually, 5.5 million unsafe abortions in Africa; 36,000 deaths
In their lifetimes, tens of millions of African women will experience an unsafe abortion
Reasons for denying rights including abortion
Restrictive laws, policies, and practices
Weak health systems
Lack of access to contraception and sex education
Stigma and gender discrimination
Coercive sex
Organized opposition to safe abortion
Accountability for action: regional-level progress on safe abortion
2003: WHO safe abortion guidance released
African Union Protocol on women's right adopted
2006: Maputo plan of action
2007: Africa Health Strategy
Nigeria African Union 2003 protocol ratified
Joined consensus on ICPD, Maputo Plan of Action
Restrictive law of criminalizing abortion remains in place
Deaths from unsafe abortion as high as 10,000 per year
Enabling women to claim their rights
Health systems: Strengthen the role of midlevel providers and increase training
Increase the availability of technologies
Increase more funds to developmental health programmes
Enabling women to claim their rights.
Reduce stigma and counter opposition
Inform and empower women, youth and men on sexual rights and issues
Strengthen regional workplace
Together we aspire, together we achieve, for we can, we would and we must.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S2.11

WAS Symposium - WAS: 30 Years of work

AN ACTIVITY TO COMMEMORATE 30 YEARS OF THE CONSTITUTION OF WAS PANEL DISCUSSION

Moderator: Eusebio Rubio-Aurioles, President WAS

Panelists: Marc Ganem, Past President WAS

Eli Coleman, Past President WAS

Ruben Hernandez-Serrano, Past President WAS

Alan Wabreck, Past President WAS

Fernando Bianco, Past President WAS

Romano Forleo, Past President WAS

S2.11-1

WAS FROM 1978 TO 2008 : SEXUAL HUMAN RIGHTS ISSUES

Hernandez Ruben J (WAS)

WAS founded in Rome, 24 October 1978, has been the first world advocacy for Human Sexual Rights (Valencia Declaration, 1997). Since then, Hong Kong approval, Montreal Declaration and WAS Sexual Health for the millennium followed up. We achieved a lot, but there are so many matters that arise for the future, specially: 1. Violence against children, women and men 2. Aids and STI pandemic 3. Homophobia 4. Sexual taboos 5. Resistance to comprehensive sexual education programs 6. Paraphilias and medical-legal issues. 7. Lack of full time and efficient sexual postgraduate training programs 8. Unethical behaviours and misconduct 9. Lack of recognition of Sexology, as the science mother 10. Conflicts between the sharks. We have a lot to do. We present in this FLASSES Lecture some lines for discussion and action. Latin America will celebrate 30 years within our Federation in Asuncion, Paraguay 2010. We hope to continue our Life Mission.

Conflict of Interest: Advisory Board Member Eli Lilly

Financial Support/Funding: None disclosed

SYMPOSIUM S3.1

WHO Symposium Female Genital Mutilation

S3.1-1

FEMALE GENITAL MUTILATION AND SEXUALITY: WHO FUNDED STUDIES

Ph.D. R. Elise B. Johansen. Medical anthropologist. Technical officer in WHO, Geneva, Department of reproductive health and research

In 2006 WHO issued a call for proposals to examine how desire for sexual morality, "proper" sexual behaviour, and femininity is associated with women's decision to practice or stop FGM. The reason for this call was the limited reduction in the prevalence of FGM, and the lack of success of many popular approaches. If sociocultural beliefs regarding the relationship between female sexuality and FGM is an important motivator for the continuation of FGM, more knowledge is needed on this aspect. All the WHO funded studies found that FGM was considered an important or necessary means to reduce women's sexual desire, subsequently believed to enhance women's conformity to local sexual norms. Some expressed an ambivalence between the belief that FGM is important to secure morality, and fear that it reduced sexual pleasure, and hence marital happiness and stability. Also, there were in all countries beliefs in the medical necessity of FGM in some women, that was also shared by health care professionals. The study also identified a larger prevalence and desire for infibulation than has previously been documented in West-Africa. The results of these and other WHO funded studies on FGM indicate that since sexual concern is a key motivator for FGM in many communities, these concerns must be taken into account when working against the practice. The studies are supported by the European Commission.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

S3.1-2

INVESTIGATING WOMEN'S SEXUALITY IN RELATION TO FEMALE GENITAL MUTILATION IN EGYPT

El-Mouelhy Mawaheb T (Cairo Family Planning and Development Association), Amel Fahmy, Investigator, Ahmed Ragaa Ragab, Investigator

Introduction and Objectives: Female Genital Mutilation (FGM) is a problem in Egypt as in many other African Countries. This study aims at investigating women's sexuality in relation to Female Genital Mutilation in Egypt. The objective is to understand and document the local constructions and experiences of sexuality among Egyptian women in relation to FGM,

and investigate the linkages between marriageability, gender roles, sexual pleasure and FGM.

Methods: The study was conducted in three sites, two villages in one of Upper Egypt Governorates, and one in a slum area in Greater Cairo. The study used qualitative methods including focus group discussion, in depth interviews, case studies, and generation stories. The sample included women, men, community leaders, religious leaders and health providers including circumcisers.

The results: The results show that while some women see a link between FGM and dissatisfaction with their sexual life, others did not. Although some men recognize that their wives' circumcision may negatively reflect on the couple's sexual life, circumcision ensures them control over the sexual relationship and wives' submission. While men in general see sexual happiness in their marriage is very important, women do not see it as a priority, rather they define happiness as a stable home, caring husband, and happy children. Religious leaders are still divided, especially Moslem ones, on the issue of female circumcision, however all of them confirm that sexual pleasure is the right of both husband and wife. Most people link the clitoris with sexual desire/urge rather than sexual satisfaction/pleasure.

Conclusion: Understanding the

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

S3.1-3

INFIBULATION, VIRGINITY AND GENDER BASED VIOLENCE IN SENEGAL

Abibou Diagne CAMARA, Sociologist (Principal investigator) Finance-ment OMS/HRP.

Introduction and methods: In Senegal, the prevalence of excision is estimated to be 20%. It is practiced by minority ethnic groups and touches 80% of Haalpulaar and Soninke women. The main objective is to analyse the relationship between infibulation, loss of virginity and gender based violence. It is a qualitative study which analyses determining factors for the practice of excision and infibulation. In total 398 rural women and 50 excisers as well as 111 men were interviewed. 50 focus groups were undertaken.

Findings and discussion: Excision, infibulation and early marriage are practiced so that the woman stays virgin until her first marriage. The girl's virginity is a sign of confidence, respect and tolerance towards her husband. Loss of virginity before marriage often leads to tensions between families, conflicts and sometimes even conjugal violence.

If the husband expects to receive a virgin in marriage his disappointment can lead to a variety of forms of conjugal violence: Verbal, psychological and physical. Nearly all mothers justify adherence to the practice of excision as a means to preserve their daughter's virginity until marriage.

Recommendations: The aim is to realise activities that prevent excision on the level of the community and improve the inferior social status of the woman.

Conflict of Interest: None disclosed
 Financial Support/Funding: Financement OMS/HRP.

S3.1-4
FEMINITY, EXCISION AND THE APPLICATION OF EROTIC AND APHRODISIAC UTENSILS

Aminata NDIANOR, Teacher (co-researcher), Awa COULIBALY, Sociologist (Principal investigator)

Introduction and methods: The prevalence of excision is estimated to be 20% in Senegal. The objective of the study is to analyse the use of erotic and aphrodisiac products of women who practice excision and how they enhance and raise their husbands' sexual pleasure.

This is a qualitative study analysing the relationship between femininity, excision and the use of erotic and aphrodisiac products. All in all 114 individual interviews were undertaken amongst 62 Laobe women, 62 Torrodo women and 19 husbands of Laobe women.

Findings and discussion: The results have shown that sexual pleasure with an excised woman are experienced and appreciated in different ways. Aphrodisiac and erotic products raise sexual desire and increase sexual pleasure. For excised Laobe and Torrodo women these products represent an embodiment of their femininity and increase the man's sexual pleasure. The display of 'femininity' enhances the psychological and affective attachment of the husband towards his wife and facilitates her access to resources she might be interested in.

These erotic products are constituted of chains of beads, traditional erotic loin-cloths and a variety of incenses that stimulate all senses - the eyes and the sense of smell – and raise sexual desire. Aphrodisiac products are substances that put into the vagina to enhance the man's sexual pleasure but very few women accept to use these products due to sentiments of humiliation related to taboos about their sexuality.

Recommendations: The aim is to explore the multiples aspects of sexual pleasure and between couples and the diminution of sexual desire through excision.

Conflict of Interest: None disclosed
 Financial Support/Funding: Financement OMS/HRP.

SYMPOSIUM S3.2
Female Genital Mutilation

S3.2-1
THE BACKLASH OF PRO-ORGASM INTENTIONS IN ANTI-FGM CAMPAIGNING

Johnsdotter Sara (Health and Society, Malmö University)

Somali young women in Sweden, some of them circumcised, have to deal with national campaigns condemning 'female genital mutilation' and the public message that they are 'sexually mutilated' and deprived of their ability to enjoy sex and experience orgasm. This despite the fact that a growing corpus of research shows that there is no statistical correlation between female circumcision and loss of ability to orgasm. Some of these Somali young women arrived in Sweden already circumcised and the public view of how female circumcision has had a devastating effect on their sexuality is their only source of information. Thus, these young Swedish Somali women have to make their sexual débuts in lack of knowledge about the potential of their own sexuality. A previous study among Eritreans and Ethiopians in Sweden showed that many women are firmly convinced that female circumcision – generally clitoridectomy – had ruined their possibilities to have a truly enjoyable sexual life, despite the fact that they reported being orgasmic and had prior to migration classified their sexual life as 'normal'. These feelings of loss and distress seemed to stem from anti-FGM-campaigns in Sweden. Here I want to discuss the implications of unfounded allegations of deprived sexual abilities used in the moral crusade to abolish FGM, especially in the light of recent research showing that orgasmic pleasure and satisfaction are related more to cognitive and affective than sensory aspects.

Conflict of Interest: None disclosed
 Financial Support/Funding: Post doc position at Malmö University

S3.2-2
A REPORT OF FEMALE GENITAL MUTILATION IN KURDISH FEMALES

Khodabakhshi Koolaee Anahita (Shahid Beheshti University), Mahmoodi Osman (Social Welfare and Rehabilitation University)

Introduction: Female Genital mutilation/cutting (FGM/C)" the partial or total removal of the female organs genitalia or other injury to female genital organs for cultural or other non- Therapeutic reasons (WHO, 1997).

Goal: The aim of this research studies this issue in Kurdistan. In some area in Kurdistan between Iran and Iraq boundary, the Kurdish people living. They are Muslim, and have their culture. But in some villages they do the cutting for their glairs. These act the cultural action and not advise in Islam and forbidding by government.

Mythology: In this study we used the WHO questioner which made for this aim. We asked the 200 girls and women which mutilated their genital organ. Also, we asked about their means and belief of this act. Results: 85 percent of participant answered that they had very pain in that area and also, they think they have problem in their relationships with their partners.

Conclusion: Female genital mutilation is forbid action in Islam and government and this action have culture context. Besides, the women had experienced this pain, very worried about their sexual action and productivity in further life. Government needs the get more information about the limitations of this cultural action and complement the strong law for this act.

Conflict of Interest: None disclosed
 Financial Support/Funding: None disclosed

S3.2-3
FEMALE GENITAL MUTILATION: EDUCATING YOUNG AFRICAN MALES THROUGH A LEADERSHIP PROGRAM

Williams Elizabeth

Introduction: Eliminating the practice of Female Genital Mutilation requires participation by men within the culture as well as women. This program was delivered to fourteen-sixteen year old African boys at a multi-cultural secondary college in Melbourne, Australia. It aimed to establish an awareness of the practice, and predispose them to support its elimination. Action Local cultural resource groups ensured an appropriate environment. The program was trialled through the Secondary School Nurses Health Promotion Program, covering cultural, health, legal, and WHO issues. The program leads to follow-up activities for the trial group, and foreshadows further program extensions and developments. Outcomes *Enthusiastic, voluntarily involvement. *Increased knowledge of FGM. *Determination that such practices not be inflicted on participant's significant females *African boys convinced all need to learn about FGM *African girls relieved that boys are being educated regarding FGM *Boys now 'freed' to speak to the School Nurse *Presentation of this program at the 2008 Australian and New Zealand Adolescent Health Conference, with subsequent interest across Victoria and other States Discussion and recommendations It was imperative to have an adult African male and female as part of the team, yet the boys related well to the non-African female School Nurse and male Youth Worker, with food a definite draw card! Other colleges in the Region with lower numbers of African students will probably join together to run a three day course. References WHO Interagency Statement Female and Reproductive Rights Education Program

Conflict of Interest: None disclosed
 Financial Support/Funding: None disclosed

S3.2-4
CULTURAL VERSUS ISLAMIC DISCOURSE ON FEMALE CIRCUMCISION PRACTICES: LESSON LEARNED FROM INDONESIA

Rostina Julie - (Mitra Inti Foundation)

The United Nations has declared that female circumcision is a violation of women's rights. In the same line, the Government of Indonesia through the National Action Plan for the Elimination of Violence against Women has stated its commitment to address FC. Study of Population Council in 2002-2003 revealed 86-100% girls has been circumcised. About 68% were performed by a traditional provider while the remaining 32% by health care providers, especially midwives. As an action plan of Study, Mitra Inti Foundation with Ministry of Women Empowerment and professional organiza-

tions together worked for study dissemination and advocacy to Ministry of Health, Professional Organizations and Indonesian Ulama Council to eliminate harmful practices. In 2006, Ministry of Health issued a Circular Letter prohibiting medical and health professionals from practicing Female Circumcision. Also Ministry of Women Empowerment and Ulama Council are agreed to prohibit the harmful practices. The letter has limited cover, only covers health worker but not traditional circumcisers. Generally Muslim communities support the continuation of practice because they perceive it as both a societal custom or tradition, and a religious duty. Although in Qur'an as the primary source for Islamic law there is no religious requirement for Female Circumcision. It's strongly recommended for all elements together to continue their effort to protect women's sexual and reproductive rights. Linking and encouraging collaboration between Female Circumcision Practices movements and community initiatives to improve Reproductive health of women through educational services as part of increasing people's knowledge capacity.

Conflict of Interest: None disclosed
 Financial Support/Funding: Not yet found (perhaps the committee of conference can provide the scholarship)

SYMPOSIUM S3.3
Vulva modification and vaginal practices

S3.3-1
AGE AND VESICO VAGINAL FISTULA AMONG FEMALES IN NORTHERN NIGERIA: IMPLICATIONS FOR CHILD/EARLY MARRIAGE

Edwor Dennis O (National Open University of Nigeria)

Abstract: Marriage is ideally meant for individuals who are physically, emotionally and mentally matured to carry out the roles involved responsibly. Numerous studies show that early marriage increases the risk of Vesico Vaginal Fistula (VVF) in the female partners on the one hand and marital instability in general. Cases of VVF are usually more pronounced in northern Nigeria where child/early marriage is rampant. VVF is experienced when the female at childbirth sustains a tear in the vagina that extends to the anal area thus leading to unrestrained and uncontrolled leakage of urine and fecal matters. This study set to find out Vesico Vaginal Fistula was more common among younger married females in Northern Nigeria. The study also examines the rate of marital instability in cases of early marriages in Northern Nigeria. The study also finds recommendation for discouraging child marriages in Northern Nigeria. The Expost Facto survey design was used in this study. The researcher only observed the research variables among selected participants. Secondary data in form of hospital records and existing literature were used to gather information. Interview of a few victims were also used to derive qualitative data. Result showed that there was

a high rate of Vesico Vaginal Fistula among child brides at child birth. Also, early marriage is still practiced in Northern Nigeria. The key reason for marital instability among couples was the issue of VVF experienced by the child brides. Child/Early marriage should be outlawed to reduce the spate of VVF and ensure stable/healthy marriages.

Conflict of Interest: None disclosed

Financial Support/Funding: NONE- PERSONAL

S3.3-2

TRAUMATIC FISTULA, A CONSEQUENCE OF RAPE/SEXUAL VIOLENCE.

Jerome Kume Isoh (christain community health care foundation.COHECF)

Introduction and objective: While global awareness about fistula caused by obstructed labor has grown, relatively little attention has been given to vaginal fistula caused by sexual violence. In many conflict settings, sexual violence is used as an instrument of war, potentially fistula. To learn more about traumatic fistula ,it consequences and effect especially in emergencies.

Methods: Information was collected from individuals and organizations working on the issue. The meeting included panels, group, and expert testimony. The analysis uncovered information on the magnitude and distribution of the program; existing programs around traumatic gynecologic fistula; programmatic successes, challenges, and gaps; and related issues such as HIV and other sexually transmitted infection (STIs),child rape, domestic violence and harmful cultural practices.

Results: The magnitude of traumatic gynecological fistula, rape, and violence has been difficult to assess. Collected facility data represent a small percentage of actual cases. The situation analysis revealed information regarding the magnitude of the condition, the needs for counseling, clinical training supplies, and a muLti-sectoral approach, all of which resulted in the development of country strategies. Recommendations include: epidemiological and operations research, developing networks of interested institution and individuals, training and equipping facilities, and advocacy campaigns among communities and decision-makers.

Conclusion: Findings suggest that women with traumatic gynecologic fistula have needs that cannot be met by clinical services alone. Intervention must be holistic and multi-sectoral , including the health, social, legal, and other sectors.

Conflict of Interest: Traumatic fistula as health problem to victims of rape/sexual violence in crisis situation a call for concern to the universal health community.

Financial Support/Funding: Organizational sponsorship and funding

S3.3-3

THE INFLUENCE OF SOME SOCIO-CULTURAL PRACTICES ON THE SEXUAL LIFE OF WOMEN

ozowara nneka l. (ebonyi state university), odikamnoru oliver o. (ebonyi state university)

The rural African society is full of abnormal socio-cultural norms and practices, many of whicg have neither scientific nor logical basis. Unfortunately, many of these untoward practices are directed at women who bear the effects, sometimes as social stigma that may lead to poor and unhealthy sexuality.This study carried out a preliminary assessment of the influence of some of these negative socio-cultural practices on the sexual and reproductive life of women in some rural communities of Okigwe, southeast Nigeria. 1800 rural women between the ages of 30 and 55 who were willing to divulge information on their private lives were enrolled in the study. Oral interviews and close-ended questionnaire items were used to assess their expeiences with female genital mutilation and male dominance. 87% of the volunteers were circumcized while 13% were uncircumcized. 100% of the circumcized subjects admitted the they had varying degrees of sexual problems which included painful sexual intercourse, lack of orgasm, difficulties in child delivery leading to painful episiotomy, and general unsatisfactory and unfulfilled sexual life. All the circumcized women reported reasonable degrees of satisfactory sexuality.However, 79% of the entire study population still supported female genital mutilation popularly called female circumcision. It is widely believed in the locality that uncircumcized women are liable to promiscuous living. 98% of the respondents admitted male dominance in sexusl and marital issues. There is need to step up sensitization and public enlightenment campaigns on the sexual rights and reproductive health of women. These should be backed with legislation.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.3-4

PREVALENCE OF VAGINAL PRACTICES IN TETE PROVINCE (MOZAMBIQUE)

Bagnol Brigitte (The University of the WITWATERSRAND, anthropology, Johannesburg, Spouth Africa), Mariano Esmerlada (Universidade Eduardo Mondlane, Anthropology, Maputo, Mozambique;), François Isabelle (International Centre of Reproductive Health (ICRH) Faculty of Medicine and Health Sciences, Ghent University, Ghent, Belgium;), Mbofana Francisco (Regional Centre for Health and Development (CRDS), Maputo, Mozambique;), Kenter Elise (Independent researcher), Mariano Esmeralda (Universidade Eduardo Mondlane, Anthropology, Maputo, Mozambique;), Tumwesigye Nazarius Mbona (Makerere University School of Public Health, Uganda;), Chersich Matthew (International Centre for Reproductive Health, Mombasa, Kenya and Reproductive Health and HIV Research Unit, University of Witwatersrand, South Africa;), Hull Terence (Australian Demographic and Social Research Institute, The Australian National Uni-

versity); Hilber Adriane Martin (Institute of Social and Preventive Medicine, University of Bern, Switzerland.)

Despite high HIV prevalence rate and effort to understand sexuality, key aspects of sexual health remain poorly explored. Among these are a variety of products and practices used by women to modify their vaginas for hygienic, health, or sexual reasons. A household survey using a multi-stage cluster sample design covered 919 women to identify the type, motivations and prevalence of vaginal practices. Person weights were used to adjust for differential probabilities of inclusion of enumeration areas, number of eligible women per household and response rates. The prevalence of ever used vaginal practices ranged from the near universal washing (99.3%), elongation of the vaginal labia (98.7%) and cleansing (92.4%) to common practices like insertion of products in the vagina (71.6%) and ingestion (47.6%). One quarter of the respondents had carried out some form of vaginal cutting (24.8%). While insertion is mainly used in preparation to sexual intercourse (92.4%), cleansing is a component of personal hygiene (98.9%). The median number of times the practices are carried out is twice a day for washing, daily for douching and four times monthly for application. Vaginal practices include using different products as a routine or in response to particular events. Research is needed to analyse the composition of the products and to explore the relation between the practices, the products and occurrence of sexual and reproductive problems including STI/HIV transmission. These practices appear to have a major impact on women's acceptance of condoms or microbicides.

Conflict of Interest: None disclosed

Financial Support/Funding: UNDP/UNFPA/WHO/World Bank Special Programme on Research, Development, and Research Training in Human Reproduction, the International Partnership for Microbicides research, UNAIDS, the Flemish Government, and Australia Aid (AUSAid).

SYMPOSIUM S3.4

Sexual education: postgraduate & professional

S3.4-1

INTEGRATING SEXOLOGY EDUCATION INTO PSYCHIATRY RESIDENCY TRAINING: PERSPECTIVES FROM THE USA

Lin Dennis K. (Beth Israel Medical Center/Albert Einstein School of Medicine), Handler Marie-Antoinette (Beth Israel Medical Center), Buchanan Anna (Beth Israel Medical Center), Ruminjo Anne (Beth Israel Medical Center), Davis Gregory (Beth Israel Medical Center)

Introduction: The workshop will focus on how sexology and psychosexual medicine education can be integrated into psychiatry residency training.

Action: The Psychosexual Medicine Program currently being implemented at Beth Israel Medical Center, Department of Psychiatry and Behavioral

Sciences in New York City, USA will be described. Outcome: Psychiatry residents from Beth Israel Medical Center will discuss their experiences learning sexology under the Psychosexual Medicine Program.

Discussion and Recommendations: An argument will be made why it is important to teach sexology in psychiatry residency training and how psychiatrists are uniquely positioned to be the best sexologists. It will be recommended that sexology education become an integrated part of psychiatry residency training everywhere in the USA and the world.

References: Masters, W.H., Johnson, V.E. Human Sexual Inadequacy. Boston: Little, Brown & Company, 1970; Kaplan, H.S. The New Sex Therapy: Active Treatment of Sexual Dysfunctions. New York: Brunner/Mazel, 1974; Wylie K.R. (2004) Sexology as a Profession in the United Kingdom, International Journal of Clinical Practice, 58, 764-768.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.4-2

LGBT CERTIFICATION OF THE HEALTH CARE SECTOR

Vieker Karol (RFSL), Vieker Karol (RFSL)

This 10-minute presentation will introduce the rationale behind and methods associated with the LGBT certification of the health care sector that RFSL offers. One of the pillars of the health care sector is to treat everyone equally. However, treating everyone in the same manner sometimes means that lesbian, gay, bisexual and transgender (LGBT) patients receive worse treatment than others. It is therefore important that the health care sector has knowledge of how professional treatment is controlled by gender and sexual orientation norms. The health care sector is also a workplace for many people, and it is not only patients who benefit from LGBT competency. Employers, employees, and trade union representatives all have different roles and can contribute to creating a good working environment for everyone—provided that LGBT competency exists. An official LGBT certification is received following extensive education in LGBT issues, analysis and revision of standards and policies, and quality control through, for example, clearly formulated follow-up plans. This certification can then be used for marketing and will be continuously renewed provided the institution continues to meet the certification's criteria. LGBT certification from RFSL is a way to clearly demonstrate that the institution actively works strategically from an LGBT perspective to offer a good working environment to employees and respectful treatment of patients. Through certification, an organisation not only gains the knowledge and tools necessary for continued work, but also receives a highly visible stamp of approval that systematic work is being carried out.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.4-3

PROFESSIONAL DISABILITY AWARENESS TRAINING FOR SEX WORKERS (PDAT): AN INNOVATIVE EDUCATIONAL WORKSHOP BY TOUCHING BASE INC.

Wotton Rachel (Touching Base Inc), Isbister Saul (Touching Base Inc)

Introduction: Touching Base Inc is a not-for-profit association, established in October 2000, in New South Wales (NSW), Australia. Members include sex workers, people with a disability and staff from organisations providing services to people with disabilities. Although many experienced sex workers provide services to clients with various disabilities, there was no specific training available. The development of the Professional Disability Awareness Training (PDAT) programme came from key recommendations from a community forum in January 2001

Action: The workshop is for sex workers and sex industry staff only. Five training sessions have been delivered to date. Utilising key harm reduction strategies of peer education, community development and health promotion, PDAT aims to increase sex workers' awareness, skills and knowledge on issues related to providing services to clients with disabilities. Topics include communication techniques, appointments via third parties (personal care attendant or family member), occupational health and safety, medical aspects, increasing awareness of different disabilities and associated special needs, legal issues, values and attitudes, psychological health and safety and peer support networking.

Outcome: There has been increased awareness and recognition that sex workers can be trusted to provide a professional and respectful service to people with disability. This has led to an increased number of enquires to Touching Base for referrals to sex workers who attended the training. Sex workers have been empowered through their vital collaboration in the development, presentation and participation of this training programme.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.4-5

NEW APPROACHES TO DELIVERING SEXUALITY EDUCATION WORLDWIDE

Kuriansky Judy (Columbia University Teachers College), Schroeder Elizabeth (Rutgers University)

Introduction: This paper describes new models to deliver sexuality education to the public that are innovative, in that they go beyond more traditional approaches. Examples are given from different cultures around the world, and show how sexuality experts and educators from different cultures are helping prevent STIs and providing sexuality education particularly to youth.

Action: Models are presented from different cultures worldwide (the Sexuality and Youth program, the REASSURE model, the Empower Now model). These include a 4-fold approach being used in Africa (using in-

school, out-of-school, and community resources). Other models using media are highlighted, including programs developed and implemented in South and North America, as well as using local resources and integrating western and eastern approaches, expositions, unique settings like museums, and new technologies involving the internet.

Research: Outcome data is presented on the effectiveness of the programs described. Discussion and Outcome: Models can be applied to other culture, settings, and populations to further sexuality education and public health.

Selected References: Hill, C. (Ed.). (2001). *Helping skills: The empirical foundation*. Washington, D.C.: American Psychological Association. Strouse J, Fabes R. Formal versus informal sources of sex education: competing forces in the sexual socialization of adolescents. *Adolescence*;20:269-270. "Sex, Soap and Social Change: The Sabido Methodology for Behavior Change Communication" and "Web-based Sex Education for Professionals: A Three-Year Experience and Evaluation of An Innovative International Teaching Program" and other selected chapters from "Sexuality Education: Past, present and future" edited by Elizabeth Schroeder and Judy Kuriansky, Westport, Ct: Praeger, 2009.

Conflict of Interest: some parts come from a recently released book about sexuality education

Financial Support/Funding: None disclosed

SYMPOSIUM S3.5
Sexual education: specific groups

S3.5-1

KNOWLEDGE AND PERCEPTION OF EMERGENCY CONTRACEPTION AMONG FEMALE HAWKERS IN RIGASA A SUB URBAN OF KADUNA

Abubakar Attahir, Babale Sufiyan Mohammed (JHU/CCP Kusaurara Program), Imam Fatima Zakari (Kaduna Polytechnic Medical Center Kaduna), Abdulkadir Aishatu Uwani (Kaduna Polytechnic Medical center Kaduna)

Seventy-nine percent of the respondents were aged 15–24 the vast majority of the respondents (96%) are divorcee, with the remainder being single. Thirty percent have married once; 18% twice, 6% thrice, 39% four times and 6% five or six times, Sexually active respondents and those who had ever practiced contraception or had studied up to secondary school level for 3–6 years were significantly more likely than other respondents to have heard of emergency contraceptives. Of the women who were aware of emergency contraception, fewer than half had received their information on the method from trained health providers - 14% from doctors, 13% from pharmacists and 5% from nurses. However, 33% had received their information about emergency contraceptives from female friends, 5% from their boyfriends and 31% from patent medicine dealers. Menstrogen - a med-

ication used to treat women with low levels or an absolute lack of estrogen or progesterone—was the drug most frequently cited as an emergency contraceptive (50% of women). When asked to mention other, unlisted methods of emergency contraception, some respondents mentioned antibiotics or home remedies such as dye mixed with lime or lime mixed with potash, better leaf tree extract and salty water

Conflict of Interest: None disclosed
Financial Support/Funding: SELF

S3.5-2
REPRODUCTIVE HEALTH FOR REFUGEES BY REFUGEES IN CHAD: SEXUALLY TRANSMITTED INFECTIONS

Jerome Kume Isoh

Introduction and objectives: Providing reproductive and sexual health services is an important and challenging aspect of caring for displaced populations, and preventive and curative sexual health services may play a role in reducing HIV transmission in complex emergencies.

Methods: From 1995, the non-governmental "Reproductive Health Group" (RHG) worked amongst refugees displaced by conflicts in Chad. RHG recruited refugee nurses and midwives to provide reproductive and sexual health services for refugees in the Forest Region of Cameroon, and trained refugee women as lay health workers. A cross-sectional survey was conducted in 1999 to assess sexual health needs, knowledge and practices among refugees, and the potential impact of RHG's work.

Results: 30% of women and 24% of men reported at least one episode of genital discharge and/or genital ulceration within the past 12 months. Only 25% correctly named all key symptoms of STIs in both sexes. False inappropriate beliefs (e.g. that swallowing tablets before sex, avoiding public toilets, etc) were prevalent. Respondents citing RHG facilitators as their information source were more likely to respond correctly about STIs; RHG facilitators were more frequently cited than non-healthcare information sources in men who correctly named the key STI symptoms and in men and women who correctly identified effective STI protection methods.

Conclusion: Our study revealed a high prevalence of STI symptoms and gaps in sexual health knowledge in this displaced population. Learning about STIs from RHG health facilitators was associated with better knowledge. RHG's model could be considered in other complex emergency settings.

Conflict of Interest: How refugees can give assistance to their mate who are in the same situation by forming a Reproductive Health Group (RHG) within their locality.
Financial Support/Funding: COHEF Foundation

S3.5-3
SEXUAL EDUCATION IN TRANSEXUAL GROUPS - SEXUAL WORKERS AND HELPING EACH OTHERS

Murillo Margarita

An experience of sexual education training with transsexual groups in Panama- This experience was created for the Pan-American Organization of Health (OPS), in coordination with the office of VIH/SIDA prevention program in the Health Ministry of Panama. In Panama is working an Association of Transsexual people, more of the 70% of their members are sexual workers, and more than of 50% have AIDS. Their president: Mrs Venus Tejada, is a professional that dream with better life conditions to people like her. She expects to create educational opportunities, but the principal interest knows is to promote their self steam, like a first step to promote sexual health practice, like the condom use all the time. A second step is to create better mental health conditions with therapy group, and psychological therapy. The third step is promoting the educational level by a radio-school programs and scholarship at technical school or universities. The psychological test and interview, shows that personalities disturb not depend of the transsexual identity; depend of the family relationship and self steam.

Conflict of Interest: The transsexual groups experience in sexual education to prevent VIH/SIDA, are differences with other groups?
Financial Support/Funding: foundation to promote sexual health. Costa Rica

S3.5-4
A CLINICAL AND EDUCATIONAL MODEL AIMED AT REDUCING SEXUAL BEHAVIORAL RISKS ASSOCIATED WITH HIV/STI TRANSMISSION IN WOMEN WITH HISTORIES OF TRAUMA AND ABUSE

Tizzano Germaine Boswell

The significance of trauma on women's sexual health, body image, and health-care seeking behavior cannot be ignored. Women with histories of abuse are far more likely to engage in unsafe sex practices, have multiple sex partners, exchange sex for money or drugs, and be addicted to alcohol and other drugs. This presentation provides an innovative look at a clinical and educational model designed to enhance women's sense of empowerment to explore, define and implement sexual health choices aimed at reducing high risk behaviors associated with the transmission of HIV and other sexually transmitted infections. To date, there are limited existing curricula, integrated with clinical interventions, for addressing high-risk women's behaviors in this area. The clinical and educational model to be presented encompasses a program implemented at a residential alcohol and drug agency, Amethyst, Inc., based in Columbus, Ohio. A preliminary pilot study indicated that the women who participated in the program reported being highly convicted to practicing safe sex. Qualitative feedback and recommendations will be provided from clinicians, administrators and instructors who worked directly with the clients. References include:

American Social Health Association, (n.d.) STD Prevention Partnership Position Statement > Women and Sexually Transmitted Diseases. Retrieved March 23, 2006 from http://www.ashstd.org/involve/involve_adv_wompos.cfm Centers for Disease Control and Prevention. (2004). HIV/AIDS Surveillance Report, 2003 (Vol. 15). Atlanta: US Department of Health and Human Services, Centers for Disease Control and Prevention. Also available at: <http://www.cdc.gov/hiv/stats/hasrlink.htm> Cohen, M., Deamant, M., Barkan, C., & Richardson, S. (2000). Domestic Violence and Childhood Sexual Abuse

Conflict of Interest: None disclosed

Financial Support/Funding: Columbus Public Health Department, Columbus, Ohio Columbus Medical Association Foundation, Columbus, Ohio

SYMPOSIUM S3.6

Sexual education: religion

S3.6-1

CHALLENGES OF LGBT CHRISTIANS AND THE CHALLENGES OF THE CHURCHES IN THE NEW MILLENNIUM

Nwadiogu chikezie bright (aba north local government council eziama abia state)

In many countries the Gays and Lesbians are marginalized. The vicious process of social exclusion are resisted as those targeted as demeaned outsiders. However their experiences gives them special knowledge of how structures of power functions. Gay and Lesbian Christians are in a position to translate this knowledge in a call for a radical transformation that is vital for the survival of the church. The gifted Gay and Lesbian believers offer a vision of the church as it might an imagined community of the future rather than a memorial of the past.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.6-2

MAINSTREAMING SEXUAL EDUCATION TO THE WOMEN IN PURDAH PRACTICE

Sanni Rekiya Onayi (Nigerian Business Coalition Against AIDS), Suleiman Hajarar (Nigerian Council for Islamic Affairs)

The Women Ummah Support Group (an Islamic Faith Based organization) was established in 2002 and has 150 members as an integral part of the Nigerian Supreme Council for Nigerian Islamic Affairs (NSCIA). NSCIA is an umbrella organization for Muslim communities in Nigeria. The support

group is a unit of Muslim Women living with HIV/AIDS in FCT and environs. As a volunteer, while working on the needs assessment for same the group for areas to built upon, one of a very burning issues identified during series of mobilization events and trainings on HIV/AIDS with a view to increasing Reproductive Health Rights Issues of women Islamiyyas in the purdah practice of confining women excludes them from mainstream of information. Sexuality Education of women these group of women are not being address. These affected the rate of transmission and treatment of STIs. The Women Ummah Support Group can overcome these challenges and go behind purdah to reach these women by increasing their awareness on Sexuality Education; encouraging Muslim women on Sexuality Education termed as "taboo" in the community especially flow information on sexuality education amongst the women in confinement practice. Muslim women are encouraged to access sexuality education within the targeted communities; train health care workers to offer culturally acceptable information and disseminate cultural accepted IEC materials to the targeted communities and to enlighten Muslim women leaders on Sexuality Education and Share Lessons Learnt

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.6-3

WHAT WORKS FOR SEXUALITY EDUCATION IN A CONSERVATIVE MUSLIM SOCIETY!

Baig Qadeer Baig (World Population Foundation)

Pakistan is a nation of Youth - 60 percent of 168 million people are below 24 years of age. World Population Foundation has been implementing sexuality education (Life Skill Based Education) in Pakistan for last 5 years. It is one of the unique interventions on Sexual and Reproductive Health and Rights for school going adolescents. In spite of a conservative society, WPF has successfully developed Sexuality Education Programme through an 'inclusive and culturally appropriate approach' where as similar programmes in secular societies have faced severe resistance. About 70,000 adolescents in 11 districts have completed the sexuality education curriculum (50 percent girls). Sustainability is built-in into the programme through meaningful participation of governments, partner NGOs, schools, religious leaders and community and volunteer teachers. The Impact Assessment of programme has shown significant change in the behaviors of students. Developing and implementing sexuality curriculum in Pakistan was not an easy process, firstly sexuality particularly of young people and women is considered a taboo and purely a private affair. Secondly, the government faces immense pressure from religious political parties. Thirdly, academics feel that national curriculum is already 'too much' for an academic year of only 140 days. WPF's participatory, conscious, empowering, and efficient, community based and result oriented approach yielded positive results and demand for programme is gradually increasing. As a result of evidence based advocacy Government has adopted LSBE curriculum for secondary

schools and initiated process for teachers training and its integration in the national curriculum.

Conflict of Interest: None disclosed

Financial Support/Funding: Self Financing

S3.6-4

INTRODUCING AN INTEGRATED EDUCATIONAL PACKAGE ON SEXUALITY AND SEXUAL HEALTH FOR WOMEN IN A MUSLIM SOCIETY

Ebrahimi Tavani Masoumeh (Ministry of Health), Mohtashamipur Fakhrosadat (Former director of women's office, Ministry of Interior)

Introduction: In most Islamic countries, sexuality, sexual health and sex education are still regarded as sensitive issues need to be considered as high priority areas on the health programs of countries. Although Muslim women need for getting information about sexuality but there are socio cultural limitations for sex education programs. Designing and implementation of a special program for women's empowerment was done by women's office at Iranian Ministry of Interior in the year 2002-2003. Then this program was followed by an NGO named "Healthy Family Center" countrywide.

Action: An especially workshop on sexuality in combination with other no sensitized related matters was designed. The resulting program was called "Healthy Family" including women's rights, relationship skills and sexual health information. It is a 3 session package for 15- 50 years old married women. The pack seeks to provide practical sexual health information and improve abilities for strengthening family relationships. At first, 28 workshops were conducted in Tehran province.

Outcome: Mean age of participants was 36.81 years old and 73% of them were housekeeper. To assess the effectiveness and quality of healthy family project, pretest and posttest were done. Also the program was evaluated through a questionnaire according to contents, trainers, and logistics. 681 questionnaires were completed. According to results, more than 60% said workshop was effective. More than 70% of participants had evaluated the trainers of 3 sections as the best.

Discussion and recommendations: Religion and socio-cultural aspects are important factors, new models for sexuality education would be effective in Muslim societies.

Conflict of Interest: None disclosed

Financial Support/Funding: Ministry of Interior(Iran)

SYMPOSIUM S3.7 Sexuality Education Research

S3.7-1

ARE WE PROMOTING SEXUAL HEALTH? EXPERIENCES OF SEXUALITY EDUCATION IN PUERTO RICO

Rodriguez-Diaz Carlos E (Latin American Center for Sexual Health Promotion, University of Puerto Rico - School of Public Health), Santos-Ortiz Maria (Latin American Center for Sexual Health Promotion, University of Puerto Rico - School of Public Health), Velez-Vega Carmen (Latin American Center for Sexual Health Promotion, University of Puerto Rico - School of Public Health)

There is a global call for the provision of universal access to comprehensive sexuality education and information as part of the goals for sexual health for the millennium. Within the colonial context and as part of a Latin American and Caribbean culture, Puerto Ricans has faced challenges in the recognition of sexual diversity, sexual rights and evidence-based interventions to promote sexual health. Several actions have been taken in order to analyze and improve the sexual health status in Puerto Rico through the implementation of sexuality education initiatives. This presentation encompasses a critical analysis of current experiences of sexuality education in Puerto Rico. Several research approaches, including curricula and policy analyses, have helped to describe the experiences of sexuality education in Puerto Rico and the challenges and opportunities to achieve a comprehensive approach to sexual health promotion. Findings evidence disparities among the expectation for comprehensive sexuality education and the practices currently implemented in Puerto Rico. These inequalities include limited recognition of gender-based imbalances, sexual diversities, and articulated approaches to HIV and STI prevention. Sexuality education is challenged by gaps in the continuum of school-based curricular priorities, funding availability, lack of evaluation, and ideologies related to sexual practices and behaviors. It is expected that political, social and educational changes facilitate the inclusion of comprehensive and inclusive approaches for sexuality education in Puerto Rico. Otherwise, current and emergent threats will challenge wellness and well-being among Puerto Ricans and, consequently, the achievement of sustainable development.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.7-2**THE EVALUATION OF BRIEF GROUP INTERVENTIONS FOR SEXUALITY EDUCATION**

Barratt Barnaby B. (Walden University)

Despite the growing popularity of brief group interventions (weekend workshops, sexuality attitude reassessment seminars, and other formats) since the 1960s, there is a paucity of evaluative evidence as to their effectiveness. An abundance of anecdotal testimony suggests that these interventions may have powerful and lasting impact on individual participants. Scientific research on attitudinal change and group dynamics, in contexts outside the field of sexual health, is reviewed and found to offer many reasons to support the proposition that brief group interventions in this field, if conducted with an attentiveness to the many factors that can influence outcome, could be highly efficacious. Five programmatic suggestions are offered to guide future outcome studies. These include proposals concerning the need for collaboration, for improved qualitative as well as quantitative methods, for longitudinal designs, for the use of technology, and for the content of evaluative measures that assess effectiveness.

Conflict of Interest: None disclosed

Financial Support/Funding: Not Applicable

S3.7-3**EFFECTIVE PREPARATION FOR TEACHERS DELIVERING FAMILY LIFE AND HIV EDUCATION IN NIGERIA**

McCaffree, PhD Konstance A (Widener University)

The Federal Ministry in Nigeria has approved the implementation of a curriculum to be delivered in schools from primary grades to the tertiary level. The success of this implementation depends partially on the training of the teachers who deliver the curriculum. A major challenge is that open discussion of sexual behaviors as well as most aspects of sexual health is taboo for nearly everyone in the culture. Adults need to deliver clear messages about behavior, in order to change behavior and people's knowledge. This study identifies factors that influence training of professionals to deliver sexuality education openly and accurately to teachers, clergy, and agency serving adults in Nigeria. College lecturers who prepare pre-service teachers received specialized training in the implementation of sexuality education. Participants engaged in collaborative group learning and interacted through the sharing of ideas and values, as well as had an opportunity to practice teaching using an interactive model. Knowledge, attitude and skill changes were identified using pre-post forms of evaluation. Though knowledge was introduced throughout the learning activities, the focus was on communication using sexuality concepts and language. Knowledge increased significantly by the end of ten days of experiential learning, as did their ability to implement various interactive learning methods with their peers. Participants expressed confidence in their ability to increase the knowledge, positive attitudes toward teaching sexuality and skills needed

to stimulate behavior change. 1 Kirby, D. Success in Uganda :A Brief Summary. Retrieved on January 14, 2009 from <http://www.etr.org/uganda>.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.7-4**PROMOTING POSITIVE SEXUAL HEALTH PRACTICES FOR UNIVERSITY STUDENTS: WHAT WORKS?**

Koch Patricia B (Pennsylvania State University), Milstein Susan A (Montgomery College)

Promoting positive sexual health practices is a common goal for many sexuality courses offered around the world. To measure the effectiveness of this educational goal, the Sexual Health Practices Self-Efficacy Scale (SH-PSES) was developed. Respondents indicated their confidence (e.g. having the knowledge, skills, and comfort) in performing 20 different sexual health practices. Responses were based on a six-point Likert scale from "not at all" to "extremely" confident. Factor analysis of the 20 SHPSES items revealed five psychometrically-sound factors: Safer sex, Sexual Assault, Healthcare-related, Relationship-related, and Equality/Diversity-related. The reliability of the entire scale was .089. The SHPSES was then used to determine the effectiveness of various types of educational methodologies used in sexuality classes offered at two northeastern universities/colleges. Pre-post tests were compared for over 500 students attending various types of sexuality courses, including lecture-only, interactive, and peer-facilitated. Non-sexuality courses were used as controls. Findings supported the effectiveness of sexuality classes using interactive methods in significantly increasing students' self-efficacy for every sexual health practice as compared to the control groups. Peer-facilitated groups were significantly more like to increase safer-sex practices and equality/diversity-related practices as compared to controls. Results also indicated a correlation between using a condom and confidence to engage in other sexual health practices, which may indicate that increasing condom self-efficacy may improve self-efficacy for other practices as well.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SYMPOSIUM S3.8
Sexual education: disabilities

S3.8-1

FEEL SAFE - SELF PROTECTION EDUCATION FOR YOUNG PEOPLE WITH A DISABILITY

Graham Judy (Family Planning Queensland (Australia)), Brennan Holly (Family Planning Queensland)

Children and adults with special learning needs or disabilities have a higher risk of being sexually assaulted than other children and adults. It is important that we discuss these facts and to acknowledge the rights of all people to be safe. Self protection education is an integral part of any education program for young people with special learning needs. While most parents, carers and professionals want children to feel safe as they grow and develop, many may feel unsure how to teach the information and skills. Learning about bodies, touch, rules, feelings, early warning signs and safety strategies are essential components of self protection education. This presentation will discuss a rationale for self protection education for young people with disability and present FEEL SAFE, an interactive CD Rom, developed by Family Planning Queensland (Australia). This educational resource addresses sexual assault and self protection and is designed to meet the specific needs of young people with a disability in a fun and accessible way. Using FEEL SAFE, this paper will highlight the responsibility of all parents, carers, staff and services to be part of a self protection framework to reduce the risk of sexual assault.

Conflict of Interest: None disclosed

Financial Support/Funding: Funding from the Australian Commonwealth Special Education NSO Grant supported Family Planning Queensland to develop the Feel Safe CD Rom.

S3.8-2

PROMOTING SEXUAL HEALTH AND SOCIAL SAFETY FOR PEOPLE WITH DISABILITIES

Bavinton Tim P (Sexual Health and Family Planning ACT)

Introduction: Sexual Health and Family Planning ACT (SHFPACT) has provided sexual health and relationships education to people with disabilities (PWD) for more than 10 years. In recent years, a partnership was formed with to trial and later deliver ongoing training in a new social safety program called SoSAFE! SoSAFE! uses a combination of visual and conceptual tools to promote social safety for people with moderate-severe intellectual disability, and because of its underpinning assumptions about the learning, social and communication characteristics of this client group, has broad and instructive lessons for many other target audiences, including

people with mild intellectual disability, autism spectrum disorder, children in early childhood, and parents with intellectual disability.

Action: This paper reflects on the impact of implementing the program's principles and tools in SHFPACT's education and training activities, and their broader implications for this work universally. Outcome: SoSAFE provides some important challenges to assumptions about how social supports and services are structured for PWD to promote their human and sexual rights, and to ensure that relationships and sexual health education is relevant, truly accessible and genuinely results in improved sexual health outcomes, and reduced vulnerability to sexual exploitation.

Discussion/Recommendations: The presentation will provide an overview of the program's development, its key underpinning principles, and the challenges it poses for organisations who support the dignity and human rights of PWD, based on experience in Australia, but relevant universally, including ways to improve assurance of comprehension of complex social needs, support service structures.

Conflict of Interest: Training utilising the SoSAFE Program is delivered by SHFPACT under license agreement with Educational EdICTS, who own the copyright for the program material.

Financial Support/Funding: None disclosed

S3.8-3

INTELLECTUAL DISABILITIES AND SEXUALITY: PEOPLE WITH INTELLECTUAL DISABILITY AND SEXUALITY: EVALUATION OF AN EDUCATIONAL PROGRAM.

Fjeld Wenche (Habilitation Unit, Sykehuset Innlandet HF)

Introduction: The habilitation units in Norway work on advising people with learning disabilities on sexuality issues. The goals are to increase their competence, as well as that of teachers and professional caretakers. This may prevent instances of sexual assault and help the individual attaining a good sexual health. Schools are considered to be natural arenas for sex education. Therefore this subject should be included in their curricula and teachers should increase their knowledge on this subject. Experience in this area shows that strong partnerships between the schools and the habilitation units are essential, and that students stand to gain a lot from this type of education. In recent years many resources have been developed, and this presentation gives an evaluation of some of these educational materials.

Methods: 10 groups including 43 students at secondary school level were given a sex education program of 12 sessions, each lasting 70 minutes. The sociosexual knowledge of each student was assessed before and after completion of the program. Teachers were pre- and postinterviewed. During these interviews they were asked for their opinions about the program and the educational materials. They were also asked about their feelings concerning their competence in teaching this subject.

Conclusions: Students increased their knowledge on sexuality, and more importantly they gained self confidence in setting limits on what they allowed others to do to them in intimate relationships. The teachers increased

their competence and also felt more comfortable teaching this subject.

Conflict of Interest: None disclosed

Financial Support/Funding: This program has been partly funded by the Norwegian Ministry of Health and Care Services

S3.8-4

INTELLECTUAL DISABILITIES AND SEXUALITY: EVALUATION OF SOCIO-SEXUAL KNOWLEDGE IN INDIVIDUALS WITH LEARNING DISABILITIES

Zachariassen Peter (Oslo University Hospital, Ullevaal)

Introduction: There is a need for sex education programs for people with learning disabilities. Often learning disabled people do not receive sex education, or sex education is not given in ways that are easily accessible to them. When implementing a sex education program attention should be paid to assessing the students' socio-sexual knowledge in order to: 1) establish educational needs, and 2) evaluate outcome of the program. Method: The "SexKunn-test" is a semi-structured interview to be used with individuals of limited language skills. Based on the works of – among others – Prof. Marita McCabe (Deakin University), author of the Sexual Knowledge, Experiences & Needs Scale for People with Intellectual Disabilities, the "SexKunn-test" applies hand-drawn black & white pictures in evaluating socio-sexual knowledge. Most of the questions in the "SexKunn-test" are answered by pointing to pictures. Thus people with reduced expressive language skills are able to respond to the "SexKunn-test".

Results: The structure of the "SexKunn-test" will be presented and examples of the type of questions included will be given. Some clinical data will be presented, illustrating how the "SexKunn-test" may be functional in assessing the effects of sex education programs for people with intellectual disabilities.

Discussion: Some limitations of the "SexKunn-test" will be discussed. Some ethical considerations concerning the use of socio-sexual knowledge scales as a prerequisite for attending sex education programs will also be addressed.

Conflict of Interest: None disclosed

Financial Support/Funding: This program has been partly funded by the Norwegian Ministry of Health and Social Care Services.

S3.8-5

INTELLECTUAL DISABILITIES AND SEXUALITY: YOUNG PEOPLE AND THE USAGE OF THE INTERNET

Löfgren-Mårtenson Lotta (Health and Society, Malmö University, Sweden)

Introduction + Method: The Internet has become a common way for people to contact each other, to flirt and start relationships. How does this development influence today's young people with intellectual disabilities

(ID)? This qualitative study is based on interviews with 10 young people with intellectual disabilities and 12 staff members in Sweden during the year of 2005. Findings and discussion: Young people with ID also use the Internet, mainly for social and romantic reasons. They view the Internet as a positive arena where they can be "like everybody else" without mentioning their disabilities. It is seen as a "free-zone" from the control by staff members and parents. People around them tend to worry and focus on the risks of being deluded or abused involved in the usage. The young people themselves perceive the risks for disappointments or unfulfilled expectations in a partner as the more serious risk.

Recommendations: It is important to meet the young people's need of being a part of the youth net-culture, where they can create social contacts and practicing communication and spelling. But also it is vital to inform about the risks of being deluded or abused in a nuanced way.

References: Löfgren-Mårtenson, L. (2008) Love in Cyberspace: Swedish Young People with Intellectual Disabilities and the Internet. Scandinavian Journal of Disability Research, Volume 10, Issue 2, pp. 125–138.

Conflict of Interest: None disclosed

Financial Support/Funding: Forskningsrådet för Arbetsliv och Socialvetenskap (FAS)Sweden

SYMPOSIUM S3.9

The future of Sexual Health: Sexual Health in Public Health policies

Chairman : Marc Ganem, Société Française de Sexologie Clinique
 Discutant : Alain Giami : Inserm , U 822, Le Kremlin Bicêtre, F-94276, France

S3.9-1

INTRODUCTION

Marc Ganem (Société Française de Sexologie Clinique)

The concept of sexual health appeared on the international arena more than 30 years ago. , carried by the work of non governmental organizations such as WAS. An intense work of dissemination allowed the propagation of sexual health in International organizations such as WHO or Unesco and the European Community. The implementation of sexual health is confronted to a new step with its integration in public health policies and research. The symposium aims at presenting an evaluation of actions and recommendations on sexual health in Western Europe and on the topic of men. We shall present and discuss the sexual health policy under construction in the European Community (Gisela Lange), in the French Government (Thierry Troussier), and in the context of Unesco (Marc Ganem) with a focus on young people. Then we shall discuss the absence / presence of men in sexual and reproductive health. Brenda Spencer will discuss the absence of

heterosexual men in data related to the HIV Aids infection. Jane Russo will present the outlines of a new policy in Brasil with the implementation of a mass treatment of erectile dysfunction.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.9-2

FRENCH GOVERNMENT STRATEGY IN SEXUAL HEALTH

Dr Thierry Troussier (Direction Générale de la Santé. Ministère de la Santé (France))

The simultaneous consideration of health and sexuality in the field of the social sphere begins in the 60s with the women's movement, family planning, the access to contraception in 1967, the law on the abortion in 1975. "Sexual information" appeared in secondary schools in the programs of biology further in the circular of 1973. In this context the new epidemic of the HIV appeared at the beginning of the 80s. Young people constituted a privileged target because. Since, the modalities of intervention with young people evolved significantly from sexual information to a wider educational approach involving sexual health. The development of sexual education, engaged within the framework of an interministerial partnership of fight against AIDS, allowed an educational approach which considers significantly the imperatives of public health (prevention of AIDS and sexually transmitted diseases, unwanted pregnancies, sexual violence, addiction and collective ethics based on the notions of respect for the intimacy and autonomy. For the young people considered as more vulnerable, the specific partnership with the department of legal protection of the youth, national council for the local missions, the hard-working youth clubs also integrates the problem of sexual education.

Priority and a visibility were given to some dimensions in the health program of young people presented by the Ministry of Health in February 2008: Development of campaigns on contraception for the young people with a gender approach. Creation of a web site "sexuality / young people". Prevention of discriminations related to homophobia. Prevention of risk-taking in connection with drug-use.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.9-3

IMPROVEMENT OF SEXUAL HEALTH IN YOUNG PEOPLE

Gisela Lange (European Commission/ DG Health and Consumers / C4 Health determinants)

The overall objective is to develop a targeted EU policy approach to promote sexual health for young people. This broad strategy includes a focus

on the promotion of safer sex. A comprehensive strategy focusing on young people will shape the positive health aspects of a full sexual life and have a tangible impact on the general health status of future generations. It will help to decrease sexually transmitted infections and other measurable negative effects such as unwanted teenager pregnancies, sexual violence, gender inequalities and can help young women and men to live healthy and fulfilled partnerships based on understanding and respect. A major role of cooperation will be to multiply strong and clear positive messages, to promote activities and the development and exchange of good practices throughout Europe, while respecting the large social and cultural diversity and promoting social integration on all levels. The joint development of standardised surveillance for sexually transmitted infections (STI) and strengthened research on young people's sexual behaviour will allow a progressive adaptation of informed sexual health policies.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.9-4

WHERE ARE THE MEN? ABSENCE OF HETEROSEXUAL MEN IN THE INTERNATIONAL SCIENTIFIC DISCOURSE ON AIDS.

Spencer Brenda, Duchêne A, Dubois-Arber F.

Different scientific discourses have accompanied control of the AIDS epidemic over the past decades. The concept of gender relations has figured increasingly in the prevention discourse. We followed its development through analysis of a key discursive space: published proceedings of the World AIDS Conference (WAC). Our aim was to investigate representations of male heterosexuality and their role in the management of the epidemic. The appearance of gender terms in key words and titles served as a "barometer" of their presence in the scientific discourse and was monitored in WAC proceedings 1988-2004. The term "women" appeared as a keyword as from 1998 and became increasingly differentiated with successive conferences. "Men", was absent from keywords. In abstract titles, "women" was the most frequent of the 4 identified categories, these being: "homosexual men"; "men" (heterosexual or n.e.c.); "homosexual (lesbian) women"; "women" (heterosexual or n.e.c.). "Women" occurred approximately four times more than "men" and 2-3 times more than "homosexual men" in abstract titles. "Homosexual women" appeared rarely. The hypothesised absence of heterosexual men in the AIDS discourse confirms previous work on gender representations in different domains of sexual and reproductive health : men are the absent partners, their role reduced to a biological function, with hegemonic masculinity as the dominant image, excluding vulnerability.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S3.9-5

MEN'S SEXUAL HEALTH IN THE BRAZILIAN PUBLIC HEALTH SYSTEM

Jane A. Russo (Latin-American Center for Sexuality and Human Rights / Institute of Social Medicine – University of the State of Rio de Janeiro)

There's already a long tradition of special policies aiming at women's health in the Brazilian public health system. Starting with programs of maternal health and care, women's health policies have partially incorporated, in the last 15 years, issues regarding sexual health as a result of the feminist movement. Programs directed towards men's health appeared more recently. Last year a program of sexual health for men was organized by one of the most important sexologists in Brazil. Of the utmost importance was the recent announcement, made by the Brazilian Health Ministry, regarding the possibility of free distribution through the public health system (SUS) of a drug called Helleva (produced by a Brazilian laboratory) to men suffering from erectile dysfunction. We intend to discuss the way Brazilian authorities are developing a strategy of communication and information regarding men's sexual health and also the way erectile dysfunction is being transformed into a public health issue in Brazil. The discussion will take into account experiences in other Latin American countries and in France.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

ument on Sexual Health for the Millennium, aligning and expanding sexual health with the United Nations Millennium Development Goals Simultaneously to building a conceptual framework, a strategic approach to health actions was developed and WAS now is working in a series of Advocacy training Workshop which will enable participants to become advocates for this paradigm shift in their own communities.

Workshops have taken place in four regions of the world; Guayaquil for Latin America, Nairobi for Africa, London for Europe and finally, Hanoi for Asia .

This presentation will center on the the Advocacy Workshop design and materials, which are focused on translating the Sexual Health for the Millennium Technical document into advocacy actions directed to influencing public policies in the four mentioned regions of the World. It will discuss some comparative results and also present lessons learned from the workshops and the follow-up of the establishment of a world-wide advocacy network to promote sexual health.

S3.10-3

THE ROLE OF ADVOCACY IN THE SHAPING OF PUBLIC POLICY. COLLABORATION OF PAHO AND WAS FOR THE HEALTH AND EDUCATION MINISTERS MEETING IN MEXICO 2008

Rafael Mazin

SYMPOSIUM S3.10

WAS Symposium: Advocating for Sexual Health for the Millennium

S3.10-1

SEXUAL HEALTH FOR THE MILLENNIUM DECLARATION AND TECHNICAL DOCUMENT

Eli Coleman

S3.10-2

PREACHING TO THE CONVERTED. ADVOCACY WORKSHOPS FOR SEXUAL HEALTH PROFESSIONALS.

Esther Corona

The World Association for Sexual Health (WAS) has been working for almost ten years to reposition sexual health from an approach limited to reproductive health and HIV and STIs to a rights-based, gender sensitive domain which recognizes the integrality and diversity of sexuality as well as the importance of the cultural context in which it is "produced"

Two major publications have emerged from this effort: The Promotion of Sexual Health in 2000 and more recently a Declaration and Technical Doc-

SYMPOSIUM S4.1

National Sex Surveys in the Nordic Countries

S4.1-1

SEXUAL KNOWLEDGE, ATTITUDES AND BEHAVIOR AMONG DANISH ADOLESCENTS

Graugaard Christian (University Library of Copenhagen), Knudsen Lisbeth B. (Aalborg University), Fouchard Jan (National Board of Health)

Background: Surveys concerning sexual knowledge, attitudes and behavior of Danes are scarce, and opposed to neighboring countries such as Sweden and Great Britain, nationwide investigations among the general population haven't been conducted for decades. However, interesting survey data concerning the sexuality of adolescents have recently been attained by the National Board of Health.

Material and methodology: A total of 10,000 adolescents aged 15-24 were randomly selected and contacted by letter. The youngsters were invited to fill out an on-line questionnaire with 45 items concerning sexual knowledge, attitudes and behavior. The response rate was 38%, and a total of 3,695 replies were included in the study.

Results: The survey revealed interesting data on coital debut, sexual activity, and use of contraceptives among Danish youngsters. Moreover, it provided useful data on risk behavior with regard to STDs and unwanted

pregnancies. Finally, the respondents were asked to evaluate normative questions such as homosexuality, infidelity, pornography, prostitution, and advanced sexual practices.

Conclusion: Exhaustive data concerning the sexual conduct and Quality of Life of Danes are still missed. However, this study provides an interesting insight into the sexual lives of Danish adolescents, and it offers a solid foundation for future research in the area.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S4.1-2

NATIONAL SEX SURVEYS IN NORDIC COUNTRIES: SWEDEN

Lewin Bo (Dept of SOciology, Uppsala University, Sweden)

In 1996 a population based study utilizing a representative sample was conducted in Sweden. A population based representative study had not been attempted in Sweden since 1969 when the first such ever in the world was conducted in Sweden. As was the case then this study utilized a combination of personal face to face interview with respondents privately (with the interviewer present in the room as a resource person) answering also a complex written questionnaire. Response rate was 59 percent, which was considerably lower than expected. Yet the research team claim good reasons for validity of answers and grounds for generalizing results. Methodological issues as well as key findings relating to important generational differences will be discussed.

Conflict of Interest: None disclosed

Financial Support/Funding: National Institute of Public Health, Sweden

S4.1-3

NATIONAL SEX SURVEYS IN NORDIC COUNTRIES: NORWAY

Træen Bente (University of Tromsø, Department of Psychology), Stigum Hein (National Institute of Public health)

Since 1987, cross-sectional sex surveys in random samples of Norwegians have been carried out every 5th year. In 1987 and 1992, the sample size was 10.000 persons aged 18-59 years. In 1997 and 2002, the age range of participants was 18-49 years. In 1997, a study with questions overlapping the Swedish sex survey 1996 among a random sample of 5.000 in Oslo aged 18-49 years was carried out. In 2008, the sample comprised 12.000 persons in between 18 and 59 years. All data collections were carried out by means of anonymous, mailed, self-administered questionnaires, sent via regular mail. In 2008, the participants could also respond via a web-site. One reminder was sent to all individuals. The response rate was 63% in 1987, 48% in 1992, 38% in 1997 (48% in Oslo), 34% in 2002, and 18% in 2008. A drop in response rate seems to be a trend in all questionnaire surveys. Despite this, studies indicate that non-response is most likely fairly random

with respect to sexual behaviour. It is likely that the surveys up to 2002 are not severely biased, but the 2008 survey is most likely biased. In 1987, 1992, 1997 and 2002, 17%, 21%, 17% and 19% reported using condom during the most recent intercourse with a non-cohabiting partner. The percent with homosexual experience increased over the 15 years period from 4% to 11% in men, and from 3% to 12% in women. Another trend was a drop in the coital debut age.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

S4.1-4

NATIONAL SEX SURVEYS IN NORDIC COUNTRIES: FINLAND

Kontula Osmo (Population Research Institute)

SEX RESEARCH TRADITION IN FINLAND 1971-2007: MAIN TRENDS Sex surveys based on random samples from national population registers have been conducted in Finland in 1971, 1992, 1999, and 2007. They are representative of the total population within the age range of 18-54 years in 1971 and 18-74 years in 1992, 1999, and 2007. Studies were conducted in 1971 and 1992 by individual face-to-face interview visits during which each interviewee also completed a self-administered questionnaire. Due this technique response rates were very high: in 1971 even 93% and in 1992 76%. In 1999 and 2007 postal surveys were conducted. The implication of this renewed method was lower response rate, in 1999 46% and in 2007 43%. Based on careful analyses this drop in response rate did not cause any major problems for the representativeness of these surveys. Examples of main trends in sexual patterns and sexual attitudes from 1971 to 2007 will be presented. Behavioural indicators include sexual initiation, sexual partners, masturbation, and frequency of intercourse, parallel relationships, and use of porn, sexual disorders, orgasm and sexual pleasure. The most important trends are decreasing frequency of intercourse, increasing trends in lack of female sexual desire and masturbation for both genders, and decreasing rate of female orgasm. Masturbation has won some market share of intercourse due to its easy consummation. Sexual values have moved towards disapproval of unfaithfulness and renaissance of romanticism.

Conflict of Interest: None disclosed

Financial Support/Funding: Finnish Ministry of Social Affairs and Health

Abstract Book

ORAL PRESENTATION

ORAL PRESENTATION SESSION OP1.1
Female sexual dysfunction

OP1.1-1

RANDOMIZED, PLACEBO-CONTROLLED, DOUBLE-BLIND, PARALLEL DESIGN TRIAL OF THE EFFICACY AND SAFETY OF ZESTRA® IN WOMEN WITH MIXED DESIRE/ INTEREST/ AROUSAL/ ORGASM DISORDERS

Ferguson David M (Clinical Research Services Consulting), Hosmane Balakrishna (Northern Illinois University), Heiman Julia (Kinsey Institute for Research in Sex, Gender and Reproduction, Indiana University)

Over 200 women, 21 to 65 years, with mixed desire/interest/arousal/orgasm disorders participated in a 16 week randomized, placebo-controlled, double-blind study of Zestra®, topical botanical. A one month open-label placebo run-in established baselines. Thereafter, all subjects were randomized to three months of double blinded treatment with either placebo or Zestra®. Efficacy was determined with widely used instruments. Safety was determined by physical examinations, laboratory analyses, and adverse events. Eighty percent of efficacy variables showed more beneficial results for Zestra® than placebo. Zestra® improved desire, arousal and treatment satisfaction. Subjects who received Zestra® continued through the end of the study in greater numbers (84 %) than those who received placebo (59 %). The use of antidepressants had no impact on responsiveness. The only statistically significant adverse event was genital burning seen only in Zestra® treated subjects (15%). The arousal and desire benefits from a previous trial, in highly selected subjects, was now confirmed in a population that mirrors the general population of women with sexual difficulties. The only statistically significant adverse event was the same one seen in the first study, and it occurred at the same frequency. No new adverse events emerged. The significant benefits in treatment satisfaction are new findings. This randomized, double-blind, placebo-controlled trial of Zestra® in women with mixed desire/interest/arousal/orgasm disorders showed that Zestra® is well tolerated and provides significant desire, arousal, and treatment satisfaction benefits for a broad, generalized group of women with sexual difficulties.

Conflict of Interest: Authors are independent consultants to the industry sponsor.

Financial Support/Funding: Test articles and study funding provided by Zestra Laboratories, Inc., now owned by Semprae Laboratories, Inc.

OP1.1-2

EFFICACY AND SAFETY OF FLIBANSERIN IN A RANDOMIZED WITHDRAWAL STUDY OF PREMENOPAUSAL WOMEN WITH HYPOACTIVE SEXUAL DESIRE DISORDER

Goldfischer Evan R (Hudson Valley Urology), Breaux Jeffrey (Women Center of Zachary), Katz Molly (Drs Katz, Kade and Hewitt, Inc), Kaufman Joel (Urology Research Options), Smith William (University of Tennessee Medical Center), Patel Pinakin (Boehringer Ingelheim Pharmaceuticals, Inc.), Mikl Jaromir (Boehringer Ingelheim Pharmaceuticals, Inc.), Sand Michael (Boehringer Ingelheim Pharmaceuticals, Inc.), Pyke Robert (Boehringer Ingelheim Pharmaceuticals, Inc.)

Objective: The ROSE (Researching Outcomes on Sustained Efficacy) study was a randomized withdrawal trial of flibanserin, a novel 5-HT1A agonist/5-HT2A antagonist, in premenopausal women with generalized acquired Hypoactive Sexual Desire Disorder (HSDD).

Methods: 738 women were treated with open-label, flexible-dose flibanserin for 24 weeks. At week 24, patients meeting enrichment criteria (increase of at least 2 satisfying sexual events [SSEs] or at least 4 desire days between baseline period and weeks 21–24) were randomized to 24 weeks' continued flibanserin therapy at optimized dosage (n=163) or placebo (n=170).

Results: At the end of the open-label phase (weeks 21–24), the number of SSEs increased from 2.7 at baseline to 5.3 and desire score increased from 12.2 at baseline to 25.4. This was accompanied by improvements in Female Sexual Distress Scale-Revised (FSDS-R) score (from 30.2 to 20.7) and Female Sexual Functioning Index (FSFI) score (from 19.6 to 25.6). At the end of the double-blind period (weeks 45–48), flibanserin was superior to placebo in mean change from randomization baseline (weeks 21–24) in SSEs, desire score, FSDS-R score and FSFI score. During this phase, the proportion of patients experiencing an adverse event was similar in the flibanserin and placebo groups. No withdrawal reactions occurred.

Conclusions: In this randomized withdrawal trial of premenopausal women with HSDD, flibanserin was superior to placebo on several efficacy parameters and was well-tolerated, without withdrawal reactions.

Conflict of Interest: Supported by Boehringer Ingelheim. Evan Goldfischer is a consultant to Boehringer Ingelheim.

Financial Support/Funding: Supported by Boehringer Ingelheim.

OP1.1-3

TRAIT-AFFECT AND SEXUAL FUNCTIONING: DIFFERENCES BETWEEN WOMEN WITH AND WITHOUT SEXUAL DYSFUNCTION

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Introduction and objectives: The human sexuality is quite complex and the interference of different affective states can be wide-ranging. The purpose of the present study was to evaluate the role of emotional factors on sexual function/dysfunction, specifically the way in which trait affect interacts and influence women's sexual functioning, along with general psychopathology.

Method: A total of 242 women participated in the study (a control sample of 188 women without sexual problems, a sub-clinical sample of 37 women and a clinical sample of 17 women). Participants answered to the PANAS-X (Watson & Clark, 1994), BSI (Derogatis, 1982), BDI (Beck, Ward, Mendelson, Mock, & Erbaugh, 1961) and FSFI (Rosen et al., 2000).

Results: Findings indicated that women with sexual problems (clinical and sub-clinical groups) presented significantly higher levels of positive trait affect ($p < .001$), lower levels of negative trait affect ($p < .01$) and higher levels of psychopathology [somatization ($p < .01$), depression ($p < .001$), anxiety ($p < .05$), obsessive-compulsive ($p < .01$)].

Conclusions: Results supported the important role played by emotional factors on women's sexual functioning, suggesting that trait-affect may act as a vulnerability factor for sexual dysfunction. Women with poor sexual functioning present a significant lack of positive trait affect, higher levels of negative trait affect and psychopathology. They also draw attention to the need of evaluating these dimensions and to include in treatment protocols strategies aimed at its modification.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.1-4

DIFFICULTIES IN VAGINAL PENETRATION IS CORRELATED WITH DENTAL GAGGING REFLEX IN WOMEN

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Introduction: Oral cavity and its associated functions share psycho-social similarities with sexual function and behavior. One of the behavioral dysfunctions unable dental care is excessive gagging reflex. Difficulties in vaginal penetration interfere with female reproductive and sexual health. This study assesses the correlation between oro-related behavioral dys-

function and difficulties in vaginal penetration in women.

Methods: Data were collected from questionnaires answered by women applying for counseling at the Sexual Medicine Center in Sheba Medical Center, Israel. Gagging reflex was assessed by gagging scale (GAS) consisting of 4 questions. A battery of questions about experiencing difficulties in vaginal penetration included ability to insert a tampon, self finger, spouse's finger, and fully participation in gynecological examination and intercourse. Correlations were assessed using T-test (LEVENE).

Results: A total of 225 women answered the questionnaires. Women who indicated inability to experience self finger insertion or gynecological examination or intercourse scored significantly higher on GAS than women who did not experience such difficulties ($p = 0.031$; $p = 0.042$; $p = 0.026$ respectively).

Conclusions: Results show that difficulties with vaginal penetration are associated with obstacles in achieving dental care due to excessive gagging reflex, in women. Thus, women with a sexual dysfunction involving difficulties in vaginal penetration should be evaluated for dental anxiety and dental care. Sexual function and dental care have a paramount influence on women's well-being. It's important to investigate the psycho-dynamics of the presented findings.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.1-5

A CASE OF SYSTEMIC SEX THERAPY WITH FEMALE SEXUAL AROUSAL DISORDER; A DIFFERENT MODEL

Markovic Desa (Covent Garden Counselling)

This case study provides an example of integration between psychosexual therapy and the systemic approach at the levels of theory, practice and ethics. A different model is proposed using a clinical study of female sexual arousal disorder. Therapeutic work was informed by systemic and sex therapy approaches, in ways that illustrate their useful integration and its relevance for working with sexual issues. Systemic concepts eg: multiple context levels, self reflexivity, gender and cultural sensitivity, were combined with a range of ideas from sexology, eg definitions of sex / myths, sexual response cycle. Specific interventions also combined the two approaches. The presenting problems were successfully resolved thus adding to the weight of practice evidence for the potential application of such a combined approach. Whilst the therapeutic approach exhibits some similarities with the Intersystems Model (Weeks 2005) it adds new dimensions particularly by including the concepts of the Self of the Professional and the Social Construction of truth, thus comprising an alternative therapeutic approach for working systemically with sexual issues. The wider political themes of diagnostic categories, medical pathologising and issues of (female) sexual rights are also discussed within the proposed model. References: Dallos & Dallos (1997) *Couples, Sex and Power. The Politics of Desire*. OU Press; Hof & Berman (1986) *The Sexual Genogram*. JMFT; Kantor & Okun (1989) *Intimate Environments. Sex, Intimacy and Gender*

in Families. The Guilford Press; Leiblum & Rosen (2000) Principles and Practice of Sex Therapy. The Guilford Press; Weeks (2005) The emergence of a new paradigm in sex therapy: integration. BASRT. Routledge.

Conflict of Interest: None disclosed

Financial Support/Funding: N/A

OP1.1-6

WELL BEING AND SEXUAL ESTEEM AS PREDICTORS OF WOMEN'S SEXUAL SATISFACTION AND FUNCTIONING

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Research has shown important associations between dimensions of well being and women's sexuality (e.g., Heiman, 2002; Wiederman & Hurst, 1998). However, most studies have been restricted to the context of physical disability (e.g., Hassouneh-Phillips et al., 2005; Taleporos & McCabe, 2002), and very few have considered those variables together in order to clarify their differential impact on sexual experiences. For example, the specific role and relation between self-esteem and sexual esteem is still unclear. Following this, our goal was to investigate how components of women's well being and sexual esteem may interact with sexual function and satisfaction. Participants were 497 women from the general population, with ages between 18 and 75. Questionnaires assessed: self-esteem (SES), satisfaction with life (SWLS), body satisfaction (subscale from BAT), sexual self-esteem (subscale from SS), sexual functioning (FSFI) and sexual satisfaction (GRISS). The study was cross-sectional. After controlling for demographics, we found that women who scored higher on sexual satisfaction and functioning also presented significantly higher scores on self-esteem, satisfaction with life, body satisfaction and sexual esteem. However, regression analysis revealed that satisfaction with life and sexual esteem were the only significant predictors of both women's sexual satisfaction and functioning. Additionally, although self-esteem and sexual esteem were moderately associated, when entered simultaneously as predictors, self-esteem revealed no predictive value for any dimension of sexual functioning, except for pain. Findings, clarifying the contribution of different dimensions of well being and sexual esteem on women's sexual satisfaction and functioning, will be discussed in terms of clinical/ research implications.

Conflict of Interest: None disclosed

Financial Support/Funding: Foundation for Science and Technology

ORAL PRESENTATION SESSION OP1.2

Delivery & pregnancy

OP1.2-1

SEXUALITY IN PREGNANCY: MYTHS AND BELIEVES

MARTINS MARIA DE FÁTIMA S. V. (MINHO UNIVERSITY - SCHOOL OF NURSING)

Introduction: The sexuality is an important aspect in the life involving dimensions, as: biological, psychological and sociocultural. This fact gave us the courage to deepen our knowledge in this matter with the perspective of identifying if the pregnant women that attend the Public Health Service are influenced by myths or by beliefs, and also to identify specific behaviours expressed in the sexuality.

Method(s): Our study was based on the triangulation of data which in the development of our analysis allowed us to proceed with a mix of quantitative and qualitative facts based on the semi-structured interviews done over 100 women that had given birth.

Results: The beliefs that a woman can relate are related to interdictions and also to prescriptions that will rule many of these actions. Most of these prescriptions seem to have not only a hygienic task but also a magical task. We concluded that 82% of the women altered their behaviors during the pregnancy in favor of certain myths and beliefs, thus assembling elements of safety, protection, preservation, faith and tradition. This study showed that even in modern times the knowledge is spread mainly by the traditional oral manner. Distorted opinions appear as resulted of the lack of knowledge and personal clarification.

Conclusion: This is a period of cultural, social and economic transition that can influence in the familiar life of the couple. Some myths and believes are lived deeply and doubts appear in this period, becoming necessary through the education to demystify it, mainly as for the physical, emotional and

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.2-2

OBSTETRICIANS AND PREGNANT WOMEN FROM FORMIGA'S TOWN IN MINAS GERAIS STATES, BRAZIL

Silva Hesley Machado (FAPEMIG/UNIFORMG), Santos Angélica Rodrigues (FAPEMIG/UNIFORMG)

Introduction: The decision of what kind of labor should be held is intermittently generating a great debate in Brazil. It was proposed to investigate these factors which lead the women take this decision, trying to understand the principle involved. This project supported by the agency FAPEMIG.

Methods: It was made a review on the bibliography. Some datas were collected in two hospitals – public and private - about the number of labors in

Formiga's town. Subsequently, the obstetricians and a group of pregnant women were submitted to a questionnaire. The answers were observed in a graph made, analyzed and compared with the related literature.

Results: The number of cesarean sections were above the standard recommended. According to the obstetricians, the main reason would be the preference of the pregnant, fact which was not confirmed by them, that discrepancy was confirmed by the literature. About the level of information about the clinical indications for the type of labor, the doctors and the pregnant considered satisfactory, data contestable by the academics. The fear and the pain were identified by obstetricians and pregnant as a predominant factor for the preference for cesarean sections, according to the literature, shows the precariousness of information in relation to a normal birth.

Conclusion: The analysis of most of the data collected, showed a discrepancy between the information of pregnant and obstetricians. Both sides involved in the issue do not admit as responsible for the elevate number of cesarean sections, so, some new approaches are needed for analysis.

Conflict of Interest: None disclosed

Financial Support/Funding:FAPEMIG/UNIFORMG

OP1.2-3

SEXUALITY DURING PREGNANCY

Pauleta Joana R (Department of Obstetrics, Gynecology and Reproductive Medicine, Santa Maria University Hospital), Pereira Nuno M (Lusofona University), Graça Luís M (Department of Obstetrics, Gynecology and Reproductive Medicine, Santa Maria University Hospital)

Introduction: Pregnancy is a special period characterized by physical, hormonal and psychological changes that in conjugation with social and cultural influences affect women's sexuality.

Objective: To evaluate the changes in sexuality during pregnancy.

Material and methods: A prospective descriptive study was conducted in the Department of Obstetrics, Gynaecology and Reproductive Medicine at Santa Maria Hospital between July and September 2008. Puerperal women anonymously completed self-administered questionnaires regarding sexual perceptions and activities. Statistical analyses were performed using the chi-square test. Statistical significance was considered as $p < 0.05$.

Results: One hundred and eighty eight women, aged between 17 and 40 years with a mean age of 28.9 years, were analysed. The first trimester was considered the most frequent period of sexual intercourse (44.7%), followed by the second trimester (35.6%). Fifty five percent reported a decreased of sexual activity during the third trimester. Fear of sexual intercourse was referred by 23.4%. Sexual satisfaction was unchanged in 48.4% and decreased in 27.7% ($p < 0.00$), sexual desire is reported to be unchanged in 38.8% and decreased in 32.5% ($p = 0.196$). Vaginal, oral, anal sex and masturbation was performed by 98.3%, 38.1%, 6.6% and 20.4%, respectively.

Conclusion: We determined in our study that sexual desire and function decline as pregnancy progresses compared with the pre-pregnancy patterns. A discussion of expected changes in sexuality should be routinely done by

doctors in order to improve couples' perception of sexual modifications induced by pregnancy.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.2-5

THE CAMPUS EXPERIENCE OF ADOLESCENT ACCIDENTAL PREGNANCY IN TAIWAN

Yuan Liu Hsing (Chang Gung Institute of Technology)

The purpose of this study was to explore the psychosocial process and campus experience of adolescent accidental pregnancy. By using quantitative approach, the participants of the study consisted of ten preceptors. The researcher studied the lesbian students of an institute of technology in northern Taiwan. Using participant observation, semi-structured, in-depth interview and grounded theory data analysis. The content of these data were transcribed word by word. For establishment of the trustworthiness, the methods of developing trust relationship with participants, triangulation, peer reviewing, member check, and thick description were employed. The research findings five stage for the psychosocial process of Adolescent Pregnancy. These includes: 1.life accident; 2. Stands on the balance; 3. respect for life; 4.to enjoy motherhood porocess;5.will permit future pledge. And campus experience of adolescent pregnancy are?Is utterly isolated campus environment, between teacher good intentions and evil intention, associates not concentric, and when the study strives to improve. This study identified the psychosocial process and campus experience of adolescent pregnancy. Based on the conclusions, the concrete recommendations for national policies, students' affairs of higher education, the program of friendly campus and the further studies are presented.

Conflict of Interest: SEXUALITY SUDENT AFFAIRS

Financial Support/Funding:None disclosed

OP1.2-6

PREGNANCY: A PSYCHOSEXUAL LOOK

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The Santa Casa da Misericórdia do Rio de Janeiro (Maternity) was founded in 1847 by Jose Clemente Pereira, and has always been bound to the study and care in obstetrics. On November 1st, 1959, was created the 33rd Infirmary of SCM-RJ, which since December of 1988 has its own Department of Psychology. Our goal is to show the work provided to these pregnant women by this department with the presence of the Sexology Department, an expansion of the hospital since 2006. Our initial focus is on group work with pregnant

women and couples, using the method of operational and educational groups. We work with the following topics: psychological effects in pregnancy, male and female reproductive system, types of delivery, birth, breastfeeding, care of the newborn, Sexually Transmitted Diseases/ AIDS, nutrition and relaxation. Due to the gain of professionals in sexology the themes have been expanded. Information on sexual and reproductive health, development of the body and how it works in relation to sexuality and reproduction, family planning and contraceptive methods, processing emotions and pleasure, responsible motherhood and fatherhood, and the demand of women themselves are themes that enable promoting a healthier and safer sexual life. In this new framework, it seems these women and, therefore, the welfare of these families is being supported more effectively with the gain of information, thus aiding in prevention and raising their psychosexual health.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.2-7

INFERTILE COUPLES WHO UNDERGO TREATMENT: EXPERIENCES OF THE CONSEQUENCES ON SEXUALITY

Järholm Stina

Introduction: About 10-15 % of adults have the experience not getting pregnant, when they have a wish to have a child. For some, this life situation is resolved spontaneously. Some undergoes investigation, followed by varying treatments, resulting in a child, some adopts, and for others this situation are permanent, and without a solution. When this is the case, existential questions often arise. Earlier studies show that couples who become parent after IVF-treatment are just as content, or more, with their relationships and sexuality compared to parent who conceived spontaneously. Little is known about the couples who continue their relation without a child. Clinical experiences are that many women and men struggles with questions concerning the meaning of sexuality. Method In a pilot study, located to the Reproduktionsmedicin Sahlgrenska Universitetssjukhuset Goteborg, these questions were studied. Women and men, patients in this clinic, answered a questionnaire about their experiences how infertility and treatment effected sexuality. The questionnaire also included open questions about experiences.

Results: Many women and men experienced that infertility and treatment influenced their sexuality in a negative way. However, an experience existed of a higher degree of closeness and a strength in the relation; however a closeness not always including sexuality.

Conclusion: In work with individuals who's life in some way is affect of infertility, the sexual dimension needs to be further investigated. Clinicians working with infertility ought not only focus on pregnancy. Another dimension is to work with the sexual dimension, neither there will be a child or not.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

ORAL PRESENTATION SESSION OP1.3

Dyspareunia & genital pain

OP1.3-1

OPTIMIZATION OF THERAPEUTIC APPROACH TO DYSPAREUNIA

Fedorova Anna I (Saint Petersburg Medical Academy for Postgraduate Training, Department of Sexology)

Introduction and Methods. Dyspareunia is a heterogeneous disorder. Clinical research of its pathogenesis, extent and character of involvement of somatic and psychogenic pathogenic factors are important for the choice of therapy. We observed 158 women with psychogenic and combined dyspareunia. Their clinical history, gynecological status, life anamnesis have been analyzed as well as the character of sexual function, psychosexual development, individual peculiarities, partner interrelation, perceived image of the disease, pain anamnesis. Findings and discussion. Comparative analysis revealed two clinical forms of dyspareunia having different pathogenesis. We named them conversion and psychosomatic dyspareunia. Conversion dyspareunia (72 women) developed at the background of neurotic conflict meaning rejection of a partner, sexual relations or specific forms of their realization. Gynaecological status was normal. Hysterical individual peculiarities, delays of psychosexual development, rigid sexual concepts were rather common. Psychosomatic dyspareunia (41 women) had other clinics. It developed at the background of different nonspecific stress factors and was not clearly related to a neurotic conflict. In some cases pathologic alteration of genitals (symptoms of dystrophy and venous stagnations) joined. Women's individual peculiarities were dependence, anxiety, alexithymia. Rich pain anamnesis and disorders of psychosexual development, especially disorders of erotic libido were often met.

Recommendations. The differences of forms of dyspareunia define different aims and components of multimodal psychotherapy. In cases of conversion dyspareunia the most effective methods were cognitive therapy, directed at resolving the conflicts provoking sexual dysfunction, communicative training and sexual therapy. The main aims of sexual therapy are adaptation to vaginal introjection, receipt of positive sexual

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.3-2

PREVALENCE AND RISK FACTORS FOR DYSpareunia AND UNSATISFYING SEXUAL RELATIONSHIPS IN A COHORT OF PRIMIPAROUS AND SECONDIPAROUS WOMEN AFTER 12 MONTHS POSTPARTUM

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Objective. Dyspareunia affects 58% of women at 3 month after vaginal delivery and its effects on sexual function are generally resumed by 12months postpartum. Our study aims to determinate the prevalence of dyspareunia after the 12th month postpartum and its impact on women sexual health.

Methods. 602 caucasian women who delivered in our clinic in 2006, including vaginal deliveries or cesarean sections, were asked about dyspareunia and quality of sexual relations. Collected datas were analysed by R (version2.8.0), considering significant $p < 0,05$. Multivariate regressions were performed.

Results: 99,99% of women resumed their sexual activity. 16,16% of these are affected by dyspareunia. In the monovariate analysis dyspareunia correlates with vacuum delivery, Kristeller manouvre, shoulder dystocia, partoanalgesia, III-IV tears, recurrent urogenital infections, stress and urge urinary incontinence. Breastfeeding lasts significantly longer in women with dyspareunia, whose sexual and sentimental relations result significantly compromised. In the multivariate analysis dyspareunia seems to be influenced by vacuum delivery ($p < 0,05$), recurrent urogenital infections and urge incontinence. Selecting only vaginal deliveries, independent risk factors for dyspareunia are recurrent urogenital infections ($p < 0,05$), Kristeller manouvre ($p < 0,05$), partoanalgesia ($p 0,074$) and III-IV tears ($p 0,096$). Vacuum delivery disappears, probably because of its high correlation with these last three factors.

Conclusions: Dyspareunia affects 16,11% of women after 12 months postpartum. Perineal trauma by operative delivery, Kristeller manouvre, shoulder dystocia, partoanalgesia and III-IV tears, is a major risk factor for dyspareunia, as also recurrent urogenital infections. Breastfeeding is surely a co-factor.

Conflict of Interest: Authors of this study disclose any potential conflict of interest.

Financial Support/Funding:None disclosed

OP1.3-3

MANAGEMENT OF PRIMARY DYSMENORRHEA BY FEMALE ADOLESCENTS IN ILE-IFE, NIGERIA

Ogunfowokan Adesola Adenike (Obafemi Awolowo University)

The study, which employed descriptive design to assess knowledge of menstruation, severity of menstrual pain and management of primary dysmenorrhea among dysmenorrhic adolescents, was conducted in three single

sex girls' schools located in Ile-Ife, Osun State, Nigeria. One hundred and fifty adolescents (150) who reported experiences of primary dysmenorrhea on a monthly basis during menstruation were sampled using purposive sampling technique. A semi-structured questionnaire containing revised Wong Baker Faces Pain Scale which was pre-tested among 20 adolescents with experiences of primary dysmenorrhea in a mixed sex school was used to collect data. Consent to conduct the study was received from the school authorities under study. The adolescents that were sampled were also educated on the purpose of the study and informed consent form was also attached to each of the questionnaires for the adolescents to append their signatures for voluntary participation. Findings revealed poor knowledge of menstruation and primary dysmenorrhea. Eighty percent (80%) were between face 2 and face 10 on the Faces Pain Scale. The commonest drug that was used by the adolescents was Buscopan while many of them used drugs such as menstrogen, Gelucil, vermoz, tetracycline, Aftefive that are not ideal in the management of primary dysmenorrhea. Non-orthodox management of primary dysmenorrhea such as ingestion of salt water was also reported by the adolescents. Recommendation is towards the establishment of Adolescent Friendly Reproductive Health Clinics in schools for adequate reproductive health education and services.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.3-4

PREVALENCE AND CORRELATES OF CHRONIC PROSTATITIS/CHRONIC PELVIC PAIN SYNDROME AND PROSTATITIS-LIKE SYMPTOMS IN AUSTRALIAN MEN

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Purpose: To describe the prevalence of symptoms suggestive of chronic pelvic pain and prostatitis-like symptoms in a population-based sample of Australian men using the National Institutes of Health Chronic Prostatitis Symptoms Index (NIH-CPSI).

Materials and Methods: Participants were Australian men aged 16-64 years recruited as part of the Australian Longitudinal Study of Health and Relationships. 1346 men completed an interview which included the NIH-CPSI. The index identifies urogenital pain, urinary problems, and QoL impact. Prostatitis-like symptoms were indicated by perineal and/or ejaculatory pain and a total NIH-CPSI pain score greater than three.

Results: Based on a weighted population of 1387 urogenital pain was reported by (7.6%) men; 2.8% of men reporting more than one type of urogenital pain. The mean NIH-CPSI pain score for men reporting pain was 6.2 (5.6–6.8); for all men the score was 0.5 (0.4–0.6). 20% of men were con-

sidered to have urinary problems. The mean urinary symptoms score for all men was 0.9 (0.9–1.0). The mean total NIH-CPSI score for men reporting pain was 13.3 (12.0–14.7); for all men it was 2.6 (2.3–2.8). The estimated prevalence of prostatitis-like symptoms was 2%.

Conclusions: According to the NIH-CPSI the estimated prevalence of urogenital pain in the general Australian population is 8%; an estimated 3% of men experience pain from more than one urogenital location.

Conflict of Interest: None disclosed
Financial Support/Funding:NHMRC

**OP1.3-5
YOUNG SWEDISH WOMEN’S REASONS FOR CONTINUING TO HAVE VAGINAL INTERCOURSE DESPITE PAIN**

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Introduction and objectives: Pain during vaginal intercourse (VIC) is a frequent complaint among young Swedish women, which does not always make them stop having VIC. In the present study we therefore wanted to study (1) the prevalence of women who despite pain continue to have VIC, do not let the partner know, and feign enjoyment; and (2) the reasons for such behaviour.

Methods: In 2008, 1566 Swedish female high school students completed questionnaires concerning body and sexuality.

Results: Forty-seven percent (207/576) of those who reported pain during VIC continue to have VIC despite pain. The most common reasons were that they did not want to destroy sex for or hurt their partner by interrupting VIC. Feigning enjoyment and not letting partner know about their pain were reported by 22% and 32% respectively. Continue to have VIC despite pain was associated with feelings of being inferior to partner during sex, dissatisfaction with own sex life and feigning enjoyment despite pain.

Conclusion: Pain during VIC is reported by every third young Swedish woman and almost half of those with pain continue to have VIC despite pain. The reasons given are noteworthy - feeling inferior to partner in sexual situations and prioritizing his enjoyment before their own – and need to be taken into account by professionals addressing these issues.

Conflict of Interest: None disclosed
Financial Support/Funding:None disclosed

**OP1.3-6
PSYCHOLOGICAL PROFILES, DEPRESSION AND SEXUAL FUNCTION AMONG WOMEN WITH DYSpareunia TREATED WITH GROUP PSYCHOTHERAPY**

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Background and aims: The Sexological outpatient clinic at the University Hospital of Copenhagen traditionally treat women with dyspareunia with psychodynamic group therapy (PGT) including elements of Cognitive behavioural Therapy (CBT). The aim of the present pilot study is to describe personality traits, incidence rates of depression, and sexual function among women referred with dyspareunia before assessment and therapy.

Methods: Twenty-two women referred to the Sexological Clinic were included for participation in PGT over a period of one year. Prior to participation, participants were diagnosed with dyspareunia without positive clinical findings at a gynaecological outpatient clinic. Using a pre-post experimental design, the women completed a questionnaire including socio-demographic information, FSFI, FSDS, DIP-Q and BDI self-rating scales.

Results: Personality disorder (PD) was diagnosed among 17 of the 22 women. Results from 5 women were incomplete. Preliminary results found that 9/17 women had minimum one PD. One participant had a Cluster A (odd/ eccentric) PD, 5 participants a Cluster B (dramatic/erratic) and 7 participants a Cluster C (anxious/inhibited) PD. According to the Beck Depression Index 6 women had a mild depression, one a moderate and one a severe depression at the onset of therapy. At treatment start 18/22 participants were sexually distressed. During the four weeks prior to onset of therapy 10/22 had not attempted intercourse. 8/ 22 women complained of sexual dysfunction in regard to low libido, and 14/22 in regard to poor lubrication and/or anorgasm.

Conclusion: These results indicate that women with dyspareunia when beginning PGT are both psychologically and sexually distressed in addition to sexual dysfunctional.

Conflict of Interest: None disclosed
Financial Support/Funding:None disclosed

**ORAL PRESENTATION SESSION OP1.4
Abortion, drugs, contraception**

**OP1.4-1
WOMEN’S RESPONSE TO THE PSYCHOSEXUAL IMPACT OF THE ABORTION EXPERIENCE: A PHENOMENOLOGICAL RESEARCH INQUIRY**

Finn Bridget M (private practice sex therapy clinician)

Introduction: This paper presents an overview of the major findings of a qualitative inquiry exploring the psychosexual impact of the abortion experience with women who self-identify as Catholic, discussion of conclusions derived from these findings, and a synthesis of practical and theoretical implications of these findings and conclusions.

Method: This research study focuses solely on the experiences of nine women enculturated by Western ideology with regard to the abortion issue. A triangulation of qualitative data sources from four different groups of women derived at four different times and means is combined with the qualitative phenomenological method. This exploratory research inquiry resulted in an explanatory theory of the psychosexual impact of abortion.

Results: Major findings include: (1) it is the unwanted pregnancy, rather than the abortion, that is the identifiable trauma. (2) Received Catholic religious beliefs and values did not enter into decisions to terminate pregnancies, and did not create any conflict for participants during any aspect of the abortion experience, including post-abortion adjustment. (3) The abortion experience impacts sexual behavior and functioning with short-term fear of pregnancy and short-term lack of, or decrease in, sexual desire. (4) Women reveal a redefinition of self post-abortion.

Conclusion: The psychosexual impact of the abortion experience can be conceptualized as a phenomenon of nine interwoven themes which begin prior to the actual medical procedure, at the time of the unwanted pregnancy, to the present time.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.4-2

PERCEPTIONS AND EXPERIENCES OF WOMEN WITH ABORTION COMPLICATIONS: SUB-DIVISIONAL HOSPITAL BUEA-CAMEROON.

JEROME KUME ISOH (COHECF), MANJA ASANJI IMMACULATE (COHECF), NJONG ANDA ALFRED (COHECF)

Introduction and objectives: Abortion complications are some of the most significant reproductive health problems affecting women and girls in the student's residential areas of the University of Buea-Cameroon. The purpose of this research is to explore and describe the perceptions and experiences of women who have experienced an abortion complication (spontaneous or induced) within a University community.

Methods: A qualitative descriptive method of inquiry will be utilized to collect data via in-depth interviews. Women 18 to 49 who have experienced abortion complications and have received treatment will be eligible. Other eligibility criteria include women 18 to 49 years of age who have verbally consented to the interview. A purposive sampling technique using maximum variation will be employed to select participants for study. Interviews will be conducted until data saturation is realized. The study location is the gynecological ward of the Buea sub-divisional hospital south west Cameroon. To enhance rigor and trustworthiness, qualitative frameworks

utilized will include authenticity, credibility, integrity, transferability and dependability.

Results: The result from this shall be reported at the conference.

Conclusion: Findings from this study will facilitate the design and implementation of appropriate nursing-led, integrated programs to manage and prevent abortions; contribute to shaping reproductive health policy during this reconstruction phase; and from a basis for future scientific studies on reproductive health issues in Buea.

Conflict of Interest: CLINICAL AND BEHAVIORAL ASPECT OF ABORTION COMPLICATION IN CRISIS SETTING.

Financial Support/Funding:STILL SEEKING FOR FUND AND SPONSORSHIP.

OP1.4-3

COMMERCIAL SEX WORKERS AND PSYCHOACTIVE SUBSTANCE USE IN BENIN CITY

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Background: Persistent and circumstantial use of psychoactive substances is on the increase in major cities across Nigeria especially among female commercial sex workers (FCSWs). This study investigated the pattern and prevalence of psychoactive substance use among female commercial sex workers in major clubhouses across Benin City with respect to age, level of education, number of client and condom use.

Method: A total of 68 commercial sex workers aged between 15 and 35 years participated. Data collected was with structured self-administered questionnaires.Oral informed consent was obtained.

Result: 90% of respondent have used a psychoactive substance on the night of survey. 55%, 32%, 5% and 10% of respondents used alcohol only, tobacco only, cannabis only, alcohol and others respectively within the past month. Only 5% of respondents have not use a psychoactive substance before sexual contact in the last month. Psychoactive substance use was highest among respondents aged 18-25. Higher level of education did not translate to decrease psychoactive substances use. 48% of respondents that always use a psychoactive substance before sexual contact in the last month used condom less frequently.

Conclusion: The judgment of female commercial sex workers under the influence of a psychoactive substance while working is impaired and it is less likely that safer sex methods will be used. To prevent the spread of STIs and HIV/AIDS, a holistic approach tackling short, medium and long term consequences and covering the physical, mental and social risks of drug use among FCSWs should be considered.

Conflict of Interest: None disclosed

Financial Support/Funding:Critical Peers Nigeria, National Youth Service Corps(NYSC), Nigeria.

OP1.4-5

SEXUALITY ATTITUDES IN COMPARISON WITH ATTITUDES TO PATHOLOGICAL INCLINATION TO DRUG OR ALCOHOL IN ADDICTS AND HEALTHY PEOPLE

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Sexuality alteration during addiction disease (1) suggests idea about competition for pleasure between sexual and addicted behavior. We supposed that sexual attitudes compete with attitudes representing pathological inclination. We created "Addiction and Sexuality" questionnaire (2) and combined it with "Sexual Health Attitudes Questionnaire" (3). The following categories were used. Alcohol Addiction: attitude to drinking; level of alcoholic inclination; self-attitude to disease; withdrawal. Drug addiction: general attitude to drugs; level of inclination; self-attitude to drug addiction; withdrawal. Sexual disturbance: general attitude to sexuality; libido level; self-attitude to sexual functioning; sexual abstinence. Totality of 143 respondents (76 women and 67 men) with average age 41.5 (17 - 65) consists of 72 patients (29 alcoholics, 41 drug addicts, 2 clients with ludiomia) and 71 healthy people (48 patients' relatives, 23 health workers). The questioning results were computed using database. Profiles were compared. Frequency Characteristics and the reliability was calculated and evaluated. As result, we described the range of attitudes that are in a competitive relationship, and some attitudes, which does not compete. The study could be useful for psychotherapy and formation of "gender portraits" of social groups.

References 1. Zharkov Y. SEXUALITY OF HEROIN ADDICTS: APPLIED ASPECTS OF STUDIES. Sexologies. European Journal of Medical Sexology: VOL.XI-N39, 2002p.33-44 2. Zharkov Y. Methodology of questionnaires design for intercultural sexological investigations (2005) Sexologies. European Journal of Medical Sexology. 3. World Association for Sexual Health. (2008). Sexual Health for the Millennium. A Declaration and Technical Document. Minneapolis, MN, USA: World Association for Sexual Health.

Conflict of Interest: None disclosed
Financial Support/Funding:None disclosed

OP1.4-6

CONDOM USE AMONG JAPANESE HETEROSEXUAL MEN UTILIZING THE SEX ENTERTAINMENT INDUSTRY

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Introduction and Objectives: This study, funded by the Japanese Ministry of Health, Labour and Welfare, is a part of a research project whose target populations are Sex Workers (SWs) and their clients. Although Japanese heterosexual male clients face high HIV risk, little is known about their attitudes and practices, and specific interventions have not been sufficiently implemented in Japan.

Methods: From our 2006 survey (Higashi et al, 2007), 1,400 male respondents indicated utilizing sex services and were sent a follow-up questionnaire. 785 were used in the analysis.

Results: The results show; 1) 50% of respondents were between the ages of 46 and 50 2) 83.2% had engaged in sex with one or more women within one year, 59.7% of which used sex services. The average usage was 5.14 times a year. 3) The condom usage rates differed among the various types of sex entertainment services. 4) Less than 25% would ask to not use a condom before they meet SWs, but almost half of the respondents said they would not use a condom if SWs agree in person. 5) 80% of the respondents said they would use a condom if required or requested.

Conclusion: We recommend that measures be developed that can effectively address the unique needs of different subtypes of male clients. A key to effective HIV prevention is to pay special attentions to men who specifically look for sex without condom, users of "delivery service," and unsafe sex practice in oral sex service settings.

Conflict of Interest: None disclosed
Financial Support/Funding:Japanese Ministry of Health, Labour and Welfare

ORAL PRESENTATION SESSION OP1.5
Bone marrow transplantation, cancer

OP1.5-1

A DECADE OF NGARRINDJERI MIMINI CERVIX SCREENING PROJECT

Thomson Yvonne J (Murray Mallee Community Health), Wilson Di (Murray mallee Community health), Clark Sharon (SA Cervix Screening), Allen Katrina (SHine SA)

Introduction: The Ngarrindjeri Lands in rural South Australia cover the area of 18 clans of the Ngarrindjeri people. There is a strong tradition of privacy around women's business and a high burden of serious illness in this population so the rate of smear testing in the local Aboriginal women was very low. This is a description of the 10 years of providing culturally appropriate sexual health services to Aboriginal women from disadvantaged backgrounds.

Action: South Australian cervical screening statistics showed high prevalence and mortality rates of Aboriginal women with cervical cancer and the low screening rates in the Murray Bridge area. The clinics started with a doctor, a women's health nurse and an Aboriginal Women's health worker in the Lower Murray Nungas club, an Aboriginal community place.

Outcome: The statistics for provision of cervical screening and sexual health care and a survey of clients' satisfaction will be presented.

Discussion: The major burden for Indigenous health care is the extensive active disease (diabetes, hypertension, kidney disease) making sexual health

promotion and screening difficult to maintain. Strategies used to address this will be discussed.

Recommendations: The special needs of populations such as this are often disregarded in setting up sexual health clinics despite the toll in cervical cancer mortality. The clear lesson is the need to engage with the community, have a well respected Aboriginal health worker and continually concentrate on the benefits of sexual health screening despite concurrent illness.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.5-2

LOOKING AT AFFECTS OF CANCER AND ITS TREATMENT ON THE EMERGING SEXUAL SELF DURING ADOLESCENTS.

McDonnell Kelly

The literature surrounding the effects of cancer and treatment on the emerging sexual self during adolescents is weak. Previous research on cancer and sexuality has focused on adult male and female couples with little to no attention on young male and female issues. The diagnosis of a life-threatening illness such as cancer brings huge losses, both actual and potential, not only for the individual but also for the partner and family. All cancers and the treatments for cancer have the potential to negatively affect sexuality and body image, diminish sexual functioning and feelings of attractiveness. There is an importance of providing opportunity for patients to discuss issues of intimacy, sexuality and sexual development with health professionals which will be highlighted. Sexual self-esteem is often directly related to overall feelings of well-being. Sexual self-schemas are cognitive generalizations regarding sexual aspects of the self; they represent a core component of one's sexuality. Individuals learn about sexual behaviour and how to interpret sexual behaviour within a cultural context placing greater emphasis on location in the social structure as the primary force influencing the social construction of reality, including conceptions and experiences of sexuality. This research is an exploration of the lived experience looking at cancer, treatments and the effects they have on sexuality for both developing men and women, followed by a discussion on recommendations to overcome these effects.

Conflict of Interest: Currently being researched!

Financial Support/Funding:None disclosed

OP1.5-3

SCHOOL-BASED HPV VACCINATION DELIVERY: THE AUSTRALIAN MODEL

Cooper Robbins Spring Chenoa (University of Sydney), Skinner S. Rachel (University of Sydney), McCaffery Kirsten J. (University of Sydney)

Introduction: The impact of HPV vaccination on the rate of cervical can-

cer and its precursors is dependent on a number of factors. Traditionally, factors such as local epidemiology, the success of current cervical screening programs, and the presence of other co-factors that may impact disease are considered in vaccination program planning. Using a biopsychosocial approach to sexuality and prevention of disease, programming choices for a nation's vaccination initiative also involve factors that influence delivery, attitudes, and acceptance. This includes the age at which to vaccinate, average age of sexual debut and sexual risk behaviours, vaccination delivery approach (school-based vs. clinic-based), and consideration of the public health benefit (the vaccination completion rate goal).

Action: In 2007, Australia became the first country to implement an ongoing, federally-funded school-based HPV vaccination program for young female adolescents. While there is research on intended vaccination uptake, there is little published research on the determinants of actual uptake of HPV vaccination, and there is little to guide our understanding of HPV vaccination within a school-based immunisation program.

Outcome: Australian HPV vaccination coverage rates in girls; the acceptability of the program by adolescents, parents, and schools; program successes; and programming challenges will be reviewed.

Discussion and recommendations: In order to plan a successful program, several factors should be considered, including country-specific information (HPV burden of disease, sero-prevalence, prevalence of pap abnormalities, attitudes toward HPV vaccination), co-factors that impact disease, and the programming choices modeled in Australia.

Conflict of Interest: Rachel Skinner is a member of the advisory boards for both Commonwealth Serum Laboratory (GARDASIL Advisory Board) and GlaxoSmithKline (Cervical Cancer Prevention Working Party) and is principal investigator for several sponsored multi-centre trials evalu

Financial Support/Funding:none.

OP1.5-4

EXPLANATORY FACTORS FOR SEXUAL DIFFICULTIES IN SEXUAL MINORITY BREAST CANCER SURVIVORS

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Introduction and Objectives: Many women experience persistent sexual difficulties after breast cancer. Little attention has focused on the sexual function of sexual minority women (SMW; lesbian, bisexual and other women with female partners) who are survivors. We sought to identify explanatory factors for sexual difficulties in survivors compared to healthy control SMW.

Methods: Using convenience sampling, we conducted a case-control study to compare sexual minority breast cancer survivors to SMW without a cancer history. 83 sexual minority breast cancer survivors who had completed active treatment and 83 age and partner-status matched controls participated in an anonymous survey. Sexual function was measured using the Fe-

male Sexual Function Index. As explanatory factors, we considered demographic and partnership characteristics; menopausal status and symptoms; body image; emotional wellbeing and quality of life.

Results: Survivors felt less sexually attractive, were more likely to be in menopause and had more menopausal symptoms than non-survivors. Explanatory factors of sexual function did not differ for survivors compared to non-survivors: 44% of the variance in sexual function of women in both groups was explained by perceived sexual attractiveness, menopausal status and urogenital menopausal symptoms.

Conclusions: We found few differences between sexual minority breast cancer survivors compared to age and partner-status matched healthy controls. The same explanatory factors explain sexual functioning in both groups. These results diverge from reported findings on heterosexual survivors, in whom sexual functioning is also impacted by having a partner and specific partnership characteristics.

Conflict of Interest: None disclosed

Financial Support/Funding: Susan Komen Foundation

OP1.5-5

SEXUAL LIFE IN WOMEN AFTER BONE MARROW TRANSPLANTATION

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Introduction and Objectives: After high-dose chemotherapy given to patients (pts) with leukemia, blood forming stem cells from a sibling or unrelated donor are given (bone marrow transplantation; BMT). This life-saving procedure implies that the pt's own immune system is replaced by immunocompetent cells of donor origin. Graft-versus-Host Disease (GvHD) is the undesired inflammatory activity of these donor cells, and may affect the female genital mucosa. In a cross-sectional study we have assessed prevalence, symptomatology and effect on sexual life of genital GvHD (gGvHD).

Methods: Fifty-three consecutive pts, transplanted 1996-2005 were asked to participate; 44 (83%) have been examined. Median age was 47 (26-72) yrs; follow up after transplant 6 (3-12) yrs. The study encompassed (i) anamnesis and questionnaires for the identification of depression and sexual dysfunction; (ii) gynaecological examination.

Results: Clinical findings of genital GvHD in both vulva and vagina is a dry, thin, painful mucosa, white bands and patches and narrowing stenosis. Seventeen pts (39%) had clinical symptoms and signs categorized as probable gGvHD; another 14 as possible gGvHD. Female Sexual Distress Scale

revealed sexual dysfunction in 19 of 42 (45%). Beck Depression Inventory indicated depression in 12/42 (29%). Sexual dysfunction was associated with clinical gGvHD, albeit some women with painful gGvHD had no sexual problem.

Conclusion: GvHD is a common cause of genital problems after BMT and associated with sexual dysfunction and depression. Gynecological local intervention and sexual counselling should be part of the post-transplant care.

Conflict of Interest: None disclosed

Financial Support/Funding: The Health and Medical Care Committee of the Region Västra Götaland, Sweden.

OP1.5-6

WOMEN'S EXPERIENCES OF SEXUALITY AFTER TREATMENT FOR CERVICAL CANCER: A QUALITATIVE STUDY

Maticka-Tyndale Eleanor (University of Windsor), Maticka-Tyndale Eleanor (University of Windsor)

Introduction: Cervical cancer is one form of cancer that directly impacts women's experience of sexuality. This research explores women's experience of sexuality after cervical cancer treatment.

Methods: Eleven women recruited through a regional cancer centre in Canada who had completed treatment for cervical cancer within 5 years of this study participated in in-depth interviews about the experience of their sexuality post-treatment.

Findings: One treatment, brachytherapy (repeated, direct radiation to the cervix), was identified as having especially negative impacts on sexuality. Women described ongoing pain and bleeding with sexual intercourse and were reminded of the pain of treatment when engaging in intimate contacts. Lack of desire and pleasure were common, with most participants saying they would prefer not to engage in sex at all. Women in long term relationships, however, all engaged in sexual activity, citing partner needs as their motivation. Only one woman in the study considered forms of sexual pleasuring other than intercourse. No others were prepared to consider alternatives to vaginal intercourse for sexual pleasuring. All women saw intercourse as a necessary goal of sexual intimacy. While most partners were described as patient and understanding, some long-term relationships were terminated due to the strain of the experience. Although health providers were understanding and helpful, they were not equipped to deal with the sexual problems of these women.

Recommendations: Better information, counseling, therapy and support are needed to help women renew their positive connections with their sexuality after cervical cancer treatment.

Conflict of Interest: None disclosed

Financial Support/Funding: Canada Research Chairs programme

ORAL PRESENTATION SESSION OP1.6
Women's health

OP1.6-1

MATERNAL LOVE - BIOLOGICAL VS. PSYCHOSOCIAL DETERMINATION

Konecna Hana (University of South Bohemia, Ceske Budejovice, CR), Vodickova Hana (Hospital Ceske Budejovice, CR), Janku Vit (Centre for Family and Social Care, Brno, CR), Bubleova Veduna (Centre for Adoption and Foster Care, Prague, CR)

Introduction: How the mother-child relationship is created? Biologizing theories put genetic bonds in foreground, socially constructivist theories lean on psycho-social bonds.

Methods: Qualitative contents analysis of 158 statements of women-mothers on the topic of origin of the relationship to the child and of 320 chat statements on the emotional side of the case of the babies exchanged in a Czech maternity hospital in 2007.

Findings and discussion: Only 36 statements on the topic of "relationship to the newborn" put stress on the delivery as the important milestone. Others speak about gradual creation of the relationship, either already in pregnancy or in the days or months after delivery. In the time immediately after delivery, 45 women did not feel any relationship to their own child. Several respondents expressed disappointment over unfulfilled expectation as well as concerns whether they were authentic women and good mothers. The chat statements agree that they could not imagine a situation when you should return a baby you have mothered for 9 months. Results do not support the biologizing theories. The mother-child relationship is based on communication (verbal and nonverbal) and on shared intimacy and the time spent together is the essential factor.

Recommendations: The results are important not only for the sphere of third-party reproduction but they will also find use in after-delivery care for parents, as well as in consultancy provided to applicants for adoptions. References: Badinter, E. (1998). *Materska laska*. Bratislava: Aspekt. Dawkins, R. (2003). *Sobecky gen*. Praha: MF

Conflict of Interest: None disclosed

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OP1.6-2

PREDICTORS OF SEXUAL ACTIVITY AMONG POSTMENOPAUSAL WOMEN IN AN URBAN NIGERIAN COMMUNITY

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Introduction and Objectives: In many Nigerian communities, the culture stipulates abstinence at menopause. The aim of this paper is to report the prevalence and predictors of sexual activity in the month preceding the survey among postmenopausal women in an urban community in Ibadan, Nigeria.

Methods: Descriptive, cross-sectional community based study. Using a multistage cluster sample of women 40-60 years residing in selected areas of Ibadan, data was collected from 490 postmenopausal women using interviewer-administered questionnaires. SPSS 16.0 software was used for data analysis.

Results: Of the 490 postmenopausal women, 369(75.3%) were currently living with a man. Analysis was carried out on this subset. Mean age was 52.2±4.9 years. In the month preceding their interview, 112(30.4%) women reported having sex. Only 31.4% of respondents agreed that sex is more enjoyable after menopause. Ninety-two (24.9%) respondents reported experiencing dry vagina while 179(48.5%) experienced sexual problems in the preceding month. Women who were sexually active were more likely to be younger ($p<0.0001$), Christians ($p<0.0001$), in monogamous relationships ($p<0.0001$), and in professional/managerial occupations ($p<0.0001$). On the other hand, women with no formal education were less likely to be sexually active ($p<0.0001$). There was no statistically significant relationship between being sexually active and experiencing sexual problems or vaginal dryness. Predictors of sexual activity following regression analysis were age (OR=6.9; 95%CI:2.2-21.2) and level of education (OR=0.2; 95%CI:0.06-0.67) of respondent.

Conclusion: In a culture where women often abstain from sex at menopause, these findings will guide appropriate interventions for postmenopausal women of different age and educational groups.

Conflict of Interest: None disclosed

Financial Support/Funding: Personal

OP1.6-3

THE EVOLUTION OF SEXUAL DESIRE: A VIEW TO GENDER DIFFERENCES

Kontula Osmo (Population Research Institute, Family Federation of Finland)

Sexual desire is a key factor that predicts and motivates sexual activities and behaviors. Gender differences in sexual desire have been explained and predicted for example by evolution theory and social constructionism. Seldom have gender differences in sexual desire measured and analysed in nationally representative sex surveys. Sex surveys based on random samples from national population registers have been conducted in Finland in 1971, 1992, 1999, and 2007. They are representative of the total population within the age range of 18-54 years in 1971 (N=2152) and 18-74 years in 1992 (N=2250), 1999 (N=1496), and 2007 (N=2590). Due to different data collection techniques response rates were lower in 1999 and 2007 than in 1971 and 1992. Gender differences in sexual desire did not decrease from 1970s

to 2000s. Compared to women, men feel sexual desire 2-3 times more often, they would like to have sexual intercourse more often and they would prefer more frequent intercourse in their relationships more often. In addition, women report frequent lack in their own sexual desire four times more often than men. Compared to other women, women with low sexual desire less often consider sex life important for the happiness in their relationship, they quite seldom consider their sexual intercourse very pleasant, and they more often have some problems in their sexual communication and interaction with their partner. These and other findings of gender differences in sexual desire will be discussed also in a theoretical framework.

Conflict of Interest: None disclosed

Financial Support/Funding: Ministry of Social Affairs and Health

OP1.6-4

GROUP THERAPY FOR WOMEN WITH ORGASM DISORDERS

Gubler Christa

Group therapy for women with orgasm disorders One woman in four will reach the age of 20, one in ten even 35 without ever having experienced an orgasm, by which time the interest and joy arising from sexuality is greatly reduced. This results in questioning of the self, insecurities and a lack of self confidence all strongly affect one's view of being a woman in the 'proper sense'. Our learning programme understands that in order to reach orgasm and sexual fulfillment, women need to know how to elicit arousal, to enhance it and to let go in orgasm, combined with the experience of establishing sexual and erotic pleasure and voluptuousness. To this extent we introduce various successful therapeutic techniques based on skills the women already possess in order to enrich the erotic experience, thereby leading to increased enjoyment and sexual satisfaction. Groups known as 'Reaching Orgasm with Pleasure' (10 participants) aim to be serious and goal-oriented, sensual, joyous and voluptuous as well as effective. Participants learn the essentials of the sexual function of the body, how to recognise and to advocate their sexual needs, combined with an exploration of the influence of personal and societal values systems which may prevent erotic enjoyment. During group the women practice self perception of the body, breathing and muscle tension along with movement and rhythm which are requisite for the experiencing of voluptuousness. Further support is provided in the form of exercises with the possibility of experiencing an inspiring and supportive exchange among the group members.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.6-5

SEXUAL ACTIVITY DURING MENSTRUATION AMONG MARRIED WOMEN IN GORGAN-IRAN

ziaei tayebe (Golestan university of medical sciences), ziaei tayebe

(Golestan university of medical sciences), Khoory Elham (Golestan university of medical sciences), ziaei fatemeh (Gorgan department of education)

Introduction: Having sexual relationship during menstruation is one of the sexual activities which is controversial from the view of couples, cultures, religious and specialist. In some cultures it is a normal relationship, and in other it is forbidden and wrong. Also there are some studies which suggest the possibility of infections such as HIV by this sexual behavior. In Islamic countries like Iran, there are no referable scientific statistics of this behavior. Therefore, this study was done with the object of determining the existence or lack of it from the view of married women in Gorgan.

Method: Descriptive study was done on 129 married women who had at least one child and lived with their husbands in the city of Gorgan (2005-2006). Because there were no statistical references, we estimate that we would need 110 samples. Questionnaire included two parts: a) demographic information, b) questions related to sexual relationship during menstruation. After collecting data, analyzing was done by descriptive statistics.

Results: Average age of samples and their husbands were 37.5 and 41.3 years. And the length of their marriage was 13.6 years. Assessing of specific questions showed that couples used different sexual activities during menstruation: vaginal intercourse 18.59%, anal sex 10.49% and oral sex 15.14%. On the other hand, between couples who had anal intercourse 74.16% of women claimed that it was a request from their husband and about 22% said request was

Conflict of Interest: None disclosed

Financial Support/Funding: by self

OP1.6-6

ORGASM AFTER VULVECTOMY – CAN IT BE LEARNED?

Bischof Karoline

Coital anorgasmia is a common complaint among women consulting for sexual problems. Recently, a genetic predisposition was proposed. This presentation discusses the role of physical learning. Case report A 53 year old woman consulted with secondary anorgasmia of two years. She had been orgasmic through clitoral stimulation prior to an extensive vulvectomy including clitoridectomy for Bowen's disease. Sexocorporal therapeutic interventions included instructions for digital vaginal stimulation and mobilisation of the pelvis through iliopsoas and pelvic floor muscle contractions with abdominal breathing.

Outcome: After three months' training, the patient achieved satisfying orgasms through vaginal stimulation and pelvic movement.

Discussion: Concluding from research among women with genital mutilation (FGM), the clitoris is not inevitable for orgasm. The rate of orgasm through penile-vaginal stimulation is higher among FGM women than among women with intact clitoris. We propose that orgasmic response and the favored location of stimulation depends not just on genetics, but on the

physical learning history. Clitoral response, comparatively easily accessible, may keep a woman from exploring and developing her vaginal sensitivity. The more remote vagina and surrounding pelvic floor muscles require repetitive pressure to develop responsiveness, which is enhanced through pelvic movement. Through corresponding physical training, as applied in sexo-corporal therapy, vaginal sexual response can be accessible to women even after destructive surgery.

Recommendations: Women consulting for coital anorgasmia can be encouraged to develop vaginal sexual response through repetitive vaginal stimulation and play with pelvic muscles. It is important to give this information to women with extensive vulval surgery.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

ORAL PRESENTATION SESSION OP1.7 Disorders, Transsexuals

OP1.7-2

PERSONALITY AND PSYCHOPATHOLOGY OF G.I.D. PATIENTS: A STUDY WITH RORSCHACH TEST

Mariateresa Molo Chiara Crespi Monica Gen (Centre of Gender Identity Disorder)

Introduction and objective: Gender Identity Disorder (GID) is included in the DSM-IV as a form of mental disorder and represents a specific clinical syndrome. The etiology of GID is poorly understood as no definite data has been evidenced so far, so that it is a still puzzling challenge for health care providers. The aim of the paper was to investigate psychopathological problems in a GID sample by means of the Rorschach test according to Exner's Comprehensive system.

Materials and method: Our sample is composed of 30 GID subject referred for Sex Reassignment Surgery. Patients were administered the Rorschach test. Some cluster variables were investigated as cognitive factors, reality testing, self-image, interpersonal relationships, stress control and affective factors.

Results and conclusions: In line with previous findings, our results indicate no clear-cut psychopathology with the Rorschach, thus suggesting GID is an independent condition unrelated to psychopathology and calling into question its inclusion in mental health disorders. Findings from the Rorschach might suggest however some hypotheses on the personality organization of GID subjects

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.7-3

LONG TERM MORTALITY IN HORMONE-TREATED TRANSSEXUALS

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This study assessed mortality in a cohort of 1330 transsexuals: 965 male-to-female(MtF), mean age at start 31.4 years, 13,935 patient-years and 365 female-to-male (FtM), mean age at start 26.1 years, 5,550 patient-years. All patients who had started hormones before July 1, 1997 were included and followed till death, last visit or July 1, 2007. Causes of death (ICD-10) were ascertained by medical reports or general practitioners. Observed deaths were compared to the expected numbers (adjusted for age, original sex and period of follow up on hormone treatment) in the general population by standardized mortality ratio(SMR). In the MtF group total mortality was increased by 46% compared to the general population, due to increased numbers of suicide (6), drugs-related deaths (3) and AIDS (9) in the age group 25-39 and to suicide (8) and circulatory disease (13) in the group 40-64 years old. The increased mortality rate of ischemic heart diseases (SMR:1.74) suggests rather an increased risk than a protective effect of estrogen therapy on IHD. Also the risk of fatal stroke was increased (SMR:2.04) No increased mortality was found in FtM. In summary, androgen treatment of FtM appears reasonably safe but estrogen treatment of MtF appears associated with elevated IHD and stroke. Further analysis of the role of dose/type of estrogen (ethinylestradiol?) and smoking is needed. In MtF there is a high rate of suicide, AIDS and drugs-related mortality warranting intense preventive action and close follow up.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.7-4

MAKING THE TRANSITION IN TRANSGENDER MEDICINE: FROM RESEARCH TO QUALITY CARE

Sinelnikov Kirill I. (FtM Phoenix), Baker Kellan E. (FtM Phoenix and The George Washington University)

The medicalization of trans identities began when researchers developed medical treatments for people whose persistent identification with the «opposite sex» drove them to seek permanent sex reassignment. These treatments may include administration of exogenous hormones and surgical reconfiguration of the physical sex characteristics to bring the sex of the body into alignment with that of the mind. Alongside this applied medical knowledge evolved a body of research into the psychological, cultural, and biological roots of transsexuality. The field of trans medicine has had a mixed history. Sometimes it has provided trans people with what many see as life-saving medical interventions that allow them to finally achieve a

sense of psychic and bodily integrity. Too often, however, the medical profession has dehumanized trans patients by promoting the role of the doctor as scientist and gatekeeper and restricting the role of the patient to experimental subject. In response, the worldwide trans rights movement emphasizes the right of transsexual and transgender people to accessible, culturally-competent healthcare, but trans people continue to struggle to secure care from medical professionals who often fail to understand or respect trans identities. In our research, we investigate the experiences of trans people attempting to access both ordinary healthcare and care related to sex reassignment in various countries. On the basis of our findings, we recommend that the field of trans medicine commit to making a full transition to a paradigm that embraces universal quality care for trans individuals and dedicates its research solely to enhancing its patients' well-being.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.7-5

LOST IN TRANSITION: TRANSPeOPLE, HORMONES AND HEALTH IN SOUTHEAST ASIA

Winter Sam (University of Hong Kong)

Cross-sex hormones are easily available across much of Southeast Asia, at least for transwomen. Scattered reports across Southeast Asia suggest that many transwomen take hormones without consulting health workers. In view of the potential damaging health effects arising from hormone use, this research study aimed to examine patterns of hormone use by transwomen in three Southeast Asian countries: Laos, Thailand and the Philippines. The Lao study, a telephone survey, utilised participants who had been part of a respondent-driven sample in an earlier study examining issues other than hormone use. The Thai and Philippines studies, involving a questionnaire, recruited through social networks and by way of snowball sampling. There were a total of 412 transwomen participating in the three studies. The studies together indicate that many transpeople across Southeast Asia: 1) use cross-sex hormones, on average beginning in their teens; 2) seek advice before doing so (as well as subsequently); 3) get that advice from other members of the community, with health workers seldom consulted; 4) practice irregular and variable dosages; 5) are quite knowledgeable about beneficial effects; 6) are much less knowledgeable about possible non-beneficial side effects and health risks; 6) nevertheless report experiencing side effects; 7) and eventually stop taking hormones, most often citing side effects actually experienced, less often citing fears of possible future side effects. The findings prompt concern, implying a need for more accessible transgender health care, as well as better health education for transpeople. We suggest ways forward, and a possible role for WASH.

Conflict of Interest: None disclosed

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OP1.7-6

SEX REASSIGNMENT OF TRANSEXUALS IS ASSOCIATED WITH INCREASED MORTALITY, PSYCHIATRIC MORBIDITY.

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Background: Sex reassignment is the treatment of transsexualism, little is known about the long-term outcome regarding mortality and psychiatric health of this procedure.

Methods: We performed a retrospective case-control study based on Swedish national register data from 1973-2003, in which 324 sex reassigned individuals were identified and matched to two sets of randomly selected controls (10 for each case): one matched by birth sex; one matched by sex at end of follow-up. Hazard ratios with 95% CIs were calculated from Cox proportional hazards regression.

Findings: The sex reassigned group had three times higher mortality rate than the reference group matched for birth age and birth sex, after adjustment for psychiatric morbidity and immigrant status prior to baseline (Hazard ratio [HR] 2•8; 95% CI 1•8-4•3). The risk for death by suicide was much higher than in the reference group (HR 19•1; 95% CI 5•8-62•9). There was also a marked increased risk for psychiatric in-patient care (HR 2•8; 95% CI 2•0-3•9) and suicide attempts (HR 4•9; 95% CI 2•9-8•5), also when adjusting for psychiatric morbidity prior to baseline. Sex reassigned individuals have substantially higher mortality and are at higher risk for psychiatric morbidity and suicide attempts than the normal population. To reduce the risk of suicide it is important that clinicians don't neglect the psychiatric co-morbidity. More research is needed to prevent and elucidate the causes of higher mortality rates for sex reassigned individuals.

Conflict of Interest: None disclosed

Financial Support/Funding:Swedish psychiatry fondation, svenska psykiatri fonden

ORAL PRESENTATION SESSION OP1.8

Men's health

OP1.8-1

SEMEN QUALITY IN ASYMPTOMATIC INFERTILE MEN: USING MULTIPLEX PCR AND STANDARD CULTURE METHODS

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Introduction and objectives: Male urogenital tract infection plays an important role in infertility. Asymptomatic bacteriospermia may lead to sperm impairment. *C. trachomatis* and *Mycoplasmas* are discussed as the most common bacteria with negative effect on male reproductive health.

Methods: The aim of this study was to detect *C. trachomatis*, *M. hominis* and *U. urealyticum* in semen sample of 200 infertile men by Multiplex PCR method and analysis of their influence on semen parameters. Moreover, microbiological investigation of semen samples was performed by standard bacterial culture method for isolating other microbial variables.

Results: All the patients were without clinical symptoms of urogenital tract infections. Among total 200 cases, 33% (66 cases) were PCR positive. Microbial culture was positive in 69 cases (34.5%). We found a noticeable relation between the presence of bacteriospermia and the rate of non motile and morphologically abnormal sperms ($P < 0.0001$) and low sperm concentration ($P < 0.04$). There was no relation between leukocytospermia and bacteriospermia ($P > 0.05$). The highest number of positive cases has been allocated to age-group 20-30 and patients whose educational level was under high school diploma.

Conclusion: Asymptomatic existence of bacteria, especially *Chlamydia*, *Mycoplasmas*, *E. coli* and *Enterococci* in urogenital tracts may play an important role in male infertility. Bacteriospermia can influence sperm's motility, morphology and concentration. It seems that leukocytospermia is not a reliable marker for predicting of infection. We found that people's knowledge and culture have a direct effect on their perception toward sexual

health. Lack of knowledge of genital infections protection ways and not following the treatment process are

Conflict of Interest: None disclosed

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OP1.8-2

TREATMENT OF PEYRONIE'S DISEASE BY PENILE PROSTHESIS IMPLANTATION AND TUNICA ALBUGINEA INCISIONS WITHOUT GRAFTING

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Introduction and objectives: To evaluate our technique, in the treatment of Peyronie's disease, using penile prosthesis implantation without grafting of the tunica albuginea.

Methods: A 56 years old patient, with Peyronie's disease, underwent surgical repair of penile deformities. Plaque was located in distal third of corpora cavernosa. Erectile dysfunction was confirmed by Doppler duplex ultrasound and PGE1 test. After penile degloving, dissection of the neurovascular bundle was made in Buck's fascia layer starting close to urethra. Malleable penile prostheses were inserted into the deformed corporal bodies using standard technique. Tunica albuginea was incised and opened at the plaque region to correct the deformities. The neurovascular bundle was replaced and sutured to the corpora cavernosa covering completely tunica albuginea incisions. In this way, tunica albuginea grafting was avoided.

Results: Three months after surgery good results are achieved. Penis is completely straightened and lengthened. The patient is completely satisfied with his sexual life.

Conclusion: Penile prosthesis implantation without grafting of the tunica albuginea could be a good alternative to other surgical techniques in the treatment of Peyronie's disease with erectile dysfunction; wide dissection of neurovascular bundle allows an excellent approach to the plaque and good covering of incised and opened tunica albuginea.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.8-3

THE PROLIFIC PENIS: ITS PROWESS, PROTUBERANCE, AND OTHER PARTICULARS

Anderson Kimberly Resnick (Summa Center for Sexual Health)

Considerable research is being done to increase our understanding of how the human penis works, what role evolution had in perfecting the penis, and other aspects of male sexual capacity. This paper will highlight the latest research from esteemed evolutionary psychologists, sociologists, and neurobiologists who are studying various aspects of human penile function. Questions such as why is the human penis so large compared to other members of the animal kingdom; what triggers the point of ejaculatory inevitability; does the depth of a male's vaginal thrust affect fertility; and are male multiple orgasms myth or reality, will be answered. This timely overview will provide insight into the cutting edge science being conducting worldwide to enhance our knowledge of the ever-prolific human penis.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.8-4

THE PHALLUS AND ETHNICITY

Ramlachan padaruth

The Phallus and Ethnicity Ramlachan P, Newkwa Sexual Health and Wellness Center, Durban, South Africa Objective: To explore the connection between The Phallus and Ethnicity. Psychoanalysis considers the phallus to be a cultural representation of social power which is aligned to that of male authority. The Phallus as a symbol condenses the configurations that confer and maintain authority and power to man, but it is not the phallus in itself, which is revered, rather, that for which it is the Sign (lingam) – the progenitor or the cosmic individual. Ethnicity comprises an intertwining cluster of attributes that can be observed in an ethnic group. The building blocks for the concept of an ethnic group can be attributed to some of the following: kinship; commensality; common culture; proper name and reverence for the past.

Methods: An expansive reading was undertaken of relevant peer reviewed journal articles, books and Internet searches to explore this connection.

Results: I discovered that the Phallus appeared in multifarious events such as: rituals, festivals, ceremonies, survivals and vestiges, sometimes in a disguised form, in the entire world in prehistoric times and has perpetuated itself into the present in various regions of the world. Its presence among different ethnic groups is affirmed by symbols such as standing stones, woodcarvings and metal sculptures that can be found in all parts of the world. Sculpture, art architecture and drama abound with examples of phallic representations such as: 1. Objects of reverence and religious worship-examples include (the lingam in India; “Judas and his Phallus” in

Conflict of Interest: None disclosed

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OP1.8-6

MALE POPULATION WITH LOW SEXUAL DESIRE TREATED WITH AN ASSOCIATION OF TESTOSTERONE (INTRAMUSCULAR) AND TRANSDERMAL TESTOSTERONE GEL.

Moreira Carlos (Clinica Masters), Callo Marcelo (Clinica Masters), Torres Eduardo (Clinica Masters)

Introduction and objectives: Replacement treatment with Testosterone has been a controversial issue along the last 5 years. Despite the average good response to treatment many scientist disagree with the proposal of giving Testosterone on the bases of clinical evidence of Low Sexual Desire without dosage of Testosterone blood level. Our objectives were to treat an adult male population (n=200) which presented Low Sexual Desire with intramuscular (Durastone,Lilly) and transdermal fixed doses of Testosterone (Androlone gel,Beta)

Methods: We compared results with a population (n= 100) with th same diagnosis and refused treatment. Statistical studies are still being performed. Patiens included: Adam test more than 4 points. Patients excluded: prostate cancer or PSA more than 4 mgrs/ml.All patients have a PSA dosage 1 month after treatment. A clinical evaluation was done after treatment.

Results and conclusions: clearly significant beneficial effects were obtained after Testosterone treatment.Sexual Desire and sexual fantasies improved. Many patients improved some degree of Erectil Dysfunction. More investigation is required on this interesting point describing the role of Testosterone on Sexual Desire and Erectil Dysfunction

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.8-7

THE DEVELOPMENT OF STANDARDS OF CARE FOR INDIVIDUALS WITH A MALE-TO-EUNUCH GENDER IDENTITY DISORDER

Vale Kayla (Dalhousie University), Johnson Thomas W (California State University, Chico), Jansen Maren S (independent scholar), Lawson B Keith (independent scholar), Lieberman Tucker (independent scholar), Willette Krister H (independent scholar), Wassersug Richard J (Dalhousie University)

Introduction: A large number of men with gender dysphoria do not fit the classical pattern of MtF transexualism. They loathe their manhood, but do not wish to be, female. Instead, they seek castration to become emasculated males. We here refer to these individuals as male-to-eunuch (MtE).

Approach: The Harry Benjamin SOC is not applicable to MtE individuals. Neither the DSM-IV nor the ICD-10 currently recognizes MtE transgenerism as a specific GID. This is a barrier for MtE individuals to receive treatment.

Findings and discussions: Many MtE individuals perform their own castrations or seek underground cutters. Data from a survey indicated that less

than half of the 300 individuals who have had voluntary genital ablations were castrated by medical doctors. We introduce here MtE SOC that specifically recommend reversible androgen deprivation drug treatment in advance of any surgery. Our draft MtE SOC addresses the incongruence between the needs of individuals with MtE GID and GID as defined in DSM-IV and ICD-10. `

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Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.8-8

PSYCHOLOGICAL FACTORS ASSOCIATED WITH MALE SEXUAL DYSFUNCTIONS

Sapena Oscar

Introduction: One of the problems usually associated with sexual dysfunctions is psychological factors present in these patients. Other professionals in this area study the same problems, but it is unknown, in this country, official studies that establish, evaluate and describe this psychological factors.

Objective: Specify the incidence of psychological factors associated to male sexual dysfunctions, using a sample of patients from a private health center.

Method: Clinical archives of 600 male subjects were processed, with average age in 43. 3, from a private health center between 1992 and 2002. The psychological factors under study were: sexual anxiety, failure anticipation, spectator role playing and sexual avoiding. Both qualitative and quantitative analysis with Microsoft Excel Program® was done to quantify, classify and make graphics of the results.

Results: 53% of the subjects present at least one of the four psychological factors that were studied in association to male sexual dysfunctions. The percentage for each one of these factors were: 48% for sexual anxiety, 47% for failure anticipation, 40% for spectator role playing and 34% for sexual avoiding.

Conclusion: According to our findings the incidence of psychological factors in subjects with sexual dysfunctions is high. Sexual anxiety and failure anticipation were the two most important factors associated with male sexual dysfunctions.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.8-9

IMPROVEMENT IN DURATION OF ERECTION WITH VARDENAFIL TREATMENT IN MEN WITH ERECTILE DYSFUNCTION: FINDINGS OF THE ENDURANCE STUDY

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Introduction/objectives: To evaluate the efficacy of vardenafil in men with erectile dysfunction (ED) by measurement of duration of erection leading to successful intercourse.

Methods: This was a randomised, multicentre, double-blind, placebo-controlled, crossover study. Inclusion criteria: men aged 18–64 years; ED >6 months' duration; International Index of Erectile Function, erectile function domain (IIEF-EF) score >5 and <26. Patients completed a 4-week run-in period and were then randomised to 4 weeks' treatment with fixed-dose vardenafil 10 mg or placebo. After a 1-week washout period, patients were crossed over to the alternate study medication. Primary efficacy measure: stopwatch-assessed duration of erection (measured from time erection perceived hard enough for penetration until withdrawal from partner's vagina) leading to successful intercourse (measured by Sexual Encounter Profile question 3 [SEP3]). Secondary efficacy measures included: IIEF-EF, SEP2 and SEP3.

Results: Intent-to-treat (ITT) population = 191 patients. Patients had ED of varying aetiology and severity (moderate/severe ED, 73%). Baseline underlying conditions included hypertension (32%), diabetes (7%) and hyperlipidemia (10%). Over 4 weeks' treatment, least squares mean duration of erection leading to successful intercourse was significantly longer for vardenafil than for placebo (12.81 min vs 5.45 min; $p < 0.001$). Treatment with vardenafil was also superior to placebo in IIEF-EF, SEP2 and SEP3 measures. Vardenafil was well tolerated; the nature and incidence of adverse events were consistent with the previously demonstrated safety profile of vardenafil.

Conclusions: Compared with placebo, vardenafil treatment produced a significantly superior duration of erection leading to successful intercourse in men with ED of broad aetiology.

Conflict of Interest: PA, TM, JR and SM are employees of GlaxoSmithKline, and MR has acted as a consultant and co-ordinating investigator for GlaxoSmithKline.

Financial Support/Funding:This study was supported financially by GlaxoSmithKline.

OP1.8-10

PSYCHOLOGICAL DETERMINANTS OF ERECTILE DYSFUNCTION: TESTING A COGNITIVE-EMOTIONAL MODEL

Nobre Pedro J. (Universidade de Trás-os-Montes e Alto Douro)

Introduction and objectives: The aim of the present paper was to develop and test a cognitive-emotional model for male erectile dysfunction. Recent studies have shown the impact of sexual dysfunctional beliefs (Nobre & Pinto-Gouveia, 2006a), negative cognitive schemas (Nobre & Pinto-Gouveia, in press), negative automatic thoughts (Nobre & Pinto-Gouveia, 2003, 2007), and depressed affect (Nobre & Pinto-Gouveia, 2006b) on sexual functioning in men. Taking these findings into account, we developed a cognitive-emotional model for male erectile dysfunction using path analysis to test it.

Methods: A total of 352 men (303 participants from the general population and 49 participants with a DSM-IV diagnosis of sexual dysfunction) answered a set of questionnaires assessing cognitive and emotional variables: Questionnaire of Cognitive Schema Activation in Sexual Context (QCSASC; Nobre & Pinto-Gouveia, in press); Sexual Dysfunctional Beliefs Questionnaire (SDBQ; Nobre, Pinto-Gouveia, & Gomes; 2003), Sexual Modes Questionnaire (SMQ; Nobre & Pinto-Gouveia, 2003), and International Index of Erectile Function (IIEF; Rosen et al., 1997).

Results: Findings from the path analysis supported the relevance of the model and its adjustment to the observed data, indicating the main role performed by cognitive and emotional factors on the predisposition and maintenance of male erectile dysfunction.

Conclusions: These findings may have important implications for assessment and treatment of erectile dysfunction. The inclusion of measures of sexual beliefs, cognitive schemas, automatic thoughts and emotions, into assessment protocols of sexual dysfunction may help developing better clinical case conceptualizations and treatment plans. Findings also suggest the importance of including into treatment protocols, strategies oriented to work with the sexual beliefs and cognitive schemas presented by individuals with ED.

Conflict of Interest: None disclosed

Financial Support/Funding: FUNDAÇÃO CIÊNCIA E TECNOLOGIA

OP1.8-11

ETHNIC VARIATIONS IN THE PREVALENCE OF MALE SEXUAL DYSFUNCTION

Adaikan Ganesan P (Department of Obstetrics & Gynaecology, National University Hospital), Chong Yap Seng (Department of Obstetrics & Gynaecology, National University Hospital), Lee James (Department of Obstetrics & Gynaecology, National University Hospital)

Introduction and Methods: An epidemiological study was carried out in a cohort of 923 male patients presenting with sexual dysfunction (SD) at the Andrology clinic, NUH to evaluate the community prevalence of erectile dysfunction (ED) among the different races in Singapore and how it varied

with the marital status, medical illnesses and lifestyle derangements.

Results: The incidence for SD was 63% among the Chinese, 7.4% for Indians and 8.1 % for Malays and 8.3% for the other races (including foreigners). Medical illnesses resulting in organic causes of ED were more common among Malays (48%) compared to Chinese (38%) or Indians (40.4%). For instance, incidence of hypertension was 30.8% among Malays when compared to Chinese (22.1%) and Indians (16%). As for lipids, 67.9% and 39% of a mixed patient pool for total cholesterol (268) and TG (251) respectively had higher than normal levels of the two lipids. Among the 424 Chinese SD patients cohort, 13.9% presented with non-consummation of their marriages. This figure was 8.1% for Malays and 19.1% for Indians.

Discussion and Conclusion: Our study showed that non-consummation of marriages was one of the causes of subfertility. A third of the ED patients had less than normal level (<3.2 ng/ml) of testosterone correlating with low desire for frequency of coitus and age. It is seen from our epidemiological study on the patient pool that life style factors, hormonal, environmental and other socio-environmental and racial issues do play a role in contributing to sexual dysfunction including non-consummation predisposing to marital disharmony.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.8-12

THE ROLE OF PERSONALITY DIMENSIONS, TRAIT AFFECT AND PSYCHOPATHOLOGY ON MALE SEXUAL DYSFUNCTION

Quinta Gomes Ana Luísa (Universidade Trás-os-Montes e Alto Douro), Nobre Pedro (Universidade Trás-os-Montes e Alto Douro)

Introduction and Methods: Clinicians and researchers have been interested on the role played by psychological variables on sexual functioning. The aim of this study was to investigate the importance of Personality dimensions, trait Affect and Psychopathology on men's sexual functioning.

Methods: 18 men diagnosed with sexual dysfunction from Portuguese Sexology Clinics and 205 individuals from the community participated in this study. Participants answered the Sexual Dysfunction Interview (SDI – male version; Sbrocco, Weisberg, & Barlow, 1992), International Index Erectile Function (IIEF; Rosen, Riley, Wagner, Osterloh, Kirkpatrick, & Mishra, 1997), Brief Symptom Inventory (BSI; Derogatis & Spencer, 1982), Beck Depression Inventory (BDI; Beck, Ward, Mendelson, Mock, & Erbaugh, 1961), NEO Five-Factor Inventory (NEO-FFI; Costa & McCrae, 1992) and PANAS-X (Watson & Clark, 1994).

Results: Regarding Personality, findings indicated that men with sexual dysfunction presented higher levels of Neuroticism ($p = .02$) and lower levels of Extraversion ($p = .03$) when compared to sexually healthy men, although these results didn't reach statistical significance. Regarding Trait Affect, men with sexual dysfunction presented significantly higher levels of trait negative affect ($p < .05$) and lower levels of trait positive affect ($p < .05$) compared to individuals without sexual problems. Finally, concerning

Psychopathology, men presenting sexual problems showed higher levels of depressive symptoms ($p < .05$) than sexually healthy men.

Conclusions: Findings supported the importance of psychological variables on men's sexual functioning. Men with sexual dysfunction present significant higher levels of trait negative affect and a lack of positive trait affect, and higher levels of depressive symptoms.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.8-13

CORRELATION BETWEEN SEMINAL PLASMA GLUTATHIONE PEROXIDASE ENZYME ACTIVITY AND SEMEN PARAMETERS

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Introduction and objectives: Sperm cell membranes are susceptible to peroxidative damage by an excess of reactive oxygen species (ROS). Antioxidative defence systems consisting of glutathione peroxidase (GSH-Px), superoxide dismutase (SOD) and catalase (CAT) physiologically control the balance between ROS production and neutralization. In the present study, correlations between seminal plasma glutathione peroxidase enzyme activity and semen parameters are evaluated in 240 males.

Methods: Semen analysis was performed according to World Health Organization guidelines. The 240 males were subdivided into 5 groups as normospermia, oligospermia, asthenospermia, azospermia and varicocele according to their spermograms. Seminal plasma glutathione peroxidase enzyme activity was determined by Kit (Randox, Germany).

Results: The result showed that glutathione peroxidase enzyme activity is higher in normospermic than oligospermia, asthenospermia, azospermia and varicocele groups. Also, there are significant and negative correlations between glutathione peroxidase enzyme activity and seminal plasma fructose concentration, white blood cell, tail defects of sperm, coiled tail sperms and short tail sperms. On the other hand, the present data showed that significant and positive correlations between vitality, sperm count, motility and normal morphology.

Conclusion: The present study showed that measurement of glutathione peroxidase enzyme activity could be a good marker for evaluation of male infertility.

Conflict of Interest: clinical andrology

Financial Support/Funding:This study supported by deputy research of my university

ORAL PRESENTATION SESSION OP1.9

Diseases

OP1.9-1

SOCIO-SEXUAL RELATIONS AMONG INDIVIDUALS LIVING WITH DISABILITIES IN INSTITUTION OR IN PRIVATE HOUSEHOLDS : ANALYSIS OF THE DISABILITY, FUNCTIONAL LIMITATION, AND DEPENDENCY (HID) NATIONAL SURVEY

Gianni Alain (Inserm , U 822, Le Kremlin Bicêtre, F-94276, France), de Colomby Patrick (Inserm , U 822, Le Kremlin Bicêtre, F-94276, France)

Introduction and Objectives: The sexual life of disabled individuals is rarely considered as being the result of a form of social construction. This study, based on a secondary analysis of the national survey «Handicap, disability, dependence» (HID), carried out in France in 1998, highlights the influence of forms of institutional organization on the socio-sexual relations of disabled individuals.

Methods: We carried out an analysis allowing us to compare persons (age 15 to 65) who reported at least one disability who live in specialized institutions with those who live in private households.

Results: The results of a series of statistical regressions provide evidence that: (1) disabled persons' socio-sexual relations are much more limited when they live in institutions than when they live in private households ; (2) rates of being single and divorced were noticeably higher in specialized institutions; (3) disabled persons in institutions had less children than people living in households.

Conclusion: This analysis demonstrates the major influence exerted by the institutional organization of sexuality on disabled people whatever the type or degree of reported disability or incapacity. In addition, individuals living in an institution are subject to variations in the frequency of their socio-sexual relations. These variations are linked to the type of institutional organization in which they find themselves and not to the type of disability or incapacity. These results strengthen the hypothesis that the institutional organization of sexuality has a negative influence on the possibility of having socio-sexual relations.

Conflict of Interest: None disclosed

Financial Support/Funding:Inserm : French Institute of Health and medical research (France)

OP1.9-4

THE USEFULNESS OF THE 'SEX PRACTICE ROOM' IN REHABILITATION HOSPITAL FOR THE PERSONS WITH SPINAL CORD INJURY

Lee Bum-Suk (Korean National Rehabilitation Hospital), Kim Sun-Hong (Korean National Rehabilitation Hospital)

Objectives: To evaluate the usefulness of ‘Sex Practice Room’ for the persons with Spinal Cord Injury (SCI).

Methods: During 2000 to 2008, 308 couples with SCI used ‘Sex Practice Room’. Among them, 71 spinal cord injured males (mean age = 41.4 years old, mean time since injury = 12.9 months) and partners completed the questionnaire in which the satisfaction was measured with 5 points scale.

Results: Of these subjects, 59 couples had not had sexual relationship after injury. Before use of the room, they worried about ‘erectile dysfunction (65 couples)’, ‘not satisfying his partner (41)’, ‘not satisfied himself (33)’, and ‘fear of harmful effect to health (25)’. 41 couples could have penile-vaginal intercourse at the room. 91.3% of couples used woman-on-top position. 37 males used oral medication and 1 male used penile injection for erectile dysfunction. After use of the room, the partners’ satisfaction score was higher than males’ ($p < 0.001$), and psychological satisfaction score was higher than physical satisfaction score ($p < 0.01$). The sexual satisfaction score was significantly correlated with penile-vaginal intercourse. 22 couples who used the room two times reported that the intercourse success rate (from 61.3% to 81.0%) and the satisfaction score (from 2.7 to 4.1) were much increased at second time ($p < 0.05$). 90% of the users reported that the experience of using the room was helpful.

Conclusion: A new approach with ‘Sex Practice Room’ is very helpful sexual rehabilitation program for the persons with spinal cord injury.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.9-5

SEXUAL ACTIVITY, EXPERIENCES OF INTIMACY AND SEXUAL DYSFUNCTIONS IN ADOLESCENTS AGED 13–18 YEARS WITH MOBILITY IMPAIRMENT

Jemtå Lena (Department of Neuroscience, Rehabilitation Medicine, Uppsala University, Uppsala, Sweden), Öberg Katarina (Center for Andrology and Sexual Medicine, Karolinska University Hospital, and Department of Medicine, Karolinska Institute, Stockholm, Sweden)

Introduction and objectives: Growing up with mobility impairment involves unique issues for sexual development. Restricted mobility and disability-related medical problems as well as limited access to participation in social activities could influence sexual activity. The first aim was to investigate experiences of sexual activity and intimacy among adolescents with mobility impairment and to relate these to socio-demographic data and disability characteristics. The second aim was to identify sexual dysfunctions and sexual concerns in this group.

Methods: A total of 69 adolescents aged 13–18 years with mobility impairment took part in a semi-structured interview. Interpersonal experiences of intimacy and sexual activity including sexual dysfunctions, socio-demographic data and disability characteristics were registered.

Results: More than half of the adolescents reported any experience of having a relationship, including 20% who had a current relationship at the time

of the interview. Among the adolescents who had ever been in a relationship, 22% had experienced sexual intercourse and more than 90% had intimate experiences (hugging, kissing). Socio-demographic and disability-related features had a marginal influence on experiences of intimacy and sexual activities. Interestingly, no particular sexual dysfunction (decreased sexual interest, erectile/ejaculatory dysfunction, anorgasmia) was found. However, concerns about future sexual activities were reported by 15%. These concerns were presumably related to mobility impairment.

Conclusion: Several aspects of sexual health are not fully realized for adolescents with impaired mobility and there is a need for specialized sexual health care services, and in particular sexual education, to protect the sexual rights of this group.

Conflict of Interest: None disclosed

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OP1.9-6

DOES DIABETES INFLUENCE SEXUAL FUNCTION IN WOMEN?

Giraldi Annamaria (Sexological Clinic, Copenhagen Denmark), Kristensen Ellids M (Sexological Clinic, Copenhagen Denmark)

Introduction: Only few data exist on how diabetes affects sexual function in women. The aims of the study were to conduct a literature search and a clinical study to investigate the effect of diabetes on sexual function in women.

Methods: A Medline search was conducted for the review. In the clinical study 1380 women (age of 18–60 yrs) were invited to participate. 469 with diabetes (DM) and 911 without diabetes (controls). The women completed the Female Sexual Function Index (FSFI) and the Derogatis Distress Scale (FSDS). X² and two-sites T-test were used for statistical analysis.

Findings and Discussion: Though the numbers of identified studies are increasing the effect of diabetes on Female Sexual Dysfunction (FSD) is still unclear. Several studies have shown an impairment of sexual function in diabetic women; especially psychological factors are related to FSD. Endpoints, control groups and definitions differ between the identified studies. In the clinical study 1136 women (82%) returned the questionnaire; 367 DM (78%) and n=769 controls (84%). Of the DM, 316 had type I diabetes (mean age 39.4±8.7 yrs) and 51 type II (mean age 47.0±8.2 yrs). 734 age-matched controls were included. Significantly more DM (36 %) reported sexual distress than controls (29 %, $p = 0.03$). In type I, 36 % reported distress (controls 29 %, $p = 0.03$), in type II no difference in level of distress was shown (35 % vs 31 %, $p = 0.71$). No significant difference was found in total FSFI scores when comparing type I and II diabetics with controls. The effect of diabetes on sexual function in women is still unclear.

Conflict of Interest: Advisory board of Boeringer Ingelheim and Pfizer Re-

ceived unrestricted grants from Eli Lilly, Boeringer Ingelheim and Pfizer. Financial Support/Funding: Pfizer DK, Eli Lilly DK, Danish Diabetes Association,

OP1.9-7

SEXUAL HEALTH IN PARKINSON'S DISEASE

Azevedo Jacinto (HSJ-EPE / FMUP), Palha António (HSJ-EPE / FMUP), Rosas Maria José (HSJ-EPE / FMUP), Esteves Manuel Fernandez (HSJ-EPE / FMUP), Vieira-Coelho Maria Augusta (HSJ-EPE), Sousa Cláudia (HSJ-EPE), Fonseca Rosália (HSJ-EPE), Linhares Paulo (HSJ-EPE / FMUP), Garrett Carolina (HSJ-EPE / FMUP), Vaz Rui (HSJ-EPE / FMUP)

Introduction: The changes in sexual health of patients with Parkinson's disease must be a concern to the clinicians. The effects of functional surgery in sexual health of Parkinson's patients are still a matter of debate. Objectives: To describe and evaluate the sexual health of patients with Parkinson's disease following deep brain stimulation (DBS) of the subthalamic nucleus (STN).

Methods: Patients with Parkinson's disease bilaterally implanted for DBS of STN and those only pharmacologically treated, will be evaluated. Sexual functioning will be assessed using the international erectile function indices (IEFI) and the female sexual function indices (FSFI). Depression and anxiety will be evaluated using the Beck depression inventory and the brief symptom inventory.

Results: We have a control group with 23 normal volunteers, a group with 19 Parkinson patients only pharmacologically treated, and a group with 20 Parkinson's patients bilaterally implanted for DBS of STN. Control group have higher somatization index ($p < 0,05$), pharmacologically treated group have higher somatization and phobic anxiety indices ($p < 0,05$), surgery group have higher obsessive-compulsive, phobic anxiety, and psychoticism index ($p < 0,05$). BDI score was 20,23 in surgery group ($p < 0,001$). IEFI have lowest in surgery group (26,3; $p < 0,05$). FSFI was higher in the surgery group (44,0; $p < 0,05$).

Conclusions: The sexual function of Parkinson patients is globally impaired. When submitted to surgery women suffer an improvement and men impairment. Patients submitted to functional surgery have a different psychopathological profile.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.9-8

ASSESSMENT OF EJACULATION AND ORGASM AS A FUNCTION OF AUTONOMIC STIMULATION IN MEN WITH SPINAL CORD INJURY

Courtois Frédérique J (Université du Québec à Montréal), Charvier Kathleen (Hospices civils de Lyon), Vézina Jean-Guy (Institut de réadaptation en déficiences physiques de Québec), Morel Journal Nicolas (Hospices

civils de Lyon), Jacquemin Géraldine (Institut de réadaptation de Montréal), Fournier Christine (Institut de réadaptation de Montréal), Leriche Albert (Hospices civils de Lyon)

Few instruments are available to assess orgasm. While ejaculation is not always equivalent to orgasm, its presence may serve as an objective sign of climactic responses in spinal cord injured (SCI) men. This study assessed ejaculation and orgasm in 87 SCI men. Ejaculation was achieved through masturbation, vibrostimulation (VS) or midodrine. Orgasm was assessed through questionnaires on physiological and phenomenological sensations experienced during positive (ejaculation) and negative tests (sexual stimulation only). Results showed that 92% SCI men achieved ejaculation with stimulation related to the lesion level. Orgasmic responses showed an average of 6,44 cardiovascular sensations reported at ejaculation compared to 3,03 with sexual stimulation only, 10,25 muscular sensations compared to 2,83; 7,50 autonomic sensations compared to 3,78; and 5,18 autonomic hyperactivity compared to 0,97. Midodrine treatment similarly triggered an average of 4,36 cardiovascular sensations reported at ejaculation compared to 1,18 with sexual stimulation only, 7,45 muscular sensations compared to 1,27; 5,91 autonomic sensations compared to 1,82 and 4,36 autonomic hyperactivity compared to 1,45. Phenomenological sensations similarly increased as a function of ejaculation and midodrine, but were not as sensitive to discriminate between lesions as did physiological sensations. The results confirm the usefulness of the questionnaires to assess orgasm, in particular that on physiological sensations. The results further show that orgasm is possible in most SCI men despite their lesion, the experience varying as a function of natural autonomic stimulation, but not necessarily pharmacological stimulation.

Conflict of Interest: None disclosed

Financial Support/Funding: Christopher and Dana Reeve Paralysis Foundation

OP1.9-9

THE SAME, YET DIFFERENT: EXPERIENCES OF SEXUAL VIOLENCE THROUGH VOICES OF WOMEN NAMED WITH DISABILITIES

Velez Vega Carmen M (Graduate School of Public Health Medical Sciences Campus University of Puerto Rico)

The proposed presentation is a brief compilation of findings from two qualitative studies on the experiences and meanings of sexual violence of women with disabilities in Puerto Rico. Another dimension of the studies presents experiences women with disabilities have with health professionals when they are victims of sexual violence and health professionals experiences identifying signs and symptoms of sexual violence within these populations. The studies were qualitative based on a critical constructionist framework. Methods included key informant semi structured interviews, focus groups with women diagnosed with disabilities, focus groups with health care professionals, analysis of documents and public policy texts and

a review of the scientific literature on the topic. Texts were analyzed within a grounded theory framework and a team of three analysts worked on the texts. Findings are presented from the voices of the participants. Participants narrated significant experiences of sexual violence. In general participants did not identify health care professionals as a source of assistance in situations of sexual violence. Another finding is that most sexual violence is perpetuated mostly by family members, care takers and spouses. Participants offered recommendations significant to the improvement of care for these populations in areas of professional development and training in communicating with populations that are diverse; the implementation of protocols in place for other women when they receive services in public and private healthcare facilities; patient and caretaker education on signs and symptoms of sexual violence. The findings were congruent with the results of the literature review.

Conflict of Interest: None disclosed

Financial Support/Funding: Puerto Rico Committee for the Prevention of Violence and Graduate School of Public Health Medical Sciences Campus University of Puerto Rico

OP1.9-10

CURING DIFFERENT DEGREES OF ERECTILE DYSFUNCTION BY A 3-MONTH COURSE OF «CAVIGEN»

Kotb Heba

A lot of male patients present with the famous complaint; erectile dysfunction, after excluding the physical causes by several investigations especially «penile doppler», a 3-month course of «cavigen» was given to 100 patients with the same complaint, age range 25 to 62 years, dose is designed to be 1 tablet 3 times daily. The outcome of the research was found to be fruitful in general; results was satisfactory in 92% of patients, 5% mentioned they noticed a little difference in the sexual performance, 3% mentioned they noticed no difference at all in their desire and/or performance. From the overall results we found the research very valuable in proving the positive effect of taking a course of «cavigen» in patients complaining of non-physical erectile dysfunction.

Conflict of Interest: Liptis pharmaceuticals

Financial Support/Funding: None disclosed

OP1.9-11

PREMATURE EJACULATION : WHAT DO WE KNOW NOW?????

ASSALIAN Pierre (McGill University)

Introduction: The definition, etiology and treatment of premature ejaculation has not been accepted by all clinician in the past. Recently there has been attempts to produce a Standard Operating Procedure (SOP) in diagnosis and treatment of PE.

Objectives: In this presentation I will elaborate on the ISSM definition of life long PE. The constructs of PE, have to include rapidity of ejaculation, perceived control and negative personal consequences from PE. The rationale for inclusion of time-to-ejaculate in less than one minute, rationale for inclusion of control and the rationale for inclusion of negative psychological consequences will be presented. Will also discuss the subtypes of PE. I will discuss the etiology from the psychological to the present belief that life long PE is a biological in nature due to some dysfunction of the serotonergic central system. I will also review all the modalities of treatments from the past to the present that will include different forms of physical therapies. I will present a case where by I will outline whether the patient have in fact PE or not; if not, he could be suffering from a pseudo PE (Porto) or PE like dysfunction (Waldinger). The presentation can't be complete before looking at the definition, the etiology and the investigation that should be done for acquired PE.

Conclusion: Attendees after the presentation will have the latest information on the definition, etiology, types and treatment of PE. There will be ample time for Q & A with the participants.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP1.9-12

MULTILEVEL INTERVENTION FOR FAMILY PHYSICIANS

Assalian Pierre (McGill University Health Centre)

In all scientific meetings of sexological associations, we the specialists tend to criticize the primary care physicians that they do not take time to assess patients with sexual dysfunctions. With all the efforts in physician education since the last 10 years, still we are at a loss of how we can get MDs to be involved in the evaluation and treatment of male and female sexual dysfunctions. To try to remedy this, I have developed an education programme that I call, Multilevel Intervention. The essence of this programme, is sending the message to those who listen to me that: the MD is in fact involved with the evaluation and treatment at any level in the assessment, this way he/she is getting a positive contingency and not a negative one. I divide this programme into 6 levels. Level 1, History taking, level 2, physical exam, level 3, laboratory investigation general, level 4 special tests, level 5 would be really intervention based on the PLISSIT model, where the MD can use the PERMISSION, LIMITED INFORMATION part, and finally level 6, pharmacosextherapy, like PDE5 for ED, SSRIs for rapid ejaculation and Flibanserine (when approved) in women with hypoactive desire. Even if the MD would refer the patient to a specialised service after level 1, he did in fact intervene and did a service to the patient. By doing this, we can hope for more involvement of MDs

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

ORAL PRESENTATION SESSION OP1.10

Miscellaneous

OP1.10-1

SURROGATE, CLIENT & THERAPIST: LESSONS FROM MANAGING A COMPLEX SURROGACY EXPERIENCE

Tuckwell Susie (being•counselling)

Introduction: A client with complex relationship and sexual issues identified the need for practical sexual tuition as part of his journey towards a satisfying, confident relationship with a new partner. His lack of sexual confidence was stopping him from advancing the courtship. He felt unable to engage in prostitution, but was comfortable with the idea of surrogacy within the context of on- going therapy.

Action: The therapist contacted a sex worker who had a psychology background and who was studying sexual health counselling and who had already worked as a surrogate. The client and surrogate had a number of sessions covering different aspects of sexuality and sexual functioning.

Outcome: The client's issues were positively impacted in a number of ways by the surrogacy, which also raised complex issues for management of the relationships, outcomes and ethics.

Discussion & recommendations: The management of surrogacy needs to be developed further as it is a valuable aid for selected clients. However, surrogates need training to develop clarity around the therapeutic role, versus the role of an sex worker, clients need clarity in their objectives and ethics, and therapists need to be alert to manage multivalent issues. Good supervision for therapist and surrogate is also needed.

References: TBA

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.10-2

SEXOLOGY IN CYBERSPACE: ONLINE LEARNING IN SEXUAL HEALTH

Weerakoon Patricia (University of Sydney), Shuttleworth Russell (University of Sydney), Sitharthan Gomathi (University of Sydney)

Introduction: The need for interdisciplinary collaboration in the evaluation, treatment, and education of sexual concerns and dysfunctions is now accepted, as is the fact that in many cases, neither psychotherapy nor medical intervention alone is sufficient for the lasting resolution of sexual problems.

Approach: The Graduate Program in Sexual Health was established in 2004 to provide a globally relevant program that provided flexible pathways for professionals to extend their expertise in sexology and sexual

health. The program has a interdisciplinary bio-psycho-social focus and provided core competencies with opportunities to develop specialist skills in areas of professional interest The program has moved sexology training from a face-to-face objectivist, teacher centered pedagogy to constructivist, collaborative, student-centered learning utilizing digital technology support.

Findings and Discussions: The strength of the program lies in the student community which is both inter-professional (nurses, doctors, social workers, OTs, counselors, journalists, sex workers) and international (Canada, US, UK, Europe, Malta, Cyprus, Egypt, India, Hong Kong, Singapore, New-Zealand and Australia). The challenge is to provide a challenging and supportive environment in a distance on-line mode. Students whose learning style is not compatible with this form of learning struggle with this concept. Although student feedback has been consistently high with >75% reporting satisfaction in most aspects of the courses, there is still much that needs to be done in terms of encouraging collaborative group work, experiential learning and student support.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.10-3

PSYCHOLOGIST'S KNOWLEDGE OF SEXUAL SUBCULTURES: BDSM

Kelsey Katherine R (Midwestern State University), Stiles Beverly L (Midwestern State University), Spiller Laura C (Midwestern State University)

Participants of alternative or "kinky" sexual behaviors are a sizable enough minority that psychotherapists are likely to see them in their practices (Janus & Janus, 1993). The history of pathologizing statistically abnormal sexual practices suggests that some psychotherapists may have a negative view of this subculture. Additionally, Nichols (2006) suggests that therapists may lack essential knowledge about the nature of "kinky" activities, especially of BDSM activities. Although therapists may lack knowledge of sexual minorities, the APA's ethics code requires psychologists to be trained in the areas in which they practice (APA, 2002). This research employed an internet-based survey to investigate psychologists' knowledge of and attitudes towards the BDSM community. We surveyed demographics, attitudes, stereotypes, experiences, and vignettes that assessed knowledge of appropriate therapeutic responses. Our findings are from a U.S. national sample, totaling 1160 psychologists. Findings indicate a lack of knowledge about sexual subcultures. Surprisingly, a large percentage of psychologists had no experience with clients similar to our vignettes involving BDSM; however they responded that they would take that person on as a client even without experience. Amazingly, in a previous question over half of the respondents acknowledged that they did not feel competent to counsel clients who engage in BDSM. Moreover, attitude responses indicate a tendency to pathologize those who practice BDSM. This research is the most comprehensive study of psychologist's knowledge and attitudes towards participants of BDSM. We support the need

for more graduate and continuing education training about sexual subcultures that are inclusive of participants of BDSM.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.10-5

CYBERSEX AND SEXUAL PREFERENCES: AN EXPLORATIVE SURVEY

Eleuteri Stefano (Institute of Clinical Sexology, Rome), Giuliani Marta (Institute of Clinical Sexology, Rome), Rossi Roberta («La Sapienza», University of Rome), Simonelli Chiara («La Sapienza», University of Rome)

Introduction and Objectives: Use of Internet had an high impact on human sexuality. In the last years a strong double link has arisen between these two aspects: first, Internet disclosed a varied number of sexual practices before hidden from most of the people; secondly, it helped to create new ones. The aim of this study is to explore Internet sexual preferences in an Italian sample, assessing the excitement connected to some sexual stimuli through questionnaire administration.

Method(s): Internet Sex Screening Test (ISST) and a self-evaluation questionnaire for sexual preferences on the Web were administrated to an Italian sample. The sample includes male and female individuals (age: 20 to 30).

Results: According to literature, differences in Internet sex exposure were found between male and female sample, with a higher percentage of men viewing such materials. The most seen category in the female group is the one connected with obscene speech. This category and scenes with gangbang sex are also the ones associated to a major excitement degree in the female group. Men seemed to feel a greater excitement from most of this viewing. No significative differences were found between both male and female single or coupled groups.

Conclusion: From data analysis we can conclude that men use Internet for sexual purposes more than women. It also emerges a greater preference for sexual materials with paraphilic contents in men, connected to a greater excitement degree for such images.

Conflict of Interest: None disclosed

Financial Support/Funding:None.

OP1.10-6

QUALITY OF LIFE OF SEXUALLY IMPAIRED FEMALE SCHIZOPHRENIC PATIENTS

Miclutia Ioana V (University of Medicine & Pharmacy Cluj), Popescu Co-druta A (Emergency County Hospital Cluj), Macrea Rodica S (University of Medicine & Pharmacy Cluj)

Introduction: The concept of quality of life covers various objective and

subjective domains (among the latest are wellbeing, social adjustment, sexual satisfaction), being an indicator of outcome. The intensity of sexual dysfunctions, although present already at the onset, increases following long-term antipsychotic treatment.

Objectives: The examination of various aspects of sexuality in chronic female schizophrenic patients and the evaluation of quality of life.

Methods: 50 female patients suffering from chronic schizophrenia were selected and treated with conventional and atypical antipsychotics. These patients were compared to 50 matched controls. Assessment tools: PANSS, UKU sexual side effects component, GAF, female SDBQ, WHOQOL-BREF.

Results: The patients displayed a range of characteristics in the field of sexual experience. These include hyposexuality and dissatisfaction with their sexual life. Many had also experienced sexual abuse, and few used contraception, thus indicating a high level of sexual conservatism. The evolution of schizophrenia affected their professional and marital status, as well as their general level of functioning and their quality of life. It was found that even novel antipsychotics are responsible for sexual side effects comparable to those produced by conventional antipsychotics.

Conclusion: This direct investigation of sexuality in this particular group, could, in combination with the management of information, symptoms, and side effects, lead to long term acceptance of - and adherence to - antipsychotic medication by sexually active persons suffering from schizophrenia. The overall quality of life of these individuals, as well as their general functioning, could thus be improved.

Conflict of Interest: None disclosed

Financial Support/Funding:CNMP grant 91056 ACCESEGAL

OP1.10-7

INTERNET COUNSELLING FOR ADOLESCENTS - THE IMPORTANCE OF LANGUAGE AND STRUCTURE FOR THE INTERPRETATION AND UNDERSTANDING OF ON-LINE REPLIES

Wind Christina (The Danish Family Planning Association (Sex og Samfund))

Introduction: The Danish Family Planning Association (www.sexogsamfund.dk) runs a professional, anonymous and toll free telephone and Internet counselling service (www.sexlinien.dk) for teenagers about sexuality and related issues. About 9,000 questions are answered on-line every year. Various associations offer on-line counselling, but literature on methods and results is scarce.

Discussion: To get information through to the on-line users, it is important to be aware of the language and structure used in replies - otherwise the user may misinterpret the answer or dismiss it altogether. Thus, to run a professional on-line counselling it is necessary to prioritize the education of the counsellors in the structural aspects of counselling. This education should at least focus on how and why to: • Meet the user at eye level • Use the same words and concepts as the user • Use a correct grammar and vo-

cabulary • Use an accessible, contemporary and “youth-friendly” language • Avoid implicit or subtle language • Be consistent in the wording of the reply • Write the answer at the beginning of the reply • Avoid superfluous information • Use modification words to avoid replies beyond the counselor’s competence • Use counter questions

Recommendations: To secure the quality of the on-line counselling it is important to be conscientious of linguistic and structural aspects and to share best practice experiences between associations providing counselling to youngsters.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.10-15

SEXOLOGY IN MEDIEVAL ARABIC MEDICINE

Kaadan Abdul Nasser (Aleppo University)

Introduction: Arab physicians, in the Middle Ages, have played a considerable role in the field of medicine development as a whole and Sexology in particular.

Approach: We went back to the most important medical texts books available during the medieval ages, for tracing their writings on sexology.

Findings and discussions: Rhazes (al-Razi) was a famous physician and writer, whose medical writings greatly influenced the Arabic world as well as Western Europe. He devoted an important chapter in his encyclopedic medical book al-Hawi (Continens) for talking about many aspect of sexology. He, for example, described the advantages and disadvantages of sexual intercourse, and the best times to be practiced. Avicenna (ibn-Sina) is considered one of the most celebrated physicians during the Middle Ages. Al-Qanunn Fit-tib (or Code of Laws in Medicine) represents the most important work of Avicenna. In this boo Avicenna composed many chapters for talking about sexology. He talked on ointments which used for making the penis larger, and other ointments make the vagina narrower. He also talked about the causes and treatment of erectile dysfunctions. Albucahis (al-Zahrawi) lived in Spain (al-Andalus), and died there in 1013. He explained the libido and pleasure dysfunctions and all the ejaculation dysfunctions.

References, 1. Al-Baba MZ: some of medical books edited by Ibn Sina. Institute for History of Arabic Science-Aleppo University, Aleppo-Syria, 1984. 2. Ibn-Sina: Al-Qanun fit-Tibb. Vol. 3, P. 197, Dar Sader, Lebanon, 1980.

Conflict of Interest: there is no

Financial Support/Funding:I had no financial Support

OP1.10-9

INTERNET USE, CYBERSEX AND RISK: A QUALITATIVE STUDY AMONG MALE TEENAGERS FROM LOW-INCOME AREAS IN LIMA, PERU

Villacorta Victoria

Background: Internet availability and utilization has increased in the last years along with cybersex. Cybersex is participation in virtual searches or interactive sessions with some sexual content, e.g. browsing pornography, webcam-based live broadcasting and erotic chat and instant messaging, especially among male teenagers. We aim to explore to what extent and how cybersex can evolve into risky sexual practices among Peruvian youth males. **Methods:** Exploratory and descriptive study 22 male teenagers between 15 and 19 years old Inclusion criteria: ever having had sex intercourse and Internet use In depth interviews and focus groups

Results: Teenagers have risky sexual practices in Cyber facilities Cyber facilities in low in-come barrios of Lima allow sexual intercourse Risky sexual practices are diverse, from non- protected oral sex to non- protected anal sex These kind of practices are seen as part of a process for sexual learning and developing their masculinity These sexual practices are performed with casual partners Most of the times, there is no condom use

Conclusions: Internet is a very familiar mean of communication among teenagers in low in-come barrios of Lima Internet is a way to reach and find ways to explore sexuality Official or Governmental Sexual Health Programs do not usually offer sexuality information Official programs should use Internet to inform young people It is important to work with cyber facilities owners It is important to develop more studies to have better information for preparing Internet programs for young people based on their needs and interests

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP1.10-16

THE DETERMINANTS OF THE EARLY INITIATION OF SEXUAL ACTIVITIES AMONG THE COLLEGE STUDENTS

Ghatrifi Davood (IRDPI), Ghatrifi Rouhollah (IRDPI), Ghatrifi Maryam (IRDPI), Rashid Khosro (Boali university)

Introduction: The early initiation of sexual activities culturally defines any pre marital sexual activity for young in Iran. Although the majority of young people are not sexually active, while socio-culturally unacceptable, a significant number do engage in premarital sexual activity. The purpose of this paper is to explore the determinants of the early initiation of sexual activities among college students in our Islamic society.

Methodology: The focus of this study is to look at how, if at all, various factors influence the early initiation of sexual activities. A grounded-theory approach was chosen for this study. Focus group discussion was the main data collection method that was considered appropriate as the surveys were primarily qualitative. The focus groups, while according to common law, were conducted gender- separate in one public health school in Tehran. **Results:** This study explored personal, sexual human instinct, family, peer, religiosity, economic and socio- cultural factors that predisposed student, especially who are far from family, to initiate premarital sexual activity. It is appreciation of sexual activity by girls for purposes such as marriage,

love, sexual needs and economic gain. Although girls said marriage and love were their most important factors that caused premarital sexual activity, for males were sexual human instinct. According to rapid social change, controlling of early initiation of sexual activities needs the broader socio-cultural approach.

Conflict of Interest: None disclosed
 Financial Support/Funding:None disclosed

OP1.10-17
THE EXPLANATORY MODEL OF THE EARLY INITIATION OF SEXUAL ACTIVITIES AMONG THE COLLEGE STUDENTS

Ghatrifi Rouhollah, Merghatai khoei E. (Iran public health school), Ghatrifi Rouhollah, Ghatrifi leila

Introduction: Such as much of society, early initiation of sexual activity is a major problem confronting our country has led to a rising incidence of sexually transmitted diseases (STDs), emotional and psychological injuries. Early initiation of sexual activity is associated with serious health risks and detrimental social consequences for youth especially females. Speaking about sex is a Taboo in our society. Legally and culturally, premarital sexual activity isn't acceptable action and sexual activity is sensitive issue. Although the majority of adolescence and youth are not sexually active, a significant number do engage in sexual activity. Abstinence is commonly the most important strategy that has socio- culturally been suggested. The past research has demonstrated that interventions that are based on local cultures and condition are more effective than standard approach. These study tried To develop the explanatory model of the early initiation of sexual activities among the college students in one of the selected public health school, Tehran, Iran, 2007-2008.

Methodology: The qualitative study with grounded theory approach was used to explore the young people's sexual activities influenced by the context they experience them. This approach allowed us for an explanation for what is actually happening in true practical life locally at a given time.

Results: Results suggest multidimensional approach must be considered in preventive programs for discouraging involvement of early sexual activity. According our society, this article proposes an explanatory model of early initiation of sexual activity among the college students.

Conflict of Interest: None disclosed
 Financial Support/Funding:None disclosed

ORAL PRESENTATION SESSION OP2.1
Sex workers, prostitution

OP2.1-1
NORDIC PROSTITUTION POLICIES AT A CROSSROAD

Holmström Charlotta L (Faculty of Health and Society, Malmö University, Sweden), Skilbrei May-Len (Fafo Institute for Applied International Studies, Oslo, Norway), Månsson Sven-Axel (Faculty of Health and Society, Malmö University, Sweden)

In the last decades, Nordic prostitution policies have attracted a great deal of international attention. These policies are associated both with a radical legal shift in attention from the party selling sex, to “the demand side of prostitution”, and with critical research on prostitution, building on feminist and constructivist perspectives. Historically, the Nordic countries have regulated prostitution through a combination of general prohibition and local regulations. While the last three decades during the 1900s were marked by the end of policing behaviour of women in prostitution, and by the conviction that prostitution should be dealt with through social work, once again legal measures are high on the political agenda. The most prominent example of this tendency is the law against the buying of sexual services in Sweden (1999). The aim of the paper is to discuss if and how prostitution policies in the Nordic countries can be portrayed as a specific regulatory regime in a global perspective. It is based on results from a Nordic research project on prostitution and human trafficking for sexual purposes in the Nordic countries and a review of literature on the development and content of prostitution policies in the Nordic countries. The paper is organized around analytical themes that have emerged from the research: prostitution as a social problem, local problems in a global context and political and legal strategies. It ends with a discussion on the process of judicialization in relation to the question of prostitution in the Nordic countries.

Conflict of Interest: None disclosed
 Financial Support/Funding:Nordic Council Nordic Gender Institute

OP2.1-2
CONFRONTATION BETWEEN CHINA'S ANTI-PROSTITUTION LAW AND HIV POLICY RELATED TO SEX WORK

Meng Jinmei

Introduction: Sex work is illegal in China. Sex workers and their clients are subject to administrative sanctions including fine, administrative detention, sheltering and education, and re-education through labor. Organizing, forcing, luring, harboring, and introducing prostitution are crimes with maximum sentence of death penalty and minimum penalty of public surveillance. Those knowing their STI status and engaging in prostitution commit the crime of spreading STI regardless of condom use. In China sex work

is widespread and millions of people work in sex industry. HIV infection rate among sex workers is around 0.5 percent in 2007. In some areas, more than 10 percent of female sex workers are HIV infected. Behavior interventions have been conducted in sex industry.

Methods: This study is based on literature review and the interviews conducted in China in August 2008. Findings and discussions China's anti-prostitution law impedes its HIV work because: as a tool of committing offence, condom is evidence of prostitution, hindering condom promotion; police's striking against prostitution drives sex work underground, interrupting behavior intervention and ruining the achievements of HIV work; illegality of sex work determines a lack of true peer education of sex workers in China; anti-prostitution law weakens sex workers' ability of negotiating safe sex with clients.

Recommendation: In the context of HIV work, China should decriminalize sex work. References State Council AIDS Working Committee Office & UN Theme Group on AIDS in China (2007), A joint assessment of HIV/AIDS prevention, treatment and care in China (2007), Beijing.

Conflict of Interest: None disclosed

Financial Support/Funding: The University of New South Wales

OP2.1-3

PROSTITUTION AND POLITICS: IS SEX WORK AGAINST SOCIALISM IN CHINA?

Meng Jinmei

Introduction: The Chinese government highly politicizes prostitution. Prostitution is believed to be exploitive, ugly, and against socialism. The massive actions of eradicating prostitution at the early stage of PRC and the officially reported 'non-existence' of prostitution in the Mao regime were highlighted to be great victories of socialist China, showing the superiority of socialism to capitalism. However, with the introduction of economic reforms in the late 1970s, prostitution 'reappeared' in China. Prostitution is officially believed to damage the national reputation, ruin the fame of the Chinese Communist Party (CPC), and contravene the socialist spiritual civilization. Fighting prostitution was highlighted to be a political action of the CPC. In the 1980s and 1990s, intensive legislations and actions were introduced to fight prostitution. Recently it was proudly claimed the Beijing 2008 Olympic Game was the first Game without prostitution, indicating the power of the CPC.

Methods: This study is based on an analysis of existing literature. Finding and discussion Sex work does not contravene socialism. Instead it can promote socialism mainly because: most sex workers enter into prostitution out of their will instead of by force; sex work does not threaten the CPC's status; sex work helps to build a harmonious socialist China by contributing to economy, relieving poverty, reducing sexual crimes and promoting sexual harmony.

Recommendation: In contexts of human rights and public health, China should depoliticize, decriminalize and properly regulate sex work. Refer-

ence Pan S (2005), *Female sex workers: The right of labor*, Hong Kong Dadao Press, Hong Kong.

Conflict of Interest: None disclosed

Financial Support/Funding: The University of New South Wales

OP2.1-4

PROSTITUTION AND POLITICS: IS SEX WORK AGAINST SOCIALISM IN CHINA?

Meng Jinmei

Introduction: The Chinese government highly politicizes prostitution. Prostitution is believed to be exploitive and against socialism. The massive actions of fighting prostitution at the early stage of the PRC and the officially reported 'non-existence of prostitution' in the Mao regime were highlighted to be great victories of socialist China, showing the superiority of socialism to capitalism. However, with the introduction of economic reforms in the late 1970s, prostitution 'reappeared' in China. Prostitution is reported to damage the national reputation, ruin the fame of the Chinese Communist Party (CCP), and contravenes the socialist spiritual civilization. Fighting prostitution is a political action commanded by the CCP. In the 1980s and 1990s, intensive legislations and actions were introduced to fight prostitution. Recently, the Beijing 2008 Olympic Game was claimed to be the first Game without prostitution, showing the power of the CCP.

Methods: This study is based on a review of existing literature.

Findings and Discussions: This study finds that sex work is not against socialism. Instead, it can promote socialism mainly because: most sex workers enter into prostitution out of their will rather than by force; sex work does not threaten the status of the CCP; sex work helps to build a harmonious socialist China by promoting economy, relieving poverty, reducing sexual crimes and promoting sexual harmony.

Recommendations: In contexts of human rights and public health, China should depoliticize, decriminalize and properly regulate sex work. References: Pan S, *Female sex workers: The rights of labor*, Hong Kong Dadao Publishing House, 2005.

Conflict of Interest: None disclosed

Financial Support/Funding: The University of New South Wales

OP2.1-6

A SOCIAL SCIENCE TOOL TO STUDY A PUBLIC HEALTH CONCERN OR HOW GENDER RELATIONS INFLUENCE HIV VULNERABILITY OF YOUNG FEMALE SEX WORKERS IN THE CITY OF BAMAKO, MALI

Giguère Karen (CSSS de la Vieille-Capitale), De Koninck Maria (Université Laval)

Introduction: As the prevalence of HIV infection among Malian female

sex workers in the city of Bamako went from 21% in 2000 to 35,3% in 2006, the need to focus on young girls involved became obvious. A field study was thus carried out in 2006.

Method(s): Ethnographic data were collected from 25 girls involved in commercial sex as well as from 8 young boys aged between 12 and 19 through focus group discussions and in-depth interviews.

Findings and discussion: Social context in which commercial sex activities occur rests on the following characteristics: sex-differentiated social roles and sexuality, using force and violence to obtain sex considered legitimate, marriage regarded as a tool of gaining social respect and girls considered as sole responsible for their pregnancies. Our study highlighted gender norms as a determinant factor exposing girls involved in commercial sex in the city of Bamako to HIV infection. Inability to negotiate for safer sex, gender-related violence, unequal responsibilities in sexual intercourse outcomes and girls's lack of in-depth information about STI's and HIV are among factors identified in this study.

Recommendations: To adequately address gender inequality issues in the prevention of HIV in this context, intervention programs and activities aiming at promoting gender equality and empowering girls are especially required.

References: Connell, RW. 2002. *Gender*. Cambridge, Polity Press; Malden, Blackwell Publishers. Rao Gupta G. 2000. *Gender, sexuality, and HIV/AIDS: the what, the why, and the how*. XIIIth International AIDS Conference, Durban, South Africa. UNAIDS. Report on the global AIDS epidemic. UNAIDS, 2008.

Conflict of Interest: None disclosed

Financial Support/Funding: Social Sciences and Humanities Research Council (SSHRC) of Canada; Agence universitaire de la Francophonie (AUF); AIDS 3 Project.

ORAL PRESENTATION SESSION OP2.2 CSA, Incest

OP2.2-1

MOTHER-SON INCEST: THE UNTHINKABLE BROKEN TABOO
Miletski Hani G (Private Practice)

Today, although society is more aware of child sexual abuse, incestuous abuse of boys by their mothers is virtually never reported in the press even though its prevalence is well documented. Society still believes mother-son incest is rare. This belief could be explained in two ways: either this taboo is so powerful as to prevent such relationships from happening, or society is not yet ready to acknowledge and admit this form of incest. After a comprehensive review of the literature on mother-son incest and many discussions with professionals in the field of sexual abuse, it appears the apparent rarity of mother-son incest has more to do with society's inability to accept

the idea than with the taboo's actual strength. This presentation will explore and challenge these societal inhibitions, and will heighten awareness of this form of incest among sexologists. Five major misconceptions will be identified as contributors to society's denial of mother-son incest: (1) «mother-son incest means intercourse,» (2) «boys cannot be victims of sexual abuse,» (3) «what harm can be done without a penis?» (4) «motherly love cannot be sexual,» and (5) «one of them must be crazy.» Since Mother-son incest tends to be pathological, with many long-term sexual problems, education, prevention, and treatment are essential. However, before we can do anything about mother-son incest, we must become more aware of this serious issue. Hani G. Miletski (2007). *Mother-Son Incest: The Unthinkable Broken Taboo Persists; An Updated & Revised Overview of Findings*. Bethesda, Maryland: East West Publishing, LLC.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP2.2-2

'UNRECOGNIZED VICTIMS': THE SITUATION OF SEXUAL ABUSE AGAINST MALE STREET CHILDREN IN MERKATO AREA, ADDIS ABABA

Tadele Getnet (Department of Sociology and Social Anthropology, Addis Ababa University)

Sexual abuse and exploitation of male children is one of the emerging social problems affecting the physical, social and psychological wellbeing of Ethiopian children. However, very little is known about the problem so far and it is apparently one of the least researched issue in the country. Against this background, this paper explores the extent and trend of the problem, contributing factors and consequences of sexual abuse against male children in Merkato area. The study employed a combination of quantitative (small scale survey) and qualitative methodology (in-depth interviews, Focus Group Discussions (FGDS) and case history interviews) to obtain information from the children and key informants. A total of 186 children and 35 key informants were interviewed for the study. The study showed that the scale of sexual abuse on male street children around Merkato area is more prevalent than generally speculated. Quantitative data revealed that about 28.6% them had been abused or encountered an attempted abuse. Physical and mental immaturity of the children, secrecy and lack of awareness, use and abuse of drugs, the nature of street life, exposure to pornographic films and limited legal enforcement were found to be major factors which predispose street boys to the risk of sexual abuse. The study also depicted social and psychological effects of sexual abuse such as psychological trauma, stigma and discrimination and in some cases confusion in sexual orientation. Finally, using child rights framework, the study suggested various preventive, protective and rehabilitative measures that should be taken to address the problem.

Conflict of Interest: None disclosed

Financial Support/Funding: Forum on Street Children Ethiopia

OP2.2-3

FATHER - CHILD INCEST – THE ETIOLOGY AND MECHANISMS.

Beisert Maria (Institute of Psychology, Adam Mickiewicz University, Poznan, Poland)

Introduction and objectives: The factors explaining the etiology and mechanisms of domestic sexual violence towards female and male children were examined in a sample of 60 fathers perpetrators sentenced and jailed for incest. The main aims of the research are to look for the correlation between the sets of factors causing the child sexual abuse and classify domestic perpetrators (on the basis of both the kinds of victims - biological children and adopted children, daughters and sons - and on the method of manipulating them). The author asks the question whether and how the differences between factors causing abuse interfere with the type of abusers and with the differences in their method of acting.

Methods: Using the integrated theory of the etiology of sexual offending, the assumptions were build and sets of instruments (especially questionnaires and semi-structured interview) were constructed.

Results and conclusions: No significant social and cultural differences are observed between two types of domestic perpetrators: biological fathers and other family members (step-fathers, foster fathers). Only psychological factors differentiate these groups. Biological incest offenders come from more dysfunctional families (the hypothesis about intergenerational cycle of sexual abuse will be confirmed), rarely have non-secure patterns of attachment and less social skills

Conflict of Interest: None disclosed

Financial Support/Funding: Government project N106 2611 33

OP2.2-4

CASE-CONTROL STUDY EXPLORING THE IMPACT OF CHILDHOOD SEXUAL ABUSE (CSA) ON RELATIONSHIP SATISFACTION: INSIGHTS FROM THE AUSTRALIAN LONGITUDINAL STUDY OF HEALTH AND RELATIONSHIPS

Ferris Jason A (Australian Research Centre in Sex, Health & Society, La Trobe University), Smith Anthony MA (Australian Research Centre in Sex, Health & Society, La Trobe University), Richters Juliet (School of Public Health and Community Medicine, University of New South Wales), Pitts Marian K (Australian Research Centre in Sex, Health & Society, La Trobe University), Shelley Julia M (Australian Research Centre in Sex, Health & Society, La Trobe University), Simpson Judy (School of Public Health, University of Sydney)

Purpose: A case-control study, comparing CSA to non-CSA respondents, examining the impact of early sexual experience on relationship satisfaction.

Materials and Methods: A subset of data (n=594) comes from the annual Australian Longitudinal Study of Health and Relationships. Cases were people reporting CSA before the age of 16 and controls were people re-

porting first vaginal intercourse before the age of 16 (but without CSA). Respondents were in an ongoing heterosexual relationship and provided data for all interview panels. To measure relationship satisfaction a 5-point Likert scale (from 'not at all' to 'extremely') was used addressing the degree of physically pleasurable sex, satisfaction with the sexual relationship and emotional relationship.

Results: At baseline unadjusted odds ratios revealed that those who indicated CSA, compared to those who had vaginal sex under the age of 16, were less likely to report being: satisfied with the physical sex (OR 0.55; 95% CI 0.33-0.91); satisfied with the sexual relationship (0.51; 0.33-0.79); or emotional satisfied (0.58; 0.37-0.90). When accounting for the respondent's sex, age and length of relationship there was no significant difference between the two groups with either the physical sex or emotional satisfaction. Significant differences for response to sexual satisfaction remained (0.41; 0.38-0.98).

Conclusions: The study highlights that the effects of early sexual experiences not associated with CSA have a similar impact on relationship satisfaction domains as people who have reported CSA.

Conflict of Interest: None disclosed

Financial Support/Funding: NHMRC

OP2.2-5

CHILDHOOD SEXUAL ABUSE AMONG FEMALE UNIVERSITY STUDENTS IN RWANDA

IGIRANEZA GRACE

Introduction: Rwanda is a country of a thousand hills, where sexual matters are considered taboo. The situation worsens when it is a matter of sexual abuse.

Objectives: The aim of this study is to determine the prevalence of childhood sexual abuse and its outcomes among female students in National University of Rwanda.

Materials and methods: This cross-sectional study was conducted among 185 randomly selected female students attending the university. A self-report anonymous questionnaire was administered. Data were cleaned and analysed by SPSS statistical package.

Results: The results revealed that the prevalence of childhood sexual abuse was 13.5% among female university students. 68% of the victims were 15 or younger than 15 years. The most commonly reported perpetrators (56%) in this study were known persons to the victims, including family members. Unknown perpetrators were 44%. The study revealed that 36% of rape took place to the victim's home and 40% to the perpetrator's home. Collective rape was reported in 20%. Pregnancy related to rape was reported in 12%. Clinical symptoms were also reported. Psychological effects were most prominent including fear of intimacy after aggression, loss of trust in men, and loss of self esteem.

Conclusion: This first reported school-based study showed that sexual abuse is not a rare finding in Rwanda.

Conflict of Interest: None disclosed
 Financial Support/Funding:None disclosed

ORAL PRESENTATION SESSION OP2.3
Female genital mutilation

OP2.3-1

COMMUNITY RESEARCH ON THE EXPERIENCES OF SURVIVORS AND PERPETRATORS OF SEXUAL VIOLENCE /RAPE.

Jerome Kume Isoh (christain community health care foundation.COHECF)

Introduction and Objectives: The Chadian war have led to ninety percent of internal displaced persons to the Northern part of Cameroon to live in protected camps which is characterized by poor sanitation and health condition, and insecurity. The community research aimed to determine the magnitude of sexual violence experienced by women in kousserri camp for Internal Displaced Persons (IDPs).

Methods: This qualitative study focused on oral testimonies from sexual violence survivors. Written record from the police, local council, and camp authority were reviewed. Senior gynecologists from hospitals serving the internally displaced were interviewed by telephone. Organization and individuals based in Northern Cameroon provided secondary data on documented traumatic fistula cases.

Results: Sexual violence is on the rise in the camp for the internally displaced in the Northern Cameroon. Current methods of estimating the magnitude of the problem are inadequate. Incidences of abuse are under-documented by police, health unit, local council, and camp leaders. Survivors are often reluctant to report. Women may be defiled in exchange for protection, and girls abducted by the lord's resistance army have been repeatedly raped or turned into sex slaves. Abducted boys have been forced to commit crimes, some of which are sexually violent in nature and may result in traumatic fistula.

Conclusion: Traumatic fistula is not a familiar phenomenon in health facilities. Survivors of sexual violence do not often report to authorities, perhaps due to stigmatization, fear for revenge, loss of privacy, distrust of authorities and lack of awareness of the reporting process.

Conflict of Interest: BEHAVIOR OF VICTIMS OF SEXUAL VIOLENCE.
 Financial Support/Funding:None disclosed

OP2.3-2

WHY MEN RAPE: INTERPLAY OF INDIVIDUAL MOTIVATIONS AND SOCIOCULTURAL FACTORS PREDISPOSING MEN TO ACTS OF RAPE IN KENYA

Muchoki Samuel M. (Cultural Heritage department, National Museums of Kenya), Wandibba Simiyu S. (University of Nairobi)

Introduction and objectives: There are increased cases of rape of women and girls in Kenya today. This paper discusses the individual motivations and socio-cultural factors predisposing men to act of rape.

Methodology: The paper is based on findings of a study I carried out between January and March 2008. The study sample was drawn from Kamiti, Naivasha and Nyeri prisons. The main sampling method used was the simple random. Data were collected using a structured questionnaire and unstructured interviews. Seventy-two inmates participated in the survey while twenty-eight others constituted case histories. The Statistical Package for Social Sciences was used in the analysis of the quantitative data. Qualitative data collected were sorted out, tabulated and interpreted in relation to research objectives, and the findings presented according to emerging themes.

Results: The individual motivational factors identified include use drug consumption, marital problems as an excuse for rape, inability to negotiate for consensual sex, rape as a form of sexual access, psychological factors like pornographic influence and rape hallucinations, impersonal sex and power, and use of rape as a 'tool' for punishment. The socio-cultural factors include view of rape as sexual act rather than an act of violence, social attitude that the woman 'invited' the rape, early childhood environment, cultural practices, peer influence and a lack of parental advice on sex.

Conclusion: Individual motivational factors and socio-cultural factors evidenced in this study do not work in pure isolation and that, they, both interact in putting men at a heightened risk of committing rape.

Conflict of Interest: There is no conflict of interest whatsoever
 Financial Support/Funding:Institute of Anthropology, Gender and African Studies, University of Nairobi, Kenya

OP2.3-3

CLINICAL MANAGEMENT OF RAPE SURVIVORS IN EMERGENCIES: CHADIAN REFUGEES.

ISOH JEROME KUME (COHECF (CHRISTIAN COMMUNITY HEALTH CARE FOUNDATION))

Background and objectives: The United Nation Population Fund (UNFPA) in Chad support national partners to formulate, implement, monitor and evaluate programs to combat gender-base violence (GBV). Training is one of the strategies used by the country office to strengthen national capacity. Capacity-building effort were organized and conducted to enhance participants' appreciation of the multi-sectoral response in the management of rape; and to study the feasibility of supporting the UNFPA/United Nations High Commissioner for Refugees (UNHCR) training for diverse group of stakeholders.

Methods: 1) Pre-training questionnaires administered to health professionals. 2) Specific aspect of limited knowledge on the subject and poor working relationships with other stakeholders identified. 3) A mix of participants from the various sectors included with some trainees serving the role of facilitators in their field of expertise.

Findings: 1) 16/20 participants reported the training to be informative.

2)14/20 participants felt that the training was comprehensive. 3)Health professionals did not have any reservations about attending training with other professions, and recommended similar training in the future of wider audience. 3)The presence of media professionals in the training helped provided a sound basis for further advocacy on the subject. 4)Knowledge gained will be utilized by non-governmental organization (NGOs) in mainstreaming clinical management of survivors.

Conclusion: Training curriculum on clinical management of rape survivors is easy to adapt in the field. Training for diverse stakeholders are well received and have a positive and synergistic effect. Similar training can be mainstreamed into GBV-related trainings.

Conflict of Interest: MANAGEMENT RAPE FOR VICTIMS IN CONFLICT SETTINGS OF AFRICA

Financial Support/Funding: COHECF FOUNDATION

OP2.3-4

CUTTING GENITAL AREA FOR INFERTILITY TREATMENT IN MOZAMBIQUE

Mariano Esmeralda (Eduardo Mondlane University, Faculty of Arts and Social Sciences, Department of Archaeology and Anthropology, Maputo, Mozambique,), Bagnol Brigitte (Witswatersrand University, Anthropology, Johannesburg, South Africa,), François Isabelle (Ghent University, International Centre of Reproductive Health (ICRH) Faculty of Medicine and Health Sciences, Ghent, Belgium), Mbofana Francisco (Regional Centre for Health and Development (CRDS), Maputo, Mozambique,), Nzwalo Hipolito (Regional Centre for Health and Development (CRDS), Maputo, Mozambique), Kenter Elise (Independent researcher), Tumwesigye Nazariya Mbona (Makerere University, School of Public Health, Uganda,), Chersich Matthew (Witswatersrand University, Reproductive Health and HIV Research Unit, South Africa; International Centre for Reproductive Health, Mombasa, Kenya), Hull Terence (The Australian National University, Australian Demographic and Social Research Institute), Hilber Adriane Martin (University of Bern, Institute of Social and Preventive Medicine, Switzerland)

The paper addresses genital cutting and excision procedures performed by women to treat concerns about possible infertility. Infertility is hardly ever addressed as a public health issue while for many women it is a dramatic problem. From 2005 to 2007, a WHO Multi-country study carried out in Tete Province, Mozambique collected qualitative data (208 participants in individual and focus group interviews) and quantitative data (919 women aged 18 – 60 interviewed through a representative household survey) on gender, sexuality and vaginal practices. These data showed the range of genital cutting and excision procedures aiming at sexual enhancement, beauty and therapy for infertility. The prevalence of those who cut for these reasons is high (38.6%). Traditional healers are those who primarily treat women with infertility problems, cutting off “things” from the inside of the vagina and from the perineal area using a blade. This traditional therapeutic method for infer-

tility is not generally perceived as a harmful practice. These results evidence the need for an in-depth understanding of what the biomedical literature has classified as female genital mutilation. From women’s perspectives this classification fails to recognize the nature of the motivations underlying the behaviour. It is crucial to analyse these practices from a public health perspective where different procedures and their health impact related with women can be further explored. The outcome can contribute to reducing the potential risk factors and to identifying new safe interventions within a program of comprehensive primary reproductive health care.

Conflict of Interest: None disclosed

Financial Support/Funding: UNDP/UNFPA/WHO/World Bank Special Programme on Research, Development, and Research Training in Human Reproduction, the International Partnership for Microbicides research, the Flemish Government, and Australia Aid (AUSAid)

OP2.3-5

DATE RAPE CASES AMONG YOUNG WOMEN IN EUROPE

Kouta Christiana A (Cyprus University of Technology)

Introduction and objectives: The Mediterranean Institute of Gender Studies is coordinating a transnational project entitled “Date Rape Cases Among Young Women and the Development of Good Practices for Support and Prevention”, funded by the Daphne II Programme, of the European Commission. The project involves five countries of the European Union including Cyprus, Greece, Latvia, Lithuania and Malta. Project partners are the Institute of Equality in Greece, Coalition for Gender Equality in Latvia, Women Issues Information Centre in Lithuania and the Institute for Forensic Studies in Malta. The main objectives of the project were to investigate the incidence of date rape among female college/university students (aged 18-24) and assess the attitude, and level of awareness among beneficiaries and target groups.

Methods: The methodology of the study includes a quantitative and qualitative approach: From all five countries 1857 female college/university students responded to an anonymous questionnaire, 10 focus groups were carried out and 27 interviews with relevant institutional representatives were undertaken.

Results: This study reveals that unwanted sexual experiences, violence, sexual violence and date rape exist among young women’s (18-24 years old) relationships: 10-12% in Cyprus, Greece, Latvia, Lithuania and 16% in Malta.

Conclusions: Date rape is shrouded in silence and taboo. Further, there is lack of training for police and health professionals and lack of awareness among young women.

Conflict of Interest: None disclosed

Financial Support/Funding: Daphne II Programme, European Commission (2006-2008)

OP2.3-6

RAPE – AN ACT OF DESIRE OR COMPULSION? NARRATIVES DURING GROUP PSYCHOTHERAPY TOLD BY RAPISTS SENTENCED TO FORENSIC CARE

*Kordon Suzanne (Department of Psychology, University of Gothenburg),
Kordon Suzanne (Department of Psychology, University of Gothenburg)*

Introduction: The picture composed by media present the rapist as a monstrous, dangerous man governed by uncontrolled sexual needs. Seldom, possible mechanisms behind these offences are discussed. The aim here was to examine how rapists talk about their perpetrations and how they talk about allowed sexuality.

Method: The analysis was built upon transcriptions from group psychotherapy during two years with four men sentenced to forensic psychiatric care for severe rape towards unknown women. The transcripts were analysed according to inductive thematic analyses.

Findings and discussion: A recurrent feature was an uncertainty and confusion related to consensual relations. Descriptions of allowed sexuality were mainly used as comparisons and explanations of the rapes. Feelings of aggression were present before and during the perpetrations. Desperation, and demanding fantasies, dominated before the perpetrations and the choice of victim was often a coincidence. The motive to rape seldom included sexuality. Sometimes, sexual excitement was instead a consequence of being cruel. The opposite was also present; the rape was motivated by sexual urges, which turned to aggressions during the perpetration. Another recurrent pattern was the participants' difficulties in understanding their own feelings related to the perpetrations. Thus, these men were like "everybody", i.e. sexual perpetrations are difficult to understand and to put in an ordinary human context.

Recommendations: Rape is a complicated act with a lot of underlying dimensions. Knowledge about what the offenders themselves tell about their perpetrations could be of importance in prevention work and treatment planning.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

rights and sexual violence in a Nigerian university using constructionist frameworks and secondary and primary data. Following the results of 16 in-depth interviews and 4 focus group discussion involving 36 undergraduate students, a structured questionnaire was designed and distributed to 800 male and female undergraduate students randomly selected from 8 hostels within and outside the University of Ibadan, being the oldest university in Nigeria. Results from the study revealed that the respondents generally displayed high (60%) awareness of sexual rights with low (27.5%) rate of experience of sexual violence. Academic performance measured by the Grade Point Average (GPA) significantly associated with knowledge of sexual violence ($p < 0.005$). The number of sexual partners tends to increase with awareness of sexual rights. Different forms of sexual violence were mentioned but verbal assaults and sexual harassment occurred more frequently. Enjoyment of sexual rights and frequency of exposure to unwanted sexual experience was influenced by several factors such as levels of study, academic performance, gender, age and number of sexual partners but the proportion reduced with knowledge of sexual rights and awareness of the university policy that regulates sexual behaviour on campus. The study draws attention to making empowerment of students a top priority in the university environment.

Conflict of Interest: None disclosed

Financial Support/Funding:Action Health Incorporated with Support from Ford Foundation

OP2.4-2

SMALL STEPS TOWARDS FULFILLING SEXUAL RIGHTS IN MADRASAS OF BANGLADESH

Zamir Jameel

Introduction: The Madrasa system is a religious form of education which offers an educational option to a significant portion of the poor and deprived population in Bangladesh. With its limited perspective, the Madrasa system, coupled with political and religious sensitivity to issues surrounding adolescent sexuality and reproductive health, leaves limited avenues for students to talk outside their peer group about their feelings, anxieties and queries pertaining to their sexuality and sexual health. It also restricts this group's access to information, counselling and services.

Objectives: FPA Bangladesh, a member association of IPPF in the South Asia Region, is implementing an innovation fund project since January 2007. The project aims to improve knowledge and understanding of sexual and reproductive health and rights among Madrasa students, teachers and their community and to increase access to youth friendly services to 10 Madrasas in Bangladesh.

Methods, results and conclusion: The 2007 baseline survey on SRHR among 666 Madrasa students (aged 10-19 years old) and 226 teachers in Bangladesh revealed a high level of misinformation among them regarding SRH. However nearly 80% of the students had knowledge about men having sex with men and 30% knew about this practice among classmates while

ORAL PRESENTATION SESSION OP2.4

Sexual rights

OP2.4-1

SEXUAL RIGHTS AND SEXUAL VIOLENCE IN A NIGERIAN UNIVERSITY

Akinwale Akeem Ayofe (University of Ibadan, Nigeria)

Sexuality differs among persons and across places. Gender power differentials influence heterosexual relationships. This study examines sexual

52% had knowledge about their peers who visited commercial sex workers. The youth friendly programmes like peer education, student–teacher forum, health post within each Madrasa, engagement with religious leaders and parents, have contributed to qualitative changes in the lives of these reference people which was captured by Most Significant Change (MSC) technique.

Conflict of Interest: None disclosed

Financial Support/Funding:FAMILY PLANNING ASSOCIATION OF BANGLADESH

OP2.4-3

CHILDREN AND SEXUAL RIGHTS: A CASE STUDY OF A TECHNOLOGY-DRIVEN CONSERVATIVE SOCIETY.

Rambaree Komalsingh (University of Mauritius)

Introduction + Method(s): Mauritius, a model for economic development in Africa, is considered to be a technology-driven conservative society (Rambaree, 2008, Rambaree, 2007). Within this context, a qualitative research using a grounded-theory approach and two child-friendly data collection techniques (narrative interviews and focus group discussions) has been carried out to explore the issue of child sexuality in Mauritius.

Findings and discussion: The findings of the study are: (i) The Internet is re-framing sexuality in a conservative society. In particular, the Internet is breaking down cultural barriers and exposing children to a variety of sex information (both appropriate and inappropriate) (ii) Sexuality on the Internet is creating four distinct types of environment for children in Mauritius. The typologies of the environment are here referred to as (a) positive (b) negative (c) confusing (d) unknown (Rambaree, 2007).

Recommendations: The evidence presented here calls for a sexual right-based approach in relation to online child safety and protection. In order to make the current economic investment sustainable and human-centred, an Internet-based supportive sex information, education, and communication campaign for children is recommended.

References: Rambaree, K. (2008) 'Internet-Mediated Dating/Romance of Mauritian Early Adolescents: A Grounded Theory Analysis', *International Journal of Emerging Technologies and Society*, 6 (1): 34-59 Rambaree, K. (2007) 'The Ecology of the Internet and Early Adolescent Sexuality in a Technology-driven Mauritian Society' PhD thesis at the University of Manchester, UK.

Conflict of Interest: None disclosed

Financial Support/Funding:None (I am one of the applicants for the scholarships in this conference)

OP2.4-4

SEXUALITY, GLOBALIZATION AND ETHICS

Claes Tom (Ghent University)

“Changes in our understandings of and attitudes to sexuality are both affected by and reflect the larger changes of globalization.” (Altman, 2001) Needles to say then that the globalization debate is of crucial importance to the project of formulating an emancipatory sexual ethic. Attwood (2006) argues that there is a tightrope to be walked between the models we can make and the (sexual) futures we can imagine. In my presentation I will analyze and evaluate how these diverse discourses on and theories of globalization have an impact on how globalized sexuality or sexualities are envisioned and evaluated. The idea of globalization generates great controversy. ‘Weak’ theories stress the continuity between the global and capitalist era, interpreting globalization as a development of the capitalist consumptivist paradigm. Discontinuity (‘strong’) theories stress cultural and communicative factors and fuel hopes that the global era could engender a new sense of cosmopolitanism. Different types of globalization theories single out different processes and markers of globalization and hence point to different markers of globalized sexualities, often leading to different evaluations of ‘global sex.’ Continuity theories focus on the negative sides of the globalization process (trafficking & displacement, prostitution, the creation of a ‘global sexual underclass’...), while discontinuity theories tend to stress the emancipatory tendencies associated with globalization, like sexual health, sexual rights and (global) sexual citizenship. Altman, D., 2001. *Global Sex*. Chicago & London: The University of Chicago Press. Attwood, Feona. 2006. *Sexed Up: Theorizing the Sexualization of Culture*. *Sexualities*, 9(1): 77-94.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP2.4-5

MEN A BARRIER TO ACCESS OF SRHR SERVICES!

Simbeye Edgar (Young Men As Equal Partners Programme)

The Young Men As Equal Partners Programme (YMEP) in Choma, Zambia has learnt that in a male dominated society reproductive health of women depends much upon knowledge, behavior and decisions made by their male partners such as going for VCT, STI treatment, Antenatal care and use of contraceptives. Most men prevent their partners from accessing services due to their illiteracy or lack of information on issues of SRHR but it has also been learnt that men with pregnant partners prevent them from attending Antenatal Services for fear of knowing their HIV status through their partners as VCT is compulsory for pregnant women. ? To make men responsible for their own health and that of their partners ? To encourage men to support their partners to access services from health centres that concern their health as well as their own health. The continuous sensitization of men on issues of SRHR and making the services accessible

specifically addressing their unmet needs in Health facilities will benefit their health and their partners. Access to quality SRHR information will make more men access VCT services and encourage them to accompany their partners to Health facilities when seeking services. As long as men continue being left out on issues of sexuality concerning their masculinity, SRHR information and access to services addressing their needs in Health facilities, they will continue being a barrier to the health of their partners and their own hence putting both at higher risk of infection from HIV, STIs and happy healthy family life.

Conflict of Interest: None disclosed

Financial Support/Funding: Sida through Swedish Association for Sexuality Education (RFSU) to Planned Parenthood Association of Zambia (PPAZ)

ORAL PRESENTATION SESSION OP3.4

Sexual education: schools

OP3.4-1

HOW SHOULD TEACHERS TREAT STUDENT'S EMBARRASSMENT IN THE LESSON OF SEXUALITY EDUCATION ?

Satou Toshiaki (Mie University, JAPAN)

Introduction and objectives: Around ten years old, puberty begins. So among students over fourth or fifth grade in Japanese elementary school, some students feel embarrassment when sexual matters are treated in the classroom lesson. How should teachers treat this embarrassment ?

Methods: (1) Analysis of an example from Japanese teacher's report. (2) Analyses of observation of Swedish 'sex och samlevnad' lessons.

Results: (1) A Japanese elementary teacher had taught one elementary class since students were third grade. When students became fifth grade, she asked them names of sex organ as a review of learning two years ago, but no one raised hands. Students hesitated merely to mention the words they have already learned. (2) When I observed fifth grade lesson on human birth in a Swedish grundskola in February 2008, I stated my impressions to the students after the lesson that they didn't appear to be so ashamed as compared with Japanese students, but one boy replied, «But I felt ashamed!» It is difficult for foreign visitor like me to understand students' sensitive feeling during studying sexuality. I will show some more datum from sexuality lessons in Swedish schools.

Conclusion: In Japan some teachers say that it is better to learn human sexual behavior before puberty begins because students don't hesitate to learn. But I think that must be rather optimistic view? Treating student's embarrassment is a delicate matter for teachers. I'd like to consider the methods to treat it, learning from Swedish teachers experiences.

Conflict of Interest: None disclosed

Financial Support/Funding: This is one of the progress reports of the study

titled «A Study on Significance of Sexuality Education in Modern Convivial Society through Examining Some Progressive Examples in Sweden,» financed by Grant-in-Aid for Scientific Research of Japan Society f

OP3.4-2

A QUALITATIVE STUDY OF UNDERGRADUATE STUDENTS' LEARNING EXPERIENCE IN SEXOLOGY

Mayberry Lorel

Abstract: This research will respond to significant issues related to the problematic nature of sexuality in Australian society. The proposed phenomenological study will provide insights into how higher education students extend their understanding of sexuality. It emerges from the considerable body of anecdotal evidence that has been gathered over thirty years in the award winning¹ sexuality education program at Curtin University. The research will provide unique insights into sexuality education in an adult learning environment, using ethnographic methods to reveal ways in which undergraduate students perceive and interpret new knowledge acquired from formal studies in sexology. The study will also illuminate how the content and learning strategies influence participant perceptions of their own sexuality. The rich body of information emerging from this study will provide much needed information about the processes and learning outcomes for students at this level, making a significant contribution to an important issue that has thus far received scant attention in the literature on sexuality education at tertiary level. ¹ In 2007 the Sexology Program team at Curtin University received the Award for Innovation and Excellence in Sexuality Education from the World Association for Sexual Health (WAS)

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP3.4-3

HISTORY OF SCHOOL-BASED SEXUALITY EDUCATION AND ITS EFFECTS IN JAPAN

Nakazawa Chie (Tokyo Gakugei University)

Introduction and objectives: The purpose of this study is to overview school-based sexuality education in Japan and figure out its characteristics and examine the effects of sexuality education in terms of contraception and the gender-related attitudes among adolescents.

Methods: 1) A Nationwide questionnaire survey conducted every six years since 1974. 2) Complementary surveys, which are the classroom observations and interviews to teachers and practitioners in 2005 and a questionnaire survey to university students in 2008

Results: 1) School-based sexuality education in Japan has been expanding during three decades in terms of the educational contents. It is mostly in the context of Health education, STI prevention and/or moral education. It means there is little gender perspective. 2) Sexuality education in Japan had

little effects on actualizing contraceptive practice for now, while more students who received relatively more fulfilling sexuality education than students who did not receive it perceived that sexuality education was useful for them. The rates of adolescents who use condoms properly had no significant difference by the knowledge of contraception and the experience of sexuality education at schools. 3) It had also little effects on gender related attitudes and notions, e.g. masculinities and femininities, myth of male sexual desire and gender roles.

Conclusion: School-based sexuality education in Japan has lots of issues and tasks to be challenged. Teachers feel that sexuality education all together in the classroom is difficult because the sexual interest and development are varied between individuals. Further practical research is necessary.

Conflict of Interest: None disclosed

Financial Support/Funding: The Japanese Association for Sex Education and The Grants-in-aid for scientific research by the Ministry of Education, Culture, Sports, Science and Technology in Japan

OP3.4-4

“CONGRESO MORELENSE INTERESCOLAR SOBRE SEXUALIDAD HUMANA”. PROMOTING COMPREHENSIVE SEXUALITY EDUCATION AT HIGH SCHOOLS IN CUERNAVACA, MORELOS, MEXICO: THE EXPERIENCE OF A 20-YEAR OLD PSYCHOLOGY STUDENT.

Castellanos Usigli Antón (Asociación Mexicana para la Salud Sexual, A.C.)

Being an 18-year old student at the Williams School of Cuernavaca, I noticed numerous sexual health problems among my classmates, and realized that non-scientific and distorted information about human sexuality was being taught by many teachers. With the support of the School's Headmaster, I proposed and succeeded to single organize the «Williams School's Human Sexuality Week» in february 2007. For the first time, my high school classmates received lectures on many sexual topics from the hand of experienced sexologists belonging to the Mexican Association for Sexual Health. Driven by the positive results of the project, I decided to create an Inter-scholar Congress of Human Sexuality that would gather high schools of Cuernavaca in order to promote human rights and evidence-based sexuality education. The first Congress took place at the Tec Milenio University, March 3rd-March 7th 2008, with the participation of 4 schools. Over 450 students attended lectures on themes related to the components of human sexuality. The Congress was a complete success, it showed the necessity of young people to have exclusive spaces to talk and learn about their sexuality. The Second Congress is scheduled for march 2009 at the National Institute of Public Health with the participation of 6 schools. Media attention has been a key element in this project's development, because colleges are more motivated to participate and fund the Congress when they are presented not only with pedagogical benefits, but with publicity benefits as well. PAHO. (2000). Promotion of Sexual Health: Recommendations for Action.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP3.4-5

PROJECT SÅSANT - SEXUAL HEALTH PROJECT FOR PUBLIC SCHOOLS IN MALMÖE

Leveau Linda, Karlsson Tomas K

Introduction: Projekt SÅSant (Sexual Health project for public schools in Malmö) In recent years there have been indications that young people in Sweden are taking more risks when it comes to STI. In the meantime the Sexual Health Education has been in decline in Swedish Public Schools. In Malmö (Sweden third largest city) we have a demographical situation with 30% of the citizens being immigrants. We primarily work in one of the most segregated parts in Sweden (and indeed also in Europe), thus providing us with unique challenges, and many lessons to be drawn. The primary focus of this project is to provide teachers with methodological tools in order to provide young people in Sweden a better sexual health education within the public school system. Currently we have a close collaboration with some 20 public schools in Malmö. All these schools have implemented a compulsory curriculum regarding Sexual health. Action Together with teachers we create Sexual Health curriculums that are to be followed. This is our primary tool for securing a high quality of the education. The curriculum includes topics such as safe sex information about STDs and gender issues. We also conduct workshops for teachers in different related areas, such as gender issues, with a focus on sharing different pedagogical methodologies. We use a wide variety of exercises in our education to, in a joyful way, inform and implement safe sex practice in young peoples lives. For example we use condoms in relay races, we have a sex jeopardy and we use role playing

Conflict of Interest: None disclosed

Financial Support/Funding: The National Board of Health and Welfare

OP3.4-6

STD PREVENTION FOR SEX WORKERS' CLIENTS VIA INTERNET – THE SEXSICHER APPROACH

Langanke Harriet (GSSG - Gemeinnützige Stiftung Sexualität und Gesundheit)

Introduction: Clients of sex workers in Germany used to be unapproachable for issues of sexual health. But when they set up forums for themselves and their peers they became an accessible and addressable target group for sexual health and STD/HIV prevention issues on the internet.

Action: An Internet portal was developed to adequately target clients of sex workers. It has been designed to meet the needs of the target group as well as the needs of public health experts. Both groups are equal parts of the Sexsicher.de team.

Outcome: The websites Sexsicher.de have steadily increasing numbers of visits and visitors which sum up to several hundreds per day. Most major clients' forums have set links to Sexsicher.de.

Discussion and recommendations: To make Sexsicher.de work, a close cooperation with webmasters and administrators of the clients' forums was crucial. This cooperation could only be achieved by decriminalizing prostitution as Germany did in 2002. References: www.sexsicher.de

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP3.4-7

EXPERIENCES FROM THE MASTER PROGRAM IN SEXOLOGY AT MALMÖ UNIVERSITY, SWEDEN: A PILOT STUDY

Löfgren-Mårtenson Lotta (Health and Society, Malmö University, Sweden), Månsson Sven-Axel

Introduction and objectives: In 2007 a new master program in sexology started within the faculty of Health and Society at Malmö University, Sweden. This pilot study aims to explore who the master students are, and the pedagogical implications for the substance, methods and organization of the program.

Method: A pilot questionnaire study has been conducted during the spring of 2008. The sample is limited to the first class of master students at the sexology program at Malmö University. 23 out of 29 students answered and completed the questionnaire.

Results: A majority of the students are women (20), ages 35-45 (10), and married or cohabit (16). Almost half of the students are social workers (11) and nurses and midwives (8). Most of them are professionals with sexological elements as a part of their daily work (16). A majority intends to work as sexologists (16), and more than half of the master students want to begin a research career (16).

Conclusion: The varying backgrounds of the master students urge the teachers to aim for scholarship of teaching, meaning both being experts on their fields and experts on teaching. The student's diverse competences can also be used at the master program according to learning as participation in a social practice. Many of the students aspire for a research career, which means that Malmö University has to organize and prepare for studies on a higher level.

Conflict of Interest: None disclosed

Financial Support/Funding:Malmö University, Sweden

ORAL PRESENTATION SESSION OP3.5

Sexual education: technologies

OP3.5-1

HOW TO VET AND GET GOOD SEX ONLINE

Gillispie Joanie Farley (Berkeley City College, Berkeley CA)

When does cyber sexual arousal become a compulsion? When does a fetish or voyeurism become a paraphilia? What's an OK or not OK cybersexual activity? at what ages? with whom? under what circumstances? Interactive, digital media and Internet communication technology have changed the way we do sex but there are few guidelines for developing healthy sexuality online. One out of eight couples who meet online marry. Younger teens first sexual encounters are likely to be interactive virtual ones. Cyber affairs, haptic-touch technology, and teledildonics fuel anything-goes cybersexual experiences but we don't understand what this means for our sexuality and offline intimate relationships. This multimedia presentation, developed from a course on Digital Culture in an urban community college in Berkeley California, illustrates how to find sexual experiences online that promote health, self awareness and pleasure with the goal of developing a life long positive sexual identity. Universal constructs of positive sexuality (consent, authenticity, mutuality, respect, pleasure) are uploaded to the Internet as a way to vet models of online sex that promote-or don't- healthy sexuality. Sites critiqued are cyber porn, alt.sex. online dating, and identity tourism. Participants will be able to apply what they've learned to their professional and personal lives. Farley Gillispie, J. & Gackenbach, J. (2007). cyber.rules: what you really need to know about the internet. NY: WW. Norton. Farley Gillispie, J. (2007). Cyber Shrinks. In Jayne Gackenbach (Ed.). The psychology of the internet. NY: Academic Press. Bell, D. & Kennedy, B. (Eds.) (2000). The cyberculture reader. NY: Routledge.

Conflict of Interest: None disclosed

Financial Support/Funding:Berkeley City College, Multimedia Faculty Professional Development funds

OP3.5-3

PICTORIAL COMIC MEDIA AS THE CHOSEN TOOL FOR EARLY PREVENTION OF SEXUAL VIOLENCE TO THE CHILDREN

PARAMASTRI IRA (Faculty of Psychology, Gadjah Mada University Yogyakarta)

Rate of sexual violence case that is experienced by children in Yogyakarta Special Province is considered as high. National Committee of child protection notes that sexual violence to the children in year 2004 reached 221 cases, while in 2006 rose up to 426 cases. The research aimed to examine the effectiveness of pictorial comic as early prevention tool of sexual vio-

lence toward the children. It was a quantitative research with pretest-posttest group design. The participant primary schools were SD Kanisus and SD Muhammadiyah II. The respondents comprised of 12 students from SD Muhammadiyah II and 23 students from SD Kanisius. The research instrument was pictorial comic media and knowledge scale on sexual violence in children. Data analysis was using paired t-test. The result of pretest showed that the average of respondents held moderate good knowledge on sexual violence in children (mean 30,74) and average rate between 20-38 with highest value was 34 (above average). This range was very extensive that showed improvement on average value of respondent from 30,74 up to 31,74 and the most value increased from 34 to 37. The lowest value was 20 (pretest) up to 21 (post test), and the highest value was 38. Statistically there is a significant difference ($p < 0,05$) on mean improvement. This research concluded that pictorial comic media has significant influence toward knowledge improvement regarding sexual violence for students at grade 5 of primary schools although some information were not yet giving sufficient acceleration on knowledge improvement.

Conflict of Interest: There is no potential conflict of interest indicated by submitting this abstract

Financial Support/Funding: The research was funded by the National Education Department of Government of Indonesia

OP3.5-5

TECHNOLOGY BASED SEXUAL EDUCATION

Howard Marion (Morehouse School of Medicine/Emory School of Medicine), Kottke Melissa (Emory University School of Medicine)

Introduction and Objectives: Utilizing technology in health care sites offers great promise for more teen-friendly and effective sexual education. The study purpose was to demonstrate that, during waiting room time, use of computer-based interventions linked to the Internet can influence the knowledge, attitudes, skills, and behaviors of teen girls regarding condom use.

Methods: Male and female teen panels reviewed and rated 100 professionally selected potential websites. They also critiqued the intervention. Clinics were randomized to treatment and control conditions and teen participants were followed for up to six months. Those coming to treatment clinics viewed an entertaining and informative four-minute PowerPoint computer presentation about the need to use a condom with birth control methods and spent 10 minutes on chosen websites.

Results: The study found changes in knowledge, attitudes, skills and, most striking, actual behaviors. Nearly all treatment girls said they had gained new and helpful information about the importance of using two methods of protection and 90% said they would be more likely to try to use condoms next time they had sex. Indeed, at follow-up, girls who had the intervention used two methods of protection more often (73% vs. 53%), "always" used a condom (63% vs. 45%), and refused to have sex if a condom was not going to be used (67% vs. 35%).

Conclusion: Innovative computer-based sexual education may have a powerful role to play in knowledge-building, risk reduction, and important be-

havior change among young people. The approach has world-wide applicability.

Conflict of Interest: None disclosed

Financial Support/Funding: Brush Foundation

OP3.5-6

CO-AUTHORING DIGITAL STORIES FOR HIV/AIDS COUNSELING/EDUCATION IN TANZANIA

Duveskog Marcus (University of Joensuu), Sutinen Erkki (University of Joensuu)

A team of teachers, designers, university students, and pupils from secondary schools in Tanzania followed a participatory design approach to create a digital platform for real life stories on HIV/AIDS. The six month project was based on the needs of the Tanzanian context where the HIV/AIDS prevalence is 6.2% and locally in Iringa region more than 13%. Contrary to conventional uses of information and communication technology to combat the disease with delivering well-prepared electronic material, the project focused on using technology as an activating tool. During the project, a number of 37 stories were collected from which some were visualized as animated cartoons, and made interactive to a certain extent. An analysis of the co-authored contents from the sexual health point of view shows that practices, taboos, beliefs, attitudes, values and social structures needs to be addressed. A compliment to face to face teaching is needed as it is generally considered too embarrassing for both student and teacher. Traditionally, issues related to sexual education were taught by elder relatives but this has changed with urbanization and modernization, teenagers are left in a vacuum when parents do not see sex as an appropriate topic to discuss. This shows that the technology can make a significant contribution to improving the current level of Tanzanian sexual education which is often ignored all together. The next steps will be to further explore the impact of impersonating digital real life stories and improve the platform according to the identified local needs.

Conflict of Interest: None disclosed

Financial Support/Funding: Project funded by The Finnish Evangelical Lutheran Mission and Academy of Finland

ORAL PRESENTATION SESSION OP3.6

Sexual education: youth

OP3.6-1

YOUTHS TAKING UP A LEADING ROLE IN SEXUAL REPRODUCTIVE HEALTH & RIGHTS PROGRAMS TO FIGHT HIV & AIDS

Simbeye Edgar (PPAZ-YMEP)

YOUTHS INVOLVEMENT & PARTICIPATION Edgar Simbeye ymep_choma2005@yahoo.com

Issue: There are increased calls for involvement of beneficiaries in the management of projects that are meant for them. There is also little documentation on effective involvement of youth in Sexual and Reproductive Health promotion tailored to fight HIV & AIDS, apart from peer education. The Young Men as Equal Partners Project in Choma- Zambia has been able to demonstrate the value add of involvement and participation of youth in its management.

Description: Involvement of men in the improvement of sexual and reproductive health including STI/HIV prevention has been underscored in various studies. The prevalence of HIV/AIDS and its association with STIs has made involvement of men to be key to behavior and social change in improving sexual and reproductive health. The program embraces a gender transformative approach focussing at men on the belief that men can play a major role in the promotion of safer sexual relationships.

Results: Political involvement in HIV/AIDS through formation of a District Youth Coordinating Committee and involvement of youths in a Youth Parliament. Youths organise and supervise outreach activities and the church has been reached with information on sexuality through conferences, meetings and musical concerts. Lesson Learnt. • In the absence of a Youth Policy or strategic framework, youth involvement becomes more preached than practiced.

Conclusion: Involvement and participation of young men in Sexuality and HIV/AIDS programme not just as beneficiaries but as key implementors is key in addressing issues that affect them.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP3.6-2

AWARENESS, KNOWLEDGE AND WILLINGNESS TO DEAL WITH SEXUAL EDUCATION AMONG STUDENTS IN ACADEMIC COLLEGES OF EDUCATION IN ISRAEL

Brosch Ilana (Kibbutzim College of Education Seminar Hakibbutzim)

Introduction and objectives: It is commonly accepted that sex education

should start at early age. Most teachers hold positive attitudes towards programs on sex education, but some surveys showed a discrepancy between overt attitudes towards sex education and willingness to practice this as part of the professional duty.

Methods: This study is the first in Israel to check attitudes, knowledge, and willingness of students of education to deal with topics connected to sex and family life education as part of their teaching tasks. The data were collected through a closed questionnaire with a sample of 757 students-teachers from seven educational colleges in Israel.

Results: The findings show that most students did not receive a comprehensive sex education during their school education. The majority of respondents think it is important to include sex education in the school curriculum, and most are in favor of dealing with sex education themselves when they become teachers. The topic of sexual violence is perceived as most important by the students. About half responded that they require further information on this topic. The other important topic is «Directions for Help» in case of distress.

Conclusions: Responses to the knowledge questions showed a lack of knowledge in physiology and anatomy of the reproductive system, STIs, contraceptives, abortions, sexual orientation, and sexual violence. A healthy, responsible and educated sexual behavior is crucial in the life of every young person in the modern society. Colleges of education should consider adding courses and workshops that deal with these important subjects.

Conflict of Interest: None disclosed

Financial Support/Funding: The MOFET Institute and supported by the Department of Education, Ministry of Education, Israel

OP3.6-3

THE CONDOM BOOK. TEACHER'S GUIDE ON HOW TO TEACH ABOUT CONDOM USE AMONG TEENAGERS

Olsson Hans L (RFSU, The Swedish Association for Sexuality Education)

Introduction: "The condom book" is a 100-paged educational material that RFSU has produced for teachers working with teenagers. The book contains of 11 chapters: More than 40 different methods, but also chapters on condom history, penis facts with implications for condom use, organising regular condom hand out within school, young people's question about condoms, and research on risk taking.

Action: We recognized a need of deeper understanding of working with condoms/condom use. The book goes behind the "information" strategy and discusses the need of reflection and dialogue in creating safer sex practices. How can we work in an efficient way? The methods chosen for the book are focused on situations and reflection. Outcome The handbook has not been evaluated; we have got reports from teachers and educators who have used the handbook. They are satisfied and think it's easy to work with it. Some methods have been tested with participants from Africa, Asia and Middle East with good result. The Danish association Sex og Samfund has translated parts of the handbook to Danish. Based on the handbook RFSU has been engaged by county councils, departments for infectious disease

control, schools, and municipalities to train teachers and health care staff. Discussions and recommendations This kind of material is useful in developing a more profound work with condom use and young people. To spread the work/methods more effectively we could have offered designed training already at the introduction of the material.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP3.6-4

TREND ANALYSIS OF THE EFFECT OF TEACHING SEXUAL AND REPRODUCTIVE HEALTH IN JUNIOR HIGH SCHOOLS IN NORTHERN GHANA

Aberese Ako Matilda (Navrongo Health Research Centre), Debpuur Cornelius Y (Navrongo Health Research Centre), Kanyomse Ernest (Navrongo Health Research Centre), Apiung Gifti (Navrongo Health Research Centre), Gbene Martha (Navrongo Health Research Centre)

Introduction: Majority of adolescents and young people lack relevant knowledge on their sexual and reproductive health (SRH). Leading to high rate of unprotected sexual intercourse, placing them at risk of sexually transmitted diseases (STDs) including HIV/AIDS, and unintended pregnancy.

Action: The study assessed initial impact of teaching sexual and reproductive health in school for three years, on knowledge, attitudes and behaviour of junior high school pupils in the Kassena-Nankana District of Ghana.

Outcome: A baseline survey and two subsequent surveys were conducted on 1109 pupils from intervention and 1004 pupils from non-intervention schools, on their level of knowledge, attitudes and behaviour on SRH. Pupils were between the ages of 11-16 years at baseline and 14-19 years in the third year. Knowledge on possibility of pregnancy occurring at first sex increased by 34.2% among pupils in intervention schools, while those in the non-intervention schools, knowledge increased by 11.4%. This change was significant. Perception of risk of HIV/AIDS increased by 4% among pupils in intervention schools but dropped by 5.8% among those in non-intervention schools, this change was significant. On behaviour change, condom use among sexually active pupils increased by 12.2% in intervention schools and by 14.1% in non-interventions schools by the third year.

Discussions: The findings reveal that classroom teaching of SRH leads to increase knowledge and contributes to positive attitudes. However, more time is needed to translate this into positive behaviour change. References Lloyd, Cynthia B. Schooling and adolescent reproductive behaviour in developing countries. 2005. The Population Council. U.S.A

Conflict of Interest: None disclosed

Financial Support/Funding:Rockefeller Foundation

OP3.6-5

ACADEMIA AND GOVERNMENT AGENCIES COLLABORATION IN SEXUAL HEALTH PROMOTION EFFORTS IN PUERTO RICO, FROM 1990 TO 2007

Santos-Ortiz Maria del C., Vazquez-Guzman Yiselly, Negron-Rios Lixzadia, Otero-Rivera Carlos

Introduction and objectives: Sexual health is recognize in the Declaration of Sexual Rights (DSR), Goals for Sexual Health (GSH) and Sexual Health for the Millennium (SHM) as an important component in sexual science, public health and human right efforts. The study objectives were to describe the sexuality curriculum and research projects conducted in the UPR's, Graduate Health Education Program (GHEP); sexual laws, public policies and curriculum in the Puerto Rico's Department of Education (PRDE); and to analyze contextual factors that influenced sexual health promotion in these institutions.

Method: Content analysis was used to classify GHEP sexual health research projects from 1990-2007 and to analyze texts books, laws and public policy in the PRDE health curriculum. The DSR, GSH and SHM were also used. Results A total of 173 research projects were analyzed; 24 % were related to sexual health promotion. The most common topics were: HIV/AIDS (38%), family planning (17%), sexual health education (15%) and sexual behavior (12%). Sexual health promotion efforts in the PRDE were mostly related to the STI, HIV/AIDS, human development, pregnancy and the reproductive system.

Conclusion: In the last two decades, several efforts have being made to promote access to comprehensive and scientific sexuality education in the academia and school system. Both agencies have contributed to the promotion of to the DSR, GSH and SHM. Contextual factors, such as HIV/AIDS, laws, public policies and federal funding, had contribute to public health efforts, research areas of interest, and curriculum content.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

ORAL PRESENTATION SESSION OP3.7

Sexual education: HIV/AIDS

OP3.7-1

STRATEGIES FOR PROMOTING SEXUAL HEALTH AND SEXUAL RIGHTS AMONG YOUTHS: MODEL TO RESPOND TO HIV/AIDS IN NIGERIA

Okolie Ugochukwu C (Ebonyi State University, Abakaliki, Ebonyi State, Nigeria.)

The purpose of this study was to find out effective strategies for improving and promoting sexual health and sexual rights of the youths and also find

out how the effective strategies would respond to HIV/AIDS in remote areas in Nigeria. Five hundred people including health professionals, guidance and counselors, HIV/AIDS-based Organization workers, sexual health and sexual rights consultants working in ten selected states of Nigeria were randomly selected for the study. The study was a descriptive survey guided by four research questions. A twenty (20) item questionnaire was administered to the population used. A four point modified likert type scale was used for collecting data. Data collected were analyzed using mean. Items with mean scores above 2.50 were accepted as effective strategies. Literature reviews were conducted to review other works done in the fields of sexual health, sexual rights and HIV/AIDS. The review covered numerous published books and articles written by authors in the fields of work. Experiences from several organizations working in the field were reviewed. Finding among others revealed that establishing mechanism to increase information sharing and foster relationships between civil societies, activists, governments, donors, and the general public on the health needs and rights of people, will promote sex education, health and equity. Conclusion was that, governments, donors should be at fore front to promote sexual rights of the people and effective strategies for promoting sexual health and sexual rights of the people especially the youths were recommended.

Conflict of Interest: I would like to disclose the conflicts caused in most rural communities and urban areas about the stigmatization of HIV/AIDS, and the cultural and sociological conflicts involved in exercising sexual rights among the youths.

Financial Support/Funding: I nominate Department For International Development of the British Government.

OP3.7-2

SAFER SEX EDUCATION FOR PEER EDUCATORS

Ismail Gulalai (Aware Girls)

Introduction: North West Frontier Province of Pakistan, has a feudal culture and prevailing religious customs making sexuality and sexuality education a taboo. Adolescents and young people are taught only about abstinence and not provided with the necessary information about sex and sexuality as a result they involve in high risk sexual practices, which make them vulnerable to sexual health problems and STIs such as HIV/AIDS, and also result in unwanted pregnancies, back street abortions, etc The goal of the project was to promote safer sex practices among adolescents and young people using peer education.

Action: • 20 female and 20 male peer educators in five districts of North West Frontier Province were given training sessions to arm them with information, skills, tactics, and attitudes they need for effective peer education on safer sex practices. • The peer educators were involved in thought provoking exercised to let them know the basics of safer sex practices, approaches that can be used for STI and HIV transmission and prevention of unwanted pregnancies. • Capacity of peer educators was built in practical use of the concept of harm reduction and risk management in real life situations

Outputs: • 35 peer educators used the skills for promoting safer sex practices among 500 adolescents and young people both male and female. • young people who were educated, adopted safer sex practices such as use of condoms, while concern was raised about unsafe practices among others • 30 more young people became peer educators of safer sex practices

Conflict of Interest: I am Young women activist working as for sexual and Reproductive Health Rights of Young people in North West Frontier Province of Pakistan, a place where customs make sexuality and sexuality education a taboo, denying the fact that sexual pleasure is a hu
Financial Support/Funding: Aware Girls

OP3.7-3

SEXUALITY EDUCATION AND HIV/AIDS: PERSPECTIVES FROM NORTH OF AFRICA AND MIDDLE EAST

Ragab Ahmed

Introduction and objective: Evidence shows that withholding information from young people only increases the likelihood that if and when sexual initiation occurs, it will be unprotected. The Current paper examines the sex education approaches and look for their suitability for application in the Middle East and North of Africa.

Methods: The paper examined the following themes: Different sex education approaches, sex education in Middle East and North of Africa, the challenges facing the region and HIV/AIDS spread and the state of Sex Education in Islamic Teachings.

Results: Adolescents in the Middle East and North of Africa do not have enough information about their bodies, maturation, or other aspects of reproductive health to help them successfully and prepare them for future reproductive health roles. The Middle East and north of Africa have all the potentials for rapid spread of HIV/AIDS. Critical examination of Islamic teaching showed that there are elements for a comprehensive package of sex education approach.

Conclusion: Within the context of the challenges that Middle East and North of Africa face, it is safe to conclude that, a package of comprehensive sex education is needed to be applied in the region. However, in order to overcome the expected resistance from the conservative groups, abstinence should be in the center of the package.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP3.7-4

YOUNG SEXUALLY ACTIVE POPULATION AND THEIR RISKY BEHAVIOUR

Din Alla-ud- (Social Help & Research Organization (SHRO)), Ullah Hafeez (Islamia University of Bahawalpur), Nazli Shabana (Doctor & Private Practitioner)

Introduction: To reduce the STIs/HIV/AIDS epidemic, the focus needs to give the young sexually active population and their risky behaviour. The study examines the awareness about STIs/HIV/AIDS regarding preventive, transmission and treatment modes. It also examines the high-risky behaviour of students in Bahawalpur, Pakistan.

Methodology: The study was conducted by Social Help & Research Organization (SHRO) Pakistan, among 225 different colleges student (boys & girls) selected systematically.

Findings: The accurate & correct awareness & knowledge about preventive modes of STIs/HIV/AIDS is 48%, which varies among science and arts students. Hesitation to talk about sex with parents or teachers leads to low exposure to sex education. Students opined that sex education be introduced in the schools. 74% revealed STIs/HIV patients were discriminated, 82% felt that they be admitted in schools or work place. Though, 42 % of boys and 19 % girls reported that their counterparts indulge in premarital sex, 14 percent of the boys had premarital sex. Among those had sex, 52% forced to have sex and the condom use was low.

Conclusion: The study suggests it is important to initiate the sex education in schools. Intervention programmes needed among the students to safe guard their risky behaviour, delaying the sexual intercourse until marriage or be faithful with their partner.

Conflict of Interest: Few religious mind students & teachers walkout.

Financial Support/Funding: Self help basis and contribution of local charity, donation etc.

OP3.7-5

SEX POSITIVE APPROACHES TO SAFER SEX: THE GLOBAL MAPPING OF PLEASURE

Knerr Wendy (The Pleasure Project)

Introduction: The perceived lack of sexual pleasure associated with safer sex has been identified as a major factor in people having unprotected sex. Yet almost all HIV prevention programmes use fear of negative incentives to motivate people to practice safer sex. Moreover, few erotic films and materials feature condom use or non-penetrative pleasurable sex as legitimate options.

Action: The Pleasure Project has undertaken a mapping to identify worldwide experiences of organizations, programmes, media and people which promote safer sex through a positive approach. This is the only global resource available presenting 47 best practices for promoting safer sex using positive incentives. The mapping: highlights best practices from religious, youth, HIV/AIDS, women's, sex worker, males-who-have-sex-with-males and other organizations, including eroticizing condoms and promoting sexual techniques; identifies erotic media producers who include condoms/safer-sex in films and publications; and summarizes the programmatic/media/donor environment with regard to sex-positive approaches.

Lessons learnt: The number of organizations using desire to promote safer sex is limited despite increasing evidence that pleasure-focused interven-

tions can be effective in encouraging healthy behaviours. People who are promoting pleasure as an incentive for safer sex are largely isolated in their work, and while pleasure is now accepted as a component of sexual health, it is still being ignored by the majority of programmers and donors.

References: Pleasure deserves greater consideration in sexual health promotion, and the mapping is a resource for exploring the potential for sex-positive messages. In addition, research is urgently needed to evaluate sex-positive interventions.

Conflict of Interest: None disclosed

Financial Support/Funding: The Realising Rights Research Programme Consortium at Institute of Development Studies, UK, funded by the United Kingdom Department for International Development (DFID) under grant HD43. The views expressed here do not necessarily represent those of DFID.

OP3.7-6

TARGETING RADIO FOR HIV PREVENTION IN NIGERIA: CHALLENGES AND OPPORTUNITIES (KUNAMATATA)

Ndubuisi Onyinye Belinda (Economic and Social Empowerment Of Rural Communities), Uzoho Comfort Ikechi (Economic and Social Empowerment Of Rural Communities)

The issue of HIV prevention became necessary among young people because of the alarming rate in the spread of the pandemic in Nigeria; the radio is the primary communication medium for reaching to the largest segment of the population, which are the young people. How can the radio be deployed to mobilize against HIV/AIDS/STDS in Nigeria?

Description: In 2007, Economic and Social Empowerment Of rural communities (ESERC) with support the MTV- International Network Staying alive foundation began a project on HIV /STDS prevention and constraints as well as build the capacity and create awareness on HIV/AIDS and how its preventive measures. The project involved focus group discussions with people living with HIV/AIDS (PLWHA), Doctors and HIV/AIDS project managers in Nigeria. The project also included a training program for radio journalists on site to provide coverage to the listeners in Nigeria especially in the rural places. Huge potential exists for mobilizing the radio massively against AIDS. Findings from the project however revealed a lack of capacity of many radio stations to provide quality coverage of HIV/AIDS. Many of the stations are handicapped by inadequate or outdated equipment, commercial pressures as well as low levels reporting skills among staff.

Recommendations: Radio must be at the core of any long-term media intervention on HIV/AIDS. Such interventions however must address the structural, organizational and skills capacity of stations and should aim at building long-term capacities of local partners to ensure sustainability.

Conflict of Interest: None disclosed

Financial Support/Funding: Economic and Social Empowerment Of Rural Communities & MTVB international Networks Staying alive foundation

ORAL PRESENTATION SESSION OP3.8
Sexual education: children and parents

OP3.8-1

PARENTS WANT SEXUALITY EDUCATION FOR THEIR CHILDREN: RESEARCH STUDY COMMISSIONED BY FAMILY PLANNING QUEENSLAND(FPQ)

Brennan Holly, Gore Cecelia (Family Planning Queensland)

Family Planning Queensland (FPQ) provides support for implementing sexuality education in schools and services and works directly with young people. In 2007/8 FPQ provided education to 29 000 young people and over 20 000 professionals. Despite these numbers and the existence of numerous government and organisational policy's, curriculum documents and child rights declarations and frameworks, FPQ is often confronted with strong 'fears' from services that there will be parental 'back lash' to providing sexuality education. In an attempt to find out what parents really think about sexuality education and whether these fears about providing sexuality education are founded, FPQ commissioned Galaxy Research to survey Queensland parents. The study was conducted online during June 2008. There were 518 respondents, drawn from metropolitan, regional and rural areas. As well as aggregated data, questions were analysed by a series of demographic variables, including sex, age, location, age of children, and religion. The study found support for comprehensive sexuality education amongst both mothers and fathers, residents in metropolitan and regional areas and different religious beliefs. • 82 % support the provision of school-based comprehensive sexuality education. • The components of the curriculum which received most support were; preventing sexual abuse, sexual development, relationships and sexual health. • 72 % would be concerned if there was no sexuality education in schools. The findings suggest that parents and carers support the provision of sexuality education to their children and that 'fear' of parental backlash is not a valid rationale for not providing sexuality education to young people.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP3.8-2

STOPPED AT THE RED LIGHT - WHAT GETS LOST WHEN WE ONLY TALK ABOUT THE PROBLEM. THE TRAFFIC LIGHTS FRAMEWORK: SEXUAL DEVELOPMENT IN CHILDREN AND ADOLESCENTS

Graham Judy (Family Planning Queensland), Brennan Holly (Family Planning Queensland)

Family Planning Queensland (FPQ) developed the Traffic Lights frame-

work in response to an overwhelming demand for education regarding problematic sexual behaviours in children and young people. The model lists specific examples of sexual behaviour in children and adolescents from birth to eighteen and is designed to assist parents, carers and professionals to identify sexual behaviours that may be considered 'normal', at risk, abusive or harmful. Since 2006, FPQ has presented this framework in training and at conferences to teachers, school nurses, early childhood workers, child protection officers, disability support staff, social workers, counsellors and other health professionals. The Traffic Lights framework has promoted much discussion and review about sexual development. It has highlighted the need for a 'healthy sexuality framework' to sit alongside an understanding of problem sexual behaviours and sexual abuse, in order to support children and adolescents. This paper will explore the paradigm shift that the Traffic Lights framework enables. Focusing on 'problem' or concerning behaviours is like being stopped at the red light; it's not a way forward. Although the starting point for most requests for education, training and resources is problem sexual behaviour, the Traffic Lights framework requires an engagement with what constitutes 'healthy sexuality' if we are to meet the needs of young people.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP3.8-3

BOYS GROUPS THE RFSU STOCKHOLM WAY

Lineo Luis

Adolescent boys today live in a social situation that is largely driven by gender-stereotyped patterns, where homophobia and sexual harassment are part of everyday school life. This environment shapes these young boys views on sexuality. We think it is important to look at how boys respond to their own sexuality and make them understand that they have a position to change. This will also benefit girls as a group. With our boys groups activities, we want to create a space for serious talks about sex, love and relationships. Two professional sexual educators, with special boys groups training, meet around ten adolescent boys per group to discuss: Sexuality, anatomy, sexual harassment, reciprocity, STIs, masculinities, LGBT, violence, norms, oppression techniques... Ten times per term, 90 minutes sessions, in a school environment, on school time. We use short factual lectures, norm critical- and value clarification exercises. We use non heteronormative language and focus on pleasure. We've done two terms with totally seven groups. We've had a very good turn up (about 90 %). So far one evaluation has been done. 34 out of 37 boys gave us the highest mark and the rest gave the next highest. Teachers felt that the environment in school has been noticeably calmer-safer and seen a considerable decrease in homophobic-sexist language. It has often been chosen to give girls tools to change their conditions therefore a relatively good number of girls groups, but significantly fewer boys groups activities. So start gender transformative boys groups!

Conflict of Interest: None disclosed

Financial Support/Funding: RFSU and Stockholms Stad Socialtjänstförvaltning

OP3.8-4

SEXUALITY IN A GROUP OF MALE ADOLESCENTS WHO HAVE SEXUALLY OFFENDED: KNOWLEDGE, ATTITUDES, AND EXPERIENCES

Tidefors Inga (Department of Psychology, University of Gothenburg), Arvidsson Hans (Department of Psychology, University of Gothenburg), Goulding Anneli (Department of Psychology, University of Gothenburg)

Introduction: There is almost a theoretical vacuum concerning the role of sexuality in sexual abuse. More knowledge regarding this factor might contribute to an understanding useful in treatment and prevention. Therefore, this study focuses on knowledge, attitudes, and experiences of sexuality in a group of 45 male adolescents who have sexually offended.

Method: The target group consisted of 45 adolescent males with a mean age of 16.2 years who had committed sexual offences towards children, adolescents, or adults. Nine of the participants were voluntary patients at psychiatric clinics, and 36 were placed at institutions. The instruments used were semi-structured interviews, a questionnaire measuring Sexual Knowledge and Beliefs together with Social Sexual Desirability, and staff-assessments.

Results: The target group had a lower degree of sexual knowledge compared to a comparison group of 61 boys in the same age, and scored lower on a scale measuring positive attitude and orientation/openness towards sexuality. The target group was younger when they first had consensual intercourse, compared to Swedish norm data. For 40% of the boys, the first sexual experience was as a victim of sexual abuse.

Conclusion: Since sexuality is important in the lives of adolescents, one cannot only focus on sexuality as related to the perpetrations when treating and preventing sexual abuse.

Conflict of Interest: None disclosed

Financial Support/Funding: The study was granted by the Swedish National Board of Institutional Care

OP3.8-5

PERCEPTIONS AND PRACTICES OF SECONDARY-LEVEL STUDENTS REGARDING OVERSEXUALISATION AND EARLY SEXUALISATION

Duquet Francine (University of Quebec in Montreal - Department of sexology), Quéniart Anne (University of Quebec in Montreal - Department of sociology)

The oversexualisation and early sexualisation of children and adolescents are complex phenomena that have been little documented, except through peripheral studies such as the consumption of pornography (Marzano and DeRozier, 2005), the practice of oral sex (Cornell and Halpern-Flesher,

2006; Carlstrom, 2005; Gates and Sonenstein, 200; Remez, 2000), the greater vulnerability to sexual violence (APA, 2007), etc. Our study aimed to understand, from the perspective of both sexology and sociology, the perceptions of young people themselves regarding the following: oversexualisation of fashion; highly sexualized seduction; games and social activities with sexual connotations; the “fuckfriend” phenomenon; sexual chatting; internet. Are these phenomena present in their reality? What meaning do they have for them? What is their opinion and knowledge of them? Our qualitative research was conducted in Montréal (Canada) with 70 boys and girls aged 12 to 18 attending secondary school. Our Results: a) girls’ behaviour judged more harshly than boys’; b) various possible scenarios regarding relations between boys and girls: not being in love with the person they are frequently going out with and with whom they engage in sexual activities; choosing their best friends as “fuckfriends”, etc.; c) easy access to the world of sexual consumption, and confusion regarding the understanding of the intimate and private spheres.

Conclusion: While many are highly critical of the commercialization of sexuality, others trivialize it entirely. This speaks to the importance of instituting a sexual education approach that takes into account the issues of boundaries and points of reference.

Conflict of Interest: There’s no conflict of interest

Financial Support/Funding: Ministry of Education - Ministry of Culture, Communication and Feminine Condition - Youth Forum Montreal.

ORAL PRESENTATION SESSION OP3.9

Sexual education: postgraduate & professional

OP3.9-1

AUSTRALIAN SCHOOL-BASED SEXUAL HEALTH EDUCATION: PARENTS’ VIEWS

Weerakoon Patricia K (University of Sydney), Weerakoon Patricia K (University of Sydney), Sitharthan Gomathi (University of Sydney)

Objective: To investigate the attitudes of parents regarding sexual health education (SHE) in Australian schools. **Methods:** One hundred and seventeen (117) Australian parents were recruited through purposive sampling and snowballing methods to complete an online questionnaire in 2007.

Results: Most respondents (97.4%) support the provision of SHE in schools and 95.7% advocate schools and parents sharing this responsibility. A majority (82.9%) believe SHE should begin in primary school with a variance as to when specific topics should be introduced into the curriculum. There is, however, consensus for a comprehensive curriculum, including topics potentially seen as controversial such as ‘masturbation’. ‘Abstinence’ was chosen by 15.4% of parents to not be included in SHE curricula. The majority of parents rate the SHE their children have received in school as ‘fair’, and want access to resources to help them educate their children, including

workshops at schools, information about school SHE, literature, and trained sexual health educators.

Conclusions: Parents support SHE, want programs to begin in primary school, believe school programs are 'fair' in quality, want comprehensive curricula, and want to be involved with the school in the SHE of their children.

Implications: 1) compulsory and comprehensive SHE starting in primary school is supported by parents, 2) schools, parents, and young people would benefit from the involvement of parents in SHE programs, and 3) as perceived by parents, there is need for better training for teachers both in the provision of SHE and in their collaboration with parents.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP3.9-2

TEACHING PROGRAM OF SEXOLOGY IN ROMANIA

Macrea Rodica S (University of Medicine & Pharmacy Cluj), Miclutia Ioana V (University of Medicine & Pharmacy Cluj)

Introduction: There were only discrete and isolated attempts to teach and practice sexology during more than four decades of totalitarianism. There were mostly courses regarding contraception and endocrinology. Mass media had a huge impact in enlightenment of Romanians regarding sexual issues. Few private practices of couple therapy and sexology have been established recently.

Approach: to present the history of Sexology in Romania and to describe the stages of the development of sexology master classes within the University of Medicine Cluj-Napoca, Romania

Findings and discussion: The milestones of this teaching method have been put in 2005 by isolated courses of sexology, which raised the need for the development for a structured theoretical and practical multidisciplinary approach and problem solving training. The four semester master classes of sexology gather specialists from various fields: physiology, dermatology and STD, gynecology, endocrinology, psychiatry, internal medicine, urology and andrology, forensic medicine, psychotherapy, philosophy, gender studies, human rights policies. The balance between theoretical knowledge and practical skills is adapted on request of the students, which finish their studies with a dissertation thesis.

Conclusions: The two years experience enables us to reanalyze the actual problems: to identify the gaps in the field and to reinforce the successful themes. The need for qualified specialists in sexology will be covered only in conjunction with similar initiatives on national level, and international wide.

References: Porto, R., Bonierbale, M., Towards a European Sexology, *Sexologies*, 2006, 15, 4, 4-6. Palha, A., Conceptual basis of Sexual Health, *Sexologies*, 2008, 17, Suppl. 1, S32.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP3.9-3

DIALOGUES ON CAMPUS BEYOND SEXUAL IDENTITY: THE DEVELOPMENT OF SEXUAL IDENTITY OF LESBIAN STUDENTS IN INSTITUTE OF TECHNOLOGY AND THE EXPERIENCE OF LESBIANS AND HETEROSEXUALS INTERACTION ON CAMPUS

Yuan Liu Hsing (Chang Gung Institute of Technology.)

The purposes of this qualitative research were to explore the development of sexual identity of lesbian students on campus of higher education and focus on the perspective of interaction between lesbians and heterosexuals according to the theory of campus environment to understand the relationship between the experience of lesbian and heterosexual interaction and development of sexual identity of lesbian students. Using participant observation, in-depth interview and focus group, the researcher studied the lesbian students of an institute of technology in northern Taiwan and heterosexual teachers and students who had interacted with these lesbian students as the research targets. The participants of the study consisted of 11 lesbian students, 8 heterosexual female students, 5 heterosexual teachers and a focus group of 12 people. The strategy of data analysis was based on grounded theory. The research findings are: (1) The development of the sexual identity of lesbian students is formed in sequential stages; however, these stages are of circular rather than linear model,(2) The discussion of four dimensions of physical environments, organizational environments, human aggregates and social climates of the analysis of Moos' theory of social climate can clearly express lesbian students' subjective experience of lesbian and heterosexual interaction on campus and the needs of development in sexual identity,(3) The heterosexual female students' initial reaction toward lesbian students includes "refusal, disgust and uneasiness, "being shocked, afraid and refusal to become lesbians", "being tolerant but expect lesbians to become heterosexual" and "being supportive and regarding lesbians as common and normal group",(4) The

Conflict of Interest: student affairs sexuality education Nursing education

Financial Support/Funding:None disclosed

OP3.9-4

THE LAFA MODEL

Jacobsson Elin M (Stockholm County AIDS Prevention Programme), Waller Olle (Stockholm County AIDS Prevention Programme)

Introduction: Lafa is a regional method and knowledge centre for people working with sexuality and sexual health in the Stockholm area. Main goals are to prevent HIV/STIs and unwanted pregnancies among the target groups young people, MSM, immigrants and primary care patients. Lafa works to promote sexual health and wellbeing based on a salutogenic perspective. Lafa has developed a comprehensive strategy- the Lafa model- containing various components aimed to support professionals working with the target groups.

Action: The Lafa model comprises: * training programme with courses and seminars * handbooks on sexuality education * information centre/library

* reports and documentation * «Insight» magazine on HIV, sexual health and sexuality education * websites * distribution of free condoms * statistics on births, abortions, HIV/STIs * mentoring and support Outcome Evaluations show that professionals who participated in the training programme and used the handbooks found this useful for their work with sexuality education. The handbooks are used by schools, youth clinics, NGOs all over Sweden. The Insight magazine reaches 12000 professionals and the website lafa.nu has approximately 40000 visitors monthly. More than 1 million condoms are distributed to youths through schools, youths clinics and NGOs yearly.

Discussion and recommendations: Sexuality education is essential for sexual health and safer sex practices and professionals need knowledge, efficient methods and support in their work. A comprehensive model implemented on regional level can provide for this need.

References: Olsson H, & Lagergren U. (2001) *Följ tråden!* Stockholm: Lafa KAN, Kommunikationsanalys AB. (1991) *Når budskapet ut?* Stockholm: Lafa

Conflict of Interest: None disclosed

Financial Support/Funding: Not applicable

OP3.9-5

NEW FRONTIERS IN FORENSIC SEXOLOGY

Merriman Gareth (Curtin University)

The term Forensic Sexology has been used in literature for over three decades, yet rarely has there been clarification of the term or work within this area. Often the term is associated with criminal investigation, legal, psychological and psychiatric work as specialised practitioners in these fields often deal with assessment and legal aspects of sexuality – often sex offending. Yet Forensic Sexology is far more than this. Contemporary use of the word ‘forensic’ refers to the application of scientific principles and practices in the establishment of understanding and facts. While investigative TV shows (CSI, SVU, NCIS, etc) have highlighted the work of analytic and forensic skills in dealing with sex crimes, the area of forensic sexology is often only associated with sexual crimes against a person or animal, or being outside the ‘normative behaviour’ expected in a society; eg certain sexual expression. Forensic Sexology is anything that is related to laws and sexuality, human sexual rights, investigative aspects of sexual behaviours and the analysis of human sexual behaviour within the context it occurs. It is the establishment of evidence that is presented to a decision making forum for action. This presentation will provide a greater clarity of Forensic Sexology by discussing new frontiers of sexology that need to be from a Forensic base to provide the best evidence for action. The presentation will also discuss training in Forensic Sexology for different professional groups and as a tertiary program being conducted at Curtin University, Perth, Western Australia, that was established in 2000.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP3.9-8

PEER APPROACH KEY TO IMPROVING COMMERCIAL SEX WORKERS’ (CSWS) SEXUAL HEALTH.

Kisitu Godfrey (Rakai Community Development Trust (RACDET), Nambi Elisha (Millennium Development Consult), Mbidde ssenyondo M (Rakai community Development Trust), Nelson Semambo (Millennium Development Consult), Simon Ddungu (Rakai community Development Trust)

Issues: Many programs only provide information and condoms, a few employ approaches that control and contain HIV/STD’s among CSWs through clinical services, IEC and condom promotion as well as peer education.

Description: Rakai Community Development Trust (RACDET) learned that CSWs were the best agents for change to fight HIV/AIDS among themselves. This strategy required many changes in the lives of CSWs and their working conditions. Their human dignity had to be recognized, their occupation accepted as a valid option and hence they had to value their lives and look forward to a meaningful future as legitimate citizens in a healthy society. Given the asymmetrical power relations within the sex industry and the women’s social exclusion, the only way CSWs could gain greater control over their own bodies, sexuality, income, health and lives was through mutual support, collective bargaining and united action.

Lessons learnt: Beyond condom social marketing, the following elements should be addressed as well; ? Establishment of good links with community resource persons to win acceptance and CSWs trust. ? Peer involvement is a key strategy for successful project development. ? Making the project permanent allows a functional referral system ? Employing participatory approaches provides a basis for hopeful perspectives for the future. ? Adopting a service package contributes to the personal development of CSWs.

Next steps: Ownership of services and assets ought to be effectively transferred to CSWs’ communities themselves to foster sustainability

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

ORAL PRESENTATION SESSION OP3.10

Sexual education: miscellaneous

OP3.10-1

CHILD SEX ABSTRACT

Mwangi Julius N (Kiambu United Against Drugs & HIV/AIDS. (kuadha))

Children have the same range of sexual thoughts, attitude, feelings, desire, fantasy and activities as any other age group. However the child sexuality has often been seen as a problem. Sex education is sometimes withheld, even though children experience sexual abuse at a higher rate than the rest of the population. There is that sexual preferences and the associated sexual fantasy show up early and stabilize during further development.

ment. Isolated report by homosexuals about their childhood says that they were aware of their affection to the same sex or to a certain age group and had corresponding fantasias. Sexual fantasias among 8 or 9 years old might take form known to adult. Sex play with older children is also common. Some is pleasant to the child some is not childrens interest, and curiosity about sex may be exploited by older siblings or extended family members and caretakers. Greater peer group activity can lead to group masturbation and sexual experimentation. If children are left unsupervised, sex play will occasionally occur, children may be at increased risk of sexually transmitted infections and unwanted pregnancy if they are not educated about sex. However child sexuality is fundamentally different from adult goal driven, sexual behaviour and imitation of adult behaviors. All children need sex and relationships, education, to explore, enjoy and express their sexuality in positive and healthy way is fundamental. Parent should look out for times when child express interest or curiosity in sex. Research conducted by; Julius Njui Mwangi

Conflict of Interest: None disclosed

Financial Support/Funding: This was conducted through my project (KUADHA) the organisation funded by its members.

OP3.10-2

CULTURE-SENSITIVE SEXUAL HEALTH: SHARING AN EDUCATIONAL MODEL WITH AFRICA

Nudelman Anita, Liss Yonat (ofri International Training Center - MASHAV)

Adolescent sexuality has been of great concern in the last decades worldwide. Due to the decrease in the age of sexual debut, the increase in the age of marriage and a variety of economic and socio-cultural factors, youth tend to have more sexual partners putting them at a greater risk for pregnancy and HIV. Sexual health interventions may not be successful because they are often not based on the specific cultures and dilemmas of the target populations. A comprehensive sexual health and HIV prevention educational model designed for adolescents from different cultural backgrounds in residential schools in Israel was shared with professionals from Africa (Nudelman, 2006). They developed projects based on the cultural and ethnic background of their communities and counties, using innovative participatory activities in order to promote healthy relationships and sexual behavior through motivation, skills development and personal empowerment (Fisher & Fisher, 1998). The training process involved an in-depth group reflection on the complex relations between adolescent sexuality, AIDS and culture in Africa, which were reflected in the educational projects developed, some of which are being implemented in different communities and countries. It is recommended to develop long-term professional collaboration, which will include the mentoring of youth leaders, thus enhancing the project's sustainability. Fisher, W. & Fisher, J. (1998). Understanding and promoting sexual and reproductive health behavior: theory and method. Annual Review of Sex Research 9, 39-77 Nudelman, A. (2006). Culturally-significant sexual health education for adolescents: an anthropological challenge. Practicing Anthropology, 28(3), 12-15.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP3.10-3

WANTED SEX: WOMEN DESIRE VS SOCIETAL NORMS

Kambona Caroline A. (Family Health Options Kenya)

Wanted sex or "good" sex is a concept that has never attracted the concern of many programmers, researchers and policy makers. Majority of interventions seeking to address sexual and reproductive health and rights (SRH & R) have often focused on the consequences of what is considered as "bad" sex such as unplanned pregnancies and HIV among others. The tendency to stress problems related to sexuality pose a risk to reinforcing negative stereotypes to sexuality across generations. Young Men as Equal Partners (YMEP) programme in Kenya has been partnering with young men for gender oriented Sexual and Reproductive Health and Rights in an intervention targeting young men (10-24 years) in and out of School. This paper reflects on the benefits to young women from this ongoing intervention. The Author recognizes the need for a comprehensive gender oriented sexuality education approach that identifies the centrality of sexuality in addressing SRH & R concerns. It underscores the underlying idea that men have absolute power in sex and express authority to make all decisions while women are just recipient and submissive to male authority as a notion that has been perpetuated by societal norms. The paper therefore seeks to open dialogue in understanding women plight in regard to sexuality within a male dominated (patriarchal) society.

References: Jolly, S (2006), 'Not So Strange Bedfellows: Sexual Rights and International Development', in 'Women's Rights and Development', special issue with AWID, Development 49.1. www.eldis.org/health/srhr/

Conflict of Interest: None disclosed

Financial Support/Funding: Sida

OP3.10-4

THE RIGHT TO SEXUAL HEALTH INFORMATION; ENGAGING THE PUBLIC IN NIGERIA THROUGH THE USE OF PRINT MEDIA

Garba Aminu M (Community Health and Research Initiative, Kano, Nigeria)

Introduction: For 6 years now, I have maintained a weekly Health Interactive column in a national daily newspaper in Nigeria 'Daily Trust' that provides factual information to readers on diverse range of health problems. Although the column's commitment is to address readers' health concerns, however analysis of the page showed that over 80% of the questions asked were related to Sexual/Reproductive Health Problems Objective of the paper 1. To present 6 years analyzed data of the Health Interactive Column that revealed readers demand to sexual health information. 2. To engage the participants on the rights of the Nigerian public to sexual health

information and measures that will address such rights

Methods: A method adopted was to allow readers to ask relevant questions. With respect to analysis, the author used MS Excel, developed frequency tables and charts for presentation.

Results: 72% of the people asking questions were within the age bracket of 18-35 years. Over 80% of questions asked by readers were related to Sexual Health Problems and the column on weekly basis could only cater for 25% of the total questions asked due to limited space. Readers apart from asking questions also demanded to be counseled one-on-one by the author or referred to a sexual health counselor and/or therapist.

Conclusion: The demand by the Nigerian public especially young people to Sexual Health Information is overwhelming and cannot be neglected. It needs concerted effort by the government and development partners to bridge that gap.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP3.10-5

VULNERABILITY OF YOUTH TO SRH ISSUES AND ROLE OF RELIGIOUS LEADERS AND INSTITUTION IN ADDRESSING THESE ISSUES IN MUSLIM CULTURE

Ullah Ahmed (Balochistan Rural Support Program (BRSP))

Introduction: Pakistan has the largest cohort of young people in its history, estimated as 25 million (15-24) and subsequent cohorts are projected to be even larger. Sexuality education is a taboo and sensitive topic. Lack of risk awareness and poor understanding of sexual and Reproductive Health problems at all levels; especially where Adolescents are caught in the web of ignorance, discrimination, frustration and confusion in conservative cultural and religious environment; is one of the major problems in Pakistan, consequently make Adolescents vulnerable to SRH problems.

Action: Recognizing the dearth of attention towards youth SRH problems, EC/UNFPA/RHIYA project has been implemented in remote and conservative areas of Pakistan. Project focused on advocacy SRH interventions, mobilization and capacity building of religious leaders/institution and other influential through culturally appropriate approaches to create a supportive environment for SRH. Youth Friendly Centers are established in religious schools and quotations from Quran and Hadith are used in IEC material

Outcome: Increased political, community and family support for adolescent sexual and Reproductive Health interventions; Increased awareness and improved ASRH knowledge among adolescents; Improved access to quality adolescent-oriented services; Enhanced planning and managerial capacity among Government and local NGOs in the provision of ARH information and services

Discussion and recommendations: Even in extremely challenging environments, progress can be made on addressing SRH, where a careful, culturally sensitive approach is taken. Involvement of the local community and religious leaders can have added spin-offs

References: Districts ex-

penditure review Project tracking/reporting system Annual-reports

Conflict of Interest: None disclosed

Financial Support/Funding: European Commission

OP3.10-7

SOCIO-ECONOMIC-CULTURAL REALITIES AND HIV/AIDS VULNERABILITY: A STUDY ON STREET BASED SEX-WORKERS OF RAJSHAHI CITY OF BANGLADESH

Panday Pradip Kumar (University of Sheffield)

Introduction: Although the infection rate among the sex-workers has crossed over 1% in Bangladesh however, due to different socio-economic and cultural the street based sex-workers (SBSWs) are vulnerable to HIV/AIDS. The main objective of this paper is to find out the socio-economic-cultural issues that make the SBSWs vulnerable to HIV/AIDS infection.

Methods: For conducting the study SBSWs of Rajshahi City Corporation has been selected as the case. One hundred SBSWs (25 from each thana) were interviewed purposively from April 2008 to June 2008.

Findings and Discussions: SBSWs are really risky for the transmission of HIV as they seldom use condoms as to protect themselves from the disease. Almost half of the SBSWs are married and less than 40% have been using condoms with customers during the last month of the interview although the customer turnover rate is more than 4 per SBSW. Moreover, less than 30% of the respondents use to have their HIV test in the last year although it is free in some clinics and hospitals. Almost 50% of the sex-workers are found who do not want them to be exposed to general mass. The result shows that SBSWs are really vulnerable in the rapid expansion of the disease and suddenly the prevalence rate can cross over the epidemic level which might be disastrous for the poor country.

Recommendations: Awareness building, employment generation through micro-credit programmes and empowerment of the SBSWs are necessary to control this disease effectively.

Conflict of Interest: The feedback would help me to write up my dissertation.

Financial Support/Funding: Doctoral Research under Overseas Research Scholarship Scheme

ORAL PRESENTATION SESSION OP4.1
Sexuality and HIV I

OP4.1-1

HIV-RELATED RISK BEHAVIORS AND PROTECTIVE STRATEGIES OF TRANSGENDER MEN WHO HAVE SEX WITH NON-TRANSGENDER MEN

Sevelius Jae M (University of California, San Francisco)

Background: Little is known about distinct HIV/STD risks/prevention needs of female-to-male (FTM) transgender people. Reported HIV prevalence rates range from 2-3%; however, these studies predominately included men identified as heterosexual (transmen who have sex with women). Anecdotal evidence suggests a significant subgroup of transmen that engage in high-risk sex with non-transgender men ('transMSM').

Methods: Participants across the United States were recruited via transgender-focused conferences, listserves, and snowball sampling methods. Quantitative surveys (n=45) and qualitative interviews (n=15) were conducted to explore transMSM's HIV-related risk behaviors, protective strategies, and perceptions of impact of transgender identity on sexual decision-making/negotiation of safer sex with non-trans MSM.

Results: Participants reported diverse sexual orientations and risk behaviors, including unprotected anal and vaginal sex with non-transgender men, substance use during sex, and sex work. HIV prevalence was 2%. Reported risk factors included barriers to negotiating safer sex with non-transgender men, such as unequal power dynamics, low self-esteem, and desire for inclusion in gay male communities. Protective strategies included meeting partners online to facilitate disclosure of transgender status and negotiation of safer sex, and participation in transgender men's communities.

Conclusion: Current risk behaviors could lead to a significant rise in HIV prevalence among transMSM. Protective strategies must be better understood to reinforce them in prevention efforts. HIV prevention programs, especially those prioritizing gay men, need to tailor messages to include issues unique to transMSM and their non-trans male partners.

Conflict of Interest: None disclosed

Financial Support/Funding: This research was supported by the Center for AIDS Prevention Studies at UCSF, grant # P30 MH062246-06, funded by the National Institute of Mental Health (NIMH).

OP4.1-2

HIVAIDS, STIGMA, AND PREJUDICE: HEALTH PROVIDERS AND OFFICIALS IN BANGLADESH

Ullah AKM Ahsan (University of Dhaka, Bangladesh)

Background: Stigma and prejudice extend its reach to people associated

with HIV positive people such as health providers, hospital staff, as well as family and friends. Studies demonstrate that, in low income countries, especially in South Asian and Sub-Saharan Africa, health providers' view toward the HIV positive is not very much different from the general population.

Methods: The study has been qualitative in nature and conducted among health providers such as doctors and nurses attached to different hospitals. The study was conducted from March 2004 to May 2005.

Results: The study shows that 80% of the nurses and 90% of the doctors' behaviour with the HIV positives were discriminatory. They were found talking to their patients standing far from them. The interview further revealed that the spouses of the doctors and nurses in charge of the HIV positives have been putting pressure to stop serving the patient or even quit the job. The notion that HIV is only transmitted through sexual activities is prevalent among them. Therefore, their fear of being infected makes them discriminate against the HIV positive.

Conclusions: HIV related stigma remains a barrier to effectively fighting this pandemic. Fear of discrimination often prevents people from seeking treatment publicly. There are evidences that they were evicted from home by their families and rejected by their friends and colleagues. The stigma attached to HIV/AIDS can extend into the next generation, placing an emotional burden on those left behind.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

OP4.1-3

WORKING WITH YOUNG MEN IN THE FIGHT AGAINST HIV/AIDS

Cui Qi (Uppsala University)

Although it is well acknowledged that men and boys play vital roles in shape the future of HIV prevention, there are few efforts to work with young men directly as equal partners. Until recently, young men have been neglected in Sexual and Reproductive Health and Rights (SRHR) and HIV/AIDS prevention work in East and Southern Africa. With the aim to explore the relations between HIV/AIDS, masculinity and sexuality among young men to suggest new approach stop the epidemic in East and Southern Africa, The research used YMEP (Young Men as Equal Partners) programme as case study through literature review, semi-structured interviews, observations and group discussions with programme officers, various stakeholders and beneficiaries in the YMEP programme. The research examines the factors around the construction of masculinity in relation to sexuality, analyzes what makes young men vulnerable to HIV infection and transmission and discusses how to work with young men towards changing behaviours, transforming masculinity, improving the relationship and sexual health of both young men and women. The research confirms the transformation of notions of masculinity is crucial to change attitudes and behaviours of young men. Programmes should address positive and right-based

sexuality education instead of negative approaches to only address the diseases and risks. The role models from young men should be encouraged to influence peers in their behaviours and community in changing norms. Women should be included rather than leaving outside in the approach of male involvement in effective HIV/AIDS prevention.

Conflict of Interest: there are no any potential conflicts of interests
Financial Support/Funding: this is independent research for academic purpose, with no fundings from any sources.

OP4.1-4 IN SEX WE TRUST

Larsdotter Suzann (Rfsl Förbundet), Sandin Niclas (Nma), Björk Blomkvist Mikael (Rfsl Förbundet), Jonsson Mikael (Rfsl-Förbundet)

The purpose of this study was to explore the emotional needs behind decisions around safer sex among men of have sex with men, MSM. Behind shallow explanations of unprotected anal intercourse like “I was drunk”, “We didn’t have any condom”, and “He looked healthy” lies deeper explanations. The study gives us a deeper understanding of what hinders, but above all what motivates, MSM to use a condom during anal intercourse. This gives a good opportunity to have a positive approach to advocate condom use, e.g. in motivational interview, group-interventions and campaigns. The study used the patented ZMET? method, the Zaltman Metaphor Elicitation Technique, a qualitative interview- and analysis method developed by prof. Gerald Zaltman at Harvard Business School in Boston, USA. The method reaches both rational and emotional thinking, but feelings and emotions are more easily explored compared to more traditional methods of research. Instead ZMET? extracts the deeper needs and incentives that affect behaviours. The outcome of our study is that MSM wants sex to be carefree, trusting and a little forbidden. The condom is used to relieve anxiety, follow your own principles, show respect and consideration and to increase the freedom to have sex. MSM refrain from using a condom because it prevents trust, create rules, damages the ideal of sex, takes away the feeling of intimacy and creates an interruption. The motivators of condom use will vary in strength for each individual, depending on social contexts, relations with partners and the situation as such.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

OP4.1-5 ISSUE OF HIV/AIDS AND RESPONSE OF ISLAMIC RELIGIOUS CENTERS

Jamil Muhammad Jamil (Hesjiwe NGO), Jamil Muhammad Jamil (Hesjiwe NGO), Mahmood Qureshi Mubashir (Hesjiwe)

Issue/Background: Islamic charities provide health, education and social services to millions of people in Pakistan. But in Pakistan still sexuality is

a taboo topic. Strong hold of religious leaders on socio cultural pattern of community (attitude with extremism). Prevailing concepts to talk about sex considered as act of vulgarity and immoral activity. Word HIV/AIDS conceived as symbol of sexual delinquencies.

Method: Through a Questionnaire data on knowledge, attitude, behavior and practices related to STIs/HIV/AIDS was collected from 1200 male religious students and religious scholars from randomly selected Islamic religious centers. Baseline knowledge, attitude, acceptability of the concept were assessed.

Activities/Results: According to KABP study 70% students have friends of opposite sex and due to strong religious values and restriction 30% have no friendship with opposite sex. Regarding nature of sex, 40% had kissing and only 18% had intercourse. During intercourse only 3% used condoms. 42% consider that condom is used only for family planning purpose. 56% answered that during intercourse use of condoms reduce sexual pleasure and enjoyment. 32% youth use drugs and 38% did not know about HIV/AIDS. General discussions were also started with four Maderssas students and their teachers. These meetings addressed the sensitization of religious scholars to the issue of HIV/AIDS and highlight the role of Maderssas in HIV prevention.

Conclusions/Recommendations: Training of adolescent as peer educators is recommended. Ours being an Islamic society, such information should be given to youth in a way that does not challenge local norms and values. Problem-based learning and participatory education for improving knowledge and

Conflict of Interest: None disclosed
Financial Support/Funding: Balochistan AIDS Program pakistan

OP4.1-6 YOUNG WOMEN LEADERSHIP ACADEMY, ZAMBIA

Katuta Chilambe (Youth Vision Zambia), Mwale Amos (Youth Vision Zambia)

Introduction: Young people, especially young women in Zambia, remain at the periphery of decision-making mechanisms and other areas of national development. The majority of young people in Zambia are sexually active however, many of them lack the information and means to adequately address their reproductive health needs, mitigate unplanned pregnancies and protect themselves from sexually transmitted infections (STIs) including HIV and AIDS Approach The Young Women’s Academy aims to address issues of gender inequality by developing the skills of young women. The newly trained young women will be encouraged to develop personal action plans, to which they will be held accountable, and supported in implementing. The objective is to begin to develop a network of young women that are empowered with knowledge to be effective leaders within their own communities, who in turn will be instrumental in bringing about change within their own communities.

Findings and Discussion: Through this institute, the young women will be able to find support, provided with networking opportunities, and to

build a knowledge network that can be called upon/ and effectively participate in decision-making processes, and other government policy making processes. •Young women empowered with knowledge and skills in leadership, HIV/AIDS, SRH, and advocacy •Young women are able to integrate effective skills into their work •Effective national advocacy campaign by young women, through youth-adult partnerships •Voice of young women – provide added value in the planning and implementation of youth-related Zambian national development policies

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

ORAL PRESENTATION SESSION OP4.2

Sexuality and HIV II

OP4.2-1

INTEGRATING HIV/AIDS TREATMENT INTO REPRODUCTIVE HEALTH CARE IN NIGERIA: EXPERIENCES OF PRIVATE SECTOR PROVISION OF CARE FOR RAPE VICTIMS

Obi Helen C (Women's Health and Action Research Center (WHARC)), Ojobo Sylvester (Ponders End Clinic, Benin City), Okonofua Friday E (Women's Health and Action Research Center (WHARC))

Rape is increasingly becoming prevalent in Nigeria and is a known risk factor for the acquisition of HIV/AIDS. Private medical practitioners are the providers of essential reproductive health care for victims of rape in Nigeria. The objective of this study was to review all cases of rape managed at three private clinics in Benin City over a five year period and to report on the exposure of the victims to HIV/AIDS. The victims were offered emergency contraceptives to prevent unintended pregnancies and all were confidentially counseled, tested and treated for HIV/AIDS as appropriate. Data relating to their socio-demographic characteristics and the results of clinical management, including HIV testing were obtained and analyzed. A total of 142 women who reported to the clinics during the period as having been raped were reviewed. The women were aged 14-29 years (Median age=17 years). Over 85% of the women were single; 60% were in school; while 25% were engaged in menial jobs. All women reported having been raped; 87 through single violent encounters, others experienced gang rape. All women were offered confidential counseling and testing for HIV/AIDS. Of the 113 tested, 6 tested positive. Only 87 among those who were negative returned to repeat HIV testing after six months. Among this later group, four women tested positive for HIV. We conclude that there is need to integrate HIV/AIDS counseling, testing and treatment into reproductive health care provided to women who have experienced sexual violence in Nigeria.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP4.2-2

CARVING THE FUTURE: PREVENT TODAY'S YOUTH FROM BECOMING TOMORROW'S HIV VICTIMS

Diarsvitri Wienta, Hull Terence, Utomo Iwu, Neeman Teresa, McDonald Peter

Introduction and objectives: Papua and West Papua Provinces have the highest prevalence of HIV/AIDS among all provinces in Indonesia. Also, reports of high risk sexual behaviour in the Papuan community, including having multiple partners and starting sexual relationships at an early age, have motivated researchers to introduce a sexual education for young people in the two provinces. To date, little is known about the sexual knowledge, attitude and behavioural intentions of young people in the two provinces. This study's objective was to evaluate the effectiveness of the Responsible Choice Education Program in changing knowledge, attitude and behavioural intentions associated with HIV and sexuality. The research was carried out between February and May 2009.

Method: Sixteen senior high schools in Papua and West Papua Provinces, Indonesia agreed to participate and were randomized to either receive the Responsible Choice Education Program or act as a control group. Subjects were students in year 11, aged 17 years and older. The students in both groups took a pre-test and a post-test (two months later) to assess their knowledge, attitude and behavioural intentions associated with HIV and sexuality. Changes in knowledge, attitude and behaviour intentions were compared between the two groups using a mixed model to account for the cluster randomized design.

Conflict of Interest: None disclosed

Financial Support/Funding:1. The Australian Demographic and Social Research Institute 2. Directorate General of Higher Education, Ministry of Education, Republic of Indonesia

OP4.2-3

RELATIONSHIP BETWEEN SEXUAL RISK BEHAVIOR WITH STDS AND AIDS OF MALE ADOLESCENTS

Pinyaphong Jakkrite (Uttaradit Rajabhat University)

Introduction: Sexual risk perception has relation to risk behavior which effect to STDs and AIDS occurrence.

Methods: The sample included 30 Thai male adolescents aged between 18-24 year derived from snowball sampling method. The data was collected by in-depth interview together with non-participant observation and analyzed by content analysis.

Finding and discussion: The results revealed that sexual risk behavior of male adolescents were not using condom at their first sexual encounter or irregular use of condom, incorrect use of condom, condom turn out during sexual encounter, and having multiple sexual partners. The decision of using or no use condom depended on groups of sexual partners which led into trust. Male adolescents preferred to use condom for prevention pregnancy

more than preventing of the STDs. The risk perception towards contracting STDs of male adolescents was found to be low. Most of them knew only the kind of diseases but did not know their symptoms and route of transmission. When the sampled male adolescents having sexual health problem, they accordingly sought self-care which bought about drug resistance and disease transmission to their respective partners.

Recommendation: Adolescents should be changed the present attitudes among both male and female adolescents that condom use between lovers means distrust and also dissemination of knowledge about STDs. The pattern of sexual health services were adjusted to respond with the demands of the adolescents.

Reference: Douglas, M. & Wildavsky, A. (1983). Risk and Culture. California : University of California Press.

Conflict of Interest: None disclosed

Financial Support/Funding:National Research of Thailand

OP4.2-4

REFLECTIONS ON THE “SWISS CONSENSUS STATEMENT” IN THE CONTEXT OF QUALITATIVE INTERVIEWS WITH HIV-DISCORDANT HETEROSEXUAL COUPLES

Persson Asha Sofia (National Centre in HIV Social Research, University of New South Wales)

Introduction/Method: In 2008, a group of Swiss scientists [1] concluded that people with HIV who are on effective antiretroviral therapy and have an undetectable viral load are sexually non-infectious and can safely practice unprotected sex under certain conditions, a statement that contradicted 20 years of HIV prevention messages. This presentation reflects on the polarised international response to the Swiss statement in the context of interviews with HIV-discordant couples participating in the first qualitative, longitudinal cohort study of people living heterosexually with HIV in Australia [2].

Findings and discussion: The Straightpoz study found that unprotected sex was common among heterosexual HIV-discordant couples, with many relying on alternative risk-reduction strategies, including an undetectable viral load. However, it was difficult to ascertain to what extent undetectability was a driver of unprotected sex or simply worked to reassure couples that what they were already doing was relatively safe. Indeed, sexual practices appeared far more driven by complex emotions and gender dynamics.

Recommendations: Alongside the scientific controversy over the Swiss statement, there needs to be a debate about its real-life significance and about the ethics and implications of informing HIV-discordant couples about the statement.

References: [1] Vernazza et al. (2008). HIV-infected persons on effective antiretroviral therapy (and free of other STDs) are sexually non-infectious. *Bulletin des Médecins Suisses*, 89, 165–169. <http://www.pinktherapy.com/downloadables/1cpc/4threwrite.pdf> [2] Persson et al. (2009) Men and

women living heterosexually with HIV: The Straightpoz study, Volume 2, National Centre in HIV Social Research, UNSW.

Conflict of Interest: There is no conflict of interest

Financial Support/Funding:This research is partly funded by the Australian Commonwealth Department of Health and Ageing and partly by NSW Health

OP4.2-5

AIDS TELLING: THE DELIVERY OF BAD NEWS

Stiles Beverly L. (Midwestern State University), LaBeff Emily E. (Midwestern State University), Clark Robert E. (Midwestern State University)

Medical advances have dramatically slowed the progression of HIV infection to AIDS, resulting in more individuals now surviving and living longer with HIV. Stigma attached to this disease means that those infected are devalued and may experience prejudice and discrimination. Fear of these negative consequences means that many will engage in strategies or tactics as protective measures. One recognized protective measure is the control or management of the disclosure of one's status. The goal of our research is to examine the disclosure and receipt of the news of one's positive HIV status. This research continues and extends prior research on the “delivery of bad news”. We have gathered data using qualitative research methods. The data come from semi-structured, in-depth interviews and focus groups, totaling 70 individuals, both males and females. The interview data were coded and analyzed following standard qualitative strategies. Findings suggest there are indeed a variety of strategies employed. There are differences in who one tells and why. Findings also suggest that part of the delivery message usually involves discussion of how the virus was contracted. Messages also tend to change over time. Furthermore, there are disclosure differences between those who have been recently diagnosed as opposed to those diagnosed longer. Often the disclosure process involves taking care of the recipient of the bad news. Recommendations are for those who counsel individuals to understand these issues and the ramifications of disclosure. Moreover, we need to further understand stigma and its role in nonadherence to medical regimens.

Conflict of Interest: None disclosed

Financial Support/Funding:Midwestern State University in Wichita Falls, TX (USA).

OP4.2-6

RISING HIV INFECTION DIAGNOSES AMONG MSM IN FLANDERS, BELGIUM : THE ROLE OF SEXUAL NETWORKS AND THEIR RESPECTIVE PREVENTION CULTURES

Vanden Berghem Wim (Ghent University), Vincke John (Ghent University)

Introduction: Sexual risk behaviour among in Flanders, Belgium has increased. This finding is not isolated, but internationally recorded. The rea-

sons are situated both on the individual and social structural level. However, research at the latter level is minimal. The present study is a first qualitative, explorative phase of a large scale research project into the sexual lives of MSM that attempts to combine both levels in developing a more social structural theoretical basis for MSM sexual risk taking and HIV/STD prevention. Social networking plays a role in MSM sexual risk taking. Different social networks imply different sexual tastes. Membership of such a sexual taste community influences the individual's risk behaviour profile eventually the possibility of sexual risk taking. This study investigates in what way membership of different sexual taste communities influence the individual's sexual risk behaviour profile.

Method: Ethnographic individual interviews were conducted among 30 MSM from different sexual taste communities and socio-demographical backgrounds. Findings and discussion We found evidence for differences in sexual risk behavior, namely a sexual risk behaviour profile, according to membership of a specific sexual taste community. Moreover, dependent on the different subcontexts, different social epidemiological dynamics could be perceived.

Recommendations: These results already give an indication of possible implications for future community oriented HIV/STD's prevention campaigns among MSM.

Conflict of Interest: None disclosed

Financial Support/Funding: Flemish Fund for Scientific Research

violence only and 22.4% both physical and sexual violence. Attitudes towards wife beating and prevalence of violence significantly ($p < 0.001$) varied with husband's education, place of residence, economic status, husband's premarital and extramarital sexuality. The multivariate logistic regression yielded significantly ($p < 0.001$) increased risks for positive 'attitudes towards wife beating' and for physical and sexual violence among young husbands, lower educated, rural and Muslim husbands, the poor and who had had premarital and extramarital sexual relationship.

Conclusion: Wife battering is a common phenomenon and deeper malaise in the patriarchal society of Bangladesh. Awareness should be created to assure that future generations will not experience violence to the extent that contemporary Bangladeshi women are doing.

Conflict of Interest: None disclosed

Financial Support/Funding: This research was conducted with my own finance.

OP4.3-2

COURAGE, CURIOSITY, ENGAGEMENT - GROUPTHERAPY WITH SEXUAL OFFENDERS SENTENCED TO FORENSIC PSYCHIATRIC CARE

Möller Nina (Department of Psychology, University of Gothenburg, Sweden), Möller Nina (Department of Psychology, University of Gothenburg, Sweden)

Introduction: Sexual abuse is an act that provokes hateful reactions, and few crimes are as shameful and despised. If the perpetrator is a parent, the incest taboo is violated, which provokes even stronger feelings. "Incarceration" might seem to be a proper punishment; however, it can be disputed if this is the best consequence. Offering sexual offenders the opportunity to work through their experiences and difficulties might in fact reduce recidivism. The aim of this study was to examine how rapists and child-molesters experienced group-therapeutic treatment inside a forensic psychiatric clinic and the group-therapists' experiences which factors, were helpful in treatment.

Method: Empirical data consisted of audio-taped, transcribed, and de-masked individual- and focus-group interviews with group members as well as with therapists. The transcripts were analyzed according to both inductive and deductive thematic analysis (Braun & Clarke, 2006).

Findings and discussion: A recurrent theme was the group-members' wish to have therapists whom were open about themselves, cared, dared to ask and listen, trusted in the group-members' capacity to change, and allowed the members to talk about their perpetrations. These components resulted in a group-climate characterized by trust, honesty, and coherence. Furthermore, the group-members wanted deepened discussions about consequences for victims.

Recommendations: It seems that important factors in treatment of sex offenders are the therapists' ability to be flexible, able to contain "disgusting" material, and offer an opportunity to repair internal working models.

ORAL PRESENTATION SESSION OP4.3

The sexual offender

OP4.3-1

MENS' ATTITUDES AND PREVALENCE OF WIFE BATTERING IN BANGLADESH

Kamal S. M. Mostafa (Assistant Professor, Department of Mathematics, Islamic University, Kushtia-7003, Bangladesh)

Introduction and objectives: Intimate partner violence (IPV) is globally recognized as a violation of basic human right and public health concern. This study is an endeavour to understand men's self reported attitudes towards wife battering, prevalence and underlying factors associated with IPV in Bangladesh.

Data and methods: The study used nationally representative 2004 Bangladesh Demographic and Health Survey data. Detailed information of 2,740 currently married men were elicited. Both quantitative and qualitative statistics have been used to examine underlying factors affecting 'justification of wife beating' and IPV perpetrated by husband.

Results: 55.4% of the respondents opined in favour of 'justification of wife battering'. 77.6% reported to have had inflicted violence against their wives in the last year, with reporting 46.6% physical violence only, 4.6% sexual

References: Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

OP4.3-3

A STUDY OF THE PREVALENCE OF PEER SEXUAL HARASSMENT AND COPING MECHANISMS AMONG STUDENTS IN A NIGERIAN UNIVERSITY

POPOOLA BAYODE ISALAH

Sexual harassment in schools comprises a wide range of unwelcome and sexually offensive behaviours that contribute to hostile learning environment. Though sexual harassment of students by staff has received substantial research attention in Nigeria, not much attention has been given to sexual harassment of students by their colleagues. This study was designed to investigate the prevalence and nature of peer sexual harassment among female Nigerian university students. It also examined the perception of students about peer sexual harassment and ascertained the coping mechanisms adopted by victims of peer sexual harassment. Participants consisted of 387 female undergraduate students selected by convenience sampling from three Faculties at the Obafemi Awolowo University. A self-constructed instrument with a test-retest reliability coefficient of 0.79 was administered on students to collect data on their experience and perception of peer sexual harassment as well as adopted coping strategies. The results of the study indicated that verbal harassment was the most frequent type of peer sexual harassment experienced by female students. Findings from the study also showed that most victims of peer sexual harassment did not report their harassment to authorities but adopted strategies that did not involve direct confrontation with their harassers. The study concluded that there was the need for a virile counselling programme in all Nigerian universities to stem down the incidence of peer sexual harassment and that such a programme should be targeted not only at victims but also at perpetrators of sexual harassment.

Conflict of Interest: None disclosed

Financial Support/Funding:Self

OP4.3-4

A SWEDISH SAMPLE OF 45 ADOLESCENT MALES WHO HAVE SEXUALLY OFFENDED: BACKGROUND DATA, INDIVIDUAL CHARACTERISTICS, AND OFFENDING BEHAVIOR

Tidefors Inga (Department of Psychology, University of Gothenburg), Goulding Anneli (Department of Psychology, University of Gothenburg), Arvidsson Hans (Department of Psychology, University of Gothenburg)

Introduction and objectives: Previous research has shown that it is difficult to find a typical profile for adolescent males who commit sexual of-

fences. The present study used a broad approach describing a group of adolescent males who sexually offend from different perspectives; background factors, individual characteristics, and offending behavior.

Method: The target group consisted of 45 adolescent males who had committed sexual offences towards children, adolescents, or adults. The empirical data were: intake assessment files, information provided by treatment personnel, semi structured interviews, and self-report questionnaires (The Adolescent Sex Offender Assessment Pack and Beck's Youth Inventories). Comparisons were made with norm data and when norm data was not available, with a comparison group.

Results: Family problems and neglect were common in the target group. Variables like having separated parents, having lived in large families, having been placed in a foster-home, and having parents with addictive problems discriminated the group from the general population of Swedish male adolescents. The target group scored higher than norms regarding anger, depression, and disruptive behavior. They were less open concerning sexuality than a comparison group, and their knowledge about sexuality was lower.

Conclusion: Some characteristics that discriminate adolescent males who commit sexual offences from other groups were identified. However, it was not possible to find a typical profile for the group. They seemed to share the same background problems as adolescents who commit other types of crimes. Therefore, future studies need to explore more specifically how and why problematic backgrounds affect children differently.

Conflict of Interest: None disclosed

Financial Support/Funding:The study was granted by the Swedish National Board of Institutional Care

OP4.3-5

SEXUAL VIOLENCE IN GAY TEENS IN THE METROPOLITAN AREA OF SAN SALVADOR

portillo melendez carlos rene r (grupo neshema), merino naranjo benjamin geovani g (grupo neshema), quijano sanchez jaime alexander a (gay sin fronteras)

Introduction: sexual violence is a phenomenon that occurs when someone of greater economic power, physical and social uses the body of another or his weaknesses with the gratification of aspects of gender and sexual manifestations of psychological and physical aggression. The paucity of statistics on sexual violence among young gay has delayed its recognition as a public health problem, most times there is no record of complaint so that the implementation of laws on legal precepts has not been possible. Based on the foregoing the need arises to meet and discuss leading to the sexual violence of gay adolescents in the metropolitan area of San Salvador to establish prevention strategies and resolutions to the problem.

Methods: A qualitative study through interviews in focus groups and analysis of texts and audio transcribed with 15 gay adolescents who consented to voluntarily participate in low socio-economic contexts, and aged between 13 and 17 years.

Results: Of the 15 young gay interviewees, 8 were diagnosed HIV positive, 3 / 8 HAART use, having suffered abuse as interfamily were forced to live in the suburbs of the city and subsisting through sex work, selling drugs and physical and emotional exploitation of their partners.

Conclusions: To recognize sexual violence in gay youth as a problem of public health, informing and raising awareness among health service to the problem of rape. Implementation of programs on human rights and violence, as well as direct support and / or derivation in cases of sexual violence.

Conflict of Interest: the lack of financial resources makes the investigation to be late for that financial resources were employed themselves for not having sufficient funds for lack of sponsors

Financial Support/Funding: campaña para la convension de los derechoss exuales y reproductivos en El Salvador

OP4.3-6

SEXUAL PREDATORY STYLES OF INCARCERATED SEXUAL OFFENDERS

Mat Saat Geshina A (Universiti Sains Malaysia)

The foundation for this study was the lack of empirical data on sexual predatory styles of sexual offenders in Malaysia. The previous practice was to incarcerate those found guilty of the crime without any categorization of the type of sexual offense or the preferred victim. Recidivism would likely occur as appropriate rehabilitation to safeguard potential victims and to prevent re-occurrence was insufficient. The objectives of the study were to determine the preferences of rapists in selecting victims and to identify the existence of sexual fetishes. The Sexual Behaviour Scale (SBS) and Sexual Fetish Indicator (SFI) were developed for these purposes. The SBS had a reliability of 0.89 and may be able to determine the type of victim preferred. A factor analysis of this scale yielded five components. The SFI had a reliability of 0.92. Factor analysis resulted in three components. 96 male sexual offenders in two Malaysian prisons participated in this study. The majority of respondents were Malay (76%), followed by Chinese (13%) and Indians (11%). Research participants were incarcerated under one of six categories stated in the Malaysian Penal Code (2007). Among the results of the study include differences in sexual predatory styles and fetishes. The results indicate that effective rehabilitation for sexual offenders needs to incorporate an understanding of sexual predatory styles and sexual fetishes in addition to the current scope of the sexual offender rehabilitation programme. This in turn has positive implications on public safety and recidivism rates.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

ORAL PRESENTATION SESSION OP4.4

Late Breaking Abstracts Session

OP4.4-1

A STUDY OF COMMERCIAL ADVERTISEMENTS APPEARING IN SEXUAL HEALTH/MEDICINE JOURNALS

Deshpande Sandip (Porterbrook Clinic, Sheffield), Singh Ashok Kumar (Porterbrook Clinic, Sheffield)

Introduction: Advertisements in medical journals are an important strategy to improve sale of products. The pharmaceutical industry has been criticized for the quality of the advertisements especially with regards to the claims made in them and the fact that they are not evidence based.

Method: We assessed all the advertisements for medications and medical devices that appeared in four popular sexual health/medicine journals in the year 2008. A study proforma was constructed for based on previous papers in this area of research. We independently looked at the claims made and categorized them. For the claims that had references cited, we looked at the accessibility, the validity and the quality of the studies quoted.

Results: We identified a total of 37 advertisements amounting to 88 pages of advertising space. It included 31 advertisements for medications and six for medical devices. There were 10 unique advertisements noted. Only 38% of the claims had a reference quoted, out of which only one reference was accessible.

Conclusion: Advertisements had a poor evidence base to the claims they made. The quality of the references and the limited access to the cited references continues to be a problem. Clinicians should not accept the findings that are cited in advertisements at face value.

Conflict of Interest: None disclosed

Financial Support/Funding: No funding for this research

OP4.4-2

UNDERSTANDING WOMEN'S OPPOSITION TO A MALE CRITIQUE OF CLITORIDECTOMY

Dellenborg Lisen M (School of Global Studies, University of Gothenburg)

This presentation concerns gender varied attitudes toward female genital cutting and sexuality. In Senegal where I did anthropological fieldwork during 17 months between 1997 and 1999, neither men nor women related clitoridectomy to control of female sexuality. In opposition to a general Western understanding of female genital cutting as foremost a male driven practice, most of these Senegalese men, belonging to the Jola ethnic group, expressed deep concern about clitoridectomy and the risk of negative sexual consequences. I found that most Jola women, far from embracing men's critique of the practice, ridiculed and accused them of being more inter-

ested in pleasure than the socialisation of girls, dismissing them as irresponsible and egoistic. At the same time, married women were allowed to take a lover, which they did and often joked about. I argue that local meanings of clitoridectomy, sexuality and Jola women's attitudes towards the male critique has to be understood in relation to the wider socio-cultural and political context marked by gender dissonance. On one hand, adult Jola men are considered superior to women in legal and political domains. Women are constructed as inherently egoistic and quarrelsome, needing to be socialised into docile wives and self-sacrificing mothers. On the other hand, men are accused of being sexually unrestricted, splitting families by favouring a co-wife or a mistress, while mothers are seen as the family nucleus. As circumcised mothers, women enjoy much respect and also have considerable power inside and outside the family realm.

Conflict of Interest: None disclosed

Financial Support/Funding: Sida/Sarec, Nordic Africa Institute, The Nordic Public Health School, Stiftelsen Lars Hiertas minne, KNut & Alica Wallenbergs stiftelse, Paul och Marie Berghaus donationsfond, Hierta-Retziusstiftelsen, Svenska sällskapet för antropologi och geografi, Göteborgs universitet.

OP4.4-3

THE NEUROBIOLOGY OF SEXUAL ORIENTATION

Goldstein Jerome (San Francisco Clinical Research Center)

Introduction and objectives: Homosexuality is a constantly debated issue as to whether it is determined at birth or a choice (nature vs. nurture). The works of the Kinsey Reports and Dr. Evelyn Hooker published in the 1950s resulted in the removal of homosexuality from the DSM4 in 1973. Since then, it has been mentioned as an illness only in the context of being a putative exacerbating factor in anxiety states. Recent studies reveal a clear cut neurobiology to sexual orientation.

Methods: Neurobiologist Simon LeVay conducted a study of brain tissue samples from 41 human autopsies performed at several hospitals in New York and California. He found a significant size difference of the interstitial nuclei of the anterior hypothalamus between homosexual and heterosexual men.

Results: In addition, Dr. Ivanka Savic-Berglund and Dr. Per Lindström of the Karolinska Institute, Stockholm, performed fMRI and PET measurements of cerebral blood flow. Using volumetric studies, they found significant cerebral size differences between homosexual and heterosexual subjects; the brains of homosexual men resembled heterosexual women and homosexual women resembled heterosexual men. Pheromonal studies also have added to the scientific knowledge of sexuality. Sex-atypical connections were found among homosexual participants. Amygdala connectivity differences were found to be statistically significant and provided evidence towards sexual dimorphism between heterosexual and homosexual subjects. Extensive controls were performed during testing to exclude analytical variability.

Conclusion: A totally evidence-based medicine presentation will provide

current data regarding homosexuality showing differences, or similarities, between the brains of homosexuals and heterosexuals.

Conflict of Interest: None disclosed

Financial Support/Funding: none

OP4.4-4

BAREBACK SEX AMONG MSM: A COMPREHENSIVE REVIEW OF THE LITERATURE

Berg Rigmor C (Norwegian Knowledge Center for the Health Services)

The peer-reviewed literature about barebacking, generally understood as intentional unprotected anal intercourse (UAI) among men who have sex with men (MSM) where HIV transmission is a possibility, remains scant and ambiguous. In an effort to synthesize academic work exploring issues surrounding barebacking, a review of peer-reviewed work discussing barebacking was undertaken. To identify studies, a comprehensive electronic search in 7 international scientific databases and a hand search of reference lists were undertaken for peer-reviewed work published since 1990 in English, German, or Scandinavian languages. Included publications were grouped and all relevant data extracted onto an Excel form. Of the 42 academic reports included, all were from the Anglophone world and 22 were empirical projects. The review identified 3 main issues 1) The semantic diversity of the term: Over time, the term barebacking although originally an explicit emic expression has become amorphous. 2) The variable prevalence of bareback sex: Epidemiological data suggest prevalence of barebacking varies across regions, time, and serostatus, but generally, a minority of MSM bareback. 3) Factors associated with barebacking: Factors at the macro-level (e.g. heteronormative ideology), meso-level (e.g. medical advances), interpersonal-level (e.g. relational needs), and intrapersonal-level (e.g. serostatus) converge to influence the likelihood that an individual will practice bareback sex, thus a conceptual framework to examine the reciprocal and dynamic relationships sustaining barebacking is revealing. More research about barebacking is needed and crafting suitable HIV prevention programming for MSM who elect to bareback is a challenge for today's health promotion community.

Conflict of Interest: None disclosed

Financial Support/Funding: None.

OP4.4-5

DETERMINANTS OF SEXUAL BEHAVIOR OF RWANDAN YOUTH: TESTING THE UTILITY OF DOMINANT BEHAVIORAL THEORIES

Uwihangana Consolée (National University of Rwanda), Temmerman Marleen (Ghent University), Van Rossem Ronan (Ghent University)

Introduction and objectives: The use of behavioral theories is said to in-

crease the effectiveness of behavioral interventions, since they explain/predict behavior. A review of HIV risk reduction interventions for youth in sub-Saharan Africa showed that the theories that support these interventions are Theory of Planned Behavior, Health Belief Model and Social Cognitive Theory. The objective of the study is to test the utility of these individual, western-developed theories for understanding/predicting sexual behavior of African youth.

Methods: The study was done in the districts of Bugesera and Rwamagana in Rwanda (March 2009). Twelve secondary schools were selected using specific criteria (size, religious background and urban/rural setting). In these schools all students of the second and fifth year were asked to participate (over 1700 students from 14 to 28 years old). Data collection was done through a self-administered questionnaire in the local language. The questionnaire was based on existing and validated scales and measured individual characteristics, knowledge, attitudes, sexual behavior, determinants of the dominant behavioral theories and possible other determinants (identified through preliminary qualitative research). The questionnaires were read through Optical Mark Recognition software. Data analysis will be done in SPSS using regression analyses to predict sexual behavior.

Results and Conclusions: Results will show to what extent determinants, as identified in the dominant behavioral theories, can be used to explain/predict sexual behavior of Rwandan youth. If necessary, suggestions will be done for adapting the behavioral theories to the specific situation of sexual behavior among youth in sub-Saharan Africa.

Conflict of Interest: None disclosed

Financial Support/Funding: Belgian Research Foundation Flanders (FWO) and Belgian National Lottery

OP4.4-6

EFFECTS OF NON-PHARMACEUTICAL SEXUAL THERAPY IN PATIENTS WITH SEXUAL PROBLEMS

Almås Elsa (University of Agder), Almås Elsa (University of Agder), Brurberg KG (Norwegian Knowledge Centre for the Health Services), Fjeld Wenche, Haaland Wenche, Svendsen Kjell Olav Boren, Sørensen Dagfinn (Private practice), Tollefsen Mary (Norwegian Knowledge Centre for the health services), Aars Haakon (Institute for Sexology and Therapy)

Purpose: A systematic review of the evidence base for non-pharmaceutical sexual therapies for males, females, couples, in illness, physical or mental handicaps and after sexual offences.

Methods: A search in June 2008 retrieved 2805 references that were screened for relevance, critically appraised, and then summarized in narrative and tables. Studies examining the effect of devices and drugs were excluded.

Results: 25 systematic reviews and 32 randomized controlled trials fulfilled inclusion criteria. Sexual therapy seems to be effective when treating lack of sexual response in women (libido, orgasm) and premature ejaculation. The effects seem more pronounced for women than for men, and may be optimized to weekly treatments with partner present. Short interventions

and self-help (bibliotherapy) may also be effective, but not for all patients. Behavioural therapy and desensitization seem to help women with vaginismus, but not women with chronic pelvic pain. Group therapy and psychotherapy have beneficial effects on erectile dysfunction, also if the men use sildenafil. In general, however, it is important to be aware that many studies suffer from methodical limitations (e.g. selection bias), possibly leading to over-estimation of the effect. For some patient groups (e.g. physically or psychologically disabled, many illnesses and gender identity problems) the lack of knowledge regarding effects of sexual therapy is striking, given the high reported prevalence of sexual dysfunctions in these groups.

Conclusions:

Conflict of Interest: None disclosed

Financial Support/Funding: Norwegian Directorate of Health

Abstract Book

MODERATED POSTERS SESSIONS

MODERATED POSTERS SESSION MP1
Sexological sociology

MP1-1
THE RECOGNITION OF SEXUAL AND GENDERED SUBJECT-POSITIONS IN INDONESIA

Wardhani Lynda K (Australian National University)

The Indonesian gays and lesbians have become part of the Indonesian society. Subject-positions are always culturally constructed and as a result have a history. Indonesians do not appear to have started thinking of themselves as gays or lesbians until the 1970s. Subject-positions really took shape in the 1980s and 1990s. However, these Indonesians are still largely ignored by the government. This paper looks at the existing sexual and gendered subject-positions in Indonesia and how the government responds and handles this phenomenon. Gays and lesbians subject-positions have always been linked to national culture and not as a result of intentional state policy. Besides library research, methods used include conducting interviews with representatives of national network of gays and lesbians organizations in Indonesia, NGO activists and related government officials. In fact, the national character of gays and lesbians subject-positions is linked to modernity and mass media. Indonesian gays and lesbians are the New Order's greatest success story. It is the greatest example of a truly national culture irreducible to ethnocentricity. They primarily use culture and mass media to convince most citizens to accept their way of thinking and to be recognized in public. They often do efforts in staking claim to national belonging. The government's policies and programs concentrating on subject-positions issue still need more direction due to lack of understanding and limited awareness. The existence of Indonesian gays and lesbians subject-positions should be respected and recognized as they have their own rights to live positively and

Conflict of Interest: None disclosed
Financial Support/Funding: Australian National University

MP1-2
INOCENT CRIMES: CHANGES IN ATTITUDES TOWARD CHILD NUDITY AND ADULT GENITALS IN THE PUERTO RICAN CULTURE AS AN HISTORIC EXAMPLE OF HOW ECONOMIC AND POLITICAL POWER SHAPES SEX

Estrada Jesús (J E Sexological Studium)

Before the industrialization of Puerto Rico child nudity was commonplace. It was common practice to stimulate the child erotically by fondling or kissing his genitals. Some men could stop halfway in his route to town and expose his genitals to urinate. It was common to see women breastfeeding publicly her babies with uncovered breasts. Sexual approach by marriage at home could be overheard by children because of the overcrowded conditions in which families lived. After industrialization those behaviors are socially banned. Child nudity and to fond or kiss a child's genitals becomes child sexual abuse, to urinate in a place of public access becomes indecent exposure, and breastfeeding mothers exposing their breasts are indecent women. The researcher uses 18th, 19th, and 20th century historic/anthropological evidence, and surveys a small sample of individuals who lived both the pre-industrial and industrialization era of the Island to sustain how for the Puerto Rican of that era the exposure of the male genitals and the female breasts primarily entailed not indecent exposure but the simple and natural expression of human physiological needs, that an adult fondling or kissing a boy's genitals was a mere manifestation of adult affection toward and a way to pamper the child instead of child sexual abuse, to sustain that those cultural changes respond the an economic and political agenda brought by the Island's government at the middle of the 20th century, and to give an historic example of how economic and political power shapes sex.

Conflict of Interest: No potential conflict of interest
Financial Support/Funding: None disclosed

MP1-3
THE COMPLEX ROOTS OF RESPECTABILITY

Margareta Forsberg, PhD in social work at the University of Gothenburg

Introduction and objectives: There is a need to understand how sexual norms, values and patterns of activity, appear in a situation where youths with different cultural backgrounds, live together in a western, modern context (Sweden).

Methods: Observations and interviews were made with three groups of girls in the 8th grade, appr 14 - 15 years old, and four groups of girls 16 - 18 years old.

Results: Observations and interviews show that on the youth arena, the girls are striving to place themselves in the position of "the good and re-

Moderated posters

spectable“. By referring to others as dis-respectable, they can reach higher positions in the youth hierarchy of respectability. The girls charge these discussions with ethnicity. The strongest instrument of control seems to be the rumor, which is used to get and to guard positions in the hierarchy of respectability. When talking about liberal sexual relations the girls show great tolerance but are eager to mark their own respectability. Nevertheless, they exemplify a tolerance significant for (late) modern society’s individualization. The girls’ thoughts about lust and desire and their conception of their parents’ implications on their behavior are also discussed.

Conclusions: In the girls’ ways of thinking, one can trace elements from modernity, pre-modernity and late modernity in a miscellaneous mix. A consequence of this hybridity, is larger tensions between different attitudes within the (young) population. Tensions, that lead to clashes, reinterpretations, reconsiderations and disharmonies in an unpredictable social development. Number of

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP1-4

FROM TRAFFICKING TO HIV/AIDS : STUDY CASE OF IN- DONESIAN COMMERCIAL SEX WORKERS

Wardhani Lynda K (Australian National University)

Girls and women who become the victims of trafficking in Indonesia and serve as commercial sex workers are vulnerable to HIV/AIDS. Even though awareness program on HIV/AIDS has been socialized through information, education and communication (known in Indonesian term as KIE : Komunikasi Informasi Edukasi), the real problem has not been identified by the government and by the commercial sex workers themselves. The society’s awareness towards HIV/AIDS is still insignificant. This paper attempts to reveal the problems faced by commercial sex workers in Indonesia who are transmitted with HIV/AIDS and the government’s efforts in tackling this issue. The data is gathered from interviews conducted with social workers from certain organizations handling trafficking issue as well as with related government officials. One of the most active organizations is the Association of Girls and Women (Yayasan Anak Perempuan). HIV/AIDS prevention and treatment has become difficult because of lack of commitment, inadequate management skills, limited health workers with HIV/AIDS expertise and lack of financial sources. After all this time, HIV/AIDS prevention and treatment in Indonesia has been supported by foreign donors. Funds allocated by the government to prevent and treat HIV/AIDS are still insufficient. The existing HIV/AIDS policy is not gender sensitive and is even patriarchal-biased. It is estimated that the use of condom for self protection from the risk of HIV/AIDS transmission in each commercial sex trade has not reached 10%. Creating awareness on HIV/AIDS is indispensable among commercial sex workers so that they have the rights to control

Conflict of Interest: None disclosed

Financial Support/Funding:Australian National University

MP1-6

EVALUATION OF SEXUAL DYSFUNCTION’S INCIDENCE IN GAY MEN: THE RELATIONSHIP WITH PERSONAL DISTRESS

Cosmi Valentina (Istituto di Sessuologia Clinica), Fabrizi Adele (Istituto di Sessuologia Clinica), Cosmi Valentina (Istituto di Sessuologia Clinica), Pierleoni Luca (Istituto di Sessuologia Clinica), Lembo Donata (Istituto di Sessuologia Clinica)

Introduction: Personal distress may have an important role in the evaluation of sexual dysfunction’s incidence, but this notion has been poorly investigated in the current literature. Even though, the consensus conferences have focused on the need to assume personal distress as a diagnostic criteria. **Approach:** To understand this issue clearly and better, various different theoretical perspectives about sexual dysfunction in gay men were examined. Peer-reviewed articles published between 2001 and 2008 were considered.

Findings and discussion: Very few studies have focused at the aetiology, the prevalence, and the treatment of specific sexual problems in homosexual men. However it is surprising how little is known about personal distress of gay men related to sexual dysfunction. Even if, some studies highlighted how homosexual men have a different perception of personal distress related to sexual dysfunction, if compared with heterosexual men. The limitations of applying conventional models of sexual functioning and classification systems for sexual dysfunction in homosexual men need to be taken into consideration by clinicians and researchers.

References: Sandfort TGM, de Keizer M (2001). Sexual Problems in Gay Men: An Overview of Empirical Research. *Annual Review of Sexual Research*, 12: 93-120. Bancroft J, Carnes L, Janssen E, Goodrich D, Long SJ (2005). Erectile and Ejaculatory Problems in Gay and Heterosexual Men. *Archives of Sexual Behavior*, 34(3): 285-297. Cove J, Boyle M (2002). Gay men’s self-defined sexual problems, perceived causes and factors in remission. *Sexual and Relationship Therapy*, 17(2): 137-147.

Conflict of Interest: The authors have no financial or other potential conflicts of interest in the subjects of the paper.

Financial Support/Funding:There are no fundings for this paper.

MP1-7

QUEER STRAIGHT MEN: RE-IMAGING HETEROSEXUAL MAS- CULINITIES

Heasley Robert B (Indiana University of Pennsylvania, USA), Wecker Neil, Halpern Deborah

This paper presents findings from interviews with heterosexual males in the United States who are consciously dismantling the influence of homophobia and heterosexism in their relationships with other men. Such males “queer hetero-masculinity” (Heasley, 2005) by developing close, intimate same-sex relationships with physical and emotional intimacy. The presentation draws on a photo-narrative project (www.mensfriendships.org), and interviews with males who meet this criteria. Heterosexual males often con-

form to rigid perceptions of hetero-masculinity without questioning the limitations these constructs impose due to fear of punishment which can include loss of status, ridicule, and threat of violence (Connell, 1987), leading to over-conforming to male authority, violence against women and those perceived to be homosexual or transgender. In the U.S. this constructed form of hetero-masculinity leads males to seek females not only for sex, but also for intimacy, physical touch, and emotional support, to the exclusion of developing intimate male friendships. The result for males is to distance themselves from any interactions that may be perceived to indicate same-sex intimacy, as well as devaluing qualities in themselves and other males that are perceived as feminine or associated with homosexuality. This project invites a reimagining of heterosexual masculinity, one that is without homophobia and the devaluing of the feminine that underlies sexism.

References: Connell, R. 1987. *Gender and Power*. Cambridge, MA: Polity. Heasley, R. 2005. *Queer masculinities of straight men: A typology*. *Men and Masculinities*. Sage, 7.3: pp 310-322.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP1-8

HIV AND RISKY SEXUAL BEHAVIOUR OF ADOLESCENTS IN THE CZECH REPUBLIC

Zampachova Marketa

The number of new HIV positive cases in the Czech Republic has been recognised as increasing rapidly every year. There were 122 new diagnoses of HIV positive people in the year 2007. Adolescents are one of the most vulnerable groups because they are at the beginning of their sexual lives. The research Youth and AIDS that was mapping risky sexual behaviour of adolescents towards HIV/AIDS was realized in the years 1997, 2004 and 2008 in the second largest city in the Czech Republic – Brno. The aim of the research was to find out what knowledge of HIV the interviewed adolescents have, and their attitude to AIDS and safe sexual behaviour. Owing to this research we gained unique data sets (time series) which enable us to compare trends over the time. The research method was quantitative and the data were obtained through a survey at high schools in Brno. The results show that the adolescents have a good knowledge of how to behave safely and in most cases show attitudes implying safe sexual behaviour. Nevertheless, they do not behave safely. Approximately 75 % of sexually active adolescents use some form of contraception. However, only 50 % of adolescents use condom in their sexual lives – not because of the fear of getting infected with HIV, but because of the fear of unwanted pregnancy. Czech adolescents have not changed their sexual behaviour and HIV/AIDS has not been a motive for them to change it.

Conflict of Interest: None disclosed

Financial Support/Funding: The research Youth and AIDS was financed by a research grant from George Soros and Masaryk University in Brno.

MP1-9

SEXUAL VIOLENCE WITHIN MARRIAGE: THE CASE OF UZBEKISTAN

Kuzibaeva Gulnara (National University of Uzbekistan)

Introduction: As a result of a cultural taboo, sexual violence in marriage is rarely discussed in Uzbekistan. The objective of this study was to examine the extent of and reasons for sexual violence in marriage in a rural community in Uzbekistan.

Methods: Data were collected from 57 married women and 15 men through ethnographic fieldwork, in-depth interviews and focus group discussions.

Findings: Study revealed that 64% of women were victims of some type of sexual coercion with a husband in their lifetime. Of these women, 10% experienced rape by a husband. Study also showed that there was a direct link between violence and gender-based notions of roles, status and honor. Both men and women perceived violence against women as justifiable. Silence and lack of resistance on the part of women in sex are interpreted as consent, and cultural values often encourage women to accept coercion “voluntarily”. This study also examined the socio-demographic risk factors associated with sexual violence. Low educational levels, reported fear of husband, and lack of awareness on rights were significant risk factors for sexual abuse, adjusting for other relevant variables. Age, parity, length of marriage, place of residence, and consanguinity were not associated with forced sexual intercourse.

Recommendations: There is an urgent need for a comprehensive response to tackling sexual violence. A notion of sexual rights including bodily integrity for improved women’s self-esteem, communication, must form an integral part of programmatic interventions to prevent sexual violence.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP1-10

SEXOLOGY IN ARGENTINA: HISTORY, DEVELOPMENT AND PRESENT

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Introduction: This paper synthesizes a research which describes and analyzes the configuration of the field of sexology in Argentina. The general objective is to contribute to analyze the different moments, dynamics and tendencies within sexology, in relation to the local history and international influences, from the 70’s to the present. The first stage had as specific objective the mapping of sexology in Argentina to identify the constitution and the limits of this professional field. The second stage had as specific objective to explore the professional’s profile and their opinions about key points of the sexology (i.e. use of new sexo-active medications).

Methods: From an interpretative epistemological approach and a qualita-

tive methodological strategy, field work included two techniques: 1) mapping of institutions, courses and faculty (both through Internet and through key informants); and 2) 20 semi-structured interviews with sexologist working in the field.

Findings and discussion: The paper shows that sexology hasn't still had a definitive epistemological status: some professionals define it as a science, others consider it a discipline in constitution and others as a multidisciplinary synthesis of other sciences' knowledge. This epistemological lack of definition has its roots in the fact that sexology in Argentina is mainly a practical field. Its «epistemological vulnerability» and the resistance of the academic institution to incorporate sexuality issues are obstacles to the inclusion of sexology in the university curricula in Argentina.

Conflict of Interest: None disclosed

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MP1-12

HOW TO BE A REAL WOMAN: EXPLORING THE SEXUAL LIFE OF TRANSGENDER

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There are some studies on transgender in Indonesia but those studies only focus on HIV/AIDS and STIs. There are no studies which focus on sexual life of transgender just yet. The objective of this research is to explore the sexual life of transgender and the shape of relationship between transgender, their spouses and their clients. This research uses qualitative method and gender analysis. In-depth interview and observation are used to collect data from transgender sex workers and their spouses. Transgender in Jakarta have different characteristic with other transgender in several areas in Indonesia due to cultural tradition and religion. Here, they identify themselves as waria (woman who trapped in man's body). They perform and behave like a woman and they would be happy if they were treated as a real woman. This study tells us how 'husband-wife' relation projected in waria life. The husbands stated that they consider waria as woman and treated them like a woman, which is doing all domestic works plus making money (become sex worker). While the clients treated them as 'the cleaner' because they believe that only women who have HIV/AIDS and STIs while transgender are considered not to having any diseases since they are not 'real woman'. The study shows that sexuality and sexual health knowledge are mostly framed and conceived by myth due to lack of education and information. Social change is needed to influence the government to establish policy about education system which allows sex education in early school.

Conflict of Interest: None disclosed

Financial Support/Funding: self-funded

MP1-13

EXPLORING PERSONAL AND SYSTEMIC BARRIERS EXPERIENCED BY ADULTS WITH CEREBRAL PALSY WHEN ACCESSING SEX WORKER SERVICES

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Introduction: Sex work has been decriminalised in New South Wales (NSW) since 1995. There is however no information in the literature on the perspectives or experiences of people with cerebral palsy who access sex services. This project aims to identify (a) barriers adults with cerebral palsy experience when seeking to access sex worker services, and (b) strategies these adults find helpful in accessing sex workers.

Method: This study is in progress and involves a constant comparative, thematic content analysis of in-depth conversational-style interviews. Participants will be 8-10 adults with cerebral palsy living in supported accommodation in NSW who have accessed sex worker services. Participants will be interviewed on at least two occasions to gain an in-depth understanding of their experiences. Interviews will be digitally audio-recorded, transcribed verbatim, and analysed prior to subsequent interviews. Researchers will verify the content of the transcribed interviews with the participants. Through a content analysis of the data the researchers will identify main themes and sub-themes relating to (a) personal and systemic barriers in accessing sex workers, and (b) strategies to address these barriers.

Findings: This presentation will outline preliminary findings on the barriers and strategies participants reported when accessing sex workers. It will also highlight the policy and practice implications of the results.

Recommendations: The findings of this study will (a) increase the understanding of the experiences of adults with cerebral palsy in accessing sex workers, (b) identify areas for future research, and (c) inform policy development for government and community based services and disability advocacy

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP1-14

THEATRE AND SEXUALITY IN KOSOVO

Krasniqi Zana (Artpolis)

Sexuality and Sexual reproductive health (SRH) and its attendant issues, such as HIV and AIDS, are still considered taboo subjects in Kosovo culture. Theatre provides an avenue through which subject matter can be aired in public without threatening cultural sensitivities. Although the subject matter is depersonalised, the story lines can still resonate with the lived experiences of the audiences and provide an avenue for the dissemination of accurate information about sensitive issues that would not otherwise be available to many disadvantaged groups. Interactive Theatre depends on

interaction between performers and the audience. The Audience is involved in the story line and in subsequent discussions. Thus, they can receive accurate information and can also be engaged in a process that encourages them to develop their own solutions to everyday dilemmas associated with sexuality and SRH. Artpolis used Culture as a process based

Method: One involves the personal and professional development of the actors (project participants), and the other involves the audiences (project beneficiaries) in a participatory, interactive method that invites young people to explore and share (or process) their knowledge, views and concerns about SRH issues, behaviours and practices. In this context Artpolis trained more than 90 youth in Theatre Based Education, continuously worked with 20 professional artists, and organised 2 editions of Festival for social changes where more than 100 youth were involved. 14 performances prepared were shown in 12 Municipalities around Kosovo Schools, Youth centres, Culture Houses etc.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP1-15

PSYCHOSOCIAL RISK FACTORS IN YOUNG ADOLESCENTS ATTENDING A SEXUAL HEALTH CLINIC

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Introduction and objectives: Adverse psychosocial factors in young people may increase their risk of sexually transmitted infections and unintended pregnancy. We assessed psychosocial factors and sexual behaviour in adolescents attending a sexual health clinic.

Method: Case note review of adolescents, aged less than 16 years, attending a sexual health clinic. Social factors, psychological health and sexual behaviour information was gathered.

Results: Of 66 adolescents in the study (57 female, 9 male), 51% had symptoms, 32 (48.5%) used alcohol (30 female, 2 male), with 6 females drinking above the UK weekly adult alcohol limits. 14 (21%) used recreational drugs regularly. Self-reported psychological difficulties were common: 11 (16.6%) reporting anxiety and 18 (27.3%) depression. 21(31.8%) had a history of self-harm. Mean age of first sex was 13.6 years and mean number of sexual partners was 4. Over 44% reported sex with a partner 3 or more years older and 18 (28.1%) reported non-consensual sex. Consistent condom use was reported in 5 (7.8%) and other contraceptive use in 36.8%, with 2 unplanned pregnancies. A sexual infection was diagnosed in 23.4%.

Conclusion: In young people attending this sexual health clinic, high rates of psychological difficulties, alcohol and other recreational drug use, self-harming, sexual infection and non consensual sex were apparent. Rates of consistent condom use were low. Greater awareness of psychosocial and mental health factors in young people attending such services may inform

the interventions used to meet their sexual health and other needs.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MODERATED POSTERS SESSION MP2 Sexual medicine; Clinical sexological research

MP2-2

VARDENAFIL IMPROVES ERECTILE FUNCTION IN MEN WITH ERECTILE DYSFUNCTION AND ASSOCIATED UNDERLYING CONDITIONS, IRRESPECTIVE OF THE USE OF CONCOMITANT MEDICATIONS

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Introduction/objectives: Meta-analysis based on individual patient data, performed to investigate the efficacy/safety of vardenafil in men with erectile dysfunction (ED) and underlying conditions, including those taking concomitant medications.

Methods: 13 randomised, double blind, placebo controlled studies were included. Starting dose of vardenafil: 10 mg, adjustable to 5 or 20 mg after 4 weeks. Primary efficacy measures: International Index of Erectile Function, erectile function domain (IIEF-EF); Sexual Encounter Profile questions 2 and 3 (SEP2, SEP3). Efficacy analyses performed using last observation carried forward approach (intent to treat [ITT] population). Efficacy assessed for subgroups of patients with diabetes, hypertension, dyslipidemia, metabolic syndrome (modified International Diabetes Federation definition). Incidence rates of treatment-emergent adverse events analysed overall and by subgroup (safety population).

Results: Total patients randomised to treatment, 4326; ITT population, 4143 patients; safety population, 4266 patients. At week 12, significant differences in least squares mean IIEF-EF scores between vardenafil and placebo were observed in patients with: diabetes, 5.49; hypertension, 7.60; dyslipidemia, 7.27; metabolic syndrome, 7.28 (all $p < 0.0001$). Significant differences in least squares mean SEP3 success rates between vardenafil and placebo were also observed: diabetes, 22.85%; hypertension, 31.76%; dyslipidemia, 30.51%; metabolic syndrome, 25.18% (all $p < 0.0001$). Subgroup analysis by type of concomitant medication(s) showed comparable findings. Across all subgroups, the number/type of treatment-emergent adverse events was consistent with results from previous studies in men with

ED and underlying conditions.

Conclusions: Vardenafil demonstrated favourable efficacy/tolerability in men with ED, irrespective of the type of underlying condition. Importantly, the use of concomitant medications did not affect its efficacy or safety profile.

Conflict of Interest: DN and CN are employees of Bayer Schering Pharma, and IE, JL and JD have acted as consultants and clinical trial investigators for Bayer Schering Pharma.

Financial Support/Funding: The studies included in this meta-analysis and the analyses themselves were supported financially by Bayer Schering Pharma.

MP2-3

IMPACT OF BILATERAL INTRAMEDULLARY FEMORAL NAILING ON ERECTILE FUNCTION

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Introduction: In recent years literature has been drawing attention to the possible development of erectile dysfunction (ED) due to the pressure to the perineum during cycling or intramedullary femoral nailing. Neuropraxy of nervus pudendalis is considered to be the cause, developing in linear relationship to pressure and its duration. Case report The authors present a case study of a polytraumatized patient with a complicated bilateral compound fracture of femors treated by intramedullary femoral nailing. In view of the overall physical state, and especially the presence of intracranial injury, the patient was kept under deep anesthesia with complete muscle relaxation during the whole operation and during the first days after injury. Nevertheless, reduction of complicated fractures and the femoral nailing required strong countertraction during the whole four-hour procedure. Proof of the pressure intensity to the perineum was the development of a massive pressure sore in the perineum and scrotum, visible immediately after operation. We expected development of ED. Despite these expectations, the patient had first nocturnal erection already 3 weeks after operation and 3 months after he had first sexual intercourse with painful ejaculation. Erectile function was intact. Eight months after injury the patient is free of any sexual dysfunctions. IIEF-5 questionnaire shows maximum score. The partner has not observed any changes in erectile function compared with time before injury. In a young polytraumatized individual, unburdened by comorbidities, with well-performed resuscitative and traumatological care, even intensive pressure to the perineum may not lead to the development of ED.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP2-4

SEXUAL FUNCTIONING IN PRE AND PERI-MENOPAUSAL WOMEN AFTER HYSTERECTOMY

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Objective: To assess the impact of hysterectomy on frequency and quality of a woman's sexual life, in pre and peri-menopausal women.

Patients and Methods: Thirty-five patients who had undergone hysterectomy were surveyed about sexual function before and after hysterectomy. The mean age was 51+/-6- years. All were asked to respond to a questionnaire that was devised to ascertain the patient's own objective evaluation of self-image, sexuality, and sexual response before and after surgery.

Results: There was no direct correlation between quality of sexual life, hysterectomy type and patient age. Most women did not report any significant deterioration in mental attitude after the procedure. Responses about sexual activity, libido, or feelings of femininity did not reveal significant changes.

Conclusion: The responses suggest that neither self-image nor sexuality need diminish after hysterectomy. Most patients expected and experienced no change in sexual desire, orgasm frequency, or orgasm intensity. Hysterectomy appears also to result in decreased dyspareunia. The type of hysterectomy that was performed did not appear to affect the attitudes of the respondents.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP2-5

APHRODISIOLOGY IN AYURVEDA: FROM MYTH TO SCIENCE.

Joshi Venkata Narayana (College of Ayurveda), Athique Mauroof (College of Ayurveda)

Ancient Indian Ayurvedic medicine is based on the principles of healing from ethnic formulations dates back to 1500 B.C. Among thousands of recipe offered to mankind for varied health reasons including 'Vajeekarana' (Aphrodisiology) is set standards for their use in balance of active principles in them. Multivalency of these compound formulations are time tested within the non-conventional methods of evaluation. Evidence based trans paradigm modalities of research is exceptional for these compounds. Standardisation of so called Aphrodisiac formulations in Ayurveda is the core problem today for their evaluation. Infertility & Impotency both are addressed to be as an integral part of complete sexual health and wellbeing managed through within the prescriptions of these compound herbal formulations. Psycho-neuro pharmacology of these compounds are said to be interdependent within the systems of sexual health carried through from CNS to endocrine functions. subtle variations in psycho-neuroendocrinol-

ogy based on the dysfunctions of neurotransmitters is to be well managed within the principles of nature vs. nurture theory. Though primitive to understand and attribute above effects from these formulations of multivalency in nature, needs to be evaluated through from evidence based research protocol in non-conventional methods of Complementary medicine.

Conflict of Interest: Ancient Indian Ayurvedic Potions/elixirs.
Financial Support/Funding: College of Ayurveda UK

MP2-6
ASSOCIATIONS OF RISK OF DEPRESSION WITH SEXUAL RISK TAKING AMONG ADOLESCENTS IN NOVA SCOTIA HIGH SCHOOLS

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Introduction and Objective: Several interrelated factors, including depression, influence adolescents' chances of risky sexual behaviour. We examined the relationship of depression to sexual risk taking behaviours in adolescents after accounting for the effects of other variables.

Methods: We surveyed male (n=1120) and female (n=1177) adolescents at three high schools in Nova Scotia, measuring factors known to be associated with sexual risk taking. Risk of depression was assessed using the CESD. Outcomes were self-reported sexual behaviours. We used logistic regression to assess associations of the following with sexual risk taking: substance use; partner age difference; socioeconomic factors; and, depression.

Results: In univariate logistic regression, risk of depression was associated with three risk behaviours for females (being sexually active, having unintended sex when using substances, and not using effective contraception at last intercourse) and one for males (having more than one partner in the previous year). In full multivariate models, risk of depression remained significantly associated with being sexually active (OR 1.4; 95% CI 1.1-1.8) unintended sex (OR 1.8; 95% CI 1.3-2.5) and not using effective contraception (OR 2.1; 95% CI 1.3-3.6) in females. For males, having more than one partner remained significant (OR 1.9; 95% CI 1.3-2.9).

Conclusions: Risk of depression is independently associated with adolescent sexual risk behaviours after adjusting for other variables. Health care providers working with teens should screen for risky sexual behaviours and sexually transmitted infections if depression is apparent in their patients.

Conflict of Interest: None disclosed
Financial Support/Funding: The Social Sciences and Humanities Research Council of Canada

MP2-7
CLINICAL ANALYSIS OF SEXUAL ASSAULT VICTIMS IN JAPAN
Komura Hiroko (Faculty of Human Science, Osaka Shoin Women's University), Nishio Yukihiro (Department of Obstetrics and Gynecology, Osaka Police Hospital)

Objectives: Sexual assault is a serious problem damaging severely the personality of a female victim. There are little reports for the treatment of sexual assault victims in Japan. We investigated the situation of sexual assault victims in our hospital and tried to identify problems in medical care.

Materials and Methods: 763 patients of sexual assault damage were examined in Osaka Police Hospital. We reviewed numbers of prescription of emergency contraceptive pills, antibiotics for prophylaxis of STI, and follow-up revisits for STI tests. Data were compared before and after creating a manual in 1999 for examining sexual assault victims.

Results: Creating a manual for sexual assault victims increased the prescription rate of emergency contraceptive pills and antibiotics and it reached to 78.4% and 93.2% respectively. However, the rate of follow-up revisit for STI tests remained below 5%. It was not affected even though we included this recommendation within the manual.

Conclusions: Quality of medical care has improved by creating a guideline for examining sexual assault victims. However, follow-up examination for STI tests seemed not to be accepted by the victims in spite of recommendation. Socioeconomic problems may exist in the background and social support system for sexual assault should be established.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

MP2-8
EFFECTS OF TESTOSTERONE REPLACEMENT THERAPY ON GLUCOSE HOMEOSTASIS, VISCERAL OBESITY AND SEXUAL FUNCTION IN MIDDLE-AGED MEN WITH TYPE 2 DIABETES AND ANDROGEN DEFICIENCY.

Cedres Santiago (Uruguay), Cedres Santiago (Uruguay), Lissman Silvia (Uruguay), Arroyo Carlos (Uruguay), Puppo Daniel (Uruguay), Palasti Silvia (Uruguay), Gonzalez Carolina (Uruguay)

Introduction: Short-term studies have shown that testosterone replacement therapy (T) has a beneficial effect on visceral obesity and glycaemic control in men with diabetes and diagnosed hypogonadism. **OBJECTIVE:** To assess the effects of testosterone supplementation therapy on glucose homeostasis, visceral obesity and sexual function in middle-aged men with type 2 diabetes and androgen deficiency.

Materials and Methods: Eighty-six middle-aged men, with type 2 diabetes, visceral obesity and androgen deficiency (Free testosterone? 7,2ng/dL), were included in this study. Forty three subjects received T (Testosterone enanthate (250 mg) in oil vehicle deep intramuscular every 2 weeks, 12 injections); 43 subjects received no treatment. Body composi-

tion was analyzed by bio-impedance. Parameters of metabolic control were determined. Symptoms of androgen deficiency were scored by self-administered questionnaires. The non-parametric Mann-Whitney U-test was used to determine the differences between the groups. All test were done two-sided, and $p < 0.05$ was considered statistically significant. Statistical analyses were performed with SPSS version 15.0.

Results: 6 months follow up, T group had a statistically significant reduction in visceral obesity (-2,54 %) body weight (-3.72 %), and body fat (-4.58%). T significantly improved metabolic control: decrease in blood glucose values and mean glycated hemoglobin (HbA1c) (from 11.2 to 7.6%). It also improved symptoms of androgen deficiency. There was no statistically significant change in the control group.

Conclusion: T treatment of type 2 diabetic men with androgen deficiency improves glucose homeostasis, body composition, and symptoms of androgen deficiency.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP2-9

SEXUAL FUNCTION IN PATIENTS WITH SEVERE NON-MALIGNANT LONG-TERM PAIN DISORDERS REFERRED FOR MULTIDISCIPLINARY ASSESSMENT

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Aim: According to previous studies, long-term pain conditions have been associated with a negative impact on sexual function. The aim of the study was to assess and characterise sexual function in this group of patients.

Methods: The men were given a questionnaire on erectile, ejaculatory dysfunction and satisfaction. The women received a questionnaire regarding lubrication, pain during intercourse, orgasm and satisfaction.

Results: 64 patients (28 men, 36 women) were included. Average age was 42, 5 years. 44 patients reported sexual activity but 36 of these patients were not satisfied. Out of the sexual active patients, 26 patients reported lack of desire in combination with pain, being the most frequently reported problem. Co-morbidity in terms of depression and anxiety disorders was reported in 41 (69%) of the patients. 32 (54 %) patients were treated with opioids and 33 (56%) patients were treated with adjuvant analgesics.

Conclusion: Patients with severe non-malignant long-term pain disorders report a comparatively high sexual activity compared with a general Swedish population. Lack of desire in combination with pain was the most common cause of sexual dysfunction in this patient group. Co-morbidity in

terms of depression and anxiety disorders as well as pharmacological treatment of these disorders might have a major impact on sexual function in this patient group. It is of great importance to assess the presence of sexual dysfunction in patients with severe long-term pain in order to offer specialized treatment.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP2-10

PROSTITUTES: VAGINAL INFECTIONS AND CERVICAL LESIONS IN THE CERVICOVAGINAL CYTOLOGY

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PROSTITUTES : VAGINAL INFECTIONS AND CERVICAL LESIONS IN THE VAGINOCERVICAL CYTOLOGY. LOPEZ – OLMOS , J (1) ; TERRADEZ ,J .J (2) and GASULL, J. (2) Departments of Gynecology (1) and Laboratory of Pathology (2) of the Hospital Arnau de Vilanova of VALENCIA (SPAIN). Dr. JORGE LOPEZ – OLMOS Avda. Navarro Reverter,4 , 13ª, VALENCIA (SPAIN) Telef: 607 21 32 20 jlopezo@sego.es

Objective: to analyze the vaginocervical cytologies of prostitutes in the city of Valencia (Spain), to detect vaginal infections and cervical lesions of cancer , for the correct treatment.

Design and Method: During the six years , 2002-2007 , were analyzed 756 cytologies of prostitutes, referred to our laboratory from samples by the center of Medicus Mundi. We compared with a control group of 880 cytologies from the year 2007 in women of 15-43 years.

Results: range 12-60 years , the mean age of the women was 30,74 years. The majority of the women (99 %) were foreigner. In 170 cases , 22,46 % , were found a vaginal infection. The most frequents were : vaginal bacteriosis in 84 cases , (11,11 %) , and yeast, 54 cases (7,14 %). In 32 cases (4,23 %) was found LSIL , and in 8 cases (1,05 %), HSIL. Only in one case , (0,13 %) there was infiltrant cancer . Koilocytosis was found in 5 cases (0,66 %) .

Conclusions: There were major prevalence of vaginal infections in the prostitutes, in vaginal bacteriosis ($p < 0,001$), Candidas ($p < 0,05$), Trichomonas ($p < 0,001$), and in cervical lesions, ASCUS ($p < 0,001$), LSIL ($p < 0,001$), HSIL ($p < 0,001$), than the normal poblacion. No significant differences in cervical cancer in both groups.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP2-11

PREVALENCE OF SEXUAL DYSFUNCTION IN ELDERLY WOMEN IN NORTHERN INDIAN POPULATION

Singh Veer Bahadur (s p medical college), khandelwal umesh, singh moola

Methods: A cross-sectional, population-based study was carried out using an anonymous, self-response questionnaire. A total of 300 women, >65 years of age. The instrument used in the evaluation was based on the Short Questionnaire. Poisson multiple regression analysis was carried out and the prevalence ratios with respective 95% confidence intervals (95%CI) were calculated. Sexual dysfunction was calculated from the mean score of sexual responsiveness, frequency of sexual activities and libido. Sociodemographic and clinical factors were evaluated.

Results: The prevalence of sexual dysfunction was 32.9% among our study population. Multiple regression analysis showed that sexual dysfunction was positively associated with older age (prevalence ratios = 1.01; 95% CI: 1.01-1.06) and with the presence of hot flashes (prevalence ratios=1.36; 95% CI: 1.03-1.70). Having a sexual partner (PR=0.48; 95% CI: 0.33-0.64) and feeling well or excellent (prevalence ratios= 0.67; 95% CI: 0.53-0.87) were factors associated with lower sexual dysfunction scores.

Conclusions: Sexual dysfunction was present in more than one-third of women that were >65 years of age. In study group older age and hot flashes were associated with higher sexual dysfunction scores, whereas feeling well and having a sexual partner were associated with better sexuality.

Conflict of Interest: None disclosed

Financial Support/Funding: indian geriatrics

MP2-12

PROBLEMS IN TREATING PROLONGED INCESTUAL VIOLENCE

Goldberg Greta (psychelsydney)

Abstract: This brief research and case summary proposes fear, silence and shame as generational conspirators of incest, perpetuating complex betrayal and disrupted bonding even with the "non-offending" parent whose silence may reflect "dissociated denial" acquired through their own experiences of childhood abuse. Recently a client who despite prolonged therapy has never been able to disclose, asked me to read Toni Maguire's autobiographical novel "Don't Tell Mummy" and the next day overwhelmed by shame, emailed canceling all her forward appointments. Because of the excruciating difficulties such clients have with disclosure, this autobiographical novel by Toni Maguire provides a useful template to analyze complex intra-familial dynamics of prolonged incestual violence often continuing from age 5 until puberty and never disclosed. Within the linked conceptual framework of systemic and developmental/attachment theories, an attempt will also be made to broaden the discussion to encompass emotional as well as sexual abuse. Both often coexist in the "happy families façade" within which Maguire explores her families' triangulated dynamics of love, envy, fear and

guilt binding mother father and child for generations in a complex and destructive bond. Failure to disclose incest in prolonged therapy poses ethical (and perhaps legal) challenges about perpetuating silence and parallels can be drawn between the dissociated denial which keeps certain mothers from seeing what is going on, and the therapist/client barriers and "double dissociations" which can also inhibit an abused client's disclosure to a therapist who has their own unresolved personal issues of abuse. word number 253

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP2-13

THE IMPACT OF MALE SEXUAL DYSFUNCTION ON FEMALE PARTNER

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Introduction: Male sexual dysfunction affects 40% of the adult male population. The presence of male sexual dysfunction may induce marked distress in the relative partner, often resulting in a reduction in intimacy in the relationship. Furthermore, this may help to sustain sexual dysfunction.

Objectives: The aim of this study was to evaluate the impact of male sexual dysfunction on their female partners sexuality.

Methods: This study has an exploratory character. The authors included men with sexual dysfunction and relative partners attending for the first time the sexology outpatient unit of Hospital São João, reporting a stable relationship (more than 3 months). The data was collected in hospital setting. Men with mental disorders were excluded. A specific protocol, designed by the authors, was applied to collect sociodemographic data. The IIEF (the International Index of Erectile Function – Portuguese version) and the FSFI (the Female Sexual Function Index – Portuguese version) were used to characterize sexual dysfunction and satisfaction. Statistical analysis was made using SPSS

Results and Conclusions: Our preliminary results reveal that male sexual dysfunction has a negative impact in female partner's sexual life, specifically in their sexual satisfaction and sexual drive, which corroborates the results of other studies. This study provides valuable insights on the substantial practical advantages and our results reinforce the importance of partner inclusion in the treatment of male sexual dysfunction.

Conflict of Interest: no potential conflict of interest

Financial Support/Funding: None disclosed

MP2-14

EFFECTS OF NON-PHARMACEUTICAL SEXUAL THERAPY IN PATIENTS WITH SEXUAL PROBLEMS

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wegian Knowledge Centre for the Health Services), Wenche Fjeld, Wenche Haaland, Kjell Olav Svendsen

Purpose: A systematic review of the evidence base for non-pharmaceutical sexual therapies for males, females, couples, in illness, physical or mental handicaps and after sexual offences.

Methods: A search in June 2008 retrieved 2805 references that were screened for relevance, critically appraised, and then summarized in narrative and tables. Studies examining the effect of devices and drugs were excluded.

Results: 25 systematic reviews and 32 randomized controlled trials fulfilled inclusion criteria. Sexual therapy seems to be effective when treating lack of sexual response in women (libido, orgasm) and premature ejaculation. The effects seem more pronounced for women than for men, and may be optimized to weekly treatments with partner present. Short interventions and self-help (bibliotherapy) may also be effective, but not for all patients. Behavioural therapy and desensitization seem to help women with vaginismus, but not women with chronic pelvic pain. Group therapy and psychotherapy have beneficial effects on erectile dysfunction, also if the men use sildenafil. In general, however, it is important to be aware that many studies suffer from methodical limitations (e.g. selection bias), possibly leading to over-estimation of the effect. For some patient groups (e.g. physically or psychologically disabled, many illnesses and gender identity problems) the lack of knowledge regarding effects of sexual therapy is striking, given the high reported prevalence of sexual dysfunctions in these groups.

Conclusions: Sexology is effective for selected patient population, but for some patient groups the field appears to be neglected.

Conflict of Interest: None disclosed

Financial Support/Funding:Norwegian Knowledge Centre for the Health Services

MP2-15

SEXUAL SURROGACY: FROM A SURROGATE'S PERSPECTIVE *Wotton Rachel (ISIS CATS)*

Introduction: Sexual surrogacy has existed as an adjunct therapy since Masters & Johnson (1960's). Since then sexual surrogacy has been utilised in a variety of contexts in various countries, including America, Australia and Israel. While numerous therapists, researchers and journalists have written on what occurs in surrogacy sessions, very little has been written from the perspective of the surrogate. This presentation may assist in dispelling some of the myths still surrounding the practice of sexual surrogacy.

Action: Sexual surrogacy in Australia is still a relatively underground movement, though it is used by a few therapists. When New South Wales decriminalized sex work in 1995 barriers of legal repercussions were removed. Dilemmas of ethics, morality and codes of conduct are still being cited though as reasons why surrogacy has not been embraced by more therapists. As a sexual surrogate I will outline challenges, practices and learn-

ing developments I have encountered. Using brief case studies I will identify what has and hasn't worked.

Outcome: Although each therapist and surrogate has unique individual methods of approaching surrogacy, a number of commonalities can be successfully employed to maximise efficiency of sessions, assisting the client to reach his or her goals in a safe, supportive environment.

Recommendations: With formal surrogacy training only offered in the US, surrogates and therapists elsewhere have to connect and learn from each other. Sharing my personal experiences will hopefully assist in creating an open and meaningful dialogue for those keen to pursue this option of therapy for their clients.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MODERATED POSTERS SESSION MP3

Sexological research: Socio-cultural

MP3-1

SEXUAL AND REPRODUCTIVE HEALTH OF IMMIGRANT WOMEN IN PORTUGAL

Dias Sonia F. (Institute of Hygiene and Tropical Medicine/New University of Lisbon), Rocha Cristianne M.F. (Lutheran University of Brazil/Grupo Hospitalar Conceição), Gama Ana (Institute of Hygiene and Tropical Medicine/New University of Lisbon)

Introduction: The issue of sexual and reproductive health represents one of the main subjects in public health nowadays, because it affects the individual and the collective health involving both social and economic levels of the societies in which such individuals are inserted. This study aimed to understand migrants' perceptions about the most relevant issues on sexual and reproductive health.

Methods: Six focus groups were conducted in 2008 with a proposed sample of 35 low income immigrant women from Brazil and Portuguese Speaking African Countries, aged 18-45 years, living in Lisbon, Portugal. Discussions were audio recorded and transcribed. Thematic decomposition was adopted to structure the analysis and content analysis was used to analyze the data obtained.

Findings and discussion: We identified differences related to cultural beliefs and norms between African and Brazilian women that play an important role in the adoption of practices related to sexual and reproductive health. Participants described a dynamic process between the challenges they faced moving to a different society and cultural expectations that determine perceptions, attitudes and consequently choices that can make them more vulnerable on sexual and reproductive health.

Recommendations: The results of this study reinforce the need of plural, diversified and integrated strategies, rather than isolated interventions. Con-

textual and cultural factors as gender inequity, origin background and experiences are important aspects to consider in order to reduce their vulnerability and risk factors on sexual and reproductive health.

Conflict of Interest: None disclosed

Financial Support/Funding: ACIDI

MP3-2

ETHIOPIAN BY BIRTH, GAY BY NATURE AND PROUD BY CHOICE”: SEXUALITY, SEXUAL HEALTH AND RIGHTS AMONG MEN WHO HAVE SEX WITH MEN (MSM) IN ADDIS ABABA, ETHIOPIA

Tadele Getnet (Department of Sociology, Addis Ababa University)

Introduction: A body of literature on African sexuality has established the presence of homosexuality in about Fifty African societies, although widespread public and religious discourse claims homosexuality is not African (Parker et al., 1998; Niang et al., 2003; Murray and Roscoe, 1998). This paper is a product of an investigation that explored the sexual lives of men who have sex with men in Addis Ababa, within a societal context where homosexuality is illegal.

Methods: This paper draws from 24 in-depth/life history interviews, one focus group discussion (FGD) with six participants and ethnographic observation held from July 2006 to June 2007.

Findings and discussion: The study revealed that there is a flourishing underground commercial sex trade. Most of those interviewed, however, suffer from internalized and externalized stigma and discrimination. When it comes to HIV/AIDS, there is some degree of misinformation among the MSM involved in the study. Male sex workers in particular believe that HIV/AIDS can only be transmitted through heterosexual sex and they perceive their sexuality as completely safe from HIV/AIDS infection/transmission.

Recommendations: The study highlights that current efforts aimed at preventing the spread of HIV are not reaching some “high risk populations” and argues that interventions aimed at preventing the spread of HIV could benefit from an approach that addresses different types of sexual practices and identities. Using a (sexual) citizenship and rights framework, this paper also recommends the need to create space for the discussion of the different forms of sexual relationships that take place in the country.

Conflict of Interest: None disclosed

Financial Support/Funding: Christian Michlesen Institute of Norway and UNAIDS Ethiopia

MP3-5

THE USE OF CLUSTER ANALYSIS TO DETERMINE SEXUAL ATTITUDINAL PATTERNS OF EUROPEAN COUNTRIES

Lottes Ilsa S. (University of Maryland, Baltimore County)

In the 1970s social scientists argued that European culture differs markedly from other great cultures such as those of China, the Middle East, or the Americas. To support this claim as well as other reasons, in the late 1970s researchers initiated the European Values Survey (EVS) which uses representative national samples to measure attitudes and values on a variety of social issues. The research reported here uses data from 32 European countries to examine patterns of sexual attitudes from the most recent available data of the EVS, 1999-2000. Using Ward’s cluster analysis linking procedure and five clustering variables measuring views on casual sex, extramarital sex, homosexuality, abortion, and divorce, six clusters with distinct attitudinal patterns were identified. Findings are interpreted in terms of other variables in the EVS as well as macro level indicators from each country. These variables can be categorized into three types related to (1) traditional gender roles, (2) degree of religiosity, and (3) health. Combining the three types of explanatory variables with the six patterns of sexual attitudes illustrates both similarities as well as diversity of European value patterns. For example, the largest cluster had 13 countries and the smallest only one. Results are discussed in terms of how the six clusters differ in their promotion of sexual health and sexual rights.

Conflict of Interest: None disclosed

Financial Support/Funding: Not Applicable

MP3-6

MEN WHO HAVE SEX WITH MEN AND WOMEN (MSMW) IN LIMA, PERU: UNDERSTANDING THE SEXUALITY OF A HIDDEN AND VULNERABLE POPULATION

Girón J. Maziel (Universidad Peruana Cayetano Heredia), Salazar Ximena (Universidad Peruana Cayetano Heredia), Olivos Fernando (Universidad Peruana Cayetano Heredia), Cáceres Carlos (Universidad Peruana Cayetano Heredia)

Introduction: HIV epidemic in Peru is concentrated among MSM. HIV prevalence is 10-20%, 25-50 times higher than general population. 76% of MSM report sex with women at least once in their lives. However, men at highest risk in lower-income communities include a number of bisexually active men who are not self-identify, as homosexual/bisexual.

Methods: A formative study was developed to assess MSMW. We conducted in depth-interviews with two groups: G1) 29 MSMW recruited through coded coupons delivered by gay-identified MSM in low-income areas; G2) 25 MSMW recruited through internet-based announcements and chat-based contacts by gay/transgender-identified staff.

Findings and discussion: Differences based on socioeconomic levels were identified according to different aspects: 1) circumstances related to sexual relationships with men: in G1 sex occurs in the neighborhood, usually with acquaintances; for G2 sexual encounters are mostly in hidden/anonymous

places; 2) sexual practices: men in G1 expressed a lack of a relationship with male partners, claiming that their insertive role did not imply true sexual involvement; G2 showed a less rigid attitude, even expressed affinities with partners; 3) compensated sex: for G1 compensated sex is a legitimate economic strategy vis-a vis poverty, G2 declined participating in it.

Recommendations: Male bisexual behaviour is complex and not limited to a single pattern. This study reveals the need of more research to understand the complexity of male sexuality, and the role of additional factors such as socioeconomic dynamics around sexuality and HIV.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP3-7

IMPLEMENTATION OF THE NATIONAL PROGRAMME FOR SEXUAL AND REPRODUCTIVE HEALTH IN FINLAND

Pelkonen Marjaana (Ministry of Social Affairs and Health), Ritamo Maija (National Institute for Health and Welfare)

For the promotion of sexual and reproductive health the Ministry of Social Affairs and Health published an action programme 2007-2011. It includes recommendations for organizing sexual health services and counselling, informing the public, educating professionals, systematic monitoring and research. The programme was published in a national conference, in several implementation seminars and professional conferences around the country. Sexual health issues have been integrated in new legislation and in many national recommendations and guidelines. The training of professionals in sexual health follows the Nordic model. Curricula including web based studies have been developed, and regular collaborative meetings for teachers and follow up studies have been arranged. Priority groups in training are school health nurses and sexual counsellors, sexual violence is in focus, too. To integrate sexual counselling into all preventive and curative services a nationwide network for sexual counsellors has been established with an electronic mailing list, meetings, conferences, and articles as well as with defining qualifications for counsellors. A set of materials will be published to support municipal authorities in focusing on sexual health issues. The Ministry has provided recommendation actions in the prevention of interpersonal and domestic violence. Many new activities and projects are underway: materials about boys and men will be placed on the internet, and a plan for the promotion of sexual health of migrants prepared. To follow and strengthen the implementation of the action programme on regional level a national survey will be carried out and a follow up seminar arranged in 2009.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP3-8

TRADITIONAL ATTITUDES ABOUT GENDER, RELATIONSHIPS, AND SEXUALITY: FINDINGS FROM FOCUS GROUPS WITH YOUNG PEOPLE IN THE UNITED STATES

Crane Betsy (Widener University), Root Meghan (Widener University), Ruggles Danielle (Widener University), Towne Angela (Widener University)

While some see North America as in a “post-feminist” era (Hall & Rodriguez, 2003), traditional norms persist. Females experience a larger range of acceptable roles yet males still face narrow definitions of what it means to be a “real man” (Crane & Crane-Seeber, 2003). Poor, working class and immigrant young people may long for resources needed for a traditional family. Our research question asked: how are traditional ideas about gender, relationships and sexuality perceived by young people who identify as traditionally-oriented? Data collected from focus groups with 35 young people ages 18-29 was coded using an open inductive process. Females saw the double standard as so strong that some lived double lives, having a “good girl persona” but finding ways to get their needs met, or in some cases giving up their sexual desire, and even intimate relationships. Both females and males felt a need to lie or keep secrets about sex, to be perceived as traditional and have a traditional relationship. Pressures were felt from family and married friends to start a family. Based on our findings we recommend that sexuality educators and clinicians be aware that young people aspiring to lead traditional lives face paradoxes.

References: Crane, B. & Crane-Seeber, J. (2003). Four boxes of gendered sexuality: Good girl/bad girl & tough guy/sweet guy. In R. Heasley & B. Crane, (Eds.), *Sexual lives: A reader on theories and realities of human sexualities*, New York: McGraw-Hill. Hall, E.J. & Rodriguez, M.S. (2003). The myth of postfeminism. *Gender and Society*. 17(6).

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP3-9

YOUNG MEN, SEXUALITY AND THE MEDIA

Evers Clifton W (University of New South Wales)

Introduction: This paper presents some findings of a study looking at the extent to which popular media consumption by young Australian men (aged 15-25) influences their sexual identities and sexual practices, how these young men engage with popular media representations of sex and sexuality, and the relationships between representations in popular media, sex, and sexuality and the lived bodies and emotional lives of young men.

Method: The key methods informing this study include textual media analysis, qualitative group interviews, narrative analysis, and media ethnography. Data is also collected via new media: mobile phones, weblogs, and through online discussion forums.

Findings and discussion: Scholarly literature on the potential impact of

media representations on young male sexuality has focused largely on deviance – sexual assault, unethical sexual practices and homophobia. This research project is showing clear evidence that popular media consumption, mashing, and use is also producing positive outcomes in educating young men about sexual identities and practices.

Recommendations: The data collected points towards developing new media strategies with young men and in consultation with experts for promoting safe and ethical sexual practices and attitudes. For any sex education strategy to be effective it needs to draw on what this research shows to be effective language and media channels.

Conflict of Interest: None disclosed

Financial Support/Funding: University of New South Wales Postdoctoral Fellowship

MP3-11

SEXUAL HEALTH OF SOUTH ASIAN MIGRANT MEN LIVING IN AUSTRALIA

Weerakoon Patricia (The University of Sydney), Sitharthan Gomathi (The University of Sydney), Shuttleworth Russell (The University of Sydney), Ramanathan Vijayasarithi (The University of Sydney)

Introduction & objectives: South Asians (14%) formed the largest migrant group to Australia in 2007. This group of migrants are one of the most under-studied populations in terms of health issues, particularly sexual health. This is particularly so among males. The lack of understanding of cultural mores surrounding sexuality can form barriers to health care provision. The lack of understanding of cultural mores surrounding sexuality can form barriers to health care provision. The research explores the knowledge, attitude and values related to human sexuality, service utilisation and help seeking behaviour.

Methods: The study will be conducted in two stages. Five focus groups of 5-6 South Asian male volunteers of over 18 years of age were recruited from the community with the strong support of community organizations and ethnic media. Stage 1 was approved by the Ethics Committee of the University of Sydney. Each focus group lasted 60-80 minutes and was based on a set list of discussion topics: • Perceptions of Sex, sexual anatomy and function • Sexual activity • Help seeking behaviour • Acculturation The second stage of the project will consist of an on-line questionnaire.

Findings: Emerging themes in the focus groups include: • The significance of bonding and couple commitment in intimacy and sexual relations, • Positive attitude towards masturbation, • Desire discrepancy between aging males and menopausal partners, • Acceptance of pornography as a private activity and sex as a natural drive

Discussion: Sexual activity appears to be important both as an individual activity and a couple behaviour throughout the lifespan South Asian men.

Conflict of Interest: None disclosed

Financial Support/Funding: Asia Pacific Society for Sexual Medicine

MP3-13

SPIRIT SPOUSE IN THE BELIEF SYSTEM OF NIGERIAN PEOPLES

Ikpe Eno Blankson (University of Lagos, Akoka, Lagos, Nigeria)

Introduction: Many Nigerian peoples believe in the existence of spirit spouses who have regular sexual relationships with their earthly spouses. Human-spirit sexual relationships are considered a major problem in the society with serious social and economic consequences to the human partner and the society. The examination of this phenomenon is the objective of this paper.

Methodology: The study is based on a random collection of oral tradition and oral evidence through unstructured interview, from different groups of people in ten ethnic groups in Nigeria. Written reports of this phenomenon in form of newspaper, magazine reports, and church news were consulted. Information gathered were collated and analyzed to determine the essence of the belief in spirit spouses in sexuality and culture of Nigerian peoples.

Findings and discussion: The following findings were made: The belief is very pervasive; It could be an expression of the following: sexual fantasy, sexual frustration and dysfunction and supernatural explanation for diverse sexuality and social problems. It absolves the human partner from taking responsibility for his or her sexual activities since the spirits are believed to exert strong controlling influence.

Recommendations: The belief in spirit spouses should be exposed to various interdisciplinary studies so that Nigerian peoples will be freed of such beliefs which limit their sexuality. Conclusion The belief in spirit spouse is a cultural explanation for sexual failures and limitations which has been orchestrated in contemporary times through some pentecostal churches.

References: Osuntokun Akinjide and Olukoju, Ayodeji (eds.), Nigerian Peoples and Cultures, Ibadan: Davidson

Conflict of Interest: None disclosed

Financial Support/Funding: Self

MP3-15

STATUS OF CHILD SEX TOURISM IN KENYA: CHALLENGES AND OPPORTUNITIES

Ouma Oscar K. (Maseno University)

Introduction: Sexual exploitation of children in Kenya is a real problem. Although there is no sufficient empirical evidence, the levels of poverty, HIV/AIDS and the increasing number of orphaned children is a testimony to the problem. This paper purposes to highlight the status of child sex tourism in the coastal region of Kenya with a view of identifying intervention measures.

Approach: Secondary literature on child sex tourism, pieces of legislation and policy associated with protection of children and their rights are explored critically with a view of identifying intervention gaps.

Findings and discussions: Results show that several

Methods: House work, pimps, peer influence and parental influence lure children to sex thereby making them vulnerable to HIV/AIDS. Apart from

dropping out of school, such children fall sick and sometimes die. Despite the existing policy and legal instruments, the Government needs to urgently move from theory to practice through integrated multi-sectoral approach whereby the private sector and parents form the main actors.

References: An alternative report to the UN committee on the rights of the child on the implementation of the convention on the rights of the child in Kenya. 44th. session - Geneva, January 2007. Jones, C. S., A. Ferguson, A. Mirikau, Dunn, J.(2005). A survey of sex tourism and sexual exploitation of children. A Government of Kenya/ UNICEF study of the extent and effect of Child Sex Tourism on the Kenyan Coast.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MODERATED POSTERS SESSION MP4

Sexological research: Socio-cultural

MP4-1

GENDER DIFFERENCES IN COMMUNALSEXUAL NORMS: ISSUES IN THE CONTEXT OF SEXUAL RIGHTS AMONG RURAL DWELLERS IN NIGERIA

Tinuola Femi R. (Kogi State University, Nigeria)

Sexual rights refers to the rights of individuals to make choices based on the consent on who their partners are, what kind of sex they want to engage in, ability to freely choose a sexual identity and every other issues regarding their sexuality without the interference of any other person(s). This study examines gender differences in sexual norms and its implication on sexual rights advocacy in rural communities in Nigeria. This study, conducted in Ekiti, Nigeria, relied on qualitative data. Fifteen rural communities were selected using stratified sampling technique in all Political Zones. In each community, 2 respondents were selected on purpose of traditional leadership. In all, series of In-depth interviews were conducted among 15 traditional rulers, 15 holders of traditional titles, 15 street heads, and 15 heads of households making a total of 60 interviewees. They responded to a Structured Interview Guide on various issues on gender differences in communal sexual norms and the current advocacy for sexual rights. Data were collated and analyzed using content analytical method. Findings show various cultural sexual norms such as sexual permissiveness for men at women's expense, men's rights for multiple sexual partnerships, women virginity before marriage, sex initiated rites of passage marked girls' entrance into sexuality among others. These norms are x-rayed in the context of the demand for sexual rights Understudying indigenous sexual norms through community based researches and aggressive sexual education on gender equality in the right to sex will reduce discrimination against women on sexuality issues.

Conflict of Interest: There is no potential conflict of interest

Financial Support/Funding:The research work is self funded from my monthly salaries

MP4-2

BEYOND THE CLOSET: ASEXUAL IDENTITY AND NEGOTIATION OF SEXUALITY

Radloff Katrin (Asexual Visibility and Education Network)

The belief that everyone should experience sexual attraction is rarely questioned. However, just as societal acceptance of homosexuality confronted the belief that everyone should be attracted to people of the opposite gender, now the rise of an asexual identity challenges the belief that all people should be attracted to someone. Due to dominant socio-cultural expectations, asexuality often lacks legitimacy as a sexual orientation in both medical and social contexts. Consequently, lack of sexual attraction may be dismissed or pathologised. Furthermore, the distinction between sexual and romantic attraction is often not appreciated. This is particularly problematic for asexuals who wish to engage in close relationships. This presentation will draw on case studies of members of the Asexual Visibility and Education Network (AVEN) to consider how wider recognition of asexuality could improve the health and well-being of asexuals seeking relationships with asexual or sexual people. It will discuss these case studies in the context of recently published surveys which address the nature of asexuality. The discussion of asexuality can contribute to the discourse about sexual norms and the role of 'personal distress' in the pathologisation of sexual preferences. The wider implications arising from the AVEN case studies will be raised.

Conflict of Interest: As a member of the Asexual Visibility and Education Network I have a personal interest in education and visibility around asexuality and the sexual well-being of people identifying as asexual in or outside of sexual relationships.

Financial Support/Funding:None disclosed

MP4-5

SAQ SEXUAL ADDICTION QUESTIONNAIRE. PILOT STUDY BASED ON AN ITALIAN POPULATION SAMPLE

*Michele Spaccarotella (Italian Sexological Scientific Institute (IISS)),
Michele Spaccarotella (Italian Sexological Scientific Institute (IISS))*

Objective: The Authors elaborated the Sexual Addiction Questionnaire (SAQ) to assess all useful information on psycho-sexological characteristics of sexual addicted personality. The pilot study has the purpose to analyze the SAQ reliability and to collect detailed information to help shaping a trustworthy identikit of a sexual addicted within the Italian context.

Method: The research focused on 300 subjects randomly recruited (women 52,5%, men 47,5%, average age of 31). SAQ is composed by 66 five-points Likert Scale items and 14 personal data items. The survey was adminis-

tered on-line through the IISS website to 150 subjects (experimental group) and on printed format to the other 150 (control group). According to the difficulty in finding people affected by sexual addiction, we assumed that the subjects' spontaneous decision to spend much time attending the online survey and the stronger perception of anonymity given by the web, could reveal a strong involvement in this psycho-sexological disease.

Results: As expected, the experimental group showed a higher percentage on the SAQ's key items. Moreover, many subjects in the control group considered themselves addicted by a specific sexual behavior (i.e. sexual fantasies 43%, and masturbation 40.5%).

Conclusions: The collected data help us to better define the characteristics of people affected by sexual addiction. The possibility of enlarge the research to a more statistical representative sample could reveal important clinical elements for the psychotherapy of sexual addiction.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP4-6

MALE CIRCUMCISION FOR HIV PREVENTION AMONG AT-RISK MEN AND WOMEN IN PAPUA NEW GUINEA: A QUALITATIVE INVESTIGATION OF MALE CIRCUMCISION AND ASSOCIATED PENILE CUTTING PRACTICES

Fitzgerald Lisa J (School of Population Health, UNiversity of Queensland), Kelly Angela (Papua New Guinea Institute for Medical Research/ University New South Wales), Siba Peter (Papua New Guinea Institute for Medical Research), Valley Andrew (School of Population Health, University of Queensland), Kaldor John (University of New South Wales)

Introduction: It is increasingly recognised that there is an emerging HIV heterosexual epidemic in Papua New Guinea (PNG). The WHO has recommend that male circumcision (MC) be considered an essential component of comprehensive HIV prevention strategies in high prevalence settings. There is not a lot of information on MC in PNG. This paper describes the preliminary findings of a qualitative research study which is currently examining MC, penile cutting and insert practices in (PNG); investigating socio-cultural beliefs, traditions and sexual norms relevant to the future acceptance and uptake of male circumcision.

Methods: A range of qualitative methods including participant observation, focus groups and in-depth interviews have been utilised to investigate and define socio-cultural norms, attitude and beliefs relating to MC, penile cutting and related practices across the 4 geographic sites of Port Moresby, Goroka, East Sepik and West New Britain.

Findings and discussion: The preliminary findings of this study will be discussed to highlight the complexity of socio-cultural contexts associated with MC as HIV prevention.

Conflict of Interest: None disclosed

Financial Support/Funding:AUSAID

MP4-7

SUGAR DADDIES/MOMMIES: A STUDY OF ADULT-ADOLESCENT FIRST SEX AMONG KENYAN YOUTH

Maticka-Tyndale Eleanor (University of Windsor)

Introduction: Adult-adolescent sexual activity, often referred to in Africa as the sugar daddy/mommy phenomenon, has consistently been identified as problematic. This paper examines the implications of having an adult for a first sexual partner.

Methods: Questionnaires were completed in 2005 and 2006 by 14,195 form 1-3 students in 160 randomly selected Secondary Schools in Kenya and focus groups were conducted with a subset of these youth. Chi-square statistics were used to separately compare males and females who reported an adult first partner to those whose first partner was within 3 years of their own age. Multivariate regression was used to profile the influence of adult first partners on later behaviors. Qualitative data provided textual descriptions of experiences.

Results: A minority of youth (5% males, 7% females) reported first sex with an adult. There was no difference between groups in reported force, coercion or condom use as part of first sexual encounters. First sex with a peer was more likely than with an adult to be a single occurrence with this partner. First sex with an adult was significantly linked to later riskier sexual and substance use. Youth (especially girls)described more benefits than costs to sex with adults and saw themselves as exercising agency in these encounters.

Conclusions: First sex with an adult 'sets youth up' for later riskier activities. Given the practical benefits that youth ascribe to adult partners, more detailed analyses are required to develop approaches that youth will see as beneficial.

Conflict of Interest: None disclosed

Financial Support/Funding:USAID

MP4-8

THE SEXUAL HEALTH PROGRAMME FOR PUBERTY RITES FOR GIRLS IN THE RURAL AREAS OF THE LIMPOPO PROVINCE, SOUTH AFRICA

Maluleke Xavela Thelma (University of Venda)

The poster is based on the findings of a completed study entitled "The utilisation of puberty rites for girls for sexuality education and prevention of HIV and AIDS among young people in the Limpopo Province, South Africa". The purpose of the study was to determine ways of utilising the puberty rites for girls in the prevention of HIV and AIDS. Its objectives were to: determine the sexual-health risk behaviours of young people that could contribute to unintended pregnancy, STIs, HIV and AIDS in the Vhembe district; determine the perceptions of young people regarding sexuality, sexual health, STIs and HIV and AIDS; develop and implement a sexuality education programme. The design was both quantitative and qualitative.

Self-administered questionnaires were used to determine the sexual risk behaviours, Focus group discussions, key informant interviews, semi-structured interviews and observation were used to determine the perceptions of young people regarding sexuality, STIs and HIV & AIDS. A sexual health programme based on the findings was developed and implemented. The programme aimed at providing accurate information about sexual health that will enable young people to develop responsible sexuality, mutual respect and good relationships that will result in the improvement of their quality of life. The sexual health programme assisted young people in understanding the human body; gaining knowledge and skills that will enable them to form attitudes; beliefs and values about their body image; sexuality development and interpersonal relationships and taking responsible steps to prevent teenage pregnancy, sexually transmitted infections (STI), HIV and AIDS.

Conflict of Interest: None disclosed

Financial Support/Funding: The research project was funded by the National Research Foundation (NRF)

MP4-9
PERCEPTIONS REGARDING VIRGINITY AMONG STUDENTS OF GOLESTAN MEDICAL SCIENCES UNIVERSITY

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Introduction: Iran's culture and religion prohibit sexual contact prior to marriage, in the other word virginity is very important especially in female. Due to the sensitivity of the topic, our knowledge about young people's perceptions is little. This study was designed to find out the perception of virginity among female students of Golestan Medical Sciences University.

Method: This qualitative research was performed using semi structured individual interview on 30 female students of Golestan Medical Sciences University. They were recruited by theoretical sampling and Saturation of data determined the number of them. Each interview was recorded and transcribed. The researchers analyzed transcribed for content.

Results: The participants were from different majors of medical sciences with an average age of 20-21. They were from different cities. The results were grouped into three topics: Definition of virginity, importance of virginity in both genders, and probability of lack of virginity in young people. Content analysis shows that most of participants have the same definition of virginity; having and keeping Hymen before marriage. And about second topic, some girls say: a virginity clearance is required for a marriage to go ahead, but some of them find this to be humiliating, because we know that some girls do have contact with boys in secret. But actual coitus is avoided to keep Hymen. Also they have idea that there is no evidence of male virginity, therefore most of them have sexual contact. Many of the girls think that the boys have an advantage and that they enjoy greater freedom.

Conflict of Interest: None disclosed

Financial Support/Funding: byself

MP4-10
DOLLING HERSELF UP: TRACKING ADOLESCENT GIRLS WHO USE THEIR BODIES AS POLITICAL STRATEGIES

Lin Yi-li (Graduate School of Human Sexuality, Shu-Te University, Taiwan), Yang Hsing-Chen (Graduate School of Human Sexuality, Shu-Te University, Taiwan)

“A girl will doll herself for pleasing herself.” Dressing and posing are a reaction of self-identity or a compliant under male-dominated society? “Dolling” is a conscious activity designed to please oneself. One can “Pleasing herself” by dolling up beautiful or feminine, or by playing a feminine role of social (patriarchy) expectation as a strategy to empower herself to against male-dominated society. This research explores how Taiwanese adolescent girls become aware of patriarchal society's influence on their clothing choices, and how they then use this awareness in the struggle against patriarchal norms. It will further show how “dolling” or “dressing up” can empower the female body as a challenge to patriarchal constraints on female subjects, sexual desires, and power. Adopted by post-structural feminist theory, this research uses ethnography research to document how the adolescent girls, from different regions of Taiwan and school cultures consciously use their bodies and action as a strategy to break sexualized body disciplining for enhancing physical autonomy in gendered power relations. As a record of female adolescent self-empowerment and socio-political strategy, this research will form an important educational resource in the struggle against patriarchy and for the cause of women's rights, equality, and independence.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP4-11
KNOWLEDGE, ATTITUDES, AND PRACTICES TOWARD REPRODUCTIVE HEALTH AND HIV/AIDS RELATED ISSUES IN BELARUS

Hetherington, MIH Kristina L (University of Copenhagen)

Objective: To investigate the knowledge, attitudes, and practices regarding reproductive health and HIV/AIDS related issues amongst students of the Belarusian State Medical University (BSMU) in Minsk, Belarus.

Methods: In May 2006, 206 male and female students from BSMU responded to a pretested 26-item classroom questionnaire about HIV transmission knowledge, sexual behavior, and reproductive health practices. The students were recruited by professors at the university and represented different course years and faculties within the university. The questionnaire was designed by the investigator in English before being translated into Russian. Questions were primarily formulated from previous studies conducted in Russia and Ukraine.

Results: The mean age of first sexual intercourse for both genders was 17.9 years. Ten percent of students reported having been diagnosed with a sexually transmitted infection. 68% of respondents were able to correctly identify

tify 3 modes of HIV transmission and reject 2 myths about the disease. Thirty-six percent of men and 49% of women did not use a condom during their last sexual encounter with a non-regular partner. The primary reason indicated for not using a condom with a non-regular sexual partner was 'I don't like them.' The primary methods of pregnancy prevention were condom use (51%) and coitus interruptus (33%). Of the female respondents with previous sexual experience, 6% reported rape and 13% reported abortion.

Conclusion: Improving the HIV/AIDS/STI knowledge and education of the future health care providers of Belarus could prove beneficial to the reproductive health and HIV status of the population

Conflict of Interest: No potential conflicts of interest.

Financial Support/Funding: This research was self-funded by the investigator as a master's thesis project.

MP4-12

PRACTICES AND PROBLEMS RELATING TO SEXUAL BEHAVIOUR AMONG THE ELDERLY IN IBADAN, NIGERIA

odor king o (university of ibadan, nigeria), igwe nnennac (university of ibadan, nigeria)

Most studies on sexual behaviours in Nigeria focus on young people and adults with limited attention paid to elderly people. There is dearth of information on geriatric reproductive health challenges and involvement in risky sexual activities. This study determined the sexual behaviour among Geriatrics in Nigeria. The study was descriptive and cross sectional in design. 400-geriatrics aged 65 years and above were selected using a three-stage sampling technique. Validated questionnaire was designed from six Focus Group Discussions (FGDs) findings. The FGDs and questionnaires data were analysed using thematic approach and descriptive/Chi-square statistics respectively. Slightly more than half, (50.5%) were males. A total of 25% of the participants had extramarital sex since they attained 65 years. Among this subgroup, very few (6.8%) used condom. More males (5.3%) than females (1.5%) used condom during the episode ($p < 0.05$). Low condom-use was attributed to the belief that condom is unnecessary (34.5%) and the perception (50%) condom is not for the elderly. Majority (68.8%) was of the view that having sex with virgin could boost their immunity against STI/HIV; which comprised 65.1% males and 34.9% females. Majority of the males (56.4%) and females (66.7%) agreed that engagement in sex has a healing effect on the elderly. Appreciable proportion of the elderly was involved in risky sexual activities, while majority's perceptions about Sexual behaviour were negative. Therefore, there is need for health education to address the problem.

Conflict of Interest: None disclosed

Financial Support/Funding: Council for Development of Social Science Research in Africa (CODESRIA)

MP4-13

OSU CASTE SYSTEM IN EASTERN NIGERIA AND IMPLICATIONS FOR MARRIAGE: THE IMPOTENCE OF THE NIGERIAN GOVERNMENT AS PROBLEM SOLVER.

EDEWOR DENNIS O

Marriage is supposed to be a matter of choice and not a chance happenstance dictated by the society. Wedlock ideally should be based on the tenets of love for a member of the opposite sex and the reciprocation of this emotion by the targeted partner. This is not so for the Igbos who are found mostly in the Southeastern and South-central Nigeria called Igboland or Igbo society (Alaigbo or Anaigbo). A terrible relic of the indigenous religious practice of the Igbos is the dehumanizing Osu caste system, which has divided and alienated the Igbos. The Osu, by definition, is a people sacrificed to the gods in Igbo community. The Osu status is acquired through inheritance and marriage. It is an abomination (Taboo) in the Igbo society for the Diala (freeborn) to marry the Osu. This author utilized an Expost facto design combining secondary data like Newspapers, Internet materials, journals and the interview method to collect data on the issue. The result showed that till date the Osu are debarred from marrying the Diala. Also findings revealed that the Osu are very unhappy with the issue of discrimination. Finally the result showed that the Nigerian Government has not done anything tangible to abolish the Osu caste system among the Igbo people. The Osu caste system categorizes the Osu as sub-human beings and debars them from marrying the freeborn Igbos. This author condemns the practice of the Osu caste system and the Nigerian Government for condoning this blatant violation of human rights.

Conflict of Interest: None disclosed

Financial Support/Funding: NONE- PERSONAL

MP4-14

LGBT COMMUNITY CENTER - BOGOTÁ, A SUCCESSFUL EXPERIENCE IN LATIN AMERICA

Castillo Elizabeth (Profamilia - Colombia)

LGBT Community Center in Bogotá, a successful experience in Latin America. The LGBT Community Center is the first one that exists in Latin America. It has been working for two years and has provided services to more than 4000 persons. It was created thanks to an innovative approach and coalition between government and three private organizations, which are: Colombia Diversa, NGO; Theatrón, a disco; and Profamilia, associated to IPPF*. With a staff of seven persons, and the support of volunteers, this Center provides services of psychological assistance, attorney counseling, assistance of Social worker and has been a place where LGBT groups and activists could meet and find support. The space counts with 2 auditorium (25 persons), 2 psychologist's office, 1 attorney office and 1 documentation center. The CC also provides services to heterosexual population who are family members of LGBT people and provides too sensitization and activities for public workers and

policemen. Thanks to LGBTCC there are a lot of new groups in Bogotá, like: parents of LGBT people, deaf people, gay men, bisexual people, LGBT PLWHIV, transsexual persons and LGBT people older than 50. During this two years the LGBT Community Center has not had threaten or has not been attack by any group. Confidentiality as a principle; the conception of the LGBTCC like a non confessional apace and free of political compromises has been a effective lesson learned which give the users the idea of a neutral and safe place to find help.

Conflict of Interest: Any.

Financial Support/Funding: Mayor's office and temporal alliance: Profamilia -Colombia Diversa - Theatrón.

MP4-15

"REBEL" DISCOURSE: MUSIC AND SEXUALITY IN KENYA

Otieno Hezron N

Hezron Otieno "Rebel" Discourse: Music and Sexuality in Kenya The recent increase in female-centred, hyper-sexual texts in music videos in Kenya does illustrate a fundamental transformation in sexual politics. Although these texts provide conventional images of women as sex objects, they serve to subvert traditional restrictions that are historically against women's sexuality. Through content analysis of both text and videos to select music, the study seeks to illustrate that raw representation of sexuality in the videos has overcome the supposed demand that women should attempt to control the perceived excesses of their bodies hence their sexuality. The findings reveal that, this representation is not a sort of female oppression, but a challenge to sexual expression that has historically been exclusive to masculine discourse. It is so if we move beyond a feminist interpretation, which contends such sexually explicit texts reinforce patriarchy. Such a reading does not address all the meanings in popular music. In conclusion, these videos reflect more than mere patriarchal oppression. Music is not a universal art form, but a social construction shaped by structural forces, dominant ideologies, and the conventions of globalization. Even as social factors are naturalized in popular music, they are likewise challenged, undermined, subverted, and renegotiated.

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Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MODERATED POSTERS SESSION MP5

Clinical sexological research

MP5-1

PERSISTENT GENITAL AROUSAL DISORDER IN A MALE: CAN IT BE DEFINED?

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Objective: Persistent genital arousal disorder (PGAD) is defined as unsolicited genital arousal that perseveres for hours or days despite the absence of sexual desire or sexual stimuli(1). PGAD is a disorder that is not yet defined in males but only in females. In this case report, a male experiencing signs of persistent genital arousals in the absence of an increase in sexual desire or stimuli is reported.

Case: A single and 22 year-old male consulted to a psychiatry outpatient clinic with a complaint of increased genital arousal. The patient defined attacks of erection or sexual arousal which are either spontaneous or provoked by non-sexual stimuli such as excitement, anger. Sexual arousals were distressing and troublesome for the patient. The patient showed resistance to sexual arousals, wearing double underwear in order to hide the arousal from other people, and avoiding masturbation for fear of an increase in sexual stimulation. He felt guiltiness, shame and was disturbed by the sexual arousals, reluctant to be in crowded social environments.

Discussion: Persistent genital arousal and hypersexuality seems similar to each other, but they have some differences. In hypersexuality, increased sexual desire along with or as a result of sexual imagination, fantasies or masturbations are in question. The resultant sexual experiences give pleasure to the individual. Some cases of PGAD attributed to discontinuation of serotonin reuptake inhibitors were documented in the literature. There was no taking of medication or any kind of medical condition in this case and no psychosocial stress factors were reported.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP5-2

SEXUAL DYSFUNCTION AND QUALITY OF LIFE AFTER SPINAL CORD INJURY

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Objectives: Sexual dysfunction belongs among common problems after spinal cord injury (SCI). Three out of four men after SCI suffer from erectile dysfunction, 95–98% do not ejaculate. Untreated sexual dysfunctions lower self-confidence, prevent socio-sexual adjustment and negatively influence quality of life (QOL). Our goal was to determine awareness of possible sexual dysfunctions after SCI and to assess individual parameters of sexual life.

Methods: 92 persons at least 6 months after SCI completed 16-item Quality of Sexual Life Questionnaire, QOL measurement WHOQOL-BREF and GDS depression scale. Statistical significance was tested using analysis of variance ANOVA. Results 53 patients (57,6% out of 92) had sexual life. 65,2% received information on altered sexuality during hospitalization, 77,2% confirmed they had sufficient information on sexuality. Out of 53 sexually active patients, 45 (84,9%) mentioned decreased sexual QOL after SCI, 30 (56,6%) lower arousal, 17 (32,1%) decreased sexual desire and 49 (92,5%) anorgasmia. 49 patients (94,2%) performed non-coital sex. 32 (61,5%) were satisfied with their sexual life. Patients having sexual life did not differ from those who were sexually inactive regarding duration of disability, they were however significantly younger, with lower depression score, higher education and better physical health. Sexually inactive patients scored in the range of mild depression.

Conclusion: Early intervention including information about altered sexuality and timely treatment of sexual dysfunction is important for patients after SCI. Sexual QOL after SCI can be improved by treatment of depression and physical co-morbidity as well.

Conflict of Interest: None disclosed

Financial Support/Funding: The work was supported by research project MZCR MZOPCP2005 and EU SP23-CT-2005-513723

MP5-3

WELL BEING AND SEXUAL ESTEEM AS PREDICTORS OF WOMEN'S SEXUAL SATISFACTION AND FUNCTIONING

Vilarinho Sandra M. C. (Faculty of Psychology and Educational Sciences, University of Coimbra), Nobre Pedro J. S. (University of Trás-os-Montes and Alto Douro)

Research has shown important associations between dimensions of well being and women's sexuality (e.g., Heiman, 2002; Wiederman & Hurst, 1998). However, most studies have been restricted to the context of physical disability (e.g., Taleporos & McCabe, 2002), and very few have considered those variables together in order to clarify their differential impact on sexual experiences. For example, the specific role and relation between self-esteem and sexual esteem is still unclear. Following this, our goal was to investigate how components of women's well being and sexual esteem may interact with sexual function and satisfaction. Participants were 497 women from the general population, with ages between 18 and 75. Questionnaires assessed: self-esteem (SES), satisfaction with life (SWLS), body satisfaction (subscale from BAT), sexual self-esteem (subscale from SS),

sexual functioning (FSFI) and sexual satisfaction (GRISS). The study was cross-sectional. After controlling for demographics, we found that women who scored higher on sexual satisfaction and functioning also presented significantly higher scores on self-esteem, satisfaction with life, body satisfaction and sexual esteem. However, regression analysis revealed that satisfaction with life and sexual esteem were the only significant predictors of both women's sexual satisfaction and functioning. Additionally, although self-esteem and sexual esteem were moderately associated, when entered simultaneously as predictors, self-esteem revealed no predictive value for any dimension of sexual functioning, except for pain. Findings, clarifying the contribution of different dimensions of well being and sexual esteem on women's sexual satisfaction and functioning, will be discussed in terms of clinical/ research implications.

Conflict of Interest: None disclosed

Financial Support/Funding: Foundation for Science and Technology

MP5-4

BASELINE CHARACTERISTICS OF PATIENTS ENROLLED IN THREE PHASE III NORTH AMERICAN TRIALS OF FLIBANSERIN IN PREMENOPAUSAL WOMEN WITH HYPOACTIVE SEXUAL DESIRE DISORDER

Clayton Anita H (University of Virginia), Jolly Elaine (The Ottawa Hospital), Thorp John (University of North Carolina), Lewis D'Agostino Diane (Boehringer Ingelheim Pharmaceuticals, Inc.), Wunderlich Glen (Boehringer Ingelheim (Canada) Ltd./Ltée), Lesko Lynna M (Boehringer Ingelheim Pharmaceuticals, Inc.)

Introduction: Flibanserin, a novel 5-HT_{1A} agonist/5-HT_{2A} antagonist, is being investigated as a potential treatment for generalized acquired HSDD in premenopausal women.

Objective: To present baseline characteristics of premenopausal women with HSDD enrolled in three Phase III North American trials to assess the efficacy and safety of flibanserin.

Methods: The DAHLIA[®], VIOLET[®], and DAISY[®] studies were prospective, multicenter, randomized, double-blind, placebo-controlled, parallel-group trials. Each consisted of a 4-week baseline period, 24-week treatment period and 4-week follow-up.

Results: 3846 women were enrolled. Data are expressed as the mean (SD) or percentage from the DAHLIA, VIOLET, DAISY trials, respectively. Mean ages of subjects were 35.0 (7.0), 35.8 (7.2), 35.5 (6.9) years. Mean baseline data were: number of sexual events/month 4.5 (3.7), 4.8 (3.8), 4.9 (4.2); number of satisfying sexual events/month 2.6 (2.5), 2.8 (2.7), 2.8 (2.8); desire score (max. score: 84) 11.8 (9.1), 11.9 (9.7), 11.3 (9.3); FSFI score 18.7 (6.6), 19.3 (6.7), 19.6 (6.2), FSFI desire score 1.8 (0.1), 1.9 (0.7), 1.8 (0.7); FSDS-R score 31.6 (9.9), 30.6 (9.8), 30.7 (9.5); FSDS-R Item 13 score 3.3 (0.7), 3.2 (0.8), 3.2 (0.8).

Conclusions: Baseline characteristics were similar in the three trials.

Conflict of Interest: Supported by Boehringer Ingelheim. Anita Clayton is a consultant to Boehringer Ingelheim.
Financial Support/Funding: Supported by Boehringer Ingelheim.

MP5-6

SEX DIARIES: A NEW TECHNIQUE FOR EXPLORING DYNAMICS IN DESIRE DISCREPANCY

Arndt Bettina

Introduction: This new sex diary technique provides qualitative data on the interaction of couples in negotiating differences in desire.

Method: Print and electronic media attracted volunteers for a study on negotiating sex in long-term relationships. From 233 people initially expressing interest, 98 couples ultimately participated. Each member of a couple wrote separate diaries tracking desire and/or requests for sexual activity, the outcome and response to the event plus histories of patterns of desire. Diary entries were usually transmitted electronically, sometimes by regular mail and other participants were interviewed by phone.

Findings/discussion: Diary contributions varied from a few communications to detailed, regular submissions for periods up to 9 months. Both members contributed in most couples (53%), providing his-and-her versions of the same sexual event. As previously observed, most couples reported desire discrepancy with lower female interest constraining the sexual frequency - a source of deep dissatisfaction to many male participants. Female diaries showed how everyday tensions and resentments dampen desire. The resulting relationship stress and male unhappiness suggest it is unhelpful having a couple's sex life hinge on the fragile female libido.

Recommendations: A strong challenge is needed to the cultural assumption that women must desire sex in order to enjoy it - if couples are to experience regular, pleasurable sex and sustain loving relationships. With many couples reporting better communication and reduced tension from participation in the project, the diary technique proved a powerful tool for studying couple dynamics, with therapeutic benefits.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

MP5-8

ASSESSMENT OF PSYCHOPATHY AMONGST INCARCERATED SEXUAL OFFENDERS IN MALAYSIAN PRISONS

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The main purpose of this research is to assist prison officers in rehabilitating incarcerated sexual offenders. This is congruent with the amendment of section 295a of the Malaysian Criminal Procedure Code (Act 593) whereby counseling of incarcerated sexual offenders has been made mandatory. This

research assesses psychopathy using a Malay language translated version of the Million Clinical Multiaxial Inventory III (MCM-III). The traits assessed were: Schizoid, Avoidant, Depressive (Melancholic), Dependent, Histrionic, Narcissistic, Antisocial, Sadistic, Compulsive, Negativistic, and Masochistic. 2000 incarcerated male sexual offenders, ranging from 18 years to 65 years participated in this research. 25% of them were interviewed. Data was generated using a survey and semi-structured interview spanning 12 weeks. The results of the research indicate the presence of psychopathic traits amongst most participants, and that prison officers require additional training to manage the complexities of rehabilitating psychopathic inmates. Findings of this study provide necessary information for the formulation of sexual offenders' psychopathic profiles; improve knowledge and skills amongst prison officers in managing rehabilitation and treatment programmes; provide evidence for future skills training amongst prison officers; and enable referral of sexual offenders for psychiatric treatment as necessary.

Conflict of Interest: None disclosed
Financial Support/Funding: International Islamic University Malaysia

MP5-9

CHLAMYDIA MONDAY

Hansson Bocangel Marta K (Lafa - Stockholm aids prevention programme)

Chlamydia-Monday – offering testing during one day as a way to highlight the risk of contracting STIs including HIV by practicing unsafe sex. General Practitioners, Mother and Child Health Clinics, Youth Clinics within the Stockholm County have been invited to participate in a joint activity of easy-testing for Chlamydia during one day in September 2003 - 2008. The goals of Chlamydia Monday are to bring attention to and spread knowledge about chlamydia infection on a general level, offer extended, easily accessible testing at many different places and encourage more frequent use of condoms. Another aspect is to raise the level of awareness of the disease and the seriousness of the infection also among health workers at clinics not usually focused on chlamydia by inviting them to participate in this activity. A questionnaire was distributed to participating clinics 2003 - 2007, to be handed out to the visitors, with questions like –why do You want to get tested –have You had or been tested for Chlamydia before - do You think Chlamydia is a serious infection and would You have been tested anyway, had it not been Chlamydia Monday? A significant change for the better was observed with regard to knowledge about the seriousness of chlamydia, comparing the results from 2003 with 2007. The incidence has varied between 6,2 - 10 per cent and nearly half of the tested were men. Around 20 - 22 percent state they would not have been tested if not for Chlamydia Monday.

Conflict of Interest: None disclosed
Financial Support/Funding: Not applicable

MP5-10

THE ROLE OF COGNITIVE SCHEMAS ON MALE SEXUAL FUNCTIONING

Quinta Gomes Ana Luísa (Universidade de Trás-os-Montes e Alto Douro), Nobre Pedro (Universidade de Trás-os-Montes e Alto Douro)

Introduction/Objectives: Despite the growing interest on the role played by cognitive factors on sexual functioning, few authors have emphasized the importance of cognitive schemas on male sexual functioning (Andersen, Cyranowski, & Espindle, 1999; Nobre & Pinto-Gouveia, 2006). The objective of the present study was to investigate the importance of cognitive structures like Early Maladaptive Schemas and Cognitive Schemas Activated in Sexual Context on men's sexual functioning, and clarify the way these cognitive psychological variables discriminate men with and without sexual dysfunction.

Method: 18 men diagnosed with sexual dysfunction recruited from Portuguese Sexology Clinics and 205 individuals from the community participated in the study. Participants answered the Sexual Dysfunction Interview (SDI - male version; Sbrocco, Weisberg, & Barlow, 1992), International Index Erectile Function (IIEF; Rosen, Riley, Wagner, Osterloh, Kirkpatrick, & Mishra, 1997), Young Schemas Questionnaire (YSQ; Young & Brown, 1990) and the Questionnaire of Cognitive Schema Activation in Sexual Context (QCSASC; Nobre & Pinto-Gouveia, in press).

Results: Regarding Early Maladaptive Schemas, findings indicated that men experiencing sexual difficulties presented significantly more Dependence/Incompetence ($p > .05$), Vulnerability ($p > .05$) and Subjugation ($p > .05$) Early Maladaptive Schemas when compared to sexually healthy individuals. Moreover, when exposed to unsuccessful sexual events men with sexual dysfunction activated with significantly higher frequency Incompetence schemas when compared to men without sexual problems or men experiencing some sexual difficulties ($p < .001$).

Conclusions: Findings support the importance of the cognitive structures on male sexual functioning showing that men with sexual dysfunction present more Early Maladaptive Schemas concerning Dependence/Incompetence and Vulnerability themes and activate Incompetence schemas in unsuccessful sexual situations.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP5-11

WOMEN'S SEXUAL DESIRE AND SATISFACTION: TESTING A PROPOSED COMPREHENSIVE PSYCHOSOCIAL MODEL

Vilarinho Sandra M. C. (Faculty of Psychology and Educational Sciences, University of Coimbra), Nobre Pedro J. S. (University of Trás-os-Montes and Alto Douro)

Along with the general claim for a more comprehensive and positive perspective on women's sexual experiences, important contributions highlight

the role of relationship (e.g., Basson's circular model) and cognitive-emotional variables (e.g., Nobre's studies), and recent studies suggest the need to further explore the relationship between sexual satisfaction and sexual functioning (e.g., Leonard et al., 2008; Sidi et al., 2008). Following this, we propose and test a recursive model integrating predictors of sexual desire, including sexual satisfaction, arousal, lubrication and orgasm. Participants were 497 Portuguese women from the general population, between 18 and 75 years. Questionnaires assessed, within a cross-sectional study: sexual self-esteem (subscale from SS) and satisfaction (GRISS); sexual functioning (FSFI); relationship satisfaction (GRIMS); affect (PANAS-X); sexual beliefs (QCSA), focus of attention and sexual fantasies. The proposed model hypothesized that sexual self-esteem, relationship satisfaction, and sexual beliefs work as exogenous variables, with direct and indirect effects on sexual desire. Additionally, women's attention on pleasure, use of fantasies, positive emotions, as well as sexual response variables such as arousal, lubrication and orgasm would work as mediators of sexual desire. Sexual satisfaction would also explain sexual desire, conceptualised according to Basson's proposal. Results obtained through path analysis supported the relevance of the model and its adjustment to the observed data. Findings, indicating the main role and interplay between relationship, cognitive-emotional factors, and dimensions of sexual functioning in predicting sexual desire, are discussed in terms of implications for promotion and protection of sexual health.

Conflict of Interest: None disclosed

Financial Support/Funding:Foundation for Science and Technology

MP5-12

CLINICAL MANAGEMENT OF TRAUMATIC FISTULA IN THE NORTHERN PROVINCE OF THE REPUBLIC OF CAMEROON (KOUSERRI REFUGEE CAMP).

JEROME KUME ISOH (COHECF), MANJA ASANJI IMMACULATE (COHECF), NJONG ANDA ALFRED (COHECF)

Introduction/Objectives: The civil war that took place in the Republic of Chad some years ago, has led widespread and extreme sexual violence. One of the consequences has been the occurrence of urogenital fistula (UGF) or traumatic fistula. Our objective is to highlight the prevalence and etiologies of traumatic gynecological fistula and to discuss clinical management in our setting.

Methods: This study was conducted from June 14, 2006 to May 30 2008 at the kouserri Referral Health Center, Cameroon. We receive 2,506 cases of sexual assault and rape, amongst which were 198 cases with gynecological traumatic and recto-virginal fistula. During the same period of study, 72 cases with vesico-vaginal fistula (VVF) of obstetrical origin were also admitted, giving 2,578 cases in total, cases with VVF underwent surgery for UGF.

Results: Rape caused 71% of traumatic UGF, whereas 29% were of obstetrical origin. Of the total 5.7% had extra genital lesions. Only 89 pa-

tients received post-exposure prophylaxis (PEP) against HIV following the incident. In total 2,016 survivors of sexual received social support and medical help, and 198 cases underwent surgery for VVF repairs. For the VVF cases the average age of victims was 28.6 years, with a range from 6-58 years. Again, 11% of the women were age less than 18 years.

Conclusion: War atrocities are the most common cause of traumatic fistula in army conflict of the Republic of Chad. Rape victims seen at health facilities represent only the tip of the iceberg.

Conflict of Interest: clinical management of rape victims in conflict areas.
Financial Support/Funding: still seeking funding and sponsorship.

MP5-13

THE IMPACT OF BONE MARROW TRANSPLANTATION ON SEXUAL FUNCTIONING AND IT'S RELATION TO DEPRESSION AND ANXIETY

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Aims: The aim of this study was to investigate the prevalence of sexual dysfunctions and its relationship with depression and anxiety in a sample of patients underwent bone marrow transplantation (BMT).

Methods: A cross-sectional study was conducted in 135 married patients who underwent BMT at least 1 year before evaluation. Sexual dysfunctions assessed by a questionnaire that was derived from Sexual History Form and Sexual Problem Measure. Hospital Anxiety and Depression Scale (HADS) was used to assess depression and anxiety in patients.

Results: Questionnaires were completed by 128 (82.5%) participant. Fifty three percents of participants was male. The mean age of participants was 39.57±8.74. Sexual dysfunctions in post BMT period were significantly more frequent than period prior to the beginning of oncologic malignancy (P<0.05). Sexual activity was decreased significantly after BMT (P<0.01). The three most prevalent sexual dysfunctions in male group were premature ejaculation (56%) and problem in orgasm (40%) and desire (32.7%), and in female group were problem in arousal (77%) and desire (77%) and painful intercourse (77%). Sexual dysfunction was more prevalent in female group. According to HADS score, 42 (32.8%) patients had clinical depression (HADS-D score >14) and 12 (9.8%) patients had

clinical anxiety (HADS-A score >14). There was not any significant relationship between mean HADS-A and HADS-D scores and scores of sexual dysfunctions questionnaires.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP5-14

SEXUAL DYSFUNCTION IN DRUG FREE SCHIZOPHRENIC PATIENTS: A CASE-CONTROL-STUDY

El Kissi Yousri (Psychiatry department; Farhat Hached Hospital), Ayachi Mouna (Psychiatry department; Farhat Hached Hospital), Gaabout Samia (Psychiatry department; Farhat Hached Hospital), Ben Nasr Selma (Psychiatry department; Farhat Hached Hospital), Ben Hadj Ali Bechir (Psychiatry department; Farhat Hached Hospital)

Introduction/Objectives: Sexual dysfunction is reported by up to 80% of patients with schizophrenia and seems to be mainly associated with antipsychotic medications. Although other factors may be implicated, few studies have assessed sexual functioning in untreated patients. This study aimed to compare sexual functioning in drug free schizophrenic patients and in healthy controls.

Method: A consecutive sample of Sixty-nine patients meeting DSM-IV criteria of schizophrenia was constituted in psychiatry department of Sousse Farhat Hached hospital (Tunisia), during a twelve months period. They were drug naïve or drug free for at least three months. Sixty-nine age and gender matched controls were recruited among blood donors. They were free from psychotic disorders as screened by MINI-PLUS. Sexual functioning was assessed using the Arizona Sexual Experience Scale (ASEX) in sexually active patients (N=52) and controls (N=57), then compared between the two groups.

Results: There were no differences in sexual dysfunction rates between schizophrenic patients (21.7%) and healthy controls (17.4%), according to usual threshold values. Also, global ASEX score was similar in schizophrenic patients as in controls. Besides, different ASEX item scores including sex drive, arousal, vaginal lubrication/penile erection, orgasm, and satisfaction have not shown any differences between patients and controls. Only female patients reported lower sexual satisfaction compared to female controls (p=0.008).

Conclusion: Our results showed a low rate of sexual dysfunction in drug free schizophrenic patients without statistical differences with healthy controls. They support the idea that antipsychotic drugs are the main aetiological factor of sexual dysfunction in patients with schizophrenia.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP5-15

SEXUAL ORIENTATION AND SEXUAL BEHAVIORS OF OUTPATIENTS WITH GENDER DYSPHORIA IN JAPAN.

ISHIMARU Keiichiro (The University of Tokyo), HARIMA Katsuki (Harima Mental Clinic)

Introduction and objectives: The aim of this study was to investigate the relationships between sexual orientation and the actual sexual behavior among transsexuals in Japan.

Method: Participants were 468 consecutive outpatients with gender dysphoria who came to Harima mental clinic, Tokyo, Japan, between April and August 2008. The inclusion criteria were criteria A (cross-gender identification), B (discomfort with sex and gender role), and D (significant distress or impairment) for Gender Identity Disorder in DSM-IV-TR judged by an experienced psychiatrist. Their sexual orientation, history of sexual behaviors, and marital history were inquired in the first interview.

Results: Of the 468 participants, 294 were female-to-male (FTM), and 174 were male-to-female (MTF). Mean age were 25.6 for FTMs, and 32.85 for MTFs. 90% of FTMs were attracted to females, and MTFs had various sexual orientation: 44.8% were attracted to males, 15.5% to females, 23.0% to both, 9.2% to none, and 7.5% were unclear. Although most of FTMs were attracted to and had sexual contact with females, some of them had sexual contact with males (35.0%, 24.9%, and 20.7% for kissing, petting, and vaginal intercourse respectively). MTFs had various sexual experiences with both males and females.

Conclusion: Most of FTMs were clearly attracted to females, but some of them also had sexual contact with males. That might link to periods for seeking their gender identity. MTFs were more diverse on sexual orientation, sexual behaviors, and marital history.

Conflict of Interest: None disclosed

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search which explores the views of professionals working with transgender clients; parents who have had or currently have gender-variant (GV) children and transgender adults themselves. The research is an internet-based survey aiming to identify the support needs of children with GV; bring to the open forum some of the issues that children with GV and their parents are dealing with; identify the ways in which children with GV are marginalized; and recognise the support parents require in coping with various issues. The objectives include the creation of support programs and advocacy for GV children and their parents, the establishment of guidelines for working with GV children and contribution to a curriculum in educating health professionals. The longer term benefit of these programs have the potential to; reduce bullying and ostracism of GV children, contribute to positive mental health during development; help to mitigate the difficult circumstances that people with GV experience and ultimately; reduce the trauma and upheaval that adults with Gender Identity Disorder (GID) experience.

Conflict of Interest: None disclosed

Financial Support/Funding: University of Sydney

MP6-2

DATING AND SEX: PERCEPTIONS AND PRACTICES AMONG YOUNG PEOPLE IN NEPAL

Regmi Pramod R (Aberdeen University), Simkhada Padam (Aberdeen University)

Introduction: Research conducted in developed societies has shown strong associations among dating culture, early and risky sexual practices and violence. Socio-cultural changes in Nepal including better communication facilities and transportation, urbanisation and the rising age at marriage have created more opportunities for young people for so-called 'dating'. This qualitative study explores whether the existence of dating cultures influence young people's sexual behaviour in Nepal.

Methods: Focus group discussions (n=10) and in-depth interview (n=31) were carried out among young people in Nepal. Results and Discussion: Most of the urban and rural young people liked the dating culture. Mass media such as TV/internet/radio/movie and peer pressure were found to be more encouraging factors for dating practices. Although it is a new culture in Nepal, it has been found widely practised among young people. Most of the participants believe that dating culture encourages premarital and extramarital sexual behaviour.

Recommendation: Dating culture and exploitation during should be discussed and incorporated both in formal and informal education. Key References: MacDougall C and Fudge E. Planning and Recruiting the Sample for Focus Groups and In-depth Interviews. *Qualitative Health Research*, 2001;11(1); 117-126. Puri M and Busza J. In forests and factories: sexual behaviour among young migrant workers in Nepal. *Culture, Health & Sexuality*, 2004; 6 (2); 145-158. Stone N, Ingham R and Simkhada P. Knowledge of Sexual Health Issues Among Unmarried Young People in Nepal. *Asia-Pacific Population Journal*, 2003; 18(2); 33-54.

MODERATED POSTERS SESSION MP6

Sexological research: Socio-cultural

MP6-1

THE BANISHED CHILDREN

Riley Elizabeth Anne (University of Sydney)

The Banished Children Gender Variant Children: Views of Professionals, Parents and Transgender Adults A research project exploring the support needs of gender variant children and their parents. This paper will cover the current invisibility of gender variant children in Australia and the importance of researching the needs of gender variant (GV) children and their parents. Illustrated will be the methods and preliminary findings of the re-

Moderated posters

Conflict of Interest: None disclosed
Financial Support/Funding: University of Aberdeen

MP6-3 **A SYMBOL FOR AN EQUAL SOCIETY – THE SWEDISH POLICY OF CRIMINALIZING CLIENTS**

Dodillet Susanne

In 1999 the purchase (but not the selling) of sexual favours was forbidden in Sweden. The Swedish policy is a result of intensive radical feminist debates in the Swedish parliament during the 1990s (Eduards 2007, Svanström 2006, Dodillet 2009). Policymakers argued that prostitution is a form of male violence against women and that client criminalization would serve as a signal that prostitution is not accepted in Sweden. It was seen as a way not only of diminishing prostitution but of strengthening the reputation of Sweden as one of the most gender equal countries in the world. This paper compares the arguments that were used when the “Swedish model” was implemented with the claims made in governmental evaluations of this policy. So far all major evaluations of the Swedish law have been conducted by the National Board of Health and Welfare (Socialstyrelsen), which is answerable to the Ministry of Health and Social Affairs. The comparison between these reports and the policymakers’ initial claims shows that the problems which are said to be addressed by the client criminalization change over time and in accordance with upcoming reports on social problems such as trafficking and forced prostitution. It also shows that other questions, e.g. prostitutes’ rights and working conditions, were disregarded in the preparatory discussions as well as in the governmental enquiries. By analyzing the themes that are mentioned and disregarded in the Swedish evaluations this paper may also provide insight into the advantages and disadvantages of the Swedish model.

Conflict of Interest: None disclosed
Financial Support/Funding: Göteborgs university, Södertorns University & FEMCIT funded by EU’s Sixth Framework Programme

MP6-6 **POOR SEXUAL AND REPRODUCTIVE HEALTH OF RURAL WOMEN AND ACCESS TO SERVICE IN BANGLADESH**

Akram Owasim (James P Grant School of Public Health), Rashid Sabina Faiz (James P Grant School of Public Health), Standing Hilary (Institute of Development Studies, Sussex University, UK)

Background: Poor Sexual and Reproductive Health (SRH) in Bangladesh indicates an unacceptably high prevalence of preventable conditions, unnecessary suffering and often devastating consequences for individuals and families. This research aims at setting a coherent and feasible research agenda that reflects the needs and demands for SRH service in developing countries.

Methods: The study was carried out in a rural area. 404 randomly selected ever married women were interviewed. 5% were re-interviewed to maintain integrity of data. A pre-tested, semi-structured questionnaire was filled out assuring confidentiality and secrecy.

Findings: 45% of the respondents had no formal education. 91% of them were married before they reach 20. Of 404 respondents 86% stated that they had at least one SRH concern for which 63% received treatment. Leading SRH concerns included white discharge (96%), back pain (74%), abdominal pain (71%), pain or burning sensations during urine (47%), excessive bleeding during menstruation (36%). Only 46% of them received treatment from MBBS doctors for their concerns. The rest of them received treatment from Village doctors (36%), homeopathic practitioners (24%), religious healers (12%), traditional spiritual and herbal service providers (8%). 60% respondents said that SRH service is poor.

Conclusion: The study explores that rural women are very concerned with SRH. On the other hand poor utilization of government service indicates that there is gap in service and this vacuum is filled by the informal sectors. This dependent on unregulated or poorly regulated formal or informal sectors may increase their vulnerability and risk to health.

Conflict of Interest: None disclosed
Financial Support/Funding: DFID, UK

MP6-7 **CULTURE, COMMUNICATION AND INTIMACY IN THE COUPLE RELATIONSHIP.**

Pérez Naranjo Lena (Free University, Berlin)

The present research deals with issues of communication and intimacy among mixed couples (Latin-Americans/ Sweden) in Sweden and how these couples have built their communicational and intimate space taking into account their different cultural backgrounds. During my stay in Gothenburg and as part of the requirements in order to get the grade of MSSc, I conducted an empirical study with eight heterosexual couples. All of them have been living together for more than two years. I used a combination of open-ended interviews with both of them and a series of four questionnaires in the areas of Communication, Intimacy and Satisfaction. Although the members of the couples differ in their personal characteristics, they have similar perceptions about their relation regarding Communication, Intimacy and Satisfaction. The similarities make them possible to achieve agreements showing respect and tolerance with their differences. Nonetheless, they are not afraid to face and solve conflicts. Learning the language of the other is one of the steps in knowing each other. However getting the full understanding of symbols and meanings of each culture takes much longer. Into the family they try to create a space in which both cultures are represented and shared. It might be through the purchase of ornamental objects but also through the observance of traditional festivities, which give them a sense of continuity and being rooted in both cultures. Hence, forming a stable couple between two persons with different cultural backgrounds is a difficult rather than an impossible task.

Conflict of Interest: None disclosed

Financial Support/Funding:Scholarship obtained through the Department of Social Work, Göteborg Universit t.

MP6-8

SURVEY OF FEMALE SEXUAL FUNCTION IN POST-TRANSFER OF SOVEREIGNTY HONG KONG

YAU Matthew K. (James Cook University), NG Angela W.Y. (Family Physician in Private Practice)

Introduction & Objectives: Women's sexual health and sexual function are often neglected in the public health surveys. There was also lack of local data to reflect the current women's sexual health status. Thus, health service planning to address the needs has been underdeveloped. The objectives of the study were: to describe the current sexual function of adult females in Hong Kong; to explore sexual concerns and problems as encountered by them; and, to identify the service needs to promote sexual function and sexual health.

Method: A cross sectional survey by convenient sampling method was conducted in 2007 on females over the age of 18, and who have sexual encounter over last month. The Female Sexual Function Index (Rosen et al 2000) was adapted for this self-report survey.

Results: Among 1087 questionnaires collected, 901 of them (83%) with relevant details were included for analysis. The results indicated that with increase in education and employment opportunities, women are becoming more proactive in their sex life. Sixty three percent of women claimed that the aim of engaging in sexual activities was either to increase intimacy with partners or to satisfy own sexual desires. Less than 15% of respondents expressed various difficulties at different stages of the sexual response cycle. Respondents with no children and higher education tends to engage in more sexual activities, enjoy sex more, as well as easier to experience sexual excitement and orgasm.

Conclusion: Disrespecting the frequency, women who have engaged in sexual encounters, their experiences tend to be positive and satisfying.

Conflict of Interest: None disclosed

Financial Support/Funding:The Hong Kong Association of Sexuality Educators, Researchers & Therapists

MP6-9

HOMOSOCIALITY AND HOMOSEXUALITY IN MEN: SOME SIMILARITIES AND DIFFERENCES BETWEEN WESTERN AND EASTERN CULTURES

Tremblay Gilles (Laval University)

During my sabbatical year, I traveled in 15 different countries meeting researchers, practitioners and men's groups to have a better idea about the practices of masculinities in each culture as well as what is done on men's issues in these countries. Everywhere, I did interviews with men and par-

ticipated in the day-to-day life with ordinary people, as often as possible staying with families, and taking notes of the variety of so interesting observations. The focus of this paper will be on relationships between men and discuss some similarities and differences between Western and Eastern cultures concerning homosociality and homosexuality. In many Eastern cultures, men and women live quite in separated worlds. There are many elements that lead men to be very intimate between them. In doing so, especially for some young men, the frontier between intimacy and sexuality appears very thin although, in some countries, homosexual behaviours are still criminalized and remain sometimes subject to public punishment as well as gay men to be ostracized. In the contrary, Western countries recognize gay rights but, in some ways, remain very homophobic. In these countries, the spread out individualism and homophobia cause male bonding to be an issue. In the other hand, as other authors have stated before, the three most used categories of sexual behaviour (heterosexuality, bisexuality and homosexuality) represent a too much restrictive frame to understand a so wide diversity of sexual behaviours and intimate relationships.

Conflict of Interest: None disclosed

Financial Support/Funding:Laval University

MP6-11

SEXUALITY IN RESIDENTIAL AGED CARE: A SCOPING STUDY OF PERCEPTIONS AND POLICIES REGARDING SEXUAL EXPRESSION IN AUSTRALIAN FACILITIES

Shuttleworth Russell (University of Sydney), Dune Tinashe (University of Sydney), Russell Cherry (University of Sydney), Weerakoon Patricia (University of Sydney)

Despite considerable anecdotal evidence that sexual expression among residents of residential aged care facilities (RACFs) can be a problem for management, staff and other residents, there has been minimal empirical research in Australia on this topic. The purpose of this scoping study was to determine the extent to which RACFs in Australia have policies and staff training to manage residents' sexual behaviour and to determine the extent to which senior management perceive such behaviour as an issue to be addressed. Senior management at 250 randomly selected RACFs were invited to participate in a telephone interview. Participants were asked to provide basic information about their facility and its residents; identify whether their facility has a sexuality policy and training available; and whether residents' sexual behavior is an important issue. Verbatim notes were recorded. Descriptive statistics were generated using SPSS software for items such as the number of beds, trained and untrained staff, formal policies and staff training programs, and whether facilities that have policies and programs differ from those that do not in terms of these variables. Non-numerical data was entered into NVivo software and a thematic content analysis was conducted. Findings thus far show a range of senior staff attitudes toward the sexual behaviour of residents. Significantly most facilities do not have policies and training in place, albeit many staff felt this was an issue to be addressed.

These findings have implications for the design of a larger study of RACF staff attitudes toward and responses to residents' sexual behaviour.

Conflict of Interest: None disclosed

Financial Support/Funding: University of Sydney, Faculty of Health Sciences seed funding support

MP6-12

RECONSIDERING «CONTACT STRATEGIES»: «HOW» IS MORE CRITICAL THAN «WHETHER»

CHUNG Dau-Chuan

Introduction: "Contact strategies", which refers to interacting with people living with HIV (PLHIV) or related groups, has been acknowledged as a useful tool to reduce AIDS-related stigma. However, no prior research investigates the effect of contact experiences with different groups in varied social conditions.

Method: This study surveyed 98 social work faculty members and 889 students in Taiwan about their contact experiences with three groups, PLHIV, gay and lesbian (GL), and injecting drug users (IDU) in varied conditions as well as their knowledge about and attitudes toward HIV/AIDS in 2006. The varied conditions include volunteering with, working with, and personally knowing the three groups.

Results show: (1) people having contact experiences had higher attitude and knowledge scores than those who did not; (2) people with more contact experiences had higher both scores than those with less experiences; (3) people who volunteered with, worked with, or personally knew PLHIV had higher both scores than those who had such experiences with GL or IDU; (4) people who had working experiences with PLHIV had the highest knowledge scores; (5) people who had relatives were PLHIV obtained the highest attitude scores; (6) people who did not have any contact experience with GL had the lowest attitude and knowledge scores.

Conclusion: The paper concludes that (1) having contact experiences did change people's knowledge and attitudes; but (2) having contact experiences with different groups in varied social conditions seems more influential.

Conflict of Interest: None disclosed

Financial Support/Funding: National Science Council (in Taiwan)

MP6-13

BRIEF HISTORY OF THE FIRST SEXOLOGY AND SEXUAL EDUCATION LATIN-AMERICAN CONGRESS

Sapena Oscar O. (Clinical Sexology and Stress Management Private Center)

The Latin-American Federation of Sexology and Sexual Education (FLASSES) was established in March 1980 in Montevideo, Uruguay. With 30 sexual societies gathered in this place, the Executive Board, led by

his president Oscar Sapena Pastor, MD (PARAGUAY), the First Vice President Psychologist Teresa Guinta Bergna (PERU), the Second Vice President Lino Chalela, JP (URUGUAY), the Secretary Cesar Manuel Sisa, MD (PARAGUAY), and the Treasurer Oscar Gómez, MD (PARAGUAY) accorded that the First Sexology and Sexual Education Latin-American Congress (CLASES) would take place at the city of Asunción, Paraguay in June 1982. The First CLASES took place from the 14 to 17 June 1982 at the Public Health Ministry Auditorium in Asunción. The Congress was opened by the Honorary President of this meeting, Paraguay's President Alfredo Stroessner. This article takes a look of those four days where pioneers of Latin-American Sexology met and also checks the main presentations, academic debates, social activities, and also unforgettable anecdotes. The principal sexual theories, the main actors and the social and political context in which the congress took place will be reviewed in this article.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP6-14

SEXUAL HEALTH AND SOCIAL CAPITAL: THE NEXUS OF HUMAN CAPABILITY

Heater Heather N (Portland State University, Masters of Public Health Candidate)

Introduction: HIV/AIDS is a disease that affects the world's most vulnerable populations - those individuals and communities that face socioeconomic and political exclusion. Exclusion retards social capital and indigenous approaches to holistic prevention strategies. To promote upstream prevention of sexually transmitted infections (STIs), the author will begin with a discussion of social and structural factors that reduce social capital and undermine sexual health. These topics are presented as context for an exploration of the relationship between decreased social capital and sexual ill health. The author proposes that endemic levels of STIs undermine communities' ability to foster sustainable development. Case studies are used to demonstrate why sexual health promotion is essential to creating dynamic socioeconomic realities. Limits of current research and suggested strategies for promoting initiatives that more acutely address these phenomena are discussed. The author aims to generate discussion within the global field of sexology and health promotion regarding the importance of recognizing social capital as a key factor in sexual health promotion and human development. Key concepts include social capital, upstream health promotion, and structural determinants of health.

Approach: Review of the literature Findings: There is an immediate need to prioritize sexual health and social capital as key components to human development and social wellbeing.

Selected References: Goodwin, N. (2003); Holtgrave, D.R., & Crosby, R.A. (2003); Johnson, A.M., Mercer, C.H., & Cassell, J.A. (2006); Kawachi, I., Subramanian, S.V., & Kim, D (2007); Shaw, M., Dorling, D., & Davey Smith, G. (2006).

Conflict of Interest: None disclosed
 Financial Support/Funding:None disclosed

MODERATED POSTERS SESSION MP7
Sexual education: Educational research

MP7-1
YOUNG PEOPLE'S SEXUAL HEALTH; INTERNATIONAL AND SWEDISH EXPERIENCES OF PREVENTIVE EFFORTS. WHAT WORKS?

Forsberg Margareta

Introduction and objectives: There is a need for HIV and STI prevention targeting young people. The objective is to show that there is a call for development of programs targeting young people and that there is evidence that such work can be successful.

Methods: The presentation is based on the results from a literature review of international research focusing effective prevention interventions targeting young people. The review is in turn based on eight international reviews of more than 600 primary studies, and six Swedish primary reports. It was financed by the Swedish National Board of Health and Welfare.

Results: The results show that preventive efforts can be effective if structuring the interventions by: defining different aspects of youth as a target group; defining actors and arenas; intervention structure; content of interventions; communication and evaluation of interventions. Within each theme there are crucial aspects to be considered, such as using the schools as intervention arenas, building sustainable structures for interventions, using active and involving pedagogy, working consciously with communication and evaluating interventions in order to develop the tools used. It is also important to base interventions both on theoretical knowledge but also on what young people themselves ask for.

Conclusion: In order to promote sexual health among young people and to prevent HIV and STI's it is important to work in a way that is structured and sustainable over time.

Conflict of Interest: No conflicts of interest. The abstract is a parallel to an abstract by PhD Ronny Tikkanen; KNOWLEDGE-BASED HIV PREVENTION TARGETING MEN WHO HAVE SEX WITH MEN. If both abstracts are accepted, it is a good idea to present them in connection with each other.

Financial Support/Funding:The Swedish national Board of Health and Welfare

MP7-2
AUSTRALIAN SCHOOL-BASED SEXUAL HEALTH EDUCATION (SHE):

Weerakoon Patricia, Weerakoon Patricia

Introduction and objectives: There is a high rate of sexually transmitted infections (STIs) and teenage pregnancy among Australian young adults. Australian secondary school students have been poor knowledge on transmission and symptoms of STIs. Like elsewhere, Australian young people receive sexual health information from three main sources; schools, parents, and the media. The current study aims to understand Australian students support for, experiences of and attitudes towards SHE in schools. The major objective of the current study is to contribute to the future improved sexual health education of Australian young people

Method: An on-line survey was set up on Zoomerang and made available to Australian Young people between 18-25 years age. There were 273 valid responses. The questionnaire was adapted from that used earlier in a Canadian survey.

Results: Major findings include: • 97% agree/strongly agree that SHE should be provided in schools. • 91.2% (n=249) agree/strongly agree that School and parents should share responsibility for SHE • The following topics were considered as important/ very important; STIs (99.6%); Puberty: (99.2%); Personal safety to prevent child abuse: (98.9%), Birth control/safer sex: (98.2%); Sexual coercion/assault: (98.1%); Reproduction: (97.8%); Sexual decision making in relationships: (91.2%); Correct name for genitals: (75.8%); Sexual pleasure/enjoyment: (66.7%); Abstinence: (62.3%). • 35.9% of the sample agree/ strongly agree that these were covered in school

Discussion: This study indicates that young people perceive a gap between the stated and delivered SHE curriculum.

Conflict of Interest: None disclosed
 Financial Support/Funding:None disclosed

MP7-3
INTER-ORGANISATIONAL NETWORK FOR THE PREVENTION OF STI AND UNWANTED PREGNANCIES

Stenqvist Karin E (Hivprevention in Region Västra Götaland), Abellson Jonna B (Hivprevention in Region Västra Götaland), Laack Stefan K (Hivprevention in Region Västra Götaland)

Introduction: The increase of Chlamydia infections and high abortion rates in Sweden calls for a new approach in preventive work. The issue of SRH is dealt with by different clinics and specialities, each with its own perspective and knowledge. Clinics of venereology, gynaecology, youth clinics and antenatal clinics are likely to have different strategies concerning the prevention of STI and unwanted pregnancies. The experience is that complex tasks are impossible to solve without the cooperation and coordination between organisations.

Moderated posters

Action: An inter-organisational network between STI-clinics, antenatal clinics, gynaecological surgeries, abortion clinics and youth clinics has been developed in Region Västra Götaland, starting in 2000. The aim of the program has been to develop strategies for the prevention of STI and unwanted pregnancies and in the longer perspective to co-ordinate these strategies. The methods include networking, coordination, education of personnel, workshops, focus groups and strategic planning.

Outcome: A common vision and improved communication between different specialities and clinics has been developed. This has resulted in a common manual for the managing of STI, hepatitis, HIV and contraceptives, Chlamydia campaigns, improvement in the follow up of various patient groups, cross-disciplinary educations and a new out-patient clinic for better inter-disciplinary approach.

Discussion and Recommendations: Inter-organisational networking and coordination is essential for the development of common strategies that are approved by different specialities and clinics in a defined area.

References: Edgren L. (2008) International Journal of Integrated Care – vol. 8, 23 October 2008.

Conflict of Interest: None disclosed

Financial Support/Funding: Funded by the Unit for National Co-ordination of HIV/STI Prevention at the National Board of Health and Welfare

MP7-4

SEXUAL KNOWLEDGE AND SEXUAL BEHAVIOUR AMONG PORTUGUESE YOUNG PEOPLE

Ferreira Pedro Moura (Institut of Social Science - University of Lisbon), Vilar Duarte (APF - Portuguese Family Planning Association)

This paper aims at contributing to the assessment of the relationship between sexual education and sexual behaviour among Portuguese young people. Our first goal is to examine the sexual knowledge of young people attending the high school, and, secondly to explore the ways by which this knowledge is associated to the sexual and preventive behaviour, mainly the first intercourse's age and sexual frequency. From a methodological point of view, data are drawn from a quantitative survey which was carried out in sixty-three high schools covering a total of 2621 participants all over the country. In each school, a 9th and 12th graders were selected at random and all students were interviewed. The data analysis explores a sexual knowledge scale which allows obtaining not only the general level of sexual knowledge of the students but also the dimensions in which it is stronger or weaker. For analysing the impact of the knowledge's level on sexual behaviours multivariate methods were used. The analysis shows that the sexual knowledge of the students is in general satisfactory, although in some fields, mainly in sexual transmitted infectious (except regarding HIV/aids), and contraceptive use (except condoms) knowledge level is unsatisfactory. Generally speaking the analysis reveals an effect between sexual knowledge and some dimensions of sexual and preventive behaviour (first intercourse's age and feelings associated), which reflects the ways as sexuality is experimented by young people.

Conflict of Interest: None disclosed

Financial Support/Funding: Public funding

MP7-5

SEXUAL BEHAVIOR & PREVENTIVE PRACTICES IN RESPONSE TO HIV IN MAALE SEX WORKERS IN NEPAL

Bhandari Lekh Nath (Parichaya Samaj Nepal)

Objectives and Issues: The main objective of the study was to collect and analyze data regarding knowledge, sexual behavior & preventive practices of male sex workers. Recent studies have shown that HIV prevalence in these groups is raising and also other STIs are very common. This study was carried out in one of the most populated city of Nepal, Kathmandu.

Methods: As part of second generation surveillance, face-to-face in-depth interviews and testimonies using a structured questionnaire were filled from 150 male sex workers. Male sex workers were recruited through respondent driven sampling. Data were collected between March, April and May 2007.

Result & Lesson Learned: Although most male sex workers had heard of HIV and AIDS, correct knowledge of modes of transmission was lacking. Majority (59%) of male sex workers did not know that condoms gives protection against HIV transmission, only one-fourth of respondents used condoms during last anal sex with paying clients. One third of male sex workers used lubricant during last anal sex. Many did not obtain treatment for STDs in appropriate fashion, if at all.

Conclusion and Next Step: Presently there is no program for male sex workers in Kathmandu. There is need for a comprehensive HIV program that combines different services with behavior change and communication interventions, along with giving attention to the right to have access to health care in order to prevent the spread of HIV and fight the various stigma and discrimination attached to it.

Conflict of Interest: Sex worker's health protection

Financial Support/Funding: BDS Nepal

MP7-6

LISTENING CLUBS FOR MEDIA-MEDIATED SEXUALITY EDUCATION: MESSAGES AND NEGOTIATED MEANINGS

ZEWOLDE SOLOMON AMARE (TULANE UNIVERSITY TECHNICAL ASSISTANCE PROJECT ETHIOPIA)

Using audience activism theory and contemporary theories of social change (McQuail 2000) as its conceptual framework, this research explores issues related to the creation, management, function, and roles of audiences who are organized into listening clubs (LCs) for an Ethiopian media-campaign (a radio show called ABUGIDA) that aims to raise awareness and promote open discussion and community conversation on sexuality and the most rampant problems of SRH which affect the Ethiopian youth for centuries. Qualitative research design which allows the expression of deep feelings,

beliefs, and thoughts is used for the purpose of this study. The study employed recorded (broadcasted) programs, interviews with Producer of the Program and listeners, analysis of listeners' feedback form, and ethnographic recording of live programs to collect the data for this study. The findings revealed that the media messages of the radio show is not actually received by the listeners' as intended by the producers mainly due to the selective exposure, perception and retention power of audiences. It was found out that they rather negotiate with the messages and make their own meanings. Thus, it was recommended that the focus of the radio show should be on promoting discussion and conversation rather than just imparting messages especially on sexuality.

References: • Mc Quail (2000) Theories of Communication. • Audio Cassettes of ABUGIDA programs, BBC World Service Trust • A Guide to the Organization of Listening groups, BBC World Service Trust

Conflict of Interest: None disclosed

Financial Support/Funding: Self Funded

MP7-7

DOES A THEORY-BASED SEXUAL HEALTH EDUCATION PROGRAMME WORK IN POSTPARTUM WOMEN'S CONTRACEPTIVE BEHAVIOUR?

Lee Jian Tao (School of Nursing, Chang Gung University, Taoyuan, Taiwan), Tsai Jia-Ling (School of Nursing, Chang Gung University, Taoyuan, Taiwan), Liu Jen-Yu (Taipei County Chung-Lin Junior High School, Taipei, Taiwan), Tsou Tsung-Shan (Graduate Institute of Statistics, National Central University, Jhongli City, Taiwan)

Aims: This study evaluated the contraceptive effectiveness of a theory-based Postpartum Sexual Health Education Programme to enhance postpartum women's effective contraceptive behaviour. Further, the study compared the effectiveness of our programme with an interactive self-help pamphlet on postpartum sexual health and routine, non-interactive postpartum sexual health teaching.

Background: Few randomised trials have addressed communicating contraceptive effectiveness, and no intervention was clearly based on theory. Furthermore, the protocols for counseling interventions are neither specifically described nor clearly theory-based.

Methods: For this 3-group, randomised controlled trial, 250 participants were recruited at a medical centre and local hospital in northern Taiwan. Experimental group A received our intervention programme, which included 10-15 minutes of interactive individualised health education and an interactive, self-help printed pamphlet; experimental B group received only the self-help pamphlet; and the control group received routine postpartum sexual education. Participants in the experimental groups were assessed for their learning preparedness, as determined by the Transtheoretical Model, which was used to match participants to different contraceptive health education strategies. Data were collected at baseline, 5 days, 2 months, and 3 months following the intervention.

Results: Significant positive changes were found for measures of effective

contraceptive behaviour.

Conclusion: These results support the effectiveness of our theory-based Postpartum Sexual Health Education Programme for enhancing postpartum women's effective contraceptive behaviour.

Conflict of Interest: None disclosed

Financial Support/Funding: The National Science Center of Taiwan provided funding for this study

MP7-8

A COMPARISON OF WHAT TANZANIAN PARENTS, TEACHERS AND STUDENTS WANT (AND DON'T WANT) COVERED IN SCHOOL-BASED SEXUALITY EDUCATION

Mkumbo Kitila A K (University of Dar es Salaam, Tanzania)

Introduction and objectives: School-based sexuality education has been widely acknowledged as one of the most effective strategies for promoting young people's sexual health, as well as protecting them against sexual health problems such as HIV/AIDS and teenage pregnancy. However, sexuality education is not part of the school curriculum in Tanzania; school policy makers have been reluctant to introduce sexuality education in schools due to fears of reaction from key stakeholders such as parents and teachers. However, there is no evidence as to the true extent of any such objections. This study explored the feasibility for the introduction of sexuality education in Tanzanian schools by assessing and comparing parents', teachers' and students' attitudes towards school-based sexuality education.

Method: A questionnaire was administered to a randomly selected urban and rural based sample of 287 parents, 68 teachers and 715 students, assessing their attitudes towards school-based sexuality education.

Results: A majority of parents (70%), teachers (90%) and students (90%) supported the provision of sexuality education and the inclusion of a wide range of topics in the school-based sexuality education curriculum. They, however, objected to the inclusion of some "sensitive" topics, including homosexuality and masturbation.

Conclusion: The results show that policy makers' fear of parental and other stakeholders' reaction regarding the teaching of sexuality education in schools is not wholly supported by evidence. The implications of parents', teachers' and students' objection to the inclusion of 'sensitive' topics in school-based sexuality education have been discussed.

Conflict of Interest: None disclosed

Financial Support/Funding: Commonwealth Scholarship Commission, UK University of Dar es Salaam, Tanzania

MP7-9

SUSTAINABILITY OF GAINS MADE IN A PRIMARY SCHOOL HIV PREVENTION PROGRAM IN KENYA INTO THE SECONDARY SCHOOL YEARS

Maticka-Tyndale Eleanor (University of Windsor)

Introduction: Schools have been identified as an effective way to deliver HIV prevention education. We don't know, however, for how long any beneficial effects last. This paper reports results of evaluation of the effects of an HIV prevention programme delivered in primary schools in Kenya on youth who continued on to secondary school.

Methods: Questionnaires completed in 2005 and 2006 by 14,195 form 1-3 students in 160 randomly selected Secondary Schools in Kenya. Multivariate regressions produced comparisons of students who attended primary schools that did and did not deliver an HIV-prevention programme, controlling for gender, age, and time since participating in the primary school programme.

Results: Compared to secondary students who had not received programming, those who had received programming in their primary schools had higher levels of knowledge about HIV transmission and prevention and attitudes that were more accepting and supportive of condom use as a method of prevention. They were more likely not to have initiated sexual activity and to have gone to an HIV testing centre. Those who were sexually active reported fewer partners and were more likely to have partners near to their own age, and had a higher level of condom use.

Conclusions: These results support the desirability and efficacy of programming in primary school, at a time when fewer youth have initiate behaviors that carry a risk of sexual activity and when the largest proportion of youth are in attendance at school, compared to the secondary school grades.

Conflict of Interest: None disclosed

Financial Support/Funding: USAID

MP7-10

WHAT WILL OUR NEIGHBOURS THINK? AN ANALYSIS OF MEDIA AND COMMUNITY RESPONSES TO A SEXUALLY EXPLICIT HIV PREVENTION CAMPAIGN FOR MEN WHO HAVE SEX WITH MEN

Asselin Jason (Victorian AIDS Council/Gay Men's Health Centre), Battrouney Colin (Victorian AIDS Council/Gay Men's Health Centre), Spina Aldo (Aldo Spina Consulting)

Introduction: Unprotected anal intercourse remains the principal mode of transmission of HIV in Victoria accounting for 78 percent of diagnoses. Whilst a percentage of these transmissions among men who have sex with men occur in primary relationships, 57 percent are the result of unprotected anal intercourse in casual settings (UAIC) in 2007 alone.

Action: To respond to the dramatic rise of HIV infection rates among men

who have sex with men in Victoria, Australia, the Victorian AIDS Council/Gay Men's Health Centre developed a sexually explicit safe sex campaign targeted to this high risk groups.

Outcome: The implementation of campaign print ads in the gay press featuring photos of men engaging in anal sex elicited a flurry of heavily sensationalised, controversial and conservative media and community responses. We will highlight these responses. Media argued that the sexual health messages were more pornographic than educational. Gay men responded to the media saying that it would result in further stigmatising them as being highly sexual, promiscuous, irresponsible "freaks." Conversely, the period of negative media coverage resulted in an immediate response from members of the priority population who defended the campaign approach as being sex-positive, innovative and effective.

Discussion and Recommendations: External evaluation revealed 100 percent comprehension and comprehension among focus group participants. The implementation experience supported the effectiveness of using sexually explicit materials, when the resources are targeted, tested, and developed within a risk management framework.

References: Victorian Sentinel Surveillance on BBVs and STIs Report, Victorian Department of Human Services 2008

Conflict of Interest: None disclosed

Financial Support/Funding: This project was funded by the Victorian Department of Human Services

MP7-11

USING THE "HEALTHY SCHOOLS" INITIATIVE AS A FRAMEWORK FOR A COMPREHENSIVE AND CONCERTED PROVISION OF SEX EDUCATION IN QUEBEC, CANADA.

Campanelli Nadia (Ministry of Health and Social Services of Quebec), Arcand Lyne (National Public Health Institute of Quebec)

In 2003, the Ministry of Health and Social Services and the Ministry of Education signed an agreement on their complementary services. This agreement has two main objectives: 1) to implement best practices with regards to school-based health promotion and prevention programs and services, and 2) to promote educational success in young people. As a concerted and comprehensive effort, the Healthy Schools initiative includes the support of both ministries as well as planning tools for the development of a tailored, integrated and global health promotion and prevention program in each school. This program targets the students, their families, the school and the community at large. As such, sex education tools that take into account the psychosexual development of youngsters have been developed. By addressing the determinants of a healthy sexuality, schools can create activities that go beyond sex education and deal with other issues (violence, drug use and abuse and healthy lifestyle habits). This global approach of intervening addresses several transversal key determinants (self-esteem, healthy and safe sexual behaviours, social skills, preventative services). It is deployed not only in the form of extra-curricular activities, but also as part of

the school curriculum itself. This initiative also addresses the environment beyond the school grounds and as such, requires strong partnerships with the community. Twenty-five percent of primary and secondary Quebec schools participate in the Healthy Schools initiative. Despite the ongoing challenges of implementing such a comprehensive initiative (politic will, public policies), much progress has already been documented (conceptual framework, knowledges transfer).

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP7-12

ENHANCING THE SEXUAL AND REPRODUCTIVE LIFE OF ADOLESCENTS THROUGH SEX EDUCATION IN NIGERIA

ODIKAMNORO OLIVER O. (EBONYI STATE UNIVERSITY)

In Nigeria, sexual and reproductive health matters receive little or no attention. As a result, there are no articulated issues on sexuality and sexual well-being as part of health policy and planning. The negative impact of this trend is most seen in rural communities where poverty, ignorance, and low level of education have contributed to the poor sexual health of women, particularly, adolescents. Thus, rape, teenage pregnancy, sexually transmitted infections, HIV/AIDS, female genital mutilation, male dominance, and local beliefs and taboos have continued to impinge on the sexual and reproductive health of adolescents. This study sought to identify and harness effective strategies for enhancing the sexual and reproductive life of adolescents, especially in rural communities of Nigeria. Sex education was used as a tool to improve awareness on sexual matters. 3000 adolescents, mainly females aged between 13 and 18 years, drawn from 15 secondary and vocational schools located in rural communities of Imo State, southeast Nigeria were recruited for the study. 46 volunteers drawn from women leaders, health educators, sexual rights activists, and the clergy signed up as resource persons. 20 close-ended questionnaire items on sex education were used to assess general awareness before and after the study respectively. Intensive workshops were conducted on weekends for participants on relevant topics for 5 consecutive weeks. Awareness rose to over 80% from less than 15% before the study. Sex education proved a tool for the enhancement of the sexual and reproductive health of women in rural communities of developing countries.

Conflict of Interest: FUNDAMENTALIST RELIGIOUS GROUPS

Financial Support/Funding:RURAL LINKS INTERNATIONAL NGO

MP7-13

STOP, TALK, LISTEN - A NEW WAY TO DISCUSS SAFER SEX!

Larsdotter Suzann (RFSL, *The Swedish Federation for Lesbian, Gay, Bisexual and Transgender Rights*), Jonsson Mikael (RFSL, *The Swedish Federation for Lesbian, Gay, Bisexual and Transgender Rights*)

In our effort to find new ways to address HIV and STI prevention, RFSL has produced Stop Talk Listen a party game that offers exciting possibilities to reflect on sexuality and share experiences in an approving and non-moralizing manner. Stop Talk Listen is an innovative way to work with HIV prevention within a group. Research has shown that group-level interventions are particularly effective, especially when combined as multi-component interventions containing cognitive elements. Sexual norms are shaped, maintained and changed through social interaction between people. The intention of the game is to reach the players on different levels; in fantasy, thinking, dreams, identity and the experience of being your sexual self how you live with your sexuality. Methods that move you to reflect, influence and deeply involve you to make an active choice are particularly effective. Stop Talk Listen combines knowledge transfer with more reflective questions about sexuality. The game itself is lead by a play-coach who is «one of the gang». Several researchers emphasize that peer-education is a key factor in successful HIV prevention. A Swedish study about men who have sex with men (MSM) showed a need of education regarding HIV and STI's. In developing the game, a priority question was, «How to communicate about your own and sex partners' HIV status?» RFSL wanted to take the needs of talking about sex in the MSM group and adapt them to effective HIV prevention.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP7-14

SEXUAL AND REPRODUCTIVE HEALTH EDUCATION TO IMMIGRANTS AT 'SWEDISH FOR IMMIGRANTS' (SFI)- SCHOOLS IN STOCKHOLM

Warenius Linnéa (*Järva Mansmottagning*), Gustavsson Erik (*Järva Mansmottagning*), Foxhage Daniel (*Järva Mansmottagning*)

Introduction: In 2007, 51% of all HIV infections in Sweden were among immigrants. About 40% of all immigrants start language education at SFI within three years of arrival. Järva men's clinic has provided sexual and reproductive health (SRH) education to immigrants at SFI-schools since year 2004.

Objective: To evaluate a SRH education program provided to immigrants at SFI-schools in Stockholm.

Methods: Non-randomised control study. Two intervention- and two control schools are included in this study. Only students at highest level at SFI are targeted for the study. Note! Data collection is still ongoing therefore the final number of participants cannot be stated. So far, 55 and 35 students from intervention- and control school respectively have participated. Prior to the intervention, students responded to a questionnaire with background data and 31 statements reflecting knowledge related to anatomy of the man/woman's genitals, pregnancy, STI/HIV, contraceptives and the Swedish legislation related to sexual crimes, abortion, marriage/partnership and circumcision. Each statement has three response choices: 'Right', 'Wrong', 'Do not know'. Example of a statement: 'All women bleed the

first time they have intercourse'. During one week, at three occasions, intervention-students received SRH education in the classroom by health professionals and a scientist from Järva men's clinic. After the intervention, students responded to the questionnaire again. Control-students also responded to the questionnaire but did not receive SRH education.

Results: Data collection is ongoing. Results will be presented at the Congress in June.

Conflict of Interest: None disclosed

Financial Support/Funding: The National Board of Health and Welfare and Stockholm County.

MP7-15

YOUNG PEOPLE'S SEXUAL HEALTH PROMOTION IN SCHOOL AND STUDENT HEALTH CARE SERVICES

Liinamo Arja (Metropolia University of Applied Sciences), Salmivaara-Pesonen Tuula (City of Helsinki Health Centre), Nikula Anne (Metropolia University of Applied Sciences), Pietiläinen Sirkka (Metropolia University of Applied Sciences), Tervo Pirjo (Metropolia University of Applied Sciences), Häggman-Laitila Arja (Metropolia University of Applied Sciences)

Young people's sexual health promotion and developing health professionals' sexual health promotion competence are among the main priorities of the National Action Programme for Sexual and Reproductive Health Promotion 2007–2011 published by the Ministry of Social Affairs and Health. Helsinki Metropolia University of Applied Sciences is currently conducting an evaluation and development project (2008–2011) focusing on young people's sexual health services in collaboration with two municipalities from the Helsinki metropolitan area as well as with NGO's and the National Institute for Health and Welfare. Both qualitative and quantitative data are used in the assessment of the services. Between November 2008 and January 2009, 40 nurses from school health care and contraceptive clinics were interviewed. The aim of the semi-structured interview was to explore sexual health promotion practices as well as informants' perceptions and views on sexual health services. In 2009 quantitative and qualitative data related to sexual health services will be collected from young clients. Based on the results, health education and counselling methods for sexual health promotion will be developed in cooperation with young clients and other collaborative partners. Furthermore, a training module for professionals engaged in adolescent sexual health promotion will be formulated. The results of the project will be used when national recommendations for young people's sexual health services will be formed. In this presentation, the project design and results from the initial evaluation data will be presented. The project is funded by the Ministry of Social Affairs and Health and Metropolia University of Applied Sciences.

Conflict of Interest: All authors declare that the answers to the questions on your competing interest form are all «No» and therefore have nothing to declare.

Financial Support/Funding: The project is funded by the Ministry of Social Affairs and Health and Metropolia University of Applied Sciences.

MODERATED POSTERS SESSION MP8

Basic sexological research

MP8-1

THE CHRONOARCHITECTURE OF HUMAN SEXUAL DESIRE

Ortigue Stephanie (4D Brain Electrodynamics Laboratory), Bianchi-Demicheli Francesco (University Hospital of Geneva)

Introduction: Recent neuroimaging research suggests that human sexual desire recruits both the limbic system and higher-order cognitive brain areas. Because of the temporal limitation of functional MR imaging, the chronoarchitecture of SD remains however unresolved.

Method: Here, we investigated the spatio-temporal dynamics of sexual desire by combining a behavioral desire decision task with high-density visual event-related potentials (VEPs) recordings and brain source estimations. VEPs were recorded from thirteen healthy participants when presented with pictures from two different stimulus categories (high and low desirability).

Results: In agreement with the literature, behavioral results showed that participants were faster to rate non-desired than desired stimuli. Electrophysiological results extended these behavioral data. Desired stimuli were distinguished from non-desired stimuli over the N200 period, notably from 142 to 187 ms. Although desired and non-desired stimuli involved the recruitment of the right occipito-temporal region (including the extrastriate body area, EBA), LAURA source estimation of the scalp potential field for desired stimuli revealed a more right lateralized current source density maximum in the posterior superior temporal sulcus (STS) extending to the temporo-parietal junction (TPJ).

Conclusion: The recruitment of STS and TPJ for desired stimuli indicate that these brain areas, known to be respectively involved in social cognition, attention, integration of body-related information and self-processing, play a crucial role for the coding of desirability of visual sexual human stimuli within the first 200 ms after stimulus onset. These findings support the body self-expansion hypothesis and suggest that complex cognitive processing for desire occurs much faster than previously thought.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP8-2

ESTROGEN INFLUENCE ON VAGINAL WALL HISTOMORPHOMETRIC PARAMETERS

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Introduction: important vaginal histomorphometric parameters are modified after menopause which may worsen sexual response. It has been reported vaginal wall tuning after menopause, without histomorphometric evidence about this statement.

Objectives: evaluate the influence of hypoestrogenism on vaginal wall histomorphometry and to correlate vaginal wall alterations to genital sexual dysfunction.

Methods: surgical vaginal wall sample were obtained from 18 pre and 13 post-menopausal women, with genital prolapse I or II. Masson's trichromic staining for histomorphometry and immunohistochemistry for estrogen receptors, quantified by ER-alpha H-score. Blood samples to measure FSH, prolactin, estradiol, TSH. Sexual function was accessed by GRISS.

Results: Vaginal wall was thicker after menopause (2.72±0.72mm versus 2.16±0.43mm, p=0.01. Menacme groupe 2.63±0.71mm versus 2.07±0.49mm, p=0.01). This enlargement was due to an increase in the smooth muscular layer (anterior wall thickness: 1.54±0.44mm versus 1.09±0.3mm, p=0.02, posterior wall: 1.45±0.47mm versus 1.07±0.44mm, p=0.03. Anterior smooth muscular: 0.51±0.10 and 0.42±0.11, p=0.03 and posterior smooth muscular: 0.40±0.10 and 0.49±0.08, p=0.02). There was no correlation between dyspareunia, vaginal wall thickness and estradiol levels.

Conclusion: Vaginal wall thickening occur after menopause, mainly because of an increase in the smooth muscular layer. There is no correlation between dyspareunia, vaginal wall thickness and estradiol levels during menacme and menopause.

Conflict of Interest: None disclosed
Financial Support/Funding:FAEPA

MP8-4

ATTACHMENT STYLES AND MATING

Tampelli Anna (Sexological Service, Department of Psychology, University of Bologna), Rubboli Francesca

Introduction: This study examines, within the framework of attachment theory and the application of romantic love conceptualized as an attachment process, the influence of attachment styles and representations of Self and Other on mating.

Objectives: Aims were: 1) checking if there are a prevailing combination of couples mated for specific attachment styles, and 2) analyzing how much representations are involved in choosing a partner.

Method: Attachment styles and representations of Self and Other were addressed using a sample of 30 eterosexual couples. Attachment styles, self and other's sense of efficacy and Openness were assessed using Attachment Profile test by Candilera. 9-AP is a multidimensional apperception test, based on significant differences between self and others representation, giving 8 attachment styles including intercategory types and variables concerning 9 dimension, about relational interactions, in which we considered Conflict of Efficacy and Conflict of Openness.

Results: Couple level analyses showed that none attachment styles combination was prevailing. About variables of Efficacy and Openness representations of self and others none of the couples had the same type of Conflict, in terms of goals and strategies associated with working models of attachment.

Conclusions: Our sample didn't show a prevailing combination of couples, so there's no causal relation between attachment styles and mating, whereas for representations we found out that partners choose the one who matches at the very best to his own representations of self, of partner and of relationship, confirming his own expectations, as our second goal and previous literature as hypothesized.

Conflict of Interest: None disclosed
Financial Support/Funding:None disclosed

MP8-5

PSYCHOMETRIC PROPERTIES AND CLINICAL USE OF THE INTERNET SEX SCREENING TEST - REVISED

Delmonico David L (Duquesne University), Griffin Elizabeth J (Internet Behavior Consulting, LLC), Edger Katarzyna (Duquesne University)

Introduction: The Internet Sex Screening Test is the only instrument with established psychometric properties to assist clinicians in assessing the extent and type of online problematic behavior. The Internet Sex Screening Test - Revised is currently part of a research study to examine its psycho-

Moderated posters

metric properties and clinical utility.

Methods: Adult subjects were recruited from three normative groups: (a) sexually compulsive, (b) sexual offenders, and (c) non-compulsive/non-offenders. Once subjects agreed to participate and gave informed consent, they directed to a website containing the demographic survey and the 134 items from the Internet Sex Screening Test - Revised. Data will be analyzed using SPSS Version 15.0. Psychometric properties will be explored and comparisons will be made using a variety of demographic variables.

Results: In this research project the Internet Sex Screening Test - Revised was significantly modified by expanding the number of items on previously empirically established subscales resulting in a more robust and reliable measure. Data collection is currently underway to further analyze the psychometrics of the revised instrument as well as demographic comparisons. These results, along with the theoretical underpinnings for understanding and assessing problematic online behavior will be the main focus of this presentation.

Conclusions: At the conclusion of this presentation, participants will have a better understanding of problematic online behavior and how the Internet Sex Screening Test Revised plays a role in identifying the extent and type of an individual's problematic online sexual behavior.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP8-6

INSTRUMENT DEVELOPMENT TO MEASURE 4 DIMENSIONS OF SEXUALITY IN THE SYSTEMIC THEORY CONTEXT

Terrein- Roccatti Nadine

Introduction: The objective was to build a valid and reliable instrument that provides a structural systemic diagnosis of sexuality and a representation of a person's sexual structure.

Method: The instrument was constructed in seven steps: the first one consisting in a discussion group of 11 experts to elaborate the items, then, five judges selected the items that measures the best the four dimensions of sexuality: affective bonding, eroticism, gender and reproductiveness as levels of development and conflict; the instrument was administered to 58 to analyze the items, then to 302 subjects. In the fourth step, the instrument was rebuilt with 8 scales and administered to 343 subjects. Cronbach's alfa was used to calculate internal consistency and factorial analysis to describe the statistical structure of each scale Finally, the instrument was applied to 33 subjects who were interviewed and qualifies in all dimensions of sexuality to obtain the concurrent validity if the instrument.

Findings and discussion: The result is the validation of 4 scales to measure development and conflict of eroticism and affective bonding.

Recommendations: The scales can be used in the context of integral diagnose of sexuality, more investigation is needed to validate the other 4 scales.

References: Rubio, A. E. (1992). Teoría general del sistema y Terapia Sex-

ual. *Revista del Residente de Psiquiatría* 3 (4) 5-9 México Bertalanffy, L.V. (1968). *General System Theory*. Nueva York: Braziler

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP8-7

CHARACTERISTICS AND MEANINGS OF EROTIC CONTACT SITE USE IN CZECH REPUBLIC

Sevcikova Anna (Faculty of Social Studies, Masaryk University)

To search for sexual contacts via Internet is a well known phenomenon. In this study the author focused on investigating one particular online application - free erotic contact sites (ECS) in Czech Republic. By using grounded theory it was aimed to explore the characteristics of ECS use and the meaning of why the informants' choose to seek sex online. The author interviewed 4 females and 13 males aged 23 - 56. All informants were recruited from ECS. There were differentiated 4 ways of ECS use: (1) seeking sexual contacts online, (2) seeking sex offline, (3) seeking sexual contacts both online and offline, (4) having at least virtual sex when finding a partner for sex offline is impossible. The internet provided a direct access to sex. The online anonymity and the text-based ECS formed an experience of the intimacy leading to disclosure of true sexual feeling and inner sexual desires. In the context of virtual sex, Czech participants developed a parallel between the Internet without endless possibilities and infinite sexual fantasizing online. An unclear border between sexual disclosure and sexual fantasy was related to experimenting with sexual longings and self-representation online. Results support the importance of online disinhibition for sexual disclosure and the quin-A-engine theory. It is necessary to integrate a developmental approach in order to study further what kind of sexual activities are preferred by whom. The submission is for the proposed symposium «Love and sexuality on the Internet».

Conflict of Interest: None disclosed

Financial Support/Funding:Czech Ministry of Education, Youth and Sports (MSM0021622406) Faculty of Social Studies, Masaryk University in Brno

MP8-8

ANALYSIS OF MEDICAL REFERENCES RECEIVED AT THE UNIT OF MEDICAL SEXOLOGY, UROLOGY DEPARTMENT, UNIVERSITY HOSPITAL OF CARACAS (HUC), VENEZUELA. JANUARY 2006-AUGUST 2007

Gimenez-Ramirez Gerardo J (Hospital Universitario de Caracas), Cotiz Carlos A (CIPPSV), Flores Febelin, Hernandez Mircenia (Hospital Universitario de Caracas), Moanack Jorge (Hospital Universitario de Caracas), Tabares Luis F (CIPPSV)

Introduction: A "medical reference" is a record document that contains

administrative data from the referral and the addressee, and the sociodemographic and clinical data of the patient for the continuous attendance in other levels. Objective: To analyze the medical references to the Unit of Medical Sexology, University Hospital of Caracas, Venezuela. January 2006 - August 2007.

Materials and Methods: Descriptive, retrospective, and longitudinal studies. We reviewed 105 references coming from HUC and other health centers of Caracas.

Results: 89.5 % of the assisted patients were male and 10.5% female. Most of them, 94 %, were referred from the different departments of HUC, mostly from the Urology Dept. and 11% from other institutions, addressing to Levels II and III of medical assistance. 76.2 % of the physicians referred patients with right diagnosis, being most of them Erectile Dysfunction and Premature Ejaculation for male patients and Orgasmic Dysfunction for female patients. Only 7% of medical references came with wrong diagnosis, being Premature Ejaculation always confused with Erectile Dysfunction. 16.1% of the references came with unspecific diagnosis.

Conclusions: Almost all the referred patients were men, came from the different departments of HUC and with right diagnosis, being Erectile and Orgasmic Dysfunction the most frequent. In references with unspecific diagnosis, Erectile Dysfunction is confused with Premature Ejaculation.

Conflict of Interest: The need for Sexuality subjects in medicine in general, especially in those specialities that deal directly and frequently with sexual function as Urology, Gynecology, Psychiatry, Physical Medicine and Rehabilitation, and other careers as Education, Psych

Financial Support/Funding: None disclosed

MP8-9

SEXUAL EXPLOITATION BY PROFESSIONALS AND BOUNDARY VIOLATIONS

Favero Marisvalva Fernandes (ISMAI - CNEICC), Ferreira Fátima Abreu (ISMAI - CNEICC), Silva Ana Isabel (ISMAI - CNEICC), Del Campo Amaia (ISMAI - CNEICC - University of Salamanca)

Introduction and objectives: Sexual assault by professionals refers to those situations where a professional, taking advantage of their status as a professional service provider, sexually harasses another individual who uses their services. They can be professionals in physical and mental health, legal / economic areas, teachers, educators, salesmen, etc. This study aims to characterize the sexual assaults perpetrated by professionals, identifying the incidence, prevalence and characteristics of the victims and of the aggression (victims, consequences, perpetrators, place, time, revelation, complaining to the authorities, attitudes of society). Both national and international figures on sexual crimes are obscure (Redondo, 2002). The data that resulted from complaints in court proceedings indicate that 1% of the population was victim of a crime of sexual nature. However, studies of victimization made directly with non-clinical samples reached much higher percentages (Finkelhor, 2008; Garrido, et al., 2001). Researchers at the Uni-

versity of Leiden, Netherlands, conducted studies in 29 countries and concluded that the average rate of sexual victimization is 2.7%.

Method(s): We used qualitative and quantitative methodology, with self-administered questionnaires, semi-directed interviews and focus groups, which were adapted from previous studies (Fávero, 2003).

Results and Conclusion: This investigation is a broader study on sexual assault in Portugal (elderly, adults, teens and children) and is not yet complete. In a previous study (Fávero, 1999, 2003) on child sexual abuse, we found that 3.4% of offenders were teachers or educators. The findings are discussed in relation to international literature in this field.

Conflict of Interest: None disclosed

Financial Support/Funding: CNEICC ISMAI

MP8-10

SEXUAL AND REPRODUCTIVE HEALTH SERVICES FOR INTERNALLY DISPLACED PERSONS IN THE LANGUI AND TAPARE REFUGEE CAMPS

JEROME KUME ISOH (COHECF), MANJA ASANJI IMMACULATE (COHECF), NJONG ANDA ALFRED (COHECF)

Introduction and objectives: Since the mid-1990s, Cameroon has an estimated 1million internally displaced persons (IDPs) in camps mostly from the border towns of Cameroon and Chad. We explored the perceptions of, evaluate access to, sexual and reproductive health services by IDPs.

Methods: We interviewed 1.383 respondents randomly selected from camps in the Northern provinces in Cameroon during December 2007. Nine hundred sixty-eight (70%) of the respondents were adult, and 415 (30%) were adolescent; 60% were females and 40% males. We held 52 focus group discussions and interviewed 27 key informants.

Results: Most IDPs (78%) live within a Five-kilometer distance of a health facility. The majority (70%) seek health care from the public facilities, while others (21.9%) go to either private non profit or private health facilities. Main determinants of health care utilization are proximity (29.6%), free treatment (22.7%), and availability of drugs (17.7%). Most respondent (82.6%-86.1% men compared to 79.1% women) have received information about HIV/AIDS. However, 44% did not know about the availability of condoms in their camps. The majority (72.7%-77.3% women compared to 68.50% men) consider domestic violence common in the camps. Two-thirds of the respondents (68.5%-71% males and 65.9% females are satisfied with care they receive at the health facility.

Conclusion: Most IDPs live in close proximity to care from public health facilities. Most IDPs have been sensitized to HIV/AIDS and perceive gender-based violence as common in the camps.

Conflict of Interest: SEXUAL AND REPRODUCTIVE HEALTH AMONG REFUGEES IN THE LANGUI AND TAPARE REFUGEE CAMPS IN THE NORTHERN PROVINCES OF CAMEROON.

Financial Support/Funding: COHECF FUNDING.

MP8-11

EMERGING ADOLESCENT SEXUALITY: A COMPARISON OF AMERICAN AND DUTCH WOMEN'S EXPERIENCES

Caron Sandra L (University of Maine, Orono, ME USA), Brugman Maria E (University of Maine, Orono, ME USA), Rademakers Jany (Center for research & Development, Utrecht, NL)

Introduction and objectives: For decades, the U.S. has had the highest rates of teen pregnancy, births, abortions, and STIs of all industrialized countries. On the contrary, the Netherlands has the lowest rates. This study focused on sexual behavior, attitudes, and comfort of adolescent girls to understand why these two groups appear to have vastly different experiences (that lead to the large differences in rates of pregnancy, births, abortions, and STIs).

Methods: Using both qualitative and quantitative research methods, this retrospective study investigated American and Dutch college women's sexual behavior, attitudes, and comfort while in high school in an effort to better understand the factors that lead to the disparity between these two countries.

Results: Survey results (n= 289) revealed that the American sample experienced various sexual behaviors at a younger age and with more partners. The Dutch girls showed a better use of contraceptives during high school, talked more with their parents, and got more sexuality education at school of which the content was based on love and pleasure. In-depth interviews with 20 women revealed several distinctly different themes between the American and Dutch women.

Conclusion: The Dutch girls, who possess greater knowledge and understanding, and who have the guidance of parents, teachers, and doctors, develop the ability to navigate their sexual relationships in a more healthy and meaningful way, whereas American girls are left in the dark, with uneducated friends, surrounded by silent or negative adults and unrealistic media. Limitations and implications for future research are discussed. (Word count

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP8-13

EXPLORING PSYCHIATRIC PATIENTS' SEXUAL CONCERNS AND EXPECTATIONS FOR NURSING CARE IN TAIWAN

Sung Su-Ching (Chang Gung Insititute of Technology), Lin Yen-Chin (Shu-Te University)

Introduction: Patients' sexual concerns and problems are a focus for nursing care. To deal with sexual components of illness and health, nurses must recognize personal sexuality as valuable and necessary. This study was to identify the sexual concerns and expectations among psychiatric patients in Taiwan.

Methods: The samples of 115 psychiatric patients were purposely selected from three mental hospitals in Taiwan. A semi-structured interview, con-

sisting of five open-ended questions exploring patients' concerns and expectations regarding sexual expressions, was designed for the study. The content analysis was used for the corresponding responses.

Findings and Discussions: 'The sexual concerns', 'expectations of sexual relationship', and 'the awareness of discussing sexual/relationship concerns' were the major themes. The sexual concerns were desires to have intimacy with others, impotence, and genetic problems. For expectations of sexual relationships, a majority would like to have more opportunities to meet people and develop intimacy relationships, and the right to choose a partner. However, the most expressed barriers to the expectations were the financial limitation, mental illness, marital viewpoint, and hospital staffs' authority to stop their sexual relations. Also, over 50% of patients felt guilty and shamed to discuss sexual/relationship concerns, but were desired to share their concerns with professionals in the future.

Recommendations: Psychiatric patients hope to have the opportunities to form intimate and fulfilling relationships. They will be willing to discuss sexual issues and relationship matters if nurses can help facilitate communications about sexual health and right, and encourage exploration of patients' feelings and resources support.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP8-14

HURLBERT INDEX OF SEXUAL ASSERTIVENESS: RELIABILITY AND FACTOR ANALYSIS ON A SPANISH SAMPLE

Santos-Iglesias Pablo (University of Granada, Spain), Vallejo-Medina Pablo (University of Granada, Spain), Sierra Juan Carlos (University of Granada, Spain)

Introduction and objectives. Sexual assertiveness is related to a variety of human sexual factors, such as sexual risk behaviors, sexual pleasure, or victimization. Hurlbert Index of Sexual Assertiveness (HISA) is a valid and reliable instrument to assess sexual assertiveness, but studies about its psychometric properties on Spanish population are scarce. Thus, the aim of this instrumental study is to evaluate some of its psychometric properties on a Spanish sample.

Method. An item analysis, reliability and exploratory factor analysis were carried out on a sample of 779 Spanish adults (42.2% males and 57.8% females), ranging in age from 18 to 71 years (M = 30.99; SD = 9.69), who completed the HISA.

Results. All items' means range from 2.18 to 3.54, showing standard deviations over 0.88. Corrected item-total correlations are over .30, except for items 16 (Rit = .26), 20 (Rit = .03), and 22 (Rit = .27). Exploratory factor analysis showed two factors which explained 37% of total variance. Factor 1 (Initiative and Sexual communication) which is made up of 13 items explained 29.16% of variance (alpha = .84; eigenvalue = 6.12). Factor 2 (Refusal/Shyness), made up of 8 items, explained 7.84% of variance (alpha = .72; eigenvalue = 1.64). Four items (8, 16, 20, and 22) were excluded due to its lack of consistency.

Conclusion. Results showed appropriate psychometric properties and a theoretically coherent structure. Nevertheless, more studies are needed to clear up the factorial structure of the scale

Conflict of Interest: None disclosed

Financial Support/Funding:Ministerio de Educación y Ciencia, Spain

MP8-15

EVIDENCES OF EXTERNAL VALIDITY OF THE HURLBERT INDEX OF SEXUAL ASSERTIVENESS

Santos-Iglesias Pablo (University of Granada, Spain), Vallejo-Medina Pablo (University of Granada, Spain), Sierra Juan Carlos (University of Granada, Spain)

Introduction and objectives. Sexual assertiveness is supposed to be related to other assertiveness measures, as well as other social skills measures. Thus, the main objective of this instrumental study is to evaluate the external validity of the Hurlbert Index of Sexual Assertiveness (HISA) by examining its correlations with other variables.

Method. Seven hundred and 79 Spanish adults (42.2% males and 57.8% females), ranging in age from 18 to 71 years (M = 30.99; SD = 9.69), completed the HISA, Sexual Assertiveness Scale (SAS), Dyadic Adjustment Scale (DAS), Couple Assertion Scale (CAS), and Social Skills Scale (SSS).

Results. Both HISA-Sexual Initiative and Communication and HISA-Rejection/Shyness were positively correlated with SAS-Initiation, SAS-Rejection and SAS-Sexually Transmitted Diseases; CAS-Assertive; DAS-Consensus, DAS-Satisfaction, DAS-Affect, and DAS-Cohesion; and all factors of Social Skills Scale. All positive correlations range from .12 to .54. And both were also negatively correlated with ASPA-Aggressive, ASPA-Submissiveness, and ASPA-Aggressive-Passive. Negative correlations range from -.22 to -.46.

Conclusion. Hurlbert Index of Sexual Assertiveness showed appropriate external validity. Nevertheless, more studies about its external and other form of validity are needed.

Conflict of Interest: None disclosed

Financial Support/Funding:Ministerio de Educación y Ciencia, Spain

MODERATED POSTERS SESSION MP9

Sexological research: Basic; Behavioural

MP9-1

HIV INFECTION IN MALE PATIENTS AND ERECTILE DYSFUNCTION.

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Cardozo Alicia (School Of Medicine - Uruguay), Dufrechou Carlos (School Of Medicine - Uruguay)

Objective: To evaluate the degree of sexual dysfunction in a population of men with HIV, and make the correlation with demographic, immunological and treatment characteristics.

Methods: The analyses include 47 men with HIV infection assisted in ambulatory service of the Infection Institute, using an anonymous questionnaire, the International Index of Erectile Function-5 (IIEF-5), and Test of Sexual Desire of Masters & Johnson. Regression analysis was used to determine the correlation among the variables.

Results: The mean age of the patients was 42.13 years; there were 31 cases of erectile dysfunction and 39 cases of low sexual desire. 36 were treated with active antiretroviral treatment (HAART). There was statistically significant correlation between sexual dysfunction and : age, homosexual contact as HIV transmission mode, symptomatic infection, use of tranquilizers, low cultural level, no stable couple, smokers, CD4 cell count < 200 cells/mm, viral load >30.000 and treatment containing protease inhibitors (PI). (p< 0.05).

Conclusion: The etiology of SD is often multifactorial, and may be caused by endocrinological, psychogenic, neurogenic arteriogenic or iatrogenic abnormalities. Results of this study suggest that erectile dysfunction and low sexual desire are also found in patients who are on HAART, specially if their regimens contain PI. Physicians need to talk about sexual issues with their patients, in order to improve the sexual well being.

References: (1) Schrooten W., Colebunders R., Youle M, et al. Sexual dysfunction associated with antiretroviral treatment. AIDS 2001, 15:019-1023.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP9-4

CONDOM USE AMONG JAPANESE HETEROSEXUAL MEN UTILIZING THE SEX ENTERTAINMENT INDUSTRY

Higashi Yuko, Suh Sookja (Niigata College of Nursing), Nosaka Sachiko (Osaka Kyoiku University)

Introduction and objectives: This study, funded by the Japanese Ministry of Health, Labour and Welfare, is a part of a research project whose target populations are Sex Workers (SWs) and their clients. Although Japanese heterosexual male clients face high HIV risk, little is known about their attitudes and practices, and specific interventions have not been sufficiently implemented in Japan.

Methods: From our 2006 survey (Higashi et al, 2007), 1,400 male respondents indicated utilizing sex services and were sent a follow-up questionnaire. 785 were used in the analysis.

Results: The results show; 1) 50% of respondents were between the ages of 46 and 50 2) 83.2% had engaged in sex with one or more women within one year, 59.7% of which used sex services. The average usage was 5.14

times a year. 3) The condom usage rates differed among the various types of sex entertainment services. 4) Less than 25% would ask to not use a condom before they meet SWs, but almost half of the respondents said they would not use a condom if SWs agree in person. 5) 80% of the respondents said they would use a condom if required or requested.

Conclusion: We recommend that measures be developed that can effectively address the unique needs of different subtypes of male clients. A key to effective HIV prevention is to pay special attentions to men who specifically look for sex without condom, users of “delivery service,” and unsafe sex practice in oral sex service settings.

Conflict of Interest: None disclosed

Financial Support/Funding: Japanese Ministry of Health, Labour and Welfare

MP9-6

FACTORS AFFECTING CONDOM USE AT THE FIRST SEXUAL INTERCOURSE AMONG COLLEGE STUDENTS OF KATHMANDU, NEPAL

Adhikari Ramesh (Mahendra Ratna Campus, Tahachal, Kathmandu, Nepal)

Introduction and Objective: Youth receive inadequate education, guidance and services on reproductive health due to the sensitivity of this topic. The main objective of this paper is to investigate the prevalence and the influencing factors of condom use during the first sexual intercourse among college students.

Method: Structured self-administered questionnaires were administered to 1137 college students (573 boys and 564 girls) in Kathmandu district in 2006. Association between condom use and the explanatory variables were first assessed using bivariate analysis, and then further exploration was done using multivariate logistic regression.

Result: About two-fifth of the students (38%) in the study have ever had sexual intercourse. Among these sexually active students, only less than half (48%) had used a condom during their first sexual intercourse. The significantly higher proportion of boys, younger students, students from upper caste, unmarried, who were from outside Kathmandu, who never consumed alcohol, who had higher exposure to mass media and who had premarital sex had used condom when compared to their counterparts. Those students who had ever consumed alcohol were 60 percent less likely to use condom. On the other hand, students who had higher exposure to mass media were 1.7 times more likely to use condom than their counterparts who had lower exposure.

Conclusion: Low condom use at the first sexual intercourse indicates young people are exposed to health risks and hazards. College-based education on sexuality could benefit even out-of-college youth, because their partners are often students.

Conflict of Interest: The author declares that he has no competing and conflict of interests.

Financial Support/Funding: University Grant commission of Nepal.

MP9-7

ASSESSMENT OF SEX WORK IN REFUGEE CAMP IN NORTHERN CAMEROON.

Jerome Kume Isoh (christain community health care foundation.COHECF)

Introduction and objectives: Although studies and programs have shown the feasibility and important benefits of halting HIV transmission within sex work, programs in refugee settings focus mainly on the general population and do not focus on groups at risk for HIV, such as sex workers. The objective is to conduct an assessment to identify high-risk groups, to facilitate mapping and zoning of hotspots where sexual networks are likely to exist, and to involve sex workers in the design of HIV prevention and control services.

Methods: A qualitative HIV assessment was undertaken using interactive session with small groups of sex workers, focus group discussions with sex workers, meetings with community and religious leader, participatory observation at sites with extensive sexual networks and visit to health facilities and local communities.

Results: Stigma and discrimination against sex workers and their children is very high. Children of sex workers are highly stigmatized and in most cases denied access to school. Most of the sex workers reported that they were afraid to go to public places such as market. While sex workers were aware of HIV and sexually transmitted infection risk, as well as prevention methods, they had very limited power to negotiate condom use and frequently reported rape and not being paid for sex.

Conclusion: The high level of stigma and discrimination against sex workers and their children needs to be addressed, Peer education for sex workers need to be established, and access to appropriate non-stigmatizing, confidential health services should be made available.

Conflict of Interest: sexology research in emergencies i.e victims of civil conflict, natural disaster, man made disaster etc, their sexual behavior and consequences.

Financial Support/Funding: Both personal funding and organizational sponsorship and funding.

MP9-8

VULNERABLE SEXUALITY AND HIV/AIDS RELATED KNOWLEDGE AMONG YOUNG MALE TRIBES IN BANGLADESH

Kamal S. M. Mostafa (Assistant Professor, Department of Mathematics, Islamic University, Kushtia-7003, Bangladesh)

Introduction and objectives: Young people are particularly vulnerable to the HIV/AIDS epidemic due to their lack of knowledge and risky sexual behaviour, suggests the need to understand sexuality and HIV/AIDS related knowledge among the young tribes of Bangladesh.

Methods: A cross-sectional study was conducted on 800 young male tribes in 2007. A sound methodology was adopted to estimate the sample size and subjects. Information regarding socio-demographics and HIV related knowledge were elicited. Both qualitative and quantitative statistics were

used to examine the association between HIV/AIDS related knowledge, prevention, sexuality and socioeconomic characteristics.

Results: Among the respondents 32% were sexually active of whom 19% had had experience of sexual intercourse with multiple partners. Only 7% used condom during their last intercourse. 22% had never heard of HIV/AIDS. Among those who ever heard of HIV/AIDS, only 56% reported to have some knowledge to avoid HIV. Both bivariate and multivariate logistic regression analyses yielded significantly ($p < 0.05$) increased risks of sexual relationship with multiple partners among the poor and unmarried males. The multivariate treatment produced significantly ($p < 0.05$) increased odds for ABC approach to prevent HIV/AIDS among those who had secondary education, had access to mass media and were rich by wealth.

Conclusion: The young tribes are vulnerable to HIV/AIDS due to their unprotected sexual behaviour. Sex education and more depth knowledge about HIV/AIDS should be created through Information, Education and Communication programme among young to protect them from HIV/AIDS.

Conflict of Interest: None disclosed

Financial Support/Funding: This research was conducted with my own finance.

MP9-9

LEADERSHIP OF YOUNG PEOPLE IN THE REDUCTION OF THEIR OWN VULNERABILITY AGAINST STI, HIV AND AIDS AND OTHER SEXUAL HEALTH

FEZEU Faustin (Youth Network)

Introduction and objective: In Cameroun, young people between 15 and 24 years are the most infected of HIV than the rest of the population. Among all the reasons, young people complain not to take part enough in the various programs made for them. Therefore, the idea is to develop programs better targeted for them.

Method: (S) The strategy is the integration of tools like the risks and vulnerability mapping and Life skills, to give to young people skills to take in hand their own problems and to know how to submit them to adults. In each council, young peer educators draw themselves their risk and vulnerability mapping. They identify risky zones, vulnerable groups and partners who can help them in the field. Thanks to life skills they identify the needs in capacity building for their mates and carry out themselves different activities targeting the vulnerable groups.

Results: In Cameroon, 56 councils are already implementing this strategy with more than 25.000 peer educators already on the field. The strategy permit to go through the simple information, to a true adoption of healthy behaviors for young people

Conclusion: In the 2006-2010 strategic plan, the National Aids Control Committee decided to scale up this strategy in all the 340 councils of Cameroon. Some countries of the sub-region have already adopted the same strategy to put young people at the center of the resolution of its problems. As they say, "Nothing for us without us"

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP9-10

SEXUAL BEHAVIOR CHANGES IN MEXICAN UNIVERSITY STUDENTS OVER THE LAST DECADE.

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Introduction and objective: Mexican adolescents are receiving better sexual education at schools since 1998, when the last educational reform was applied for fifth and sixth grades of elementary school, and later on to secondary school. The aim of this paper is to show differences of university students' sexual behavior between two survey studies conducted over the last decade.

Method: The first survey (self-administered anonymous questionnaire) was applied to 218 students of the Health Sciences University Campus at the Universidad de Guadalajara in Mexico, during 1999. The second survey study was conducted among 976 students of the same university campus in 2008-2009, this time an online anonymous questionnaire was used. Comparative statistical techniques such as Chi square or Student t tests were applied.

Results: Significant statistical differences of sexual behavior, knowledge and attitudes were found between the two surveys. There was more sexual education within families, less guilt or shame feelings about masturbation, more use of condoms for first, last and over lifetime intercourse, more HIV testing and less HIV-risk self perception.

Conclusion: New generations seem to understand better their sexuality and have more positive attitudes about sexual issues. Making more responsible decisions could be a result of having a better sexual education at school, which allows students to ask their parents about their sexual doubts.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP9-11

CHILDREN'S PERCEPTIONS OF SEXUALITY IN THE CONTEXT OF HIV IN AFRICA

Thomsen Sarah C. (InDevelop-IPM), Bherhanesilassie Etsub (Save the Children, Sweden), Nordfjell Eva (Save the Children, Sweden), Regnér Åsa (Swedish Association for Sexuality Education)

Introduction: According to the Convention on the Rights of the Child, children have the right to access to information, education and services to

protect themselves from HIV. However, this access is often limited or non-existent. More information is needed about children's own strategies and experiences in protecting themselves in order to develop appropriate programmes to assist them in the fight against HIV/AIDS.

Methods: This is a desk study of research conducted in 13 African countries.

Findings: Children have many strategies to avoid HIV, the most popular being involvement in school or recreational activities. However, strict gender norms make it difficult for boys and girls to negotiate sex and not fall into society's expectations of their behavior. Children were concerned with the need for confidentiality, lower costs, and easier access to sexual health services. They prefer getting information about sexuality from younger people and those who discuss sexuality in a positive, non-judgmental way. They found the sexuality education provided in schools and communities to be too technical, negative and moralistic. It does not address issues that concern them such as love, body image, identity and how to negotiate safe sex and ensure they are in non-violent relationships.

Recommendations: Programmes should promote and support children's own strategies for staying healthy. Sexually active girls should be provided with skills in explicit negotiation of condoms. Faith-based organizations should be helped to find ways to discuss sexuality and life skills in a way that seems relevant for young people.

Conflict of Interest: None disclosed

Financial Support/Funding: Save the Children, Sweden and The Swedish Association for Sexuality Education (RFSU)

MP9-12

SEXUALITY IN NIGERIAN CITIES: IS IT REALLY WAYWARD?

Oyedemi Opeyemi O. (Department of Psychology, Faculty of Social Sciences, Obafemi Awolowo University, Ile-Ife, Nigeria), Tiemoko Richmond (Director, Africa Regional Sexuality Resource Centre, Jibowu, Nigeria)

Introduction and objectives: The resurging religio-cultural fundamentalism in Nigeria tags sexualities in the cities as wayward or un-African. Consequently various bills attempted to restrain sexual expression in cities. The question is, are there any differences between sexual expression in urban and rural areas, and how has place promoted (or otherwise) sexual health and wellness?

Method: The study used various sexuality related bills, and newspaper reports to investigate the construction of urban sexuality as untamed. Using data from Nigerian Demographic and Health Survey 2003, the study compared various sexual practices in rural and urban areas.

Result: The various bills (e.g. indecent dressing bill) were not evidence-based. Some differences emerged in the data: age at sexual debut is higher in the urban area for women and men (17.8 and 21.5 years against 17.8 and 20.6 years respectively). Among youth (15-24 years) youth in rural were likely to have premarital sex than urban youth. However, young girls in urban areas were likely to engage in age-mixing sexuality than those in

rural areas. Men's use of condom in the urban area is almost twice those in rural area (63.6% vs. 34.3%). The percentage who have never had sexual intercourse is higher among both gender in urban area than in rural area.

Conclusion: The wildness of sexual behaviour in Nigerian cities seems toward freedom and risk reduction than in rural areas. It is important to establish evidence for segmented programme for sexual health and wellness in Nigeria.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP9-13

HIGH RISK SEXUAL BEHAVIOR AMONG RUSSIAN STUDENTS IDENTIFIES A PRIORITY APPROACH FOR HIV PREVENTION

Vvedenskaya Elena (State Medical University), Shilova Oxana (Regional Centre for AIDS Control)

Introduction and objectives: Risk sexual behavior places young people at risk for sexually transmitted diseases (STDs) and HIV infection which is a great burden today in Russia. The aim of the study is to provide a valid assessment of sexual behaviors and HIV-related knowledge among female students.

Methods: Sexual behaviors, risk factors and HIV-related knowledge were examined among a sample of 493 female students aged 15-24. They completed a self-administered questionnaire, which included questions about sexual intercourse, number of sex partners, contraception, STIs and HIV epidemiology and their prevention.

Results: Most of the respondents had already had sexual intercourse (66.4%); 18.4% of students had had the first intercourse before they were 16 (26.0% started their sexual activity at the age of 16; 14.3% - 17; 7.2% - after the age of 18. About ¼ of the respondents (age group 18-24) had 4 and over sexual partners; 9.0% of teenagers had 4-10 partners and 5.5% were unable to count their numerous partners. Majority of students use contraception but only 34.0% does it regularly. Usually they use outdated methods. Our respondents demonstrated rather poor knowledge in STIs and HIV epidemiology and modern methods of contraception.

Conclusion: High risk sexual behaviors are common among female students. The efforts for prevention sexual risk behaviors will need to be intensified to meet the national health objective for responsible sexual behavior and HIV prevention. Quality and culturally oriented comprehensive sex education programmes should be developed and implemented urgently.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP9-14

DEFINING MALE SEXUAL SATISFACTION: A GROUNDED THEORY APPROACH

Ghatrifi Rouhollah (IRDPI), Ghatrifi Davood (IRDPI), Ghashghaei parisa

The family is not a static institution. In recent decades, divorce rates have risen and defining characteristics of marriage have changed. Much of people tend to explain these trends with only economic approach in most countries such as Iran, but Sexual satisfaction is an important aspect of marital satisfaction. Similar to most countries, best sexual relationship is defined legally and culturally in marriage. Trying to encourage abstinence up to marriage, and limitation of premarital sexual relationship and out marriage, sexual relationship proved the importance of sexual satisfaction. Researchers differ on the definition term sexual satisfaction. Speaking about sex and sexual issues are taboo in our culture. Most studies reveal difficulty in obtaining accurate figures, most professional persons and people suffering from sexual dissatisfaction, tends to be less willing to talk about it. In this study, we try to conceptualize sexual satisfaction view of male because male is socially active person in relationship.

Methodology: Historically, many of the studies on sexual satisfaction have examined linear relationships between variables. In order to get an overall perspective of a male sexual satisfaction, a grounded-theory approach was chosen to further develop broadened perspective of male satisfaction. In depth interview, Focused group discussion, informal encounters were selected as the method for gathering data.

Result: Males may be more satisfied with some aspects of their sexual lives than others, therefore a person couldn't easily tell, either is or not sexual satisfied. Based on collecting data, male sexual satisfaction was conceptualized...

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MP9-15

DEVELOPMENT OF THE SCALE OF VIRGINITY BELIEF IN A CHINESE SAMPLE

He Shanshan (The University of Hong Kong), Tsang Sandra (The University of Hong Kong)

Virginity belief is how individuals perceive being as a virgin and a transition from a virgin to a non-virgin. However, no measure of virginity belief exists. This study describes the development of the Scale of Virginity Belief. Three studies using a sample of Chinese college students were designed to fill this gap. Study 1 (N=135) and Study 2 (N=195) testified the original 49-item scale and the test-retest reliability. After validation and modification according to the previous two studies, a revised 25-item version of this scale was validated in the Study 3 (N=895). Results showed that the Scale of Virginity Belief (25 items) had a valid and reliable five-factor construct for male and female versions respectively, which is Gift (8 items), Stigma

(6 items), Transition (3 items), Process (3 items) and Pleasure (5 items). This study is an important step toward understanding individuals' belief of virginity and would contribute to future research and clinical applications.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

MODERATED POSTERS SESSION MP10

Sexological research: Basic; Behavioural

MP10-1

COMMON GENETIC EFFECTS OF CHILDHOOD GENDER ATYPICAL BEHAVIOR AND ADULT SEXUAL ORIENTATION

Alanko Katarina (Åbo Akademi University), Sandnabba N Kenneth (Åbo Akademi University), Santtila Pekka (Åbo Akademi University)

Childhood gender atypical behavior, sexual orientation, their genetic and environmental sources and the shared genetic effects of the two traits were studied in a population-based sample of 3261 Finnish twins aged 33 to 43 years. The participants completed questionnaires on recalled childhood behavior, same-sex sexual interest and same-sex sexual behavior. The associations that were found between childhood gender atypical behavior and adult sexual orientation were stronger for males than for females. In the quantitative genetic analyses it was found that variation in childhood gender atypical behavior, same-sex sexual interest and behavior was partly due to genetics. Nonshared environmental effects were also found. Substantial common genetic and modest common nonshared environmental correlations for childhood gender atypical behavior and sexual orientation were found. Finally, gender atypical behavior was entered into a path analysis as a mediating variable between genetic similarity and sexual orientation, resulting in that the association between genetic similarity and sexual orientation disappeared.

Conflict of Interest: None disclosed

Financial Support/Funding:The Signe and Ane Gyllenberg Foundation, The Stiftelsens for Åbo Akademi University Foundation and the Academy of Finland.

MP10-2

THE HIV/AIDS CYCLE AMONG INCARCERATED POPULATIONS IN UGANDA

Oijuke Moses (Makerere University), Oijuke Moses (Makerere University)

Custody of prisoners on the Uganda government side is a challenge making prisoner's health-care a non priority which has given room for

HIV/AIDS prevalence rate to close in at 10 % verses the nations rate at 6%. Prison statistics are likely to be higher due to non existence of VCT services at prison level, over crowding which leads to activities that result in risky behaviours such as un-protected sex, homosexuality, sharing of sharp objects and ignorance on HIV/AIDS. Owing to lack of HIV/AIDS programs in prisons, inmates usually have inadequate knowledge, support and skills to negotiate for safe sex while inside and outside their communities once released. Women are particularly at a higher risk as they are usually used by prison officers in exchange for favors. Mother to child HIV/AIDS transmission sets in because of the limited health services set up at prisons. Some female inmates enter prison while pregnant and a big number conceive while in custody. The dilemma is the most individuals are always re-arrested after a short period thereby making prisons silent conduits for HIV/AIDS. Containing the HIV/AIDS pandemic in prisons will contribute greatly to reducing the national and global prevalence rates.

Recommendations 1. Adopt a Peer led strategy to equip inmates with knowledge and skills needed to promote a continuous behavioural change, reduce stigma and decrease personal risk upon their return to the community. 2. Advocate for special HIV/AIDS funding for prisons from Government and international organisations.

Conflict of Interest: None disclosed

Financial Support/Funding: UNFPA Uganda

MP10-3

PSYCHOMETRIC PROPERTIES OF THE GLOBAL MEASURE OF SEXUAL SATISFACTION (GMSEX): TWO PRELIMINARY STUDIES ON TWO PORTUGUESE SAMPLES

Pascoal Patricia, Narciso-Davide Isabel S.B., Vilarinho Sandra M.C. (University of Coimbra), Nobre Pedro J.S. (University of Trás-os-Montes e Alto Douro), Pereira Nuno M.

Introduction and objectives: The Global Measure of Sexual Satisfaction by Lawrence and Byers (1995) has been used as a measure to evaluate sexual satisfaction within long term relationships. Satisfaction is based upon self-appraisal of participants current sexual relationship on five seven point bipolar scales, with higher scores indicating greater sexual satisfaction. The scale has proven to have good test retest reliability and high internal consistency as well as good convergent validity with other measures (Byers, Demmons, & Lawrance, 1998; Lawrance & Byers, 1995; 1998). It has also proved to have good psychometric properties in a large Chinese sample (Renaud, Byers, Pan, 1997). Our goal was to test GMSEX properties in a Portuguese Sample.

Methodology: The preliminary studies were conducted in a Portuguese sample of 140 women from the general population ages between 18 and 75 (Study 1) and relationship for 6 months or more; another study (Study 2) was conducted online with a sample of 779 men and 1378 women from the general population with and without self report of sexual difficulties.

Results: On Study 1 Test retest reliability (with 3 weeks interval between

both administrations) was (Pearson's r) .66 ($p < .001$); Internal consistency (Cronbach's α) .98 Convergent validity with GRISS was (Pearson's r) = .42 ($p < .001$). On Study 2 Internal consistency was (Cronbach's α) .94
Results: This results show that GMSEX is a quick and easy to understand reliable measure of sexual satisfaction that can be used in both clinical and research contexts in Portugal.

Conflict of Interest: None disclosed

Financial Support/Funding: Foundation For Science And Technology

MP10-4

SEXUALITY IN THE AGED: CHARACTERÍSTICS, PHYSIOLOGICAL AND PSICOSSOCIALS IMPLICATIONS, ATTITUDES AND KNOWLEDGE.

Favero Marisalva Fernandes (CNEICC - ISMAI), Ferreira Fátima Abreu (CNEICC - ISMAI), Silva Ana Isabel (CNEICC - ISMAI), Maia Carla (CNEICC - ISMAI)

Sexuality in aging should be seen as another dimension that accompanies the evolutive life course, breaking thus the abusive relationship between sexuality and sexual activity (Ramos, 2000). Within this line we are holding in Portugal a study to address the characteristics and physiological and psychosocial implications of sexuality in old age and what knowledge and attitudes of the elderly and society in general have towards sexuality in that stage of the life cycle.

Method(s): Data were collected from 185 elderly, 250 elderly relatives, 350 professionals e 250 subjects from general population. The subjects completed the Sexual Dysfunctional Beliefs Questionnaire (Nobre et al., 2003); International Index of Erectile Disorder (IIEF; Rosen et al., 1997, portuguese version by Nobre, 2003); Female Sexual Function Index (FSFI; Rosen et al., 2000, portuguese version by Nobre, 2003); Sexual Dysfunction Interview (SDI, Sbrocco et al., 1992, portuguese version by Nobre, 2003); Golombok Rust Inventory of Sexual Satisfaction (GRISS; Rust & Golombok, 1989, portuguese version, Vilarinho & Nobre, 2005); SEXIDOS (Moreira & Fávero, 2005); ASKAS (White, 1982, portuguese version, Gomes & Fávero, 2008); S.O.S (Fisher et al., 1982, portuguese version, Fávero, 2008). For the physiological evaluation we asked for clinical tests and clinical diagnostic procedures.

Results/Conclusion: Previous results indicate that family members have more negative attitudes towards the sexuality of their elderly relatives than the professionals from the geriatrics áreas. We expect to find data about the influence das attitudes and knowledge and the physiological and psicosocials factors related to sexual satisfaction.

Conflict of Interest: None disclosed

Financial Support/Funding: CNEICC - ISMAI

MP10-5

EMOTIONAL RESPONSES TO SEXUAL CUES: EROTOPHOBIA – EROTOPHILIA. PORTUGUESE VERSION OF A SEXUAL OPINION SURVEY (S.O.S)

Favero Marisalva Fernandes (CNEICC - ISMAI)

Introduction and objectives: Erotophobia - erotophilia is a tendency to respond to sexual cues with negative-to-positive affect and related negative-to-positive evaluation of sexuality. A high score in erotophobia indicates negative attitudes towards sexual stimuli; whereas a high score in erotophilia indicates positive attitudes towards sexual stimuli. This study describes the adaptation, validation and reliability study of the Sexual Opinion Survey (S.O.S) from Fisher, Byrne, White and Kelly (1988), composed by 21 items to a Portuguese group.

Method(s): We applied S.O.S on 535 subjects, 282 men and 253 women, students and non students from three major cities in Portugal, between 18 and 27 years of age with an average of 22. The subjects of the sample completed a questionnaire on sociodemographic data and a questionnaire on sexual experiences in childhood.

Results: Results showed that men were significantly more erotophobic than women ($p < .001$); subjects who self-classified as “open” towards sexuality were more erotophilic than those who self-classified as “conservative” ($p > .5$). There are also more erotophilic people belonging to the younger age group ($p < .001$). Besides, and confirming other studies analyzed (Lopez et al., 1995), people who were victims of sexual abuse are more erotophilic.

Conclusion: The factor analysis performed indicates the presence of two factors with good internal consistency (erotophobia, erotophilia), keeping the psychometric properties of the original version of Fisher et al. (1988). The validity of the multidimensional construct confirms the scale.

Conflict of Interest: None disclosed

Financial Support/Funding: CNEICC - ISMAI

MP10-6

QUESTIONNAIRE ON YOUNG CHILDREN’S SEXUAL LEARNING: A PORTUGUESE SURVEY

Favero Marisalva Fernandes (CNEICC - ISMAI), Favero Marisalva Fernandes (CNEICC - ISMAI)

Introduction and objectives: In previous studies (Fávero, 2003) we conclude that in the scope of the sexuality, sexuality in childhood is to less investigated and that 84% of the subjects had related some sexual experiences before puberty. With the objective to deepen the knowledge in this field we carry out a study to test the Questionnaire on Young Sexual Children’s Learning (Brick & Koch, 1996) in a sample of health professionals.

Method(s): The sample, composed by 98 health professionals, completed the Questionnaire on Reactions Regarding Child Sexuality (Fávero, 2003) with 24 items (yes/no answers), and the Questionnaire on Young Children’s Sexual Learning (Brick & Koch, 1996), composed of three scales: Knowl-

edge About Young Children’s Sexual Learning Scale (21 true-or-false statements); Attitudes/Beliefs About Young Children’s and Sexual Learning Scale (28 statements, Likert-type scale) and Comfort With Young Children’s Sexual Learning Scale (10 topics).

Results: Previous analyses of the Portuguese version of the Questionnaire on Young Children’s Sexual Learning have demonstrated a good internal consistency ($\alpha = .79$). Attitudes/Beliefs About Young Children’s and Sexual Learning Scale ($\alpha = .862$; and Comfort With Young Children’s Sexual Learning Scale $\alpha = .83$).

Conclusion: The subjects present positive attitudes face to child sexuality and had demonstrated to feel themselves comfortable to deal with children sexuality, but they present levels of insufficient knowledge to support the good exercise of sexual health promotion .

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

MP10-7

RFSU STOCKHOLM’S SCHOOL PROJECT

Isfors Ellinor (RFSU Stockholm)

Introduction: The local branch of RFSU (The Swedish Association for Sexuality Education) in Stockholm has been running an HIV preventive school project for the past twelve years. The project is run by four employees and has about 40 young, professional educators.

Action: We train 20 new educators every year. The course is 60 hours long and covers different topics, like HIV and other STI’s, condom use, sexual harassment, mutual respect, gay, lesbian and transgender rights etc. The educators are taught to question gender roles and other norms that affect people’s sexual life. Schools book our educators against a fee. We talk to pupils from the age of 12 to 18, in small groups, for 90 minutes. A checklist with topics that have to be brought up with every group regulates the educators’ sessions.

Outcome: The project has been evaluated once every two years, by the pupils we meet. In the last evaluation we got 4.6 points out of five. Even though sex education has been compulsory since 1955 many teachers have little training. The option to invite RFSU to their classes is something that a lot of teachers are grateful for.

Discussion and Recommendations: The project has good routines to secure the quality of the educators work. These routines have been developed through out more than a decade and the checklist is updated on a yearly basis. We see great benefits of having had the possibility to run the project for so long.

Conflict of Interest: None disclosed

Financial Support/Funding: The project is funded by the National Health Board, via the local Government in Stockholm.

MP10-9

FACTORS INFLUENCING REPRODUCTIVE HEALTH KNOWLEDGE OF YOUNG PEOPLE IN NIGERIA

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Background: The young aged 15-24 are more vulnerable and have highest rate in HIV and other STIs. Nigeria has a population structure with about 46% under 25, therefore it is important to study youths perception about reproductive health, HIV/AIDS and other STIs and also its protective methods.

Methodology: This study sampled 3052 young people from three cities, Awka, Onitsha and Nnewi metropolitan cities within a period of 2 years. Researchers focus on the youth's knowledge about reproductive health, particularly about different issues of sexual relations, contraceptive methods, fertile ability, HIV prevention, and the critical factors that affect youth's perception.

Result: The results show that there is obvious difference between the cities. For instance, the young people from Awka who were sampled have better understanding about reproductive health compared to that of other two cities; the differences between those in Onitsha and Nnewi are not clearly dichotomous some issues are known by youth in Onitsha better than Nnewi youth inhabitants while the others are not. Thus the result also show that urban youth with higher education and older age have better knowledge about related issues of reproductive health. Sex, marital status, occupation and education of youth parents has a significant impact on youth knowledge however the pattern is not clearly defined.

Recommendation: There is need to increase awareness on reproductive health of young people in all the cities sampled because it is one of the most effective means of prevention and control of HIV and other STIs.

Conflict of Interest: None disclosed

Financial Support/Funding: YIRHEA

MP10-10

HIV (AIDS) COMMUNITIES AND NETWORKS IN SOCIAL AND RELIGIOUS PRACTICES

Schmiedt Streck Valburga (Escola Superior de Teologia)

This study reflects ways in which social networks can be established among the population that is HIV positive and different religious group in collaboration with governmental and social agencies. Its aim is to investigate among subjects, networks and virtual communities to understand intercultural aspects in the Brazilian religious contexts and how these influence daily life of the people, analyzing those that promote empowerment as well as those that,

in case of HIV, exclude due to moral aspects. It is understood that the fragmentation of social relationships in modern society puts in risk the coherence of the context where people live, and in this way pose serious consequences to the identity and to the health of people. The investigations is being conducted in the context of the city of Porto Alegre/RS, and focuses mainly on situations of risk and vulnerability of HIV and the dynamic of exclusion. The methodology used is the Grounded Theory (Strauss, 1997) which is based on the analysis and systematization of data and is also grounded by the collected data. So far, different communities in the largest virtual communication site in Brazil have been analyzed and it was found that virtual communities among Christian Youth have a high level of discrimination and prejudice against HIV and homosexuality while non-religious groups in general offer support and orientation. Also several religious denominations start working together with governmental and NGOS, experiencing new approaches to dialogue and strategies of collaboration. The project is funded by: National Council and Technological Development (CNPq).

Conflict of Interest: None disclosed

Financial Support/Funding: National Council and Technological Development (CNPq)

MP10-11

SEXUAL RE-PLEASURING: MALE SUBSTANCE USERS AND ABUSERS WORKING SEXUAL PLEASURE AS RELAPSE PREVENTION WHILE LIVING IN A THERAPEUTIC COMMUNITY

Estrada Jesús M (J E Sexological Studium)

Some drug users prefer to use drugs in sexual situations while some drug abusers resume to drug consumption after a good period of abstinence when facing sexual situations relapsing, consequently, into a new period of drug consumption. To prevent relapse via a sexual encounter drug rehabilitation participants should experience that sex per se-free of drugs-can be pleasurable, that they may find and create their own drug free sexual enhancement situations. This work stresses on how a small male substance use and abuse group living in a therapeutic community is empowered to experience and create new ways of sexual enhancement so they may feel able to be drug free on sexual situations once out of the therapeutic community. The process is divided into four phases: a) Playful Integration Phase devoted to build trust and group integration, and works PLISSIT's Permission to work and explore new sexual patterns; b) Socialization and Sexuality Phase to work Ira Reis' concept of social scripts and their culture's view of male sexuality; c) Physiological/Psychological Phase to work the physiology and psychology of sex either on drugs or out of drugs, Masters and Johnson's ejaculatory control, and Zilbergeld's conditions for good sex theory; d) Enrichment/Sensory Phase which works The Institute for the Advanced Study of Human Sexuality's (IASHS) Sexual Enrichment and Education and Sensorium programs-to help them experience and create new, drug-free levels of sexual sensations-and Carol Well's guided imagery and sexual creativity exercises and other sexual creativity activities.

Conflict of Interest: No potential conflict of interest
 Financial Support/Funding:None disclosed

MP10-13

EFFORTS TO INCREASE THE KNOWLEDGE OF SCHOOL GOING ADOLESCENTS ON REPRODUCTIVE/SEXUAL HEALTH & RIGHTS.

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Background: Pakistan, the sixth largest country in the world has a large population bulge in the young age group (54% under the age of 24, according to census held in 1998). Culturally, it is a traditional society where sex and reproduction are taken synonymously with marriage and discussion on such issues is considered taboo.

Method: Classroom intervention of RSHR programme has been conducted for 9-10 class students who are around 15-16 years old. The components includes reproductive health, sex & sexuality, gender and rights of equality and legal issues like marriage age, 52 schools from Bahawalpur (Southern Region of Punjab), Pakistan were selected for the intervention. Social Help & Research Organization (SHRO) forms were prepared and used before and after the class room intervention and analysed through excel programme to find out the changes in their knowledge level in respect to RSHR, fertilization, family planning, sex and sexuality.

Results and Conclusion: A dramatic change has been observed at the knowledge and perception level which increased from 32% to 88%. Tehsil wise base line difference of knowledge level has also been noted. One of the reasons of the success is the teachers training programme prior to class room intervention. The appropriate teaching and educational materials have also played contribution to this success.

Conflict of Interest: Some religious mind teachers and community individual try to create conflicts in the programs. But team of SHRO already involved local community and notable of the society for successful implementation of the research.

Financial Support/Funding:SHRO conduct this research on self help basis by involving local community & notable of the society.

MP10-14

FACING SEXUALITY AS A METHOD IN PROFESSIONAL WORK

Lukkerz Jack Rafal (RFSU-Gruppen Malmoe), Hansson Elinor Irene-Mari (RFSU-Gruppen Malmoe)

Sexuality as a complex phenomenon can be explained in many ways. RFSU Malmö (Swedish association for sexuality education, branch in Malmö) manages since 1990 a project within HIV-prevention in the Scania region in south Sweden. Our daily work contains counselling, education and in-

formation; herein we use sexuality as the main method. Therefore, we have developed a model grounded on interaction between biological, psychological and social factors. It shall be looked upon as an interaction in an active and unfolding process, where one factor alone can not explain sexuality, the parts are not necessarily equal for every person, and the meaning of it can change over time (Brander & Hansson, 1995). The aim of the workshop is to provide tools to the target groups - sexually active persons and professionals meeting sexual active persons on a daily basis – to deal with different aspects of the human sexuality in a conducive, positive, affirming and non-judgemental way. We define the phenomenon sexuality; we discuss key terms and give suggestions for a successful practical work. The PLISSIT-model (Annon, 1976) enables us to put the professional her/himself on an adequate level. Our workshop takes place in the shape of mutual dialog with the participants, with a solution focused approach. References: Brander, G & Hansson, E (1995) Sexualitet – rapport om ett arbetssätt. Malmö: RFSU. Annon, JS (1976) The PLISSIT Model: A Proposed Conceptual Scheme for the Behavioral Treatment of Sexual Problems. Journal of Sex Education and Therapy: spring-summer 1976.

Conflict of Interest: None disclosed
 Financial Support/Funding:None disclosed

MP10-15

WORKSHOP FOR HIV SERODISCORDANT COUPLES

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Introduction: HIV diagnosis has a negative impact on the person infected and his or her partner, affecting both in their life quality. It is common that medical or psychological assistance put people affected indirectly by HIV in a second place (1). Two of the most problematic topics for serodiscordantes couples are: Fear of HIV transmission and family planning (2). Most of the couples, who look for pregnancy, don't find the correct medical advice and take the risk of infection their partner and/or the baby. Action: 10 heterosexual couples participated in monthly workshops. These were coordinated by psychologists who focalized in different topics and guided them during several activities. The participants were in contact between sessions by e-mail where they could make questions or share information with the coordinators, physician and other couples.

Outcome: Couples reduce their fear for HIV transmission and regain their sexual life. 2 couples began fertilization treatments. The negative partner referred being more involved in their partner's treatment and prevention measures.

Discussion and recommendations: The lack of group interventions and training of health agents, as well as multipliers, are still a gap for correcting in the way to a better multidisciplinary treatment of serodiscordantes couples.

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Moderated posters

Abstract Book

Green, E., and Van Laningham, D. Couples who care: The effectiveness of a psychoeducational group intervention for HIV serodiscordant couples. *Research on Social Work Practice*, 2002; 12(2), 238-252.

Conflict of Interest: None disclosed

Financial Support/Funding:None disclosed

POSTERS: LIST BY THEMES

<i>ID</i>	<i>Title</i>	<i>Author</i>
Sexuality education		
PO-1091	OPPORTUNITIES FOR HELP: THE IMPERATIVE OF YOUTH CENTER SERVICES IN ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH DEVELOPMENT AND HIV/AIDS PREVENTION.	Nerima Rebecca
PO-1109	SEXUALITY AND LIFE SKILLS EDUCATION AMONG YOUNG PEOPLE IN HARD TO REACH COMMUNITIES IN LAGOS-STATE	Durueke Florita
PO-1114	HIV AND AIDS-RELATED BELIEFS, PERCEPTION AND SEXUAL BEHAVIOURS IN METROPOLITAN CAPE TOWN, SOUTH AFRICA.	Oyedokun Amos
PO-1119	AN ALTERNATIVE PATHWAY FOR SCHOOL-BASED SEXUALITY AND REPRODUCTIVE HEALTH EDUCATION (NEED ASSESMENT)	Yusran Sartiah
PO-1120	RESOURCE MOBILIZATION AS TOOL FOR HIV/AIDS IMPACT MITIGATION AT THE COMMUNITY LEVEL: LESSONS LEANT, CHALLENGES AND WAY FORWARD	Chijioko Okonkwo
PO-1125	KNOWLEDGE, ATTITUDE AND PERCEPTION OF ISLAMIYYA STUDENTS ABOUT HIV/AIDS: ARE THESE STUDENTS AT RISK?	Abubakar Attahir
PO-1136	SEXUALITY EDUCATION FOR SECONDARY SCHOOL STUDENTS IN MAKASSAR, INDONESIA	Yusran Sartiah
PO-1140	EVALUATION OF THE BOOK EVERYONE'S GOT A BOTTOM - EARLY CHILDHOOD RESOURCE FOR COMMUNICATING ABOUT SEXUALITY AND PREVENTION OF CHILDHOOD SEXUAL ASSAULT	Brennan Holly Kamalifard Mozghan
PO-1160	IMPLEMENTATION OF SEXUAL HEALTH ON WORK PLACE , PROGRAME IN IRAN	
PO-1165	CHANGES IN THE ATTITUDE OF JAPANESE HIGH SCHOOL STUDENTS BEFORE AND AFTER SEX EDUCATION	Hayashi Itoko
PO-1196	SEXUAL EDUCATION: AN EXPERIMENTAL PROGRAMME WITH EDUCATIONAL AND MEDICAL BENEFIT	Kettemalet Anthony Fabric Kupferman Sarit
PO-1197	WHEN AGE AND GLOBALIZATION MEET SOCIAL RISKS	
PO-1204	PAKISTANI TEACHER AS POTENTIAL RESOURCES TO IMPART REPRODUCTIVE & SEXUAL HEALTH AND RIGHTS EDUCATION TO YOUTH.	Nasir Muhammad Kume Isoh Jerome
PO-1205	HIV/AIDS AND YOUNG PEOPLE (YP)	
PO-1227	INFORMATION COMMUNICATION TECHNOLOGIES: INDISPENSABLE TOOLS FOR QUALITY SEXUALITY EDUCATION IN SUB-SAHARAN AFRICA.	Okolie Ugochukwu C Packiisamy Ranuga Devy Nathan Vytialingam
PO-1236	LEGAL ISSUES IN SEXUAL PRACTICE	
PO-1241	SETTING YOUR MOOD WITH BACKACHE	
PO-1250	NEW DIMENSIONS IN RISK BEHAVIOR IN SEX WORKING: IS PREVENTION IMPOSSIBLE?	Ahsan Ullah Akm
PO-1264	EXPERIENCE OF SEXUAL EDUCATION WITH DIFFERENTS GROUPS - RELIGIOUS PERSPECTIVE AND HEALTH NECESSITIES	Murillo Olga Margarita Seeletso Mmabaledi Seeletso Mmabaledi
PO-1287	LIVING MONTREAL RIORITIES: MYTH OR REALITY – CASE STUDY BOTSWANA	
PO-1298	SEXUAL HEALTH & RIGHTS; A REFLECTION ON BOTSWANA	
PO-1313	THE NEW FACE OF HIV/AIDS: WHAT NEW INFORMATION NEEDS TO BE GIVEN TO YOUNG PEOPLE	Nampeera Viola Gonsalkorala Lalith Nadège Kpainia Fiossem Edwige Fleur Kpomako
PO-1330	SEXUAL AWARENESS AMONG TEENAGERS - THE SRI LANKAN SITUATION	
PO-1350	SEXUAL EDUCATION	
PO-1355	SEXUAL EDUCATION	
PO-1379	ATTITUDE AND KNOWLEDGE ON SEXUALITY EDUCATION AMONG PARENTS	

Abstract Book

PO-1392	OF TEENAGERS IN PORT-HARCOURT CITY OF NIGER-DELTA REGION OF NIGERIA UTERINE CERVIX CANCER AND STATE OF THE ART SEXUALITY.	Inyang Mfrekemfon Bazarrá-Fernandez Antonio
PO-1405	FIRST SEXUAL INTERCOURSE: A RESEARCH WORK CARRIED OUT WITH YOUNG PEOPLE FROM 13 TO 17 YEARS OLD, BELONGING TO POPULAR SECTOR AND MIDDLE CLASS, BUENOS AIRES, ARGENTINA.	Goldstein Beatriz
PO-1409	BENEFITS AND CHALLENGES OF ONLINE COLLEGE/UNIVERSITY COURSES IN HUMAN SEXUALITY FROM INSTRUCTOR AND STUDENT PERSPECTIVES	De Villers Linda
PO-1455	EDUCATING SEXUALITY FOR OLDER ADULTS IN MALAYSIA	Mat Saat Geshina
PO-1476	SWEDISH AND AMERICAN YOUTH; THEIR THOUGHTS AND PERCEPTIONS SURROUNDING SEXUAL LITERACY	Vallin Lisa Michaela
PO-1487	YOUNG PEOPLE AGAINST THE HIV AND EARLY AND UNWANTED PREGNANCIES IN THE DISTRICT OF YAOUNDE II-CAMEROON	Fezeu Temma Faustin Shokat Muhammad
PO-1507	THEATRE FOR SOCIAL CHANGE	Öster Mia
PO-1515	YOUTH CLINICS IN SWEDEN, A SHORT PRESENTATION	Kambona Caroline
PO-1607	WANTED SEX: WOMEN DESIRE VS SOCIETAL NORMS	Chijioko Okonkwo
PO-1624	SPORTS AS A MEANS OF INTEGRATING REPRODUCTIVE HEALTH EDUCATION IN NIGERIA: YIRHEA WAY	Rodtzevich Olga Shuttleworth Russell
PO-1642	THE CONTENTS OF POSTGRADUAL PREPARATION OF ADULTERY SEXOLOGY SPECIALISTS	Kambona Caroline Hanifah Laily
PO-1655	DEVELOPING AN ONLINE SEXUALITY AND DISABILITY RESEARCH MODEL	Miyahara Harumi Gieles Frans
PO-1703	MALE ENGAGEMENT IN SEXUALITY DISCOURSE AS A POSITIVE INTERVENTION TO THE HIV PANDEMIC	Schindele Anna Chuchu
PO-1704	SEXUALITY EDUCATION IN INDONESIA: EXPERIENCE FROM 2 UNIVERSITIES	Dessi Antonio Becker Alvear Maria Andrea
PO-1708	A PEER TAUGHT SEX EDUCATION CLASS FOR CHILDREN WITH DEVELOPMENTAL DISABILITIES	Valkama Sirpa
PO-1719	GO DUTCH – A PRACTICE SAMPLE	Axelzon Fredrik
PO-1727	SEXUALITY EDUCATION – HOW TO INTERLINK THEORIES WITH PRACTICAL METHODS	Smith Marika
PO-1801	IT'S NEVER TOO EARLY! PARENT'S ATTITUDES TOWARD SEX EDUCATION: AN ITALIAN EXPERIENCE	Ashraf Saima Schindele Anna Chuchu
PO-1802	TOWARDS AN EPISTEMOLOGY TO WORK ON SEXUALITY	Hallam-Jones Ruth
PO-1826	THE VALORISATION OF SEXOLOGY EDUCATION AND TRAINING PROGRAMME AT THE JAMK UNIVERSITY OF APPLIED SCIENCES, DURING THE YEARS 2000-2007	Paramastri Ira
PO-1835	DEVELOPMENT AND DEPLOYMENT OF GAME BASED LEARNING FOR SEXUALITY EDUCATION IN SCHOOLS	Hallam-Jones Ruth Bello Tititlola
PO-1840	POLITICAL AND EDUCATIONAL WORK WITH BDSM AND FETISH-RELATED ISSUES IN SWEDEN	Guy Alain Seogoroye
PO-1852	EDUCATION FOR ALL AGREED SEXUALITY EDUCATION FOR ALL...? WHY STILL A QUESTION MARK	
PO-1887	THE MAIN THREAD – A HANDBOOK FOR SEXUALITY EDUCATION	
PO-1903	CASE STUDY DEMONSTRATION OF A NEW RESOURCE FOR TREATING WOMEN WHO EXPERIENCE VAGINISMUS	
PO-1905	PRIMARY PREVENTION KNOWLEDGE OF PARENTS AND TEACHERS OF KINDERGARTEN AND PLAYGROUP ON CHILD SEXUAL ABUSE (CSA)	
PO-1910	THE NEED TO INCLUDE ADEQUATE RELEVANT SEXUAL EDUCATION WHEN USING THE EROS PHYSICAL TREATMENT WITH WOMEN EXPERIENCING FSD AND POOR VASCULARITY OF THE GENITALIA	
PO-1928	SEXUALITY EDUCATION	
PO-1943	CHILD SEX ABUSE	
PO-1949	PLEASURE, DESIRE AND RESPONSIBLE CHOICES: REFRAMING SEXUALITY	

PO-1966	EDUCATION AND RESEARCH IN THE CONTEXT OF SEXUAL LITERACY EDUCATIONAL STRATEGY FOR TRANSSEXUALS INTEGRAL CARE IN CUBA	Vallin Lisa Michaela Castro Espín Mariela
PO-1971	FIRST SCANDINAVIAN SEX HANDBOOK FOR WOMEN WHO HAVE SEX WITH WOMEN	Flodman Malinda
PO-1991	SEXUAL EDUCATION IN A SUPPORT GROUP AS A PART OF A HOLISTIC TREATMENT FOR BREAST CANCER	Hernandez-Rivera Ana
PO-1996	PARAGUAYAN SOCIETY OF HUMAN SEXUALITY STUDIES: WORKSHOPS ON SEXOLOGICAL AGREEMENTS	Gonzalez Galeano Ariel Gonzalez Galeano Ariel
PO-1998	III PARAGUAYAN CONGRESS OF HUMAN SEXUALITY STUDIES	Mohammadi Mostafa
PO-2016	AN INTRODUCTION TO SEXUAL TRAINING IN ISLAM	Kuriansky Judy
PO-2069	PUBLIC QUESTIONS ABOUT SEX WORLDWIDE AND HOW SEXUALITY EXPERTS ANSWER	Sharma Neeru Sazdanovska Biljana Sazdanovska Biljana
PO-2076	ATTITUDE OF ADOLESCENT GIRLS TOWARDS FAMILY LIFE EDUCATION: A COMPARISON OF RURAL AND URBAN AREAS OF INDIA.	Utomo Iwu Dwisetiyani
PO-2079	LOVE EROTIC AND SEXUAL EDUCATION OF KOMAJA IN MACEDONIA	Sung Su-Ching
PO-2092	LOVE EROTIC AND SEXUAL EDUCATION OF KOMAJA IN MACEDONIA	Lou Jiunn-Horn Birgerson Cecilia Grimrud Karen Vanwesenbeeck Ine
PO-2097	WHAT ARE THEY LEARNING: LESSONS ABOUT HIV IN INDONESIAN PRIMARY AND SECONDARY SCHOOL TEXTBOOKS	Kim Haewon
PO-2100	THE POWER DISPLAY AND MEANING IN PREMARITAL SEXUAL INTERACTION OF ADOLESCENT GIRLS	Bogren Malin Wallace Mette Bogren Malin
PO-2108	A STUDY OF SEXUAL EXPERIENCE AND CONTRACEPTIVE FACTORS AMONG ADOLESCENTS IN TAIWAN	James Fadokun Rajapaksha Milinda Barrios Martha Elena
PO-2109	SEXUAL HEALTH ON EQUAL TERMS	Mehdi Hameed Ul
PO-2112	SEXUALITY AND SEXUAL FUNCTIONING IN PERSONS WITH SPINA BIFIDA	Goldstein Beatriz
PO-2119	SEXUAL EMPOWERMENT OF ADOLESCENT GIRLS, AND MEASURING IT	Guerrero Figueroa Olivia
PO-2120	KNOWLEDGE OF THE HUMAN PAPILLOMAVIRUS AND THE CERVICAL CANCER IN KOREAN NURSES	
PO-2128	THE ROLE OF COMMUNITY BASED SKILLED BIRTH ATTENDANTS IN ENSURING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS	
PO-2135	NORWEGIAN HABILITATION SERVICES' NETWORK ON DISABILITY AND SEXUALITY	
PO-2141	INITIATIVES TO ENSURE BETTER ACCESS FOR SERVICE FOR VIOLETTED WOMEN	
PO-2163	AN ANALYSIS OF SEXUAL AND REPRODUCTIVE HEALTH BEHAVIOUR OF UNIVERSITY STUDENTS IN NIGERIA: THE NEED FOR A STRATEGIC RESPONSE	
PO-2200	SEXUALITY EDUCATION FOR YOUNG PEOPLE THROUGH RADIO IN SRI LANKA	
PO-2204	THE CARAVAN "MY BODY, MY EMOTIONS...MY RIGHTS"	
PO-2208	ROLE OF ISLAMIC SCHOLARS TO ADDRESS HIV, REPRODUCTIVE HEALTH, SEXUAL HEALTH.	
PO-2209	FIRST SEXUAL INTERCOURSE: A RESEARCH WORK CARRIED OUT WITH YOUNG PEOPLE FROM 13 TO 17 YEARS OLD, BELONGING TO POPULAR SECTOR AND MIDDLE CLASS, BUENOS AIRES, ARGENTINA	
PO-2237	VIOLENCE IN THE CLASSROOM FOR NOT COMPREHENSION OF THE SEXUAL ORIENTATION AND THE GENDER IDENTITY	
Sexological Research: Basic research		
PO-1080	ALARMING RATE OF RAPE CASES IN NIGERIA: CURBING THE TREND THROUGH PARENTAL GUIDANCE	Folorunsho Moshood
PO-1102	IMPROVING SEXUAL HEALTH AMIDST MAJOR OBSTACLES IN RURAL MALINGO, CAMEROON	Menang Joshua Ngwang

Abstract Book

PO-1151	CAUSES AND FORMS OF INTIMATE PARTNER SEXUAL VIOLENCE: A HEALTH PROFESSIONALS' PERSPECTIVE.	Maina Geoffrey
PO-1179	REPRODUCTIVE HEALTH NEEDS AMONG FEMALE SEX WORKERS IN THE DOUALA METROPOLIS OF CAMEROON.	Kume Isoh Jerome
PO-1185	GENDER, SEXUALITY AND HEALTH	Naeem Muhammad
PO-1199	BARRIERS TO THE USE OF MODERN CONTRACEPTIVES AND IMPLICATIONS FOR WOMAN-CONTROLLED PREVENTION OF SEXUALLY TRANSMITTED INFECTIONS IN REFUGEES SETTING.	Kume Isoh Jerome
PO-1232	WHAT ATTRACTS TEENAGE EXPECTANT MOTHERS TO HAVE ANTENATAL CARE SERVICES :A CASE STUDY OF NAGURU TEENAGE HEALTH CENTRE, KAMPALA UGANDA	Nansubuga Resty
PO-1268	STUDY OF DIETARY PATTERNS AND SELENIUM LEVELS IN SOILS AND FOODS OF HIGH HIV PREVALENT DISTRICT OF BONDO IN KENYA	Boaz Otieno Samwel
PO-1274	SEXUAL LEGISLATION IN KENYA: THE SEXUAL OFFENCES ACT OF 2006	Otieno Hezron
PO-1290	CHILDBEARING INTENTIONS OF PEOPLE LIVING WITH HIV/AIDS AND ARE ON ANTIRETROVIRAL TREATMENT IN UGANDA	Nakkazi Musoke Irene
PO-1291	KNOWLEDGE AND PRACTICES RELATED TO SANITATION AMONG THE COMMUNITIES IN MBALE DISTRICT UGANDA.	Nakawoza Maria Goreti
PO-1317	PERSONALITY AS A PREDICTOR OF THE PREFERENCE FOR AND IMPORTANCE ATTACHED TO ROMANCE IN COMMITTED RELATIONSHIPS: WHAT HAPPENED TO THE GENDER STEREOTYPE?	Hald Gert Martin
PO-1318	REPRODUCTIVE HEALTH NEEDS AMONG FEMALE SEX WORKERS IN THE DOUALA METROPOLIS OF CAMEROON.	Kume Isoh Jerome
PO-1326	HEALTHCARE PROFESSIONALS' OPINIONS OF SERVICES FOR MALES SEXUALLY ASSAULTED IN ADULthood	King Nicole
PO-1328	WHY HUMANS DO NOT HAVE SEX	Aavik Toivo
PO-1360	UNWANTED EARLY SEXUAL EXPERIENCES AND SEXUAL ADJUSTMENT AMONG FIRST-YEAR UNIVERSITY STUDENTS	Revell Arlynn
PO-1407	CONDUCTING SEXUALITY RESEARCH ONLINE WITH HARD-TO-REACH POPULATIONS.	Iantaffi Alessandra
PO-1436	AN ANALYSIS OF ADOLESCENT'S CONDOM-USING THROUGH TRANS THEORETICAL MODEL	Lin Yen-Chin
PO-1454	ADOLESCENT SEXUALITY IN MALAYSIA	Mat Saat Geshina
PO-1457	SEXUAL VIOLENCE IN MALAYSIAN HOSPITALS	Mat Saat Geshina
PO-1468	DESCRIPTION OF THREESOME SEXUAL EXPERIENCE AND PRACTICE (EPST) ON THE STUDENTS OF CENTRO DE INVESTIGACIONES PSIQUIÁTRICAS, PSICOLÓGICAS Y SEXOLÓGICAS DE VENEZUELA, INSTITUTO DE INVESTIGACIÓN Y POSTGRADO, CARACAS	Garzón Alicia
PO-1524	DEVELOPING AND VALIDATING A TAIWAN VERSION OF THE FEMALE SEXUAL FUNCTION INDEX FOR PREGNANT WOMEN	Chang Shiow-Ru
PO-1535	FEMALE GENITAL MUTILATION;THE UNENDING CHALLENGE IN NIGERIA.	Hygie-Enwerem Grace
PO-1583	SEXUAL INTERCOURSE DURING PREGNANCY AS A SOURCE OF ANXIETY OF A PREGNANT WOMEN	Wrobel Beata
PO-1661	FACTORS OF ADOLESCENTS' SEXUAL HEALTH IN TAIWAN: A STRUCTURAL EQUATION MODEL	Lou Jiunn-Horn
PO-1668	SEXUALITY AMONG STUDENTS OF A TERTIARY INSTITUTION IN KADUNA, NIGERIA.	Onwuhafua Polite
PO-1706	SEXUAL BEHAVIOUR OF STUDENTS IN BELARUS	Domoratsky Vladimir
PO-1712	SEX DIFFERENCES IN SEXUAL AND EMOTIONAL INFIDELITY AMONG KOREAN STUDENTS AND ADULTS	Youn Gahyun

PO-1786	PRELIMINARY VALIDATION OF THE SEXUAL ASSERTIVENESS SCALE (SAS) AMONG A SPANISH SAMPLE.	Vallejo Medina Pablo
PO-1842	TRANS LIVES: ASIAN VOICES	Winter Sam
PO-1846	PREVALENCE AND CORRELATES OF SEXUAL GENDER BASED VIOLENCE IN UGANDA	Nayiga Joy
PO-1863	BODY DISSATISFACTION AND BODY MASS INDEX IN SPANISH STUDENT: IMPLICATIONS IN SEXUALITY	Lameiras Fernandez Maria
PO-1868	THE DIRE STATE OF SEXUAL AND REPRODUCTIVE HEALTH IN ETHIOPIA: A QUALITATIVE STUDY OF KNOWLEDGE, ATTITUDE AND BEHAVIOR AMONG THE YOUTH	Zewelde Solomon Amare
PO-1961	INCIDENCE OF PERSONOLOGICAL HOMOGAMY AND HETEROGAMY ON THE CHOICE OF PARTNERS AND THE QUALITY OF THE RELATIONSHIP OF THE COUPLE	Lampis Jessica
PO-1977	CHINESE ATTITUDES TOWARDS TRANSGENDERISM AND TRANSGENDER CIVIL RIGHTS IN HONG KONG	King Mark
PO-1999	MEANINGS OF EROTICISM, SEXUAL DESIRE, AROUSAL AND ORGASM IN A COLLEGE STUDENTS	García- Hernández Ma. Graciela
PO-2028	HOMOPHOBIA AND INTERNALIZED HOMOPHOBIA AMONG MEN WHO HAVE SEX WITH MEN - A REVIEW OF INSTRUMENTS	Robinson Beatrice "Bean"
PO-2033	SEXUAL CRITERIA IN THE SHORT AND LONG TERM PARTNER SELECTION	Favero Marisalva
PO-2038	CHILD SEXUAL ABUSE: NURSE ATTITUDES	Favero Marisalva
PO-2039	ASSESSMENT OF ATTITUDES AND KNOWLEDGE REGARDING SEXUALITY IN THE AGED: A SURVEY ON A PORTUGUESE SAMPLE	Favero Marisalva
PO-2203	DEVELOPING A NATIONAL ASSESSMENT TOOL FOR SEXUAL HEALTH AMONG CANADIAN YOUTH	Doherty Maryanne
PO-2213	PENILE ERECTION IS A HYDRAULIC PHENOMENON OF THE CORPORA CAVERNOSA: HEMODYNAMIC STUDY ON HUMAN CADAVERS	Hsu Geng-Long

Sexological Research: Behavioral

PO-1053	EFFECT OF SEXUALITY EDUCATION ON THE IMPROVEMENT OF HEALTHSTATUS OF YOUNG PEOPLE IN THE UNIVERSITY OF ADO EKITI,NIGERIA	Akanle Florence Foluso
PO-1059	SENSUAL AND SEXUAL MARITAL CONTENTMENT IN PARENTS OF SMALL CHILDREN - A FOLLOW-UP STUDY WHEN FIRST CHILD IS FOUR YEARS OLD	Ahlborg Tone
PO-1088	MSM'S SEXUAL BEHAVIOR IMPACT ON WOMEN'S REPRODUCTIVE HEALTH	Bhandari Lekh Nath
PO-1100	SEXUAL BEHAVIOR AND VULNERABILITY OF STREET TEENAGERS TO HIV/AIDS IN KATHMANDU VALLEY	Gurung Gagan
PO-1106	EFFECT OF SEX STEREOTYPES ON SCHOOL ADOLESCENTS' SEXUAL BEHAVIOUR IN SOUTH WESTERN NIGERIA	Popoola Bayode
PO-1108	MODIFYING HIV- RELATED RISK BEHAVIOR AMONG FEMALE SEX WORKERS IN LAGOS (NIGERIA)	Durueke Florita
PO-1113	VIOLENCE AND HEALTH RISKS OF COMMERCIAL SEX WORKERS (CSW): SNAPSHOT FROM A BROTHEL IN BANGLADESH	Chanda Sanchoy Kumar
PO-1152	GENDER-BASE VIOLENCE IN EMERGENCIES (REFUGEE CAMP IN NORTHERN CAMEROON).	Kume Isoh Jerome
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PO-1252	THE DEADLY MENACE OF HIV/AIDS: ENDANGERED COMMERCIAL SEX WORKERS AND THEIR CLIENTS IN BANGLADESH	Ahsan Ullah Akm

Abstract Book

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PO-1327	GENDER-BASED VIOLENCE AGAINST TEACHERS AND STUDENTS IN THE SCHOOL CAMPUS: AN ANALYSIS OF ITS THEORETICAL AND CULTURAL	De La Torre Lourdes
PO-1331	EXPLORING THE IMPACT OF DOMESTIC VIOLENCE ON WOMEN'S SEXUALITY AND HEALTH IN NIGERIA	Danesi Jafar Abdukadir
PO-1340	SEXUAL BEHAVIORS OF OLD ADULT IN SOUTHERN TAIWAN	Chao Jian-Kang
PO-1373	THE POSSIBLE GOODNESS OF GODLINESS – MINISTERS’ REFLECTIONS ON SEXUAL ABUSE	Rudolfsson Lisa
PO-1404	HIV/AIDS PREVENTION AMONG AFRICAN AMERICAN FEMALES: EXPANDING NEGOTIATION AROUND INTIMACY PAST THE BED ROOM	Bankins Kieva
PO-1408	PREDICTORS OF PREMARITAL HETEROSEXUAL RELATIONSHIPS AND SEXUAL INTIMACY AMONG ELITE YOUNG FEMALES IN TEHRAN, A SEXUAL HEALTH APPROACH	Khalaj Abadi Farahani Farideh
PO-1422	KNOWLEDGE-BASED HIV PREVENTION TARGETING MEN WHO HAVE SEX WITH MEN	Tikkanen Ronny Heikki
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PO-2198	THE PRACTICE OF SEMEN PLAY (BUKKAKE) AMONG MARRIED MEN WHO HAVE SEX WITH MEN (MMSM)	Hudson Jeff

Sexological Research: Clinical

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Abstract Book

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|---------|--|-------------------|
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Sexological Research: Educational

- | | | |
|---------|--|---------------------------|
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Sexological Research:Socio-Cultural

- | | | |
|---------|---|--------------------------|
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Abstract Book

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|---------|--|-----------------------------|
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Sexual Counseling

- | | | |
|---------|--|---|
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Verulashvili Iatamze |
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Sexual Psychotherapy

- | | | |
|---------|---|---------------------|
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| PO-1959 | INTEGRAL SEX THERAPY IN COUPLES INVOLVED WITH SEX VIOLENCE | Guzman Idhaly |
| PO-2008 | WHAT SEXOLOGY FORGOT? | Hampson David |

PO-2089	COGNITIVE SCHEMAS AND SEXUAL DYSFUNCTION: INTERPRETATION OF NEGATIVE SEXUAL EVENTS PREDICTS SEXUAL PROBLEMS IN MEN AND WOMEN	Nobre Pedro
PO-2125	ERECTILE DYSFUNCTION AND SEXUAL PHOBIA: CASE REPORT	Cedres Santiago
PO-2159	MIND / BODY MODEL FOR UNDERSTANDING SEXUAL DIFFICULTIES	Elias Anita
PO-2173	DR. FAROOQ MODEL OF SEX THERAPY WITH PHARMACOTHERAPY FOR SEXUAL DYSFUNCTION TREATMENT ESPECIALLY IN NON CONSUMATED MARRIAGE IS MORE SUITABLE THEN BANCROFT MODEL OF SEX THERAPY AND OTHER MODESL USING SEX THERAPY ONLY.	Nasim Muhammad Amir Farooq
PO-2185	SWEDISH SEX OFFENDER TREATMENT PROGRAMME ROS	Kwarnmark Elisabeth
PO-2201	PSYCHOTHERAPY OF THE INCESTUOUS FAMILY	Lippi José Raimundo
PO-2228	PERSISTENT GENITAL AROUSAL DISORDER, TO LIVE A LIFE OF SHAME IN THE SHADOW OF SHAMELESSNESS	Lainio Iréne
PO-2230	THE WORKING ALLIANCE IN INTERNET ADMINISTRED CBT-TREATMENT OF ERECTILE DYSFUNCTION: DESCRIPTION AND ANALYSIS	Hallberg Jonas
PO-2231	ADAM – A RANDOMISED, CONTROLLED TRIAL OF INTERNET-ADMINISTRED COGNITIVE-BEHAVORAL THERAPY FOR ERECTILE DYSFUNCTION.	Hallberg Jonas
PO-2243	HOW MUCH LONGER ARE GENDER CLASSIFICATIONS RELEVANT?	Sahlée Annika

Sexual Medicine

PO-1073	OZONE THERAPY IN TYPE2 DIABETIC ERECTILE DYSFUNCTION	Pranata Mulyadi Tedja
PO-1389	UNCONSUMMATED MARRIAGES (U.M.): A DIFFERENT CLINICAL ENTITY	Gindin Leon Roberto
PO-1411	SEXUAL FUNCTION AFTER BREAST CANCER	Kiriakopoulos Nikos
PO-1413	SEXUAL FUNCTION IN MENOPAUSAL WOMEN UNDER HORMONE REPLACEMENT THERAPY (HRT)	Kiriakopoulos Nikos
PO-1565	OSTEOPOROSIS AND MALE AGE-RELATED HYPOGONADISM.	Cedres Santiago
PO-1567	RELATION BETWEEN BODY MASS INDEX, WAIST CIRCUMFERENCE, BODY FAT AND VISCERAL FAT WITH SEX STEROID HORMONES.	Cedres Santiago
PO-1643	AN IMPACT OF THE PHYSIOTHERAPY ON THE SEXUAL DYSFUNCTION AND THE CHRONIC PAIN IN THE PELVIS AREA	Br?Hová Ludmila
PO-1679	SUPPORTING VULNERABLE TEENAGERS-LIAISON BETWEEN SERVICES	Claire Whitfield
PO-1714	MANAGING PATIENTS WITH SEXUAL DYSFUNCTION: EXPERIENCES OF RESIDENTS IN A TERTIARY FACILITY IN SOUTH WESTERN NIGERIA	Sangowawa Adesola
PO-1744	SOME ETHNOMEDICINAL PLANTS- REMEDY FOR SEXUAL PROBLEMS.	Petkar Dr.Sudhakar
PO-1771	ANEJACULATORY ORGASM : DILEMMAS IN MANAGEMENT	Pandey Sanjay
PO-1947	THE BODY-AND-BRAIN UNITY PRINCIPLE AND VAGINISMUS	Nivon Bolan Maria Del Rosario
PO-2012	IS THERE A LINK BETWEEN PEYRONIE'S DISEASE AND ALCOHOL CONSUMPTION?	Wylie Kevan
PO-2083	THE FIRST EVER SEXOLOGY OFFICE IN IRAN.	Hagh Del Mohammad
PO-2086	ROLE OF AYURVEDIC RASAYANA HERBS IN IMPROVEMENT OF REPRODUCTIVE FUNCTION	Chauhan Nagendra
PO-2127	IMPACT OF THE METABOLIC SYNDROME ON THE MANAGEMENT OF ERECTILE DYSFUNCTION	Anis Tarek
PO-2153	POST-TURP ERECTILE DYSFUNCTION: ARE THERE OTHER RISK FACTORS?	El-Bahnasawy Magdy
PO-2154	ERECTILE DYSFUNCTION COMPLICATING PELVIC FRACTURE-INDUCED URETHRAL RUPTURE AND/OR URETHROPLASTY PROCEDURES: HEMODYNAMIC EVALUATION	El-Bahnasawy Magdy
PO-2155	HEMOSPERMIA: DO WE HAVE TO EXTENSIVELY INVESTIGATE?	El-Bahnasawy Magdy
PO-2156	MALE INFERTILITY AFTER KIDNEY TRANSPLANTATION	El-Bahnasawy Magdy
PO-2157	DOES RISK ASSESSMENT WORK WHEN TESTING FOR INFECTIONS?	Ellks Rachael
PO-2168	PREVALENCE OF ORAL LESIONS ASSOCIATED WITH SEXUALLY TRANSMITTED INFECTIONS IN PATIENTS ATTENDING A SEXUAL HEALTH CENTRE IN CHILE	Povea-Pacci Heraldo

PO-2171	REPEAT SEXUALLY TRANSMITTED INFECTIONS IN JUVENILES IN DETENTION – A MARKER OF A POTENTIAL TRAJECTORY TO ILL HEALTH AND PREMATURE MORTALITY.	Hart Bret
PO-2182	THE DEVELOPMENT OF ALCOHOL DEPENDENT PATIENT'S SEXUAL DISORDERS AS A FUNCTION OF ABSTINENCE, MEDICAL AND PSYCHOTHERAPEUTICAL TREATMENT	Kerekes Medárd Ferenc
PO-2186	QUALITY OF LIFE IN HYPERANDROGENIC WOMEN TREATED WITH 30 µG ETHINYLESTRADIOL AND 2 MG CHLORMADINONE ACETATE ORAL CONTRACEPTIVE	Caruso Salvatore
PO-2217	A CAVERNOSOGRAPHIC STUDY ON PENILE MORPHOLOGY: IS CONGENITAL PENILE DEVIATION UNCOMMON?	Hsu Geng-Long
PO-2235	SEXUAL DYSFUNCTION IN MENTAL ILLNESS - PSYCHIATRIST ATTITUDE	Singh Ashok
Sexual Surgery		
PO-1180	HALCLENES IN EMERGENCY OBSTETRIC CARE TRAINING FOR HEALTH WORKERS IN CONFLICT AREAS IN AFRICA	Kume Isoh Jerome
PO-1223	ESTHETIC AND FUNCTIONAL ENLARGED LABIA MINORA REDUCTION	Bizic Marta
PO-1224	NEOVAGINAL PROLAPSE PREVENTION BY SACROSPINOUS LIGAMENT FIXATION IN MALE TO FEMALE TRANSSEXUALS	Bizic Marta
PO-1277	SURGICAL TREATMENT OF PENILE FRACTURE: OUR EXPERIENCES	Jagodlic Klemen
PO-1332	THE PURPOSE OF GENITAL FLAPS IN URETHRAL RECONSTRUCTION IN SINGLE STAGE METOIDIOPLASTY	Bizic Marta
PO-1603	EJACULATION LATENCY TIME	Díaz Rafael
PO-1818	ESSENTIAL FACTORS OF PREOPERATIVE CONSULTATION IN PENILE AUGMENTATION AND ELONGATION	Jang Su-Yeon
PO-1829	EFFICACY EVALUATION OF PENILE LENGTHENING PROCEDURE AND DIAMOND-SHAPED SCROTOPLASTY FOR CORRECTING SMALL WEBBED PENIS	Jang Su-Yeon
PO-2214	AN OVERVIEW OF SALVAGING PENILE VENOUS SURGERY	Hsu Geng-Long

Sexological Anthropology

PO-1304	SPILLING OF SEMEN: REPRESENTING MALE SEXUALITY IN THE ARTWORKS OF KENDELL GEERS	Du Plessis Rory
PO-1311	VALIDATION OF SELF-REPORTS OF PERINEAL TEAR BY THE PAROUS WOMEN	Sultana Samina
PO-1494	ERECTILE DYSFUNCTION IN MIDDLE AGE MEN CAN BE SUGGEST BY A SPECIFIC BODY STATUS	Coca Vasile
PO-1519	YOUTH FEMININE SEXUALITY AND THE RISK OF HIV/AIDS: AN ANTHROPOLOGICAL APPROACH IN URBAN CONTEXT	Brak-Lamy Guadalupe
PO-1657	THE EVOLUTION OF FEMALE MENOPAUSE	Kim Won-Whe
PO-1658	EROTIC PAINTINGS OF KOREA IN THE PAST	Kim Won-Whe
PO-1839	PRIVATE AFFAIRS, PUBLIC SCORN: INTERROGATING QUEER POLITICS IN KENYA, 1890-2009	Chacha Babere
PO-1888	UNCONSUMMATED MARRIAGE IN IRAN	Moshtagh Bidokhti Nahaleh
PO-2111	INNER AND OUTER SEXUAL DESIRE AMONG MUSLIM WOMEN IN CAIRO	Malmström Maria
PO-2179	HEALTH ECONOMICS AND HUMAN RIGHTS: CONFLICT ON THE TRANSSEXUAL REALIGNMENT PATHWAY	Devine Bernadette

Sexological Sociology

PO-1081	THE STUDY ON THE POWER BETWEEN MALE SEX WORKERS AND THEIR
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Abstract Book

	FEMALE CUSTOMERS	Gang Fang
PO-1174	THE IMPACT OF HIV/AIDS ON INTERGENERATIONAL RELATIONSHIP IN NIGERIA: THE EFFECTS OF DEVELOPMENT ON THE ELDERLY SEXUALITY	Olawale Awoyemi
PO-1181	ANALYSIS OF EXPERT DECISIONS IN RELATION TO EROTIC/PORNO OFFERED TO DISTRIBUTION IN UKRAINE.	Zaytsev Oleksandr
PO-1238	THE APPROACH TO SEXUALITY IN INGO GUIDELINES OF SEXUAL AND REPRODUCTIVE HEALTH SERVICES	Van Belle Sara
PO-1322	PUBLIC DISCOURSE OF SEX WORK IN NIGERIA	Akinwale Akeem
PO-1401	FACILITATING WOMEN ACCESS TO HIV AND AIDS RESOURCES	Kyomukama Flavia
PO-1502	GROWING VIOLENT IN RURAL AREAS OF ETHIOPIA	Alemayehu Awraris
PO-1687	MASCULINE HOMOSEXUAL BOYS AND THE RISK OF BECOMING A SEX OFFENDER. AN EMPIRICAL STUDY.	Langfeldt Thore
PO-1713	SEXUALITY OF PEOPLE LIVING WITH HIV/AIDS	Langa Artur
PO-1716	WHAT DO PARENTS NEED? DIFFERENCES BETWEEN STATEMENTS OF THOSE PLANNING PARENTHOOD AND PARENTS	Konecna Hana
PO-1730	IN THE SHADOWLANDS OF SEXUALITY	Abelsson Jonna
PO-1763	SEXUAL TECHNIQUES IN LONG TERM CATHETERISED MALES BY INNOVATIVE COUPLES : AMAZING BUT TRUE	Pandey Sanjay
PO-1794	SEXUAL HEALTH ATTITUDES IN TEENAGERS, HEALTH PROFESSIONALS, TEACHERS, ADDICTED PATIENTS AND THEIR RELATIVES	Zharkov Yuriy
PO-1880	A PERSONAL PERSPECTIVE OF A SEX WORKER WHO PROVIDES SERVICES TO CLIENTS WITH DISABILITY	Wotton Rachel
PO-1909	SEXUALITY, POWER DYNAMICS AND ABUSE AMONG FEMALE, MALE AND TRANSGENDER SEX WORKERS IN PAKISTAN	Collumbien Martine
PO-1979	OTHER-GENDER PARTNERS OF TRANSPERSONS: BEYOND CONTEMPORARY CONCEPTUALIZATIONS OF SEXUAL ORIENTATION, SEXUAL IDENTITY, AND SEXUAL RIGHTS	King Mark
PO-1994	THE TASTE OF THE PILL: THE CONTROVERSIAL USE OF PUERTO RICO FOR THE DEVELOPMENT OF THE CONTRACEPTIVE PILL AND THE USE OF FEMALE STERILIZATION AS HISTORIC EXAMPLES OF HOW SOCIAL, POLITICAL, AND ECONOMICAL POWER SHAPES SEX	Estrada Jesús

POSTERS

PO-1053

EFFECT OF SEXUALITY EDUCATION ON THE IMPROVEMENT OF HEALTH STATUS OF YOUNG PEOPLE IN THE UNIVERSITY OF ADO EKITI, NIGERIA

Foluso Akanle F. (University Of Ado Ekiti, Nigeria.), Kemi Odu B. (University Of Ado Ekit, Nigeria)

The study investigated the effectiveness of sexuality education on the improvement of health status of undergraduates. A pretest-post test experimental design was adopted for the study. The subjects were 40 undergraduate students who were sexually active. A 2x2 design was used for the study. 20 students were randomly assigned to groups the control and experimental group. An instrument named a sexuality adjustment scale, designed and validated by the researchers was used to measure pre and post test health status of the subjects. Subjects in the experimental group were exposed to treatment while those in the control group did not receive any treatment but were allowed their normal lecture outside the venue of the treatment. The subject exposed to experimental treatment were more comfortable in discussing sexuality issues, gained more knowledge of reproductive health, perceived self efficacy towards safer sex practices and adopted change in sexual behaviour such as reduction in the number of sexual partner and increase in consistent and correct condom usage. Based on the finding it was recommended that sexuality education should be made compulsory course in all higher institution in Nigeria. This is to foster the improvement of sexual health status of youth in Nigeria.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1059

SENSUAL AND SEXUAL MARITAL CONTENTMENT IN PARENTS OF SMALL CHILDREN - A FOLLOW-UP STUDY WHEN FIRST CHILD IS FOUR YEARS OLD

Ahlborg Tone (Gothenburg University), Rudeblad Kristina (Örebro University), Linnér Sarah (Örebro University), Linton Steven (Örebro University)

Abstract: This follow-up study explored parents' (N=452) intimate relationships, from that their firstborn child was six months and four years later. The measurement used was a modified version of Dyadic Adjustment Scale, DAS. The present results show that most parents are content sensually and sexually at six months and four years later, 2002 and 2006. However, more parents have changed from being sensually content 2002 to sensually discontent 2006, than the opposite way, and the average sexual frequency was low both at six months and at four years, 1-2/month. Being too tired for sex was experienced as even a significantly greater problem now 2006, and, to notify, this regardless of whether the parents had received another child or not since 2002. Changes in sensual and sexual contentment when becoming parent are com-

mon, which emphasizes the need of support in parents of young children.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1061

STUDY OF HIV POSITIVE CASES ATTENDING VOLUNTARY COUNSELING AND TESTING CENTER - A GENDER PERSPECTIVE

Shaikh Mohsin G (M.S.University), Misra Shobha M (M.S,University)

Introduction: Research Question: What are the Gender perspective differences in the HIV positive patients attending Voluntary Counseling and Testing Center (VCTC), Baroda, India?

Objectives: 1. To find out the possible high risk behavior of having acquired HIV/AIDS. 2. To understand the social support system and gender discrimination. 3. To find out health seeking behavior.

Methods: A semi structured and pretested proforma is used to interview HIV positive patients attending VCTC located at SSG Hospital, Vadodara. Prior verbal and written consent was taken for this cross sectional study which include HIV positive 50 male and 50 female (>13 yrs) cases attending VCTC during April-July 2007. Analysis is done by Epi info 6.04 d statistical package.

Results: In 45 % cases, spouse were HIV positive while 31 % cases didn't know of the HIV status of their spouse. More males presented with history of premarital sex (83 %), extramarital sex (64 %), multiple sex partners (84 %) and sexual activity (85 %) even after HIV infection. More number of females experienced careless behavior/neglect (65 %) after HIV status disclosure to their spouse and (71%) their family. Almost 75 % females were the culprit of domestic violence. Majority of males (59 %) had contacted private clinic/hospital initially for their health problems while 70 % female patients contacted government hospital for their problems.

Conclusion: More males were presented with premarital, extramarital sex and multiple sex partners and females were more vulnerable. Health seeking behavior of females were affected by male dominance and their economic dependency on others.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None

PO-1064

PROVIDING ON-LINE SUPPORT FOR TEACHERS IN DELIVERING SEXUAL HEALTH EDUCATION IN WESTERN AUSTRALIA

Mckay Erin B (Department Of Health, Western Australia), Baker Maryrose (Department Of Health, Western Australia)

Introduction: Sexual health education is a subject that teachers are frequently required to teach often without any prior training. Some teachers view the subject as a priority while others may feel uncomfortable or insufficiently prepared to teach it. Action: A priority of the Department of Health's (DOH) is to work with the school education sector to promote and support the conduct of quality sexual health education. In addition to parents, the DOH regards teachers and schools to be a fundamental partner in providing sexual health education. Since 2002, The DOH has funded the development and implementation of set of resources and corresponding in-person professional development courses for teachers. Outcomes: In 2005, an audit of the uptake of the resources found that they are having a positive impact on school sexual health education. An impact evaluation is currently underway to examine the influence on teacher participation in the professional development and training.

Discussion and Recommendations: The DOH, in partnership with the Department of Education and Training are now moving towards providing on-line support for teachers. This involves the development of two interlinked components: 1. Interactive website: This will incorporate a range of age-appropriate learning activities, links to resources, statistics, background information, and an on-line question box for teachers. 2. Corresponding on-line training course: Designed to increase teachers' confidence, comfort, knowledge and skills using on-line learning techniques such as asynchronous learning, podcasts, video clips, discussion forums, interactive games, and professional facilitation. Reference: Department of Health

Conflict of Interest: None disclosed

Financial Support/Funding: Department of Health Western Australia

PO-1073

OZONE THERAPY IN TYPE2 DIABETIC ERECTILE DYSFUNCTION

Pranata Mulyadi Tedja (Medizone Clinic)

Background: Ninety percent of all men with diabetes have Type 2 (non-insulin-dependent) diabetes mellitus, and erectile dysfunction (ED) is common. This study evaluated the effects of ozone therapy in Type2 diabetes mellitus men with erectile dysfunction.

Objective: Goal of this study is to investigate the improvement effects of ozone therapy in T2 DM erectile dysfunction Method : This one group Pre-test and Post -test study evaluated the effect of ozone therapy in T2DM men with ED. A total of 14 aging men (mean age 55) with diabetic ED (average suffering DM for 6 years and ED for 6 months and over) received ozone therapy on protocol dosage 27 ug/dl 60 minutes/day, frequency 5 x continuously and interval 1 week from January to December 2007 at Medizone Clinic Jakarta Accidental blood glucose , HbA1c, MDA (malon-dialdehyde) examination were evaluated and IIEF-5 questionnaires have been completed before and after ozone therapy procedures.

Results: Tab.1 Comparison of accidental blood glucose, glycosylated hemoglobin (HbA1c) and malon-dialdehyde (MDA) before and after Ozone bio-oxidative therapy IIEF - 5 before After 12.50 ± 2.53 17.79 ± 2.04 p <

0.00 Acci.blood glucose before After 250.79 ± 54.79 177.57 ± 50.55 p < 0.00 HbA1c before After 9.829 ± 1.352 7.521 ± 0.832 p < 0.00 MDA before After 2.90021 ± 0.40452 1.62214 ± 0.37365 p < 0.00

Conflict of Interest: No conflicts of interest

Financial Support/Funding: private

PO-1075

DREAMS, EMOTIONS AND SENSATIONS IN ADOLESCENT SEXUAL DEVELOPMENT

Kjellberg Göran F

The Elaboration of Dreams, Emotions and Sensations Can Help in Acquiring an Adult Sexuality. Introduction Adolescence can be seen as a reaction to the advent of an adult, genital sexuality induced by puberty. The concomitant and necessary psychological accomplishments of adolescence, including the differentiation between generations, between sexes and between the imaginary world and reality as well as the perception of the finality of death, need to be processed in parallel. This processing implies a capacity to mentalise (to put words on) perceptions, bodily sensations, emotions and mental representations. When this process is missing alarming psychopathology may develop. This can include depression, border-line pathology or psychotic reactions often paralleled by destructive coping strategies such as serious risk behavior, eating disorders, violence, drug abuse, sexual risk behavior or even suicide. Method The exploration of sensorial perceptions, bodily sensations and emotional reactions as well as mental representations including dreams in a psychotherapeutic setting can constitute a constructive frame, which may help to favor the elaboration and mentalisation and thus lead to less destructive coping strategies. Findings and Discussion Dysfunctional psychological defense mechanisms can be replaced by more constructive ones resulting in reduced impulsivity, integration of split body images and development of emotional maturity. Recommendations A psychotherapeutic approach to adolescents in crisis presenting alarming psychiatric symptoms as part of their development can contribute to preventing risk behavior and favor the acquisition of an adult sexuality. References American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition 2004.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1080

ALARMING RATE OF RAPE CASES IN NIGERIA: CURBING THE TREND THROUGH PARENTAL GUIDANCE

Folorunsho Moshood Abolore (Educare Trust)

Introduction: The recent Newspaper survey by Educare Trust and enquiries by some beneficiaries of Educare Trust's HERHIS Book in Nigeria revealed an alarming rate of rape cases among teenagers both as victims and perpetrators. The situation is like in every ten seconds, a teenager is

being raped or rapes. Parents' inability to guide their children aright, right from the formative stage, is one of the reasons for this alarming rate. Parents often use 'Thou Shall Not' approach in dealing with their children when it comes to sexual matters, thereby creating a wide gap between them and their children. All the seven female teenage enquirers who are victims of rape trusted a friendly stranger, Educare Trust, through the hotline 08023865772 and not their parents. Although sexual attitude maybe a predictive factor of sexual behaviour, parents often find it difficult to differentiate the two concepts, thereby allowing the rapist, often a friend or relation, to go on a raping spree.

Objective: This paper will attempt to proffer ways of preventing and controlling rape among the teenagers.

Methods: It will draw heavily from case studies, Newspaper reviews and the review of relevant attitude and psychoanalytic theories.

Results: Many wrong impressions parents have on Sexuality Education will be brought into for. Strategies for controlling and preventing rape will be highlighted.

Conclusion: In Nigeria, rape is the commonest sexual related issue. Its alarming rate is mainly attributed to lack of parental guidance among teenagers right from the formative stage.

Conflict of Interest: None disclosed

Financial Support/Funding: Nil

PO-1081

THE STUDY ON THE POWER BETWEEN MALE SEX WORKERS AND THEIR FEMALE CUSTOMERS

Gang Fang

This paper, which based on the result of fieldwork and the ways of social gender, used the theory of masculine, analyses the relationship of power between male sex workers and their female customers through their sexual relationship, conflict and emotional relationship. We think that the relationship between them is not so simple as one dominate another. In fact, there are many social factors participate the construction of power in this special gender relationship. The various practices of masculine and femininity determine their relationship of power is in different situation and it is a variational constructing process. So, we provided a new analysis to the study of social gender.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1088

MSM'S SEXUAL BEHAVIOR IMPACT ON WOMEN'S REPRODUCTIVE HEALTH

Bhandari Lekh Nath (National Vigilance Center)

Objectives: A higher rates of HIV infections are transmitted through homosexual contact. Most MSMs are youth and are an incredibly diverse

group, in terms of both their economic circumstances and sexual attitudes and behavior, more economically disadvantaged than older youth, often more subject to peer. Most of them either are married or will become married, thus having an impact upon women's reproductive health.

Methods: Government's different strategies for national health program in terms of sexual health and HIV/AIDS has shaded a negative impact among such vulnerable population in Asia region; due to socio-cultural-religious reasons, those behaviors are to a large extent invisible, often difficult to access in terms of standard sexual health promotion framework of the nations.

Result: The most needing information, education and counseling are driven underground. Men and women are at not only greater risk of being infected, but also HIV/AIDS affects women also as caregivers in the family.

Conclusion: An urgent need to promote behaviors, which enable to adopt a lifestyle without risk of HIV and to provide counseling services, is essential. When youth belong to an organization that helps them and provides opportunities, they better avoid risky behaviors, including those that might lead to HIV/AIDS. Not every social sector should discriminate/stigmatize them so that they can create an environment to change their behavior. Regardless, there should be ensured legal framework protections of human rights of those sexual minorities.

Conflict of Interest: Gender Identification

Financial Support/Funding: Government of Nepal

PO-1089

MSMS/MSWS'S VULNERABILITY TO HIV/AIDS

Bhandari Lekh Nath (National Vigilance Center)

Background: The HIV-infection rate among MSMs/MSWs are particularly vulnerable and their behaviors compound the vulnerability of other young adults to HIV infection. Widespread denial and complacency- the attitude that AIDS only happens to someone else, somewhere else, and not to us- have grave health and socioeconomic consequences in a dramatic way.

Method: But government's high level of commitment and sustained efforts at large calls for dynamic leadership and political foresight that can hasten the transition from denial to realism, from complacency to action and mobilization of all resources, can prevent the spread of HIV and minimize its future impact by including them in national health framework.

Result: The lost productivity of a key demographic group - the young - is compounded by increased health-care costs and its likely impact on the already fragile health-care services. The growing number of AIDS orphans and widows may create serious strain on social safety net programmes. It mainly strikes adolescents, young adults, and those in early middle age, killing the very people on whom society relies for production/reproduction.

Conclusion: The epidemic potential and its impact are truly enormous in Asia. Therefore, all education programs must be stressed to promote individual's behavior enabling to practice safer-sex and to provide ICE-materials and STD-treatment services. No one is immune and all countries and communities are vulnerable to HIV/AIDS. So countries with currently low

HIV-infection should not be complacent.

Conflict of Interest: Gender Issues

Financial Support/Funding: Government of Nepal

PO-1091

OPPORTUNITIES FOR HELP: THE IMPERATIVE OF YOUTH CENTER SERVICES IN ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH DEVELOPMENT AND HIV/AIDS PREVENTION.

Nerima Rebecca (African Medical And Research Foundation (Amref Uganda)), Nakabiri Dorah (Local Government, Nakasongola District Uganda)

Case Study: Nakasongola District, Uganda Issues: The HIV/AIDS epidemic is a challenge and an opportunity to the understanding and management of adolescent sexuality rights, the opportunity in it is the interest to understand and influence adolescent sexuality to prevent the spread of AIDS.

Method: A review of the youth focused services of 9 health units. It aimed to assess the effectiveness of the health units and youth health clubs in meeting the needs of young people and propose ways in which their services can be improved. A qualitative assessment of the services was done by records review, key informant interviews and focus group discussion with health unit staff, adolescent and community leaders. Lessons learnt: All the health units and youth health clubs covered in this review are 1-6 years old, started as initiatives of a few people in the community to protect young people and the health units were initiated by the government with support from donor agencies to improve on the health service delivery in rural areas. Service delivery is mainly based in the existing institutions like schools and churches; only two of the agencies had a stand alone youth center/day.

Recommendations: Youth centre services are viable in reaching young people in rural communities and should be integrated in existing facilities to reduce the high cost of stand alone centers. This calls for more recognition and involvement of leaders in these institutions like health units, schools, churches/mosques.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: From friends and family

PO-1100

SEXUAL BEHAVIOR AND VULNERABILITY OF STREET TEENAGERS TO HIV/AIDS IN KATHMANDU VALLEY

Gurung Gagan (Save The Children ,Nepal Family Health Program)

Introduction and objectives: Since the detection of first AIDS case in Nepal in 1988, this country has progressed from a low prevalence to one with so-called concentrated epidemic in certain sub-groups of the population. This paper examines the sexual behavior, HIV/AIDS knowledge and vulnerability of street teenagers to HIV/AIDS in Kathmandu Valley.

Methods: Ninety street teenagers were sampled in cross-sectional survey and 5 Focus Group Discussions were conducted to generate data from respondents. Non probability snowballing sampling method was utilized to select the respondents who were children between 13-18 years.

Results: The study found that a significant number of teenagers (43%) had experienced risky sexual behavior. Mean age of first sexual contact was 13.13 years. There was significant relationship between age and being sexually active at $P < 0.01$. Most of the respondents inconsistently used the condom (79.1%). An overwhelming majority (70%) of the teenagers had multiple sexual partners. Both quantitative as well as qualitative findings confirmed existence of homosexual relationship, though minimal in number. Data on knowledge about HIV/AIDS show that teenagers heard about AIDS and 57.8% had good level of knowledge. However, significant number of respondents had misconception that one could contract HIV through mosquito bites and kissing.

Conclusion: The street teenagers of Kathmandu, Nepal shows risky sexual behavior and are highly vulnerable to HIV infection. Government and non-governmental organizations working on the prevention of HIV/AIDS in the country should focus special attention on this section of population.

Conflict of Interest: None disclosed

Financial Support/Funding: World Health organization through Institute of Medicine, Teaching Hospital, Maharajgunj, Kathmandu, Nepal

PO-1102

IMPROVING SEXUAL HEALTH AMIDST MAJOR OBSTACLES IN RURAL MALINGO, CAMEROON

Menang Joshua Ngwang (Divine Providence Low Cost Clinic, Malingo Village Buea Cameroon), - Ngwa Edward (Divine Providence Low Cost Clinic (Diprolocc)), Njimogu Samuel (Baptist Hospital Mutengene)

Introduction and objectives: Improving sexual health at all cost amidst major obstacles like poverty, illiteracy, peer pressure, cultures or religious factors in a resource restraint area; known to be responsible for unhealthy sexual activities includes.

Method: Screening every female recruited for the survey for HIV, syphilis, gonorrhoea, Chlamydia, Human Papilloma Virus (HPV). Consent and ascent is taken, involving both sexes of ages 12-35 years and vaginal exam done by specialists as well as pap smears for women.

Results: Because this clinic is an NGO Health institution with lowest cost of treatment, the exercise is regular with good participation. Some infections were common in some age groups than others and some conditions like rape and specific infections as well.

Conclusion: After the 8th month survey from November 2007 to June 2008, high number of females are exposed to unhealthy sexual behaviors, about 56% of the total participants had either little or no knowledge at all or misguiding knowledge on sexual health. The other 44% with remarkable knowledge are obliged at one time or always, to engage in risky behavior leading to unhealthy sexual practices following the afore-stated factors especially of poverty and peer pressure. Worst now is the prevailing HIV in-

fection and the present rising diabetes prevalence that have great negative impact on sexual health. Reproductive health resources like Family Planning, specialists, equip laboratory are rare. Intensive community education and sensitization remains the present cheap, efficient and most available tool.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-1106
EFFECT OF SEX STEREOTYPES ON SCHOOL ADOLESCENTS' SEXUAL BEHAVIOUR IN SOUTH WESTERN NIGERIA

Popoola Bayode Isaiah (Obafemi Awolowo University Ile Ife, Nigeria), Adeyemi Babatunde (Obafemi Awolowo University, Ile Ife, Nigeria)

Sexuality is an issue that many Nigerians believe the society must regulate at all times in order to ensure stability and survival of family and societal life. Among the people, social control of sexuality is evident in stereotypes that individuals internalize as they grow up, and which are reflected in numerous sex myths and popular sayings among them. This study investigated the prevalence of sex stereotyping and its effects on the sexual behaviour of Nigerian school-going adolescents. Study participants consisted of 658 adolescent students (mean age = 17) selected randomly from secondary schools in three towns in South Western Nigeria. A self-constructed instrument was administered to measure the internalization of sex-stereotypes by participants and the extent to which they engage in risky sexual behaviour. Statistical analysis of data revealed that male participants demonstrated a higher degree of sex-stereotypical behaviour than their female counterparts. Findings also showed that sex stereotyping had significant negative effects on sexual behaviour of both male and female adolescents. The results of the study suggest the need for virile and radical programmes of sexual re-conditioning to enable Nigerian adolescents develop responsible sexual behaviour.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: Self

PO-1108
MODIFYING HIV- RELATED RISK BEHAVIOR AMONG FEMALE SEX WORKERS IN LAGOS (NIGERIA)

Durueke Florita C (Health Matters Incorporated), Aboluwarin Lola E (Health Matters Incorporated)

Introduction HIV/AIDS prevalence rate in Nigeria is estimated at 4.4%. (Federal Ministry of health-2006) The ages being mostly affected are young people. Female sex workers (FSW) are highly vulnerable population. There is need to examine their risk perception and modify their HIV- related risk behavior.

Objective To assess HIV- related risk perception among female sex workers in Lagos and to promote attitudinal change in the area of HIV- related

risk behavior.

Method Open brothel HIV sensitization seminars were conducted for Female sex workers and brothels managers in Mainland and Ikeja LGAs. 25 Peer health educators were trained. Rapid assessment questionnaires were administered to analyze HIV risk perception and HIV/ AIDS awareness among 100 female sex workers. Home based HIV testing strategy was adopted using rapid screening test. Monthly interactive forum were held with FSWs

Result Analysis of questionnaire showed that all the female sex workers interviewed are aware of HIV/AIDS and 40 percent have low risk perception. Inconsistent use of condom was reported among 60 percent of the female sex workers. . 'No condom No sex slogan' was adopted and circulated in the brothels. They were provided with female and male condoms. Home based HIV counseling and testing was highly acceptable as uptake was high.

Conclusion HIV related risk behaviour is still high among Female sex workers. There is need to identify the clients of FSWs and integrate them into public health effort and program aimed at modifying their HIV- related high-risk behaviors.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: Ford Foundation of West Africa

PO-1109
SEXUALITY AND LIFE SKILLS EDUCATION AMONG YOUNG PEOPLE IN HARD TO REACH COMMUNITIES IN LAGOS-STATE

Durueke Florita C (Health Matters Incorporated), Agochukwu Caroline N (Health Matters Incorporated)

Introduction Young people are the most vulnerable group to STI including HIV/AIDS. Education is key to promoting sexual reproductive health. Cultural, ethnic, religious and social factors continue to set back sexuality education in Nigeria while sexual promiscuity, sexual violence against women and sexual transmitted diseases is still at alarming rate. Equipping young people with basic sexuality education and life skills will promote positive behaviour change and reduce their risk of contracting STI. HMI with support from Ford foundation (West Africa) implemented sexuality and life skills education programme targeting young people in Makoko and Olaleye communities. The objective of the program is to empower young people with the basic knowledge and life skills that will promote positive behavior change and reduce the incidence of STI including HIV/AIDS in the target communities. Action The activities carried out included training of peer health educators, sensitization seminar for adults, focus group discussion, community outreach program and weekly youth forum and counseling.

Outcome 100 peer health educators were trained and they reached out to their peers giving a multiplier effect. There was a significant reduction in the incidence of teenage pregnancy, STIs and rape among the target group. Parents and guardians were able to break the silence on sexuality.

Recommendation Sexuality and life skills education is a vital tool in promoting positive behavior change and reducing the incidence of STI and its

associated problems. It should be integrated in all programmes focusing on young people development.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: UNICEF-NIGERIA

PO-1113

VIOLENCE AND HEALTH RISKS OF COMMERCIAL SEX WORKERS (CSW): SNAPSHOT FROM A BROTHEL IN BANGLADESH

Chanda Sanchoy K (Sarpv- Bangladesh), Islam Tuhinul (Society For Social Services)Molla Musaraf H (Jahangirnagar University)

Introduction and objectives Brothel-based Commercial Sex Workers (CSW) in Bangladesh faces violence in their everyday life often goes unreported. The purpose of this study is to examine the impact of violence on health of CSWs.

Methodology About 167 out of 987 CSWs lived for last 12 months or more in the Tangail Brothel were interviewed with a structured questionnaire. Information on causes and types of violence as well as information regarding health seeking behavior was collected.

Results The estimated incidence of physical violence is severe enough to restrict themselves from their normal activities for couple of days or took medical treatment for the ailments was 62/100 person-years. Sexual reasons (37%) are asking for using condom (71%), failure to satisfy clients (52%), refusing anal or oral sex (48%), refused to have sex during menstruation (34%) and others (15%). The common types of physical assaults were beating, cutting, burn, injury in private parts etc. 98% cases required medical treatment, also hospital stay in many cases. Violence prevented them to resume normal duties in 77% cases. 62% girls suffered from any STI in last 12 months. 55% of them took early treatment, of these 70% didn't continue the treatment once symptoms disappeared.

Conclusion Perpetrators are often motivated by a desire of power and domination in sex, which has short and long-term impact on reproductive and sexual health of CSWs. This study confirms the need for better attention by the concerned authority to prevent violence, with a specific need to reduce risk among CSWs.

Conflict of Interest: None disclosed

Financial Support/Funding: SARPV- Bangladesh

PO-1114

HIV AND AIDS-RELATED BELIEFS, PERCEPTION AND SEXUAL BEHAVIOURS IN METROPOLITAN CAPE TOWN, SOUTH AFRICA.

Oyedokun Amos O. (University Of The Witwatersrand, South Africa), Odimegwu Clifford O. (University Of The Witwatersrand, South Africa)Oyedokun Olukemi A. (Private Consultant, South Africa)

South Africa's HIV and AIDS treatment efforts have been lauded recently for making significant progress against the epidemic, but not her prevention

efforts. This paper investigates the impact of HIV and AIDS-related beliefs and risk perception on sexual behaviours of young people in Cape Town, South Africa. This paper uses Wave 1 data of Cape Area Panel Study which is a longitudinal study of the lives of 4,800 young adults, their families and households. Wave 1 sample was a representative sample of young people who were aged 14 to 22 in 2002. Simple descriptive statistics, chi-square, binary and multinomial logistic regression models were employed for the analysis. Binary logistic regression results show that sex of the respondents, type of place spent most of life, race/population group, whether ever married and currently in school and description of first sexual intercourse are the most important predictors of use of protection at first sexual intercourse. Also, age, sex of the respondents, whether ever married and currently in school and HIV risk perception are important factors influencing use of contraception at last sexual intercourse. Those youths with high HIV risk assessment are more likely to use protection at the last sexual intercourse when compared to low risk assessor. The paper concludes that knowledge about HIV/AIDS is high among the young people studied and that they had diverse beliefs about ways of preventing it. Also, sex of the respondents and whether currently in school significantly influence use the outcome variables consistently in this paper.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1119

AN ALTERNATIVE PATHWAY FOR SCHOOL-BASED SEXUALITY AND REPRODUCTIVE HEALTH EDUCATION (NEED ASSESMENT)

Yusran Sartiah - (Univ. Haluoelo)

Abstract: School-based Adolescent Reproductive Health in Indonesia Secondary School Sartiah Yusran This qualitative study was conducted to explore the views on and concepts of sexuality and reproductive health education among young people, parents, teachers and policy makers and the broader community and to identify the needs of adolescents for sexuality and reproductive health education, including the gap between young people's needs and existing sexuality and reproductive health education policies and programs and to explore the appropriate policies for a school-based reproductive health education program in Makassar, South Sulawesi, Indonesia. The research was conducted in 6 Senior High Schools; and involved 56 male and 56 female secondary schools students, 11 male and 18 female secondary students' parents, and 16 male and 15 female teachers. The study sample also included 9 male and 6 female key informants from different background and from Jakarta, Yogyakarta, Surabaya, Denpasar and also from Makassar. The methods used included interviews, focus group discussions and key informant interviews. The study reveals that premarital relationships are common among secondary school adolescents in Makassar. They were struggling with their exploration of sexuality, due to outside pressure and having to deal with contradictory expectations from their peers, parents and society. They received information on sexuality and reproductive health information from school too little and too late, and this area has been neglected in school-based curriculum. If the goal of a 'adolescent reproductive

health' program is to help adolescents to take care of their reproductive health, to reduce their risk taking behaviour toward unwanted

Conflict of Interest: This is sensitive issue.

Financial Support/Funding: Australia Development Scholarship (my PhD sponsorship)

PO-1120

RESOURCE MOBILIZATION AS TOOL FOR HIV/AIDS IMPACT MITIGATION AT THE COMMUNITY LEVEL: LESSONS LEANT, CHALLENGES AND WAY FORWARD

Chijioke Oukonkwo O (Hope Givers Organisation/Unizik), Chioma Amah S (Youth Integration On Rights Health And Aradication Of Hiv/Aids (Yirhea))

Background: The stigma and discrimination associated with HIV/AIDS means that people living with HIV/AIDS are less likely to receive care and support. These in rural Nigeria have posed barriers to uptake of services not just to PLWHA but even those not actually infected but associated with the infected, such as spouse, children, and caregivers. Stigma and discrimination needlessly increase the personal suffering associated with the disease.

Methods: HGO a support group for PLWHA and PABA is partnering with government, mission hospitals, international organization and NGOs in Anambra state and Nigeria at large to provide HIV prevention, care ,and treatment services at 5 hospitals in semi rural and hard-to-reach communities .In order to address stigma and discrimination, enhance service uptake, and to ensure the needs of PLWHA are met at both the facility and community level. HGO promotes and supports networking between health facilities and PLWHA. After identifying PLWHA living positively with HIV in the communities surrounding project sites, HGO and hospital staff works to provide support and training to enable PLWHA to play key roles in service delivery .They now make critically important contributors to HIV/AIDS prevention ,care, and treatment advocates, and support group coordinators.

Results: HGO members support groups have over 1500 PLWHA under treatment in their custody. They have conducted treatment advocacy visits or community dialogue to community leaders and have organizes activities reaching over 20,000 people in one year through CEDPA positive Living project going on now in the organization. The project is going to run for

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1123

QUALITY CARE OF VOLUNTARY COUNSELING AND TESTING CLIENT'S EXPERIENCE, EXPECTATIONS AND SATISFAC-TIONS AMONG YOUTH IN MUBI ADAMAWA, KADUNA AND ZARIA IN KADUNA STATE

Abubakar Attahir (Adolescent And Youth Awareness Team), Imam Fatima Zakari (Kaduna Polytechnic Medical Center)Abdulkadir Aishatu Uwani (Kaduna Ploytechnic Medical Center), Mani Fatima Abba (Action Health

Incorporated)

Among the 235 young people who have taken an HIV test, most intend to adopt safer sexual behaviours after the HIV test. These include abstaining from sexual intercourse, practicing monogamy, using condoms, or reducing the number of partners' with which they have sexual intercourse, survey results show that youth have a strong interest in knowing about their HIV status. More than 75% of untested youth in Mubi and about 90% in Kaduna indicate they would like to be tested in the future. Many untested youth (32% - 44%) also said they are still thinking about taking the test. Many youth in Mubi (41%), however, took the test the same day—often within hours—that they made the decision to do so. Half of these youth reported that they had the test in response to the referral of a service provider or because of a pregnancy. Of all the tested youth nearly 20% did not talk to a health worker before taking the test, most youth received their test results through one-on-one counselling. However, such post-test counselling was much rarer in Mubi (58%) than in the sites in Kaduna (90%). The study also found that VCT is an important entry for care and support. These findings have boosted interest and support for VCT as a valuable component of a comprehensive HIV/AIDS prevention program.

Conflict of Interest: None disclosed

Financial Support/Funding: Self

PO-1125

KNOWLEDGE, ATTITUDE AND PERCEPTION OF ISLAMIYYA STUDENTS ABOUT HIV/AIDS: ARE THESE STUDENTS AT RISK?

Abuabakar Attahir (Adolescent And Youth Awareness Team), Imam Fatima Zakari (Kaduna Polytechnic Medical Center Kaduna)Abdulkadir Aishatu Uwani (Kaduna Polytechnic Medical Center Kaduna), Yusuf Fatima Abdulkadir (Ahmadu Bello University Zaria), Yakassia Umar Tanko (Aminu Kano Teaching Hospital Department Of Community Medicine)

This study examined the knowledge, attitude and perception of Islamiyya students about HIV/AIDS: are these students at risk? A total of 685 students of Islamiyya Secondary Schools, age 14-24years were interview using structured questionnaires translated into Hausa for easy understanding and administered by two trained interviewers. Students had partial knowledge of the definition of HIV/AIDS, the mode of transmission, prevention and cure. Only 84.3% of the students believed that abstinence is the best way of HIV/AIDS prevention among unmarried adolescents but majority, 80.3% denounce use of condom for safer sex. There is urgent need for more education, counseling and testing for HIV in order to prevent the spread of HIV/AIDS due to ignorance and risky behaviours among youths in Islamic faith based communities.

Conflict of Interest: None disclosed

Financial Support/Funding: Self

PO-1130

PREMATURE EJACULATION - MALE AND FEMALE ASPECTS ON THE PHENOMENON IN SEXUAL INTIMACY

Ljunggren Christina M (Urohalsan), Sttroberg Peter M (Urohalsan)

Introduction: At least 5 % of males have Premature Ejaculation (PE) It may have a major impact on a relationship. A study of gender similarities and differences among those with experience of PE.

Method: Ten structured face-to-face interviews with 5 males and 5 females (3 couples) where PE was a problem. The interview consisted of 15 questions in 6 domains (definition,satisfaction/disappointment,control,problem,self-esteem/shame,relationship)

Findings and discussion: Similarities was found in definition of penetrating sex, PE ,control. Both genders also reported, frustration, decreased interest in sexual activity, inability to enjoy sex and that PE had a major impact on a relationship. Gender differences; Males described anger, loss of self-esteem, scared of new relationships, acceptance of the relationship not considering breaking up, believed that the partner had no problem with his PE and considered completed intercourse to be when both reach climax. Females described contempt, that something was missing, felt PE to be a major problem in the relationship but did not tell the partner, was considering to change partner and considered completed intercourse to be when «he had had his». There are major differences between genders on several aspects of PE, particularly regarding satisfaction, self-esteem and relationship. This has to be addressed and considered when counselling subjects affected by PE Ref: Diccico-Bloom B,Crabtree BF.The qualitative research interview.Med Educ. 2006 Apr;40(4):314-21 Schuster TG.Premature ejaculation.Urol Nurs. 2006 Aug;26(4):245-9

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1131

CHILD SEXUAL ABUSE AND PREVENTION

Kazmi Syed Azhar Mahmood (Street Organization), M Pervaiz M (Street)

Introduction: Every day three children dies as a result of child maltreatment. Thousands are abused or neglected. Child abuse hurts on many levels, and no child is immune, but it can be prevented.

Objective: To determine Gateways to Prevention – What we Can Do to Prevent Child Abuse, focuses on raising awareness about prevention.

Method and Findings: One thousand reports of suspected child abuse were made, concerning welfare of approximately five hundred children. Of those five hundred children, 300 were abused. Majority of victims experienced neglect, 20% were physically abused, 15% sexually abused, and 9% were found to be victims of emotional abuse.

Results and Rcomendations: Child abuse is harm caused to a child by a parent, teacher, caretaker, or another person responsible for the child's safety. There are four major types of child abuse: neglect, physical abuse, sexual abuse, and emotional abuse. Neglect is failure to provide for a child's

basic needs. Physical abuse is physical injury as a result of punching, beating, kicking, biting, burning, shaking, stabbing, choking, or harming. Sexual abuse includes fondling a child's genitals, penetration, incest, rape, sodomy, indecent exposure, and commercial exploitation through prostitution. Emotional abuse includes constant criticism, threats, or rejection, as well as withholding love, support, or guidance. Gateways to Prevention, remember "Five R's," courtesy of Prevent Child Abuse: raise issue, reach out to kids and families, remember risk factors, recognize warning signs, and report suspected abuse or neglect. Child abuse and neglect occur in all segments of society.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Street Organization

PO-1132

THE EFFECT OF EXERCISE TRAINING ON DIFFERENT ASPECT OF SEXUALITY HEALTH AND QUALITY OF LIFE IN PATIENTS WITH DIABET, PROGRAME IN IRAN

Mokhtari Garakani Iman (Pm&R Department , Special Medical Centre (N.G.O)), Kamalifard Mozghan (Health And Safety Labor Research Center)Ezzaty Kamran (University Of Social Welfare & Rehabilitation)

Introduction: Diabetes Mellitus is a growing problem world - wide , For diabetics, cause of illness, men and women experience different types of sexual dysfunction. The purpose of this Randomized Controlled Trial study was to investigate the impact of a 7 month exercise on different aspects of sexual health related quality of life in subjects with diabetes.

Patients and Methods: Among 118 patients with type 2 diabetes, 105 subjects (58 male, 47 female) have the inclusion criteria (erectile dysfunction , ejaculation problems for men and for women , vaginal dryness, pain during intercourse, decreased vaginal sensitivity, difficulty climaxing and decreased sexual desire) for this study. They were randomized to control group (age = 36 ±2/1) and exercise group (age = 36 ±1/7). All patients in the latter group were given a training session. Then stretching , strength and endurance exercises were trained to them and did the supervised exercises 3 times per week during 5 month.

Results: The results showed significant changes in physical functioning, role limitation- physical, role limitation - emotional , bodily pain, general health, vitality, physical and mental component summary and total scores of SF-36 scale (P<0/001).

Conclusions: Regular supervised integrated strength and endurance exercises is a safe and effective intervention in diabetic patients, which significantly improves health related quality of life which may favorably influence their sexuality health.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1133

FIRST STEPS IN THE PROMOTION SEXUALITY EDUCATION AND COUNSELING

Verulashvili Iatamze (Women 'S Center)

Introduction: Approximately 3000 adults and children were living with HIV/AIDS in such small country as Georgia with population 5 million. The main routes of transmission are: injecting drug 72 %; heterosexual 25%; mother-to child 1,4%, and 1% blood transfusion. Most youth population living with HIV and doesn't know about it. Country doesn't practice sexuality education programs. From 2003 we work on HIV/AIDS prevention program among youth at schools and universities and on re-qualification family doctors by special training programs which include 1) risk –reduction counseling 2) physical examination 3) youth education 4) routing HIV testing

Methods: Was evaluated effect on 170 doctors practice training program through interview of 351 patients of the trainees at program sides(1) and 72 patients at comparison sides(2). 430 student get information on all aspects of sexuality, contraception, STD, HIV/AIDS , 264 student tested on HIV

Results: Risk –reduction counseling of first group help to avoid STI in future their rate higher than in second side. (98% vs. 62 %). 264 students tested on HIV ,87 student refuse testing as they feared the results Majority of both group note that they were at risk for HIV infection and that they feared the results of an HIV testing.98, 8 % of respondents were being testing for the first time. 57% noted that they are sexual active. No new infections were diagnosed.

Conclusion: Re-qualification program for doctors support better quality care, better HIV risk education and higher HIV test uptake.

Conflict of Interest: None disclosed

Financial Support/Funding: ASTRA -Central and Eastern European Network for Sexual and Reproductive Health and Rights which member is Women's Center (Georgia)

PO-1135

RIGHTS-BASED APPROACH TO ACCESS TO SEXUAL HEALTH CARE SERVICES FOR ADOLESCENTS IN AFRICA

Durojaye Ebenezer T (Univeristy Of The Free State), Sholola Olufolake B (Univeristy Of The Free State)Balogun Victoria R (University Fo The Free State), Okon Ekanem (University Of The Free State)

Introduction: In many African countries adolescents and young people bear the greatest burden of sexual and reproductive ill health. This ranges from high incidence of unwanted pregnancy, sexually transmitted infections, HIV/AIDS and unsafe abortion. Yet many of the young people in the region lack adequate information and services on sexual and reproductive health. This ultimately put their health and lives in grave danger.

Method: This study was conducted through desk research, consultation with book, reports and relevant journals and the internet. Finding and discussion It was found that many young people in Africa lack access to information and services relating to their sexual health that could prevent loss of lives and morbidity in the region. A number of factors contribute to this.

These include, social-cultural factors, lack of youth- friendly health care services, non-respect for privacy and confidentiality of adolescents, emphasis on parental consent for adolescents seeking sexual health services, lack of access to contraception, poverty on the part of adolescents and gender roles among adolescents Yet many of African countries have ratified international and regional human rights instruments and endorsed consensus statements which impose legal and moral obligations on them to ensure access to sexual health care services to young people.

Recommendations: Unless African countries take adequate measures, in line with their obligations under international human rights law, to remove these barriers, they are unlikely to meet the goals of the MDGS. It is therefore, imperative that they live up to their obligations in realising the sexual rights of

Conflict of Interest: None disclosed

Financial Support/Funding: University of the Free State

PO-1136

SEXUALITY EDUCATION FOR SECONDARY SCHOOL STUDENTS IN MAKASSAR, INDONESIA

Yusran Sartiah - (Women Studi Centre At The Iuniv. Of Haluoleo Kendari)

This qualitative study was conducted in order to explore the concepts and views on sexuality and reproductive health education among young people, parents, teachers, and policy makers as well as the community. Another purpose of this study was to identify the needs of adolescents for sexuality and reproductive health education, including the gap between young people's needs and existing sexuality and reproductive health education policies and programs and to explore the appropriate policies for a school-based sexuality and reproductive health education program in Makassar, South Sulawesi, Indonesia. The research was conducted in 6 Senior High Schools; and involved 56 male and 56 female secondary schools students, 11 male and 18 female secondary students' parents, and 16 male and 15 female teachers. The study sample also included 9 male and 6 female key informants from different backgrounds who come from various regions such as Jakarta, Yogyakarta, Surabaya, Denpasar and Makassar. The method used in this study included interviews and focus group discussions. The study revealed that premarital relationships are common among secondary school students in Makassar. These students struggled with their own sexuality exploration, due to the external pressure and contradictory expectations from their peers, parents and society. Moreover, the information on sexuality and reproductive health information that these students have gained from school is insufficient and a bit too late for their age. Another issue is that this area has been neglected in school-based curriculum. If the goals of an 'adolescent

Conflict of Interest: sexuality is a sensitive issue in certain society and there will be a potential conflict or agree and disagree on the related issues.

Financial Support/Funding: Australian Development Scholarship (ADS) AusAID.

PO-1140**EVALUATION OF THE BOOK EVERYONE'S GOT A BOTTOM - EARLY CHILDHOOD RESOURCE FOR COMMUNICATING ABOUT SEXUALITY AND PREVENTION OF CHILDHOOD SEXUAL ASSAULT**

Brennan Holly (Family Planning Queensland), Sanderson Jennifer (Griffith University)

This paper presents the findings of an evaluation of the book, *Everyone's got a bottom* published by Family Planning Queensland. The book has been designed to assist parents, carers and teachers to help young children develop effective personal safety skills and increase communication about sexuality. The evaluation surveyed a random sample of purchasers of the book about their use, and the perceived effectiveness of the book in educating children aged 3 – 8 years about child safety skills and sexuality. The research was conducted by Griffith University, Key Centre for Ethics, Law, Justice and Governance: Violence Research Program: Brisbane, Australia. One thousand purchasers of the book were randomly selected and surveyed during May 2008. 280 surveys were returned. The paper will present the analyses of participants responses to the survey including: • Reasons respondents had not used the book • Changes in behaviour since using the book • Helpfulness as an early childhood educational tool. The evaluation showed that there were clear benefits in using the book to provide prevention education for purchasers', children (aged 3 – 8 years) and other adults who were included in communication about the book (including other carers, child care services and schools). Implications for further research include surveying child care workers and teachers about their attitudes/beliefs regarding sexuality and prevention of childhood sexual abuse education for the early childhood sector.

Conflict of Interest: None disclosed

Financial Support/Funding: NA

PO-1145**HELP-SEEKING BEHAVIORS FOR FEMALE SEXUAL DYSFUNCTION: A CROSS-SECTIONAL STUDY FROM IRAN**

Vahdaninia Mariam (Iranian Institute For Health Sciences Research), Goshatebi Azita (Iranian Institute For Health Sciences Research) Montazeri Ali

Introduction and objective: Female sexual dysfunctions (FSD) are prevalent multifactor problems that commonly remain misdiagnosed in primary health care. This population-based study investigated help-seeking behaviors among women with FSD in Iran.

Methods: This was a cross sectional study carried out in Kohgilouyeh-Boyer-Ahmad province in Iran. Using quota sampling a questionnaire containing demographic and FSD items was administered to all sexually active women aged 15 and over registered in primary health care delivery centers. FSD was defined by: DSM-IV criteria and assessed by a self-reported questionnaire. FSD help-seeking behaviors was assessed through a list of serv-

ices. Using SPSS 13 data were analyzed in a descriptive manner.

Results: In all 1540 women were studied and of these 786 (51.0%) cases had experienced at least one of the FSD problems. Results showed that 35.8% of women with FSD had sought no professional help and the most reasons for not seeking help were identified as: "time constraints" and "did not occur to me" (39.1 and 28.5% respectively). Sixty one percent of women who sought help for FSD reported that "doctor gave them a definite diagnosis" and "a definite treatment plan was given" in 57.0% of cases.

Conclusions: The study findings indicated that FSD problems were prevalent and many women did not seek help for the problem. Since FSD might cause a negative impact on interpersonal relationships and quality of life it seems that there is need to address the problem both at local and national primary health care services.

Conflict of Interest: The authors do not have any conflict of interest.

Financial Support/Funding: Iranian Academic Center for Education, Culture and Research

PO-1149**EXPANDING ROLES OF HEALTH PROFESSIONALS ON INTIMATE VIOLENCE MANAGEMENT**

Maina Geoffrey M (Moi University)

Introduction: Intimate partner violence represents a significant health problem which places a major strain on the health of the individual and also a burden to the health care system due to the cost involved in medical care. Traditionally, health care provider's involvement in partner violence management and prevention has been restricted to screening of the victim in the health care setting only. The aim of the study was to identify the perceived role of health professionals working in the emergency department in the management and prevention of partner violence in Kenya.

Methods: Health professionals working in the Emergency Department (ED) were interviewed in the study. In depth interview was carried out among one doctor, six nurses and 4 clinical officers who had worked in the ED for at least a year. Transcription and subsequent analysis of the interviews were done using NVIVO7 software for qualitative data. Emerging ideas were merged into themes and sub-themes.

Results: From the interviews, it emerged that the participants found themselves assuming diverse roles with regard to partner violence both in the health setting and outside of health care facility. They include, counsellor, liaison, community educators Discussion: health professions must see themselves beyond assuming clinical responsibilities in the management of victims of partner violence. This assists in the prevention and control of intimate partner violence

Recommendation: there is need to induct the health professional on their roles so that they are able to diagnose and manage victims of partner violence appropriately

Conflict of Interest: None disclosed

Financial Support/Funding: None

PO-1151

CAUSES AND FORMS OF INTIMATE PARTNER SEXUAL VIOLENCE: A HEALTH PROFESSIONALS' PERSPECTIVE.

Maina Geoffrey M (Moi University)

Introduction: Intimate partner sexual violence is a major violation of human rights is seldom recognized and reported in Kenya. This is due to the fact that there is no sufficient legislation that criminalizes intimate sexual violence in Kenya combined with a poor definition of what constitutes to intimate sexual violence in intimate relationships as well as the stigma, shame and fear associated with disclosure of sexual issues in a relationship. Moreover, cultural practices and beliefs such as gender power imbalance, patriarchy and the dowry system prohibit the recognition of intimate sexual violence as abuse.

Methodology: Being the point of entry for the victims of intimate sexual violence who go to the hospital, the emergency department health professionals were chosen to participate in the individual in-depth interview. The interviews were recorded on a digital voice recorder and later transcribed into MS word. NVIVO software was used to manage and analyze the interviews for emerging themes and ideas.

Results and discussion: From the study it was established that intimate partner intimate sexual violence was rife in the Kenyan society. It was expressed through forced sex, coercion, and manipulation and withholding of sex. Several factors such as infertility, culture and alcohol intake were associated with sexual abuse. Also an attempt to protect oneself from contracting a sexually transmitted infection from a partner was said to degenerate into violence especially among women who were perceived to be culturally disempowered to negotiate for safe sex.

Conflict of Interest: None disclosed

Financial Support/Funding: None

PO-1152

GENDER-BASE VIOLENCE IN EMERGENCIES (REFUGEE CAMP IN NORTHERN CAMEROON).

Jerome Kume Isoh (Christain Community Health Care Foundation.Cohecf)

Introduction and Objective: Gender-base violence is a serious human right and public health Concern globally. It include sexual violence, sexual exploitation and abuse, forced Prostitution, intimate partner violence, trafficking, forced and early marriage and harmful traditional practices such as female genital mutilation, causing gynecological disorders, unwanted pregnancy, adverse pregnancy outcome, sexually transmitted infections, including HIV, mental distress and death. To identify the gaps and challenges in provisions of services to survivors.

Methods: Health and community services implementation by ensuring women's Access to basic health services; provide sexual violence related health services and community based psychological and social support, information on sexuality education.

Results: Concerted effort within the health sector to address gender-base Violence has been undertaken only recently, and there were still consider-

able gaps. However, a governmental expert and UN staff member both said that the government did not have capacity or the financial or human resources to implement gender-base violence programs and the lack of appropriate services. A gender-base violence coordination committee was also in place headed by the local government and supported by the UN and the international NGO'S. In addition, a forum for sharing information, identifying problems and resolving them, the committee had designed a district referral system encompassing the police, the legal services and the medical psychosocial services provider.

Conclusion: Though findings have proven that in every crisis setting like the case of Chad, Women and girls have been victims of gender-base violence, however men and boys have also subjected to sexual exploitation and rape.

Conflict of Interest: PSYCHOSOCIAL EFFECT TO VICTIMS OF SEXUAL VIOLENCE AND THE PERPETRATORS

Financial Support/Funding: ORGANIZATIONAL SPONSORSHIP AND FUNDING

PO-1154

POST-OPERATIVE DEPRESSION AFTER GENDER CONFIRMATION SURGERY

Angello Michele M (Widener University), Mcginn Christine N (Papillon Gender Wellness Center)

Until recently post-operative depression after Gender Confirmation Surgery was not something widely discussed among transsexuals, or the therapists and surgeons who work closely with people transitioning. In this paper, we will discuss the therapeutic and medical aspects to depression in hopes of opening up a dialogue about this mysterious concept. Because it has been ignored, or even denied, many people experiencing "post-op blues" fear that perhaps the decision to undergo surgical intervention was a mistake. After all, if you realize your ultimate goal, aren't you supposed to be ecstatic? This interdisciplinary approach to working with vulnerable clients will speak to the concerns that many professionals discuss privately about pre-operative assessment as well as post-operative care. The intention is to augment the current readiness and eligibility guidelines with information specifically directed at predicting and preventing post-operative regret, and supporting clients if/when issues arise after surgery. Recommendations for additional screening and assessment tools (both pre-and post-operatively) will also be discussed.

Conflict of Interest: None disclosed

Financial Support/Funding: n/a

PO-1158

SENSITIZATION CAMPAIGN FOR 14-15 YEARS OLD YOUNG GIRLS ON THE RISK OF STI AND HIV TRANSMISSION IN THE FRAMEWORK OF SEXUAL INTERCOURSE WITH OLDER MEN IN MOUGUE (CAMEROON)

Salla Nzie Annie Michele (Wocare), Sanzhie Georgette (Wocare)

Introduction and objectives Girls aged 15-24 are three times more HIV infected than boys of the same age group. Due to poverty, young girls are engaged early in sexual intercourse and marriage with partners commonly 20 to 50 years older than her. They are not able to negotiate for safe sex and are subject to early pregnancy, unsafe abortion, STI and HIV transmission, sexual violence. Women Care has implemented a one year sensitization campaign aimed at raising awareness on the risks of STI and HIV transmission in this context, and to empower young girls in their sexual rights.

Methods The following was done: • 3 Advocacy meetings with parents, local leaders and health professionals; • 504 radio spots diffused on rural radio; • 100 educative talks/120 individual talks with young peer educators girls; A qualitative and quantitative study was conducted to measure campaign impacts.

Results: Impact on target groups is mitigated and the phenomenon is generalised. Two types of risks were identified by young girls: the risks incurred as a result of involvement in the relationship (loss of human dignity...) and sex related risks (pregnancy...). Wearing a condom is not systematic among these young girls. 56% of the girls involved in this sexual put money at the top motivations followed by rent (18%). Mothers tend to support the practice.

Conclusions: Awareness-building with emphasis on leadership and health issues, the reprecision of texts and legal sanctions on sexual practices with minors, the development of employment opportunities for girls.

Conflict of Interest: None disclosed
Financial Support/Funding: USAID

PO-1159

FEAR OF SEXUALITY IN DIALYSIS PATIENTS IN PAKISTAN

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Introduction: Prevailing myth in culture is that vitality is lost due to sexual activity. Impact of this stereotypical thinking becomes more pronounced in the patients with chronic illness like that of chronic renal failure.

Method: Fifty dialysis patients having spouses alive were randomly selected for evaluation of sexual function. Standardized and validated Urdu translation of IIEF 5 was used. Information regarding attitude toward sexuality and about use of sexual medicine was elicited.

Results: 41 patients (82%) were found to be completely impotent. 0% of the patient were using sexual medicine.

Discussion: Incidences of impotence are comparable with other studies. Interesting finding was attitude of avoidance of sexual intercourse and reluctance to use sexual medicines. In Pakistan myth is that semen is substance of vital power. Uremic patients has feeling of malaise, lassitude and depression want s to preserve this vital fluid. Hakims advocates that sexual activity put pressure on testis from there stress is transferred to the kidneys and onward. For that reason dialysis patients shun sexual intercourse. This

abstinence from intercourse is an independent risk factor for erectile dysfunction. Negative attitude for sexual medicine especially for PDE5 inhibitors was due to misconception about sexual medicines. Patients considered PDE5 inhibitor as equivalent of KHUSTAS which are nephrotoxic heavy metal salts with aphrodisiac properties. Beings overcautious they avoided PDE5 inhibitors.

Conclusion: Strength of culturally sanctioned myths is selectively reinforced for patients of dialysis Sexual function in dialysis patient can be improved by dispelling myths about sexuality

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-1160

IMPLEMENTATION OF SEXUAL HEALTH ON WORK PLACE , PROGRAME IN IRAN

Kamalifard Mozhgan (Health And Safety Labor Research Center), Odjaghi Mansoure

Introduction: sexual health is a growing problem world-wide. The objective of this study is to provide a set of guidelines to address the HIV/AIDS in work place and cover the prevention and management on the work ; care and support of workers.

Methods: Course Aim To develop a nurse and patients that is capable of providing a basic level of care within the local, community environment. Course Objectives • Identify simple pathology and infections • Prescribe appropriate device • Develop an appropriate health education package Course Structure Academic component The academic component of the programme was delivered, on site. Clinical Component The clinical component of the programme was delivered on clinic.

Results and Conclusion: Nurses and patients who educated in the programme can now be manage of sexual health care . They are involved in assessing and creating a base line while delivering basic sexual health education.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: NONE

PO-1162

SEXOLOGY IN MEDIEVAL ARABIC MEDICINE

Kaadan Abdul Nasser (Aleppo University)

Introduction: Arab physicians, in the Middle Ages, have played a considerable role in the field of medicine development as a whole and Sexology in particular. Approach, We went back to the most important medical texts books available during the medieval ages, for tracing their wittings on sexology.

Findings and discussions: Rhazes (al-Razi) was a famous physician and writer, whose medical writings greatly influenced the Arabic world as well as Western Europe. He devoted an important chapter in his encyclopedic medical book al-Hawi (Continens) for talking about many aspect of sexology. He, for example, described the advantages and disadvantages of sex-

ual intercourse, and the best times to be practiced. Avicenna (ibn-Sina) is considered one of the most celebrated physicians during the Middle Ages. Al-Qanunn Fit-tib (or Code of Laws in Medicine) represents the most important work of Avicenna. In this book Avicenna composed many chapters for talking about sexology. He talked on ointments which used for making the penis larger, and other ointments make the vagina narrower. He also talked about the causes and treatment of erectile dysfunctions. Albucasis (al-Zahrawi) lived in Spain (al-Andalus), and died there in 1013. He explained the libido and pleasure dysfunctions and all the ejaculation dysfunctions.

References: 1. Al-Baba MZ: some of medical books edited by Ibn Sina. Institute for History of Arabic Science-Aleppo University, Aleppo-Syria, 1984. 2. Ibn-Sina: Al-Qanun fit-Tibb. Vol. 3, P. 197, Dar Sader, Lebanon, 1980.

Conflict of Interest: None disclosed

Financial Support/Funding: I had no financial Support

PO-1165

CHANGES IN THE ATTITUDE OF JAPANESE HIGH SCHOOL STUDENTS BEFORE AND AFTER SEX EDUCATION

Hayashi Itoko (Oita University Of Nursing And Health Sciences), Yoshidome Atsuko (Kagoshima University)

Objective: To elucidate changes in the attitude of high school students before and after sex education. Methods Sex education regarding the current condition of teenage sexual behavior, induced abortion, sexually transmitted diseases, and contraceptive methods was given to 280 first-year high school students. Questionnaires were administered and collected both before and after sex education.

Results: Students obtained information on sex most commonly from friends (n=177; 65.6%), followed by magazines (n=85; 31.5%). The proportion of students who viewed themselves positively and responded that they "liked oneself" was 25.7% before sex education and 34.1% after education, indicating low self-esteem. Significant increases were observed for "would like to take good care of oneself" (before education, 56.1%; after, 83.1%) and "would like to act in consideration of others' feelings" (before education, 80.7%; after, 95.7%). Regarding the image of sex, the number of students with a positive image ("good") increased from 60 (22.2%) before sex education to 73 (27.1%) after education, while the number of students with a negative image ("embarrassing") decreased from 67 (24.8%) to 44 (16.4%). After sex education, 220 students (92.1%) reported "understanding the need for contraception", but only 180 (69.0%) reported "being able to promote contraceptive use".

Conclusion: After sex education, students had a more positive attitude toward themselves and others as well as a more positive image of sex, indicating that sex education was effective. Future education must include skills for communicating with partners, such as the ability to promote contraceptive use.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1168

PERSONALITY AND INTERNET SEXUALITY IN MEN IN MIDDLE AGE AND BEYOND

Seikowski Kurt (University Of Leipzig, Andrological Unit), Gollek Sabine (University Of Leipzig, Department Of Psychiatry)Rauschenbach Jana Personality and Internet Sexuality in Men in Middle Age and Beyond Seikowski K, Gollek S, Rauschenbach J

Introduction and objectives: Sex sites are increasingly accessed in the Internet. Compared to earlier pornographic material which had to be purchased, access to these sexual contents is now less problematical, no longer embarrassing and considerably cheaper, since sex can be indulged in at home via the Internet. Do aging men indulge in sex in the Internet? The question was to be answered whether these men differ from non-users of sexual Internet sites in psychological factors and whether new queries for the rating of one's own sexuality might result.

Methods: An anonymous survey was performed for this purpose. 41 men between 45 and 64 years of age participated in the study. Internet behavior was recorded in addition to sociodemographic characteristics. Personality characteristics were measured using the Trier Integrated Personality Inventory (TIPI). The men were divided into two groups: those who did not use the Internet at all (n=28) and the frequent users (n=13).

Results: The frequent users could be characterized by the following traits compared to the other groups: they were more depressive and irritable, showed more aggressive tendencies. They perceived lower quality of life and were less-well educated. They were not, however, less satisfied in their partnerships than the others.

Conclusions: Indulging in sex in the Internet appears to compensate for limited quality of life. In this, early signs of possible Internet sex addiction may be seen.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1169

THE INFECTIOUS FACTOR OF ENDOMETRIAL CYSTS – A PRELIMINARY RESEARCH

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Endometriosis is a big social problem connected with infertility and sterility, loss of sexuality and disintegrate ones couple. Endometriosis is also an

inflammatory, estrogen-dependent, persistent disease. Unfortunately the inflammatory factor as a part of endometriosis pathophysiology, as well as endometrial cysts, remains still unexplained. The comparison of the inflammatory markers levels in the blood serum of patients with recognized and histopathologically confirmed endometrial cysts. The study group was consisting of 20 women with ovarian endometrial cysts, who underwent laparoscopies in the Clinical University Hospital in Pozna[?] among the years 2007 and 2008. In Group I, there were 10 patients diagnosed with endometrial cysts, and in Group II, 10 patients diagnosed with endometrial cysts coexisting with peritoneal endometriosis stage II and III. Part of blood samples was examined immediately, and part were centrifuged and frozen. Iron RBC Hg WBC PLT Fibrinogen CRP CA- 125 [ug/dl] T/I] [mmol/l] [G/l] [G/l] [mg%] [mg/l] U/ml] Gr I 101.18 4.46 9.46 8.92 280.75 3.22 1.22 17.79 Gr II 55.45 3.85 7.56 6.93 235.00 3.04 2.07 11.85 p 0.001 0.04 NS NS NS NS NS Student's t-test; p-value <0.05 1. In further research we should expand the study group and clinical biochemistry examinations. 2. The presence of endometrial cysts should not be identified with iron deficiency, nor anemia.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1174

THE IMPACT OF HIV/AIDS ON INTERGENERATIONAL RELATIONSHIP IN NIGERIA: THE EFFECTS OF DEVELOPMENT ON THE ELDERLY SEXUALITY

Awoyemi Olawale Babatunde (Health And Sustainable Development Association Of Nigeria (Hesdan))

Objectives: Well-being, Development and intergenerational links on Sexuality. The Nigeria population is undergoing demographic transition, with an increasing population of older people. Nuclear and extended family members traditionally care for older's person's sexuality at home. The purpose of this paper is to examine the impact of AIDS on intergenerational relationships in Nigeria. The study made use of secondary data sources, supplemented by mail survey of a selected group of Nigerians who are engaged in AIDS research. Findings revealed that AIDS and sexuality issues have had a major impact on the relationship between the younger and older populations in the affected areas in Nigeria. The study observed changes in home living conditions due to reduced family size, urban migration for economic reasons has a considerably increased the care giving responsibilities and challenges faced by older people on sexuality. AIDS caregivers face discrimination as a result of the stigma attached to the disease. The inadequately funded healthcare system has placed little emphasis on the care of older people is limited. The paper further elaborate on the failure in Government policies on Health and Sexuality rights, social security, National Health insurance Scheme (NHIS), pensions schemes, Institutional changes and programs have not been adequate in addressing the intergenerational challenges that arise as a result of the disease. This paper advocates improved attention to the

Conflict of Interest: No conflicts of interest

Financial Support/Funding: PERSONAL FUNDING

PO-1179

.REPRODUCTIVE HEALTH NEEDS AMONG FEMALE SEX WORKERS IN THE DOUALA METROPOLIS OF CAMEROON.

Jerome Kume Isoh (Cohecf)

Introduction and objectives: Unplanned pregnancy is a relevant issue for female sex workers (FSWs), who may have less access to health services than other. The purpose of this is to determine contraceptive utilization among female sex workers in the Douala metropolis of Cameroon.

Methods: Female sex workers in Bonanjo, Bonapriso, and Akwa were recruited between October 2006 and January 2008 through outreach programs. Following written informed consent, participants completed an interview-administered survey describing demographics, risk behaviors and reproductive health history. Descriptive statistics were generated and correlates of unplanned pregnancy risk were assessed with logistic regression analysis.

Results: Of 543 sex workers, 520 (95.8) were female. Of the FSWs, mean age was 28.5 years (range: 18 to 45) and mean duration of sex work was 4.6 years. Most (69.4) were not married, 94.2% were born in Cameroon, and 76.9% had no formal education. Most (79.5%) of FSWs had children, with a mean age of 4.9 (SD=2.7, range: 1-17) pregnancies and 3.9 (SD=2.4, range 0-12) living children. One-third (36.7%) had at least one prior unplanned pregnancy, and 33, 2% stated they had a prior pregnancy termination.

Conclusion: Though FSWs in Cameroon appear to utilize contraception at high rates, some are at persistent risk for unplanned pregnancy. Programming for FSW should include reproductive health services to reduce risk of unplanned pregnancy.

Conflict of Interest: CLINICAL MANAGEMENT OF SEXUAL VIOLENCE IN CRISIS SITUATION.

Financial Support/Funding: SEEKING FOR FUNDING

PO-1180

HALCLENES IN EMERGENCY OBSTETRIC CARE TRAINING FOR HEALTH WORKERS IN CONFLICT AREAS IN AFRICA

Jerome Kume Isoh (Cohecf), Manja Asanji Immaculate (Cohecf), Njong Anda Alfred (Cohecf)

Introduction and objectives: Chad has been affected by civil war. To increase the access to quality reproductive health services, the United Nations Population Fund (UNICEF) in Chad and Ministry of Health (MOH) in Chad, have decided to train health workers in Emergency Obstetric Care (EmOC) using expertise of training centers in Africa. The purpose is to discuss the challenges and findings in training in EmOC for service providers working in conflict-affected areas, and to review the difficulties facing trainees in implementing them.

Methods: The training in EmOC had a three components: 1) a knowledge update; 2) skills standardization; and 3) to follow-up visit. The trainees

(physicians, nurses, midwives, and anesthesiologist) working in conflict areas were selected by UNICEF and MOH. At the end of first two phases, each team of participants (comprising a physician nurse/midwife, and anesthesiologist from the same health center) had to implement an action plan, which would be assessed by the training team during the follow-up visit.

Results: Health workers in conflict areas are enthusiastic about gaining new knowledge and skills. Short-term improvement of the quality of care is noticed. Follow-up visits are essential for the implementation of new knowledge and skills. Implementing training requires strong support from the sponsoring organizations.

Conclusion: Training in EmOC for providers working in conflict areas leads to an improvement in the quality of care. There should be a sustainability plan at the beginning of the project based on an agreement between sponsoring organizations and MOH.

Conflict of Interest: CLINICAL TRAINING OF EMERGENCY OBSTETRIC CARE IN CONFLICT SETTING.

Financial Support/Funding: SEEKING FUNDING

PO-1181

ANALYSIS OF EXPERT DECISIONS IN RELATION TO EROTIC/PORNO OFFERED TO DISTRIBUTION IN UKRAINE.

Zaytsev Oleksander (Social, Forensic Psychiatry And Substance Abuse Research Institute, Ukraine), Markova Marianna (Social, Forensic Psychiatry And Substance Abuse Research Institute, Ukraine)

Objective – analysis of expert decisions in relation to erotic/porno kino- and videoproductions offered to distribution in Ukraine. Design and methods. Conclusions of Members of the Culture Ministry Expert Commission limited to distribution of video productions in Ukraine (Sexologist, Art critic and Public representative).

Results. Were analysed 255 films at the period from June 2005 to February 2006. In the format of home video exceptionally for an adult audience were recommended to distribution and demonstrated by Sexologist – 163 films (64 %), Art critic – 142 (56 %) and Public representative – 117 films (46 %). Were forbidden for distribution according to Law of Ukraine «About defence of public moral» by Sexologist – 8 (3 %), Art critic – 1 (0,4 %) and Public representative – 48 (19 %). Thus, professional and world views options were determined on acceptance of expert's decisions. Conclusion about absence of clear criteria of differentiation of erotic and pornographic productions in Ukraine is drawn. The ways of decision of problem come into question.

Conflict of Interest: None disclosed

Financial Support/Funding: Objective – analysis of expert decisions in relation to erotic/porno kino- and videoproductions offered to distribution in Ukraine. Design and methods. Conclusions of Members of the Culture Ministry Expert Commission limited to distribution of kino- and

PO-1185

GENDER, SEXUALITY AND HEALTH

Naeem Muhammad Naeem (Plus Development Foundation)

As a young Muslim nation with complex anthropology, Pakistan continues to struggle with common sense of identity. This struggle also touches our personal lives particularly amongst young people with severe identity and gender stereotyping issues, poverty and low levels of literacy. This confusion is propounded and manifests clearly in sexual behaviors and practices. Community based sexual health /HIV prevention programs must incorporate self-reflection, self-concepts and identity issues to ensure ownership and sustainability of their programs. Working on self-encourages/ facilitates strong self-concepts, which translates to assertive behavior, negotiation skills and a sense of rights. Gender identity refers to how one thinks of one's own, gender: whether one thinks of oneself as man (masculine) or as woman (feminine). Society prescribes arbitrary rules or gender roles based on one's sex. These gender roles are called feminine and masculine. Methods/procedures: Promote Peer education and educate public on gender sexuality for behavior change. Exercise responsibility in sexual relationships, by abstinence addressing power imbalances, negotiation skills resisting pressure during sexual intercourse. Gender Sexuality education must be component of development/reproductive health programs designed to prevent STIs.

Results: Socio cultural framework is supremely gender and often-sexual relationships are framed by gender roles, power relationships, poverty, class, caste and custom, hierarchies of one sort of another. Term "man" is male gender identity not sexual identity. The phrase males who have sex with males is not about identities and desires it is about recognizing there are many frameworks within which men/males have sex with males, many different self-identities, many different context of behavior.

Conflict of Interest: None disclosed

Financial Support/Funding: Local Philanthropists

PO-1194

THE CONTEMPORARY ROMANIA, UNDER THE IRRATIONAL SEX' DICTATORSHIP

Pop Tiberiu, Herczegh Rita Craiut Doru I., Mocuta Diana, Lacziko Szidonia, Szasz Florin

Dictatorship represents a violent socio-political phenomenon tasked by physical force, which is exerted upon a population segment, rejecting tyranny and wishes something completely different: freedom. The dictatorship of irrational sex in contemporary Romania is the consequence of another dictatorship, the communist one, which considered the sexual act being a taboo. In those times the unique role of sex was the artificial growth of the Romanian population. The fear of sex (even more the fear of pregnancies) have validated in that period the first manifestations of non-vaginal sex, because the contraceptive methods were illicit, and gynecologists had the role and professional obligation of tracking down the pregnancies,

at every six months, to every woman until the age of 45. All these lead to wear down the aim of sexual relationships (procreation and pleasure) causing more and more people to suffer physically and somatically because of the fear, rejection or avoidance of a normal sexual act and vanishing of sexual pleasure and will of procreation. As it follows, the present feminine generations of 55-60 years old were mutilated physically-sexually, by privation of sexual pleasure, and that, by emotional compensation, allowed the next generations the discharge of the communist dictatorship, through the Revolution of 1989, which lead also to sexual freedom in Romania. As any spontaneous revolution (sexual revolution also), as well as any unlearned/unpracticed thing (including sex), after self-taught/audio-visual methods, it was applied wrong, without the desired results, and no available means to efficiently correct the side-slip.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1195

THE IMPORTANCE OF ANSWERS GIVEN AT THE SEXUAL COUNSELING TEST IN THE ATTENUATION OF IRRATIONAL SEXUAL DICTATORSHIP EFFECTS IN ROMANIA

Pop Tiberiu, Herczegh Rita Craiut Doru I., Mocuta Diana, Bodog Alin, Veres Monica

The contemporary human sexual behavior is not very different from that of our ancestors. The strict biological aim of sexuality and human reproduction still runs its course on the same criteria and ways. Along human history, the culture, and particularly the religion, played a major role in the determination and direction of sexual behavior, limiting a lot the possible side-slips considered as abnormal, by isolating all cases considered to have abnormal manifestations. There is a great social concernment generated by the different normal or abnormal aspects that compose and validate the human sexuality. The idea of elaborating a test for helping the sexual counseling sprouted in our mind as a result of many dialogs had with our patients and students, from where we noticed the great interest regarding this subject, considered a taboo in Romania. Most of the sexual information was empirical transmitted from a generation to another, all along with the explosively growing sexual promiscuity, perversions and STD's. This article wants to antagonize the reminiscence of false impudence in applying some themes, still considered taboo and stop the appearance of unhealthy sexual habits (more and more aggressive ones), encouraged by many unscientific references and sources. With the possibility of being considered too late for some, the authors consider that this commentary will bring a contribution to vanish the third millennium's rod, STDs, by underlining the benefic role of sexual counseling, using the guidance test, the motto being: What you know not, it can harm you a lot.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1196

SEXUAL EDUCATION: AN EXPERIMENTAL PROGRAMME WITH EDUCATIONAL AND MEDICAL BENEFIT

Kettemalet Anthony Fabrice

Objectives: To develop and teach a school sex education programme that will lead to a decrease in sexual activity

Method: A matched internal and external control experiment, comparing control populations which received their own sex education programmes with populations which received a novel sex education intervention that included medical and peer led teaching.

Results: In the intervention population, progressive increase in knowledge related to contraception, sexually transmitted diseases, and prevalence of sexual activity (2 (trend) $P < 0.001$ for all three series); relative increase between intervention and control populations in knowledge, relative decrease in attitudes suggesting that sexual intercourse is of itself beneficial to teenagers and their relationships, relative decrease in sexual activity, and relative increase in approval of their «sex education» (relative risk > 1.00 with 95% confidence limits not including 1.00 for all series and for comparisons with both control populations); odds ratio (control v programme) for sexual activity of 1.45, controlling for sociodemographic variables.

Conclusion: School sex education that includes specific targeted methods with the direct use of medical staff and peers can produce behavioural changes that lead to health benefit.

Conflict of Interest: None disclosed

Financial Support/Funding: -MASECA student association. -institut of social science at university of Bangui

PO-1197

WHEN AGE AND GLOBALIZATION MEET SOCIAL RISKS

Kupferman Sarit (Public Health Services. Ministry Of Health. Israel), Sa'Adon Ronit (Or Shalom Association) Arbeli Yael (Public Health Services. Ministry Of Health. Israel)

The WHO defines the age group of 10-24 years as «Young People» and we call them «Adolescents.» This group has specific health needs according to age and developmental stage. At a time where teenagers are exposed to mass-media, accessibility is not necessarily reliable knowledge that can lead them to a rational decision making process. These risk factors combined with basic characteristics of adolescent, produce the «global risks» of adolescence. Risk taking behaviors cause social morbidity including sexual behaviors, sexual abuse, unexpected pregnancies and STDs. Professionals in the field of adolescents talk about the need of health promotion programs tailor made age and risk groups. Public Health Services at Ashkelon District Health Office believes that the only way reducing these risks is by changing behavioral patterns as part of health promotion programs in the field of sexuality, especially in high-risk populations. In Israel are living 330,000 children and adolescents that are defined as «High Risk,» as they are exposed each day to personal, interpersonal, familiar or envi-

ronmental risk factors. Out of them – 10,000 were taken out of their homes and placed in alternative settings. Or Shalom Association provides care, protection, and guidance to more than 1000 children and adolescents in a wide range of community protective settings and programs. The collaboration between the social services of Or Shalom and health promotion nursing, built a special program in one of Or Shalom's homes for adolescent girls at risk. In our presentation, we will present the social and professional processes mapping procedures of abeling and

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1199

BARRIERS TO THE USE OF MODERN CONTRACEPTIVES AND IMPLICATIONS FOR WOMAN-CONTROLLED PREVENTION OF SEXUALLY TRANSMITTED INFECTIONS IN REFUGEES SETTING.

Jerome Kume Isoh (Cohecf)

Introduction and objectives: Globally, unplanned pregnancies and sexually transmitted infections (STIs) persist as significant threats to women's reproductive health. To illustrate the Barriers to the use of modern contraceptives by women might inhibit uptake of novel woman-controlled methods for preventing STIs/HIV.

Methods: Use of modern contraceptives and perceptions and attitudes towards contraceptive use were investigated among women in Langui, Chad, using qualitative research.

Results: The hypothetical acceptability of the diaphragm—a woman-controlled barrier contraceptive device that also holds promise of protecting against STIs/HIV—was assessed. Women consecutively seeking care for vaginal discharge at a public health clinic were recruited for participation in a semi-structured interview (SSI) or focus group discussion (FGD). Of 46 participating women, 70% reported occasional use of male condoms, mostly for preventing pregnancy during their fertile days. Although women could name effective contraceptive methods, only 14% reported using hormonal contraception. Three barriers to use of modern contraceptives emerged: gaps in knowledge about the range of available contraceptive methods; misinformation and negative perceptions about some methods; and concern about social opposition to contraceptive use, mainly from male partners.

Conclusion: These results demonstrate the need for programmes in both family planning and STI prevention to improve women's knowledge of modern contraceptives and methods to prevent STI and to dispel misinformation and negative perceptions of methods. In addition, involvement of men will probably be a critical component of increased uptake of woman-controlled pregnancy and STI/HIV prevention methods and improved health.

Conflict of Interest: None disclosed

Financial Support/Funding: COHECF foundation

PO-1204

PAKISTANI TEACHER AS POTENTIAL RESOURCES TO IMPART REPRODUCTIVE & SEXUAL HEALTH AND RIGHTS EDUCATION TO YOUTH.

Nasir Muhammad (Social Help & Research Organization (Shro)), Rashid Haroon-Ur- (Social Help & Research Organization (Shro))

Background: In Pakistani society Reproductive and Sexual Health and Rights Education is a taboo and teachers are also not fully equipped to face the situation. On the other hand, adolescence is the age where clear and correct information is highly desirable. SHRO is working in RSHRE field for last 7 years and 450 teachers were trained. These training programmes increased the knowledge level of the teachers along with the communication skills which in turn brought changes in their attitude.

Methodology: Appropriate educational and teaching materials were developed on the subject and teachers were trained on the communication skills through 6 days workshops. A significant increase in the knowledge level and change in attitude have been recorded and monitored and evaluated by using different tools.

Results and Conclusion: The trained teachers have formed a Forum to promote such education within schools system. The forum has a news bulletin to reach schools and teachers. 83% of forum members have volunteered their services to work with NGOs/CBOs to impart training to other teachers. Teachers admitted that perfect training materials produced by SHRO and scientific training methodology by creating an enabling environment which helped in learning and bringing change in their attitude.

Conflict of Interest: Some religious mind teachers try to create conflict and disappoint other teachers.

Financial Support/Funding: None disclosed

PO-1205

HIV/AIDS AND YOUNG PEOPLE (YP)

Jerome Kume Isoh (Cohecf), Manja Asanji Immaculate (Cohecf), Njong Anda Alfred (Cohecf)

Introduction and objectives: More than half of all new HIV infections worldwide occur among people aged 15 to 24. During conflict, many adolescents and youth face additional risk due to increased sexual violence and exploitation, poverty, alcohol and drug abuse, and sexual activity without prevention education. To support adolescent and youth leadership in HIV assessment and program design, implementation and evaluation.

Methods: • Include HIV information in education activities. • Determine and enforce strict policies preventing sexual abuse and exploitation of YP by members of your staff or group, and provide staff with child right and HIV information. • Coordinate HIV services, and provide confidential voluntary HIV testing and counseling. • Provide YP, especially girls, with economic alternatives to exchanges of sex for goods and services through skills training and apprenticeships.

Results: • YP's risk of exposure to HIV is reduced when community and

humanitarian aid workers receive HIV prevention information and when strict policies are enforced to hold them accountable for sexual violence and exploitation. • Education and economic opportunity for YP are essential alternatives to sex for money or other risky behavior that increases HIV risk. • HIV programs that encourage YP to delay their first sexual experience reduce their risk of exposure.

Conclusion: Supporting YP's initiatives, such as youth centers, youth newspapers, radio shows, recreation, creative projects and advocacy groups, integrating health awareness and good practices; and supporting their leadership in reproductive health programming is an importance step in reducing the spread of HIV/AIDS among young people.

Conflict of Interest: The conflict of interest is to the status of HIV/AIDS amongst young people in Africa and thier behavior regarding the disease.
Financial Support/Funding: COHECF Foundation.

PO-1215

SEXUAL DYSFUNCTIONS AND EPILEPSY: PREVALENCE AND CLINICAL FEATURES IN MALE PATIENTS

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Introduction and Objectives: Sexual disorders seems to be very common in epileptic patients but, to date, the aetiology remains uncertain but likely to be multifactorial involving neurological, endocrine, iatrogenic, psychiatric, cognitive and psychosocial factors. This study was specifically aimed to evaluate the prevalence and the aetiology of sexual dysfunctions in a group of epileptic outpatients, with particular regard to the role that neurological and psychological factors could carry out.

Methods: Male patients between 18 and 55 years and a control group of healthy volunteers were enrolled in the study. All the patients were investigated to point out the social, economical, occupational and work-related conditions. Patients underwent Neurological and General examination, EEG, CT and/or MRI, Hamilton Depression Scale and Hamilton Anxiety Scale administration. A semi-structured interview and the short form of the SESAMO questionnaire were performed to evaluate the sexual function. Results Of the 30 patients enrolled, 19 (63%) were affected by partial epilepsy and 11 (36 %) by generalized epilepsy. More than the 50% of the patients were seizures free by at least 5 years; only 5 (17%) patient presented with high seizures frequency. A HDRS score >11 was present in 5 (17%) patients and 30% were anxious. Concerning the prevalence of sexual dysfunctions, 5 (17%) patients were affected by retard ejaculation, 4 (13%) by premature ejaculation, 4 (13%) by erectile dysfunction , 5 by hyposexuality and only one patient by hypersexuality with no statistically significant differences between cases and controls.

Conflict of Interest: None disclosed

Financial Support/Funding: No Financial funding

PO-1218

PSYCHOSOCIAL EFFECTS OF SEXUAL VIOLENCE IN CONFLICT SETTING.

Jerome Kume Isoh (Cohecf)

Introduction and Objectives: The Chadian population has experience conflicts over some years now a psychosocial needs evaluation was carried out in late last year and early this year. COHECF established the program Life After Rape to respond to the need identified. This presentation will describe the challenges faced in developing program for psychosocial support in conflict areas of Chad.

Methods: Local women organized themselves to address issues around sexual violence and other form of gender-base violence (GBV). They developed a counseling training program and train teachers, nurses and other as community psychosocial workers. They have also trained parents to support children formerly abducted by rebels.

Results: Psychological disorder resulting from sexual violence in crisis setting include personality disorder, emotional disorder, suicidal behavior and post traumatic stress disorder. Several factors can make victims of sexual violence in conflict setting particularly vulnerable including poverty, insecurity, and a lack of access to shelter, food, water, clothing, education and information. Moreover, victims may have limited opportunities for life skills development, vocational training and access to income-generating activities. Survivors must be empowered with information and skills in order to recover and be reintegrated into their families and communities.

Conclusion: Psychosocial rehabilitation strategies should be based on the community perception regarding the causes and effects of sexual violence. Programs that build on existing social and cultural support system are therefor more likely to be acceptable to communities.

Conflict of Interest: Psychological effects on victims of sexual violence in crisis situation.

Financial Support/Funding: Foundations.

PO-1219

MARITAL RAPE

Packirisamy Ranuga Devy, Vytialingam Nathan

The woman in agreeing to marry the man is said to have unconditionally given consent to all future instances of sex until the marriage is legally dissolved. Being so ,can the husband be charged for raping his wife ? Under the defination of rape ,it is a crime if it is «an act of sexual intercourse by male with a woman other than his wife. Therefore it is not possible for the husband to rape his own wife.» Sir Matthew Hale, Chife Justice of England, had defined, rape within a marriage as a contractual obligation of the wife to the husband. To this day , law is based on this principle when it comes to sex within the marriage. The compounding history of man abus-

ing his wife has long been in the history of mankind. In practice it has been found that law affords little protection to the wife as the enforcement treats the violence within the family set-up different from other types of criminal behaviour except in the cases where physical injury is of a serious nature. In Malaysia at present there is a new legislation granting protection to battered woman in a marriage. The authors will be presenting and discussing issues on marital rape, conflicts in developing countries, where amendments and remedies are needed to be addressed in order to protect the woman and child in a marriage. Facts contributing to such violence would be highlighted.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1222

BARRIERS TO USE OF MODERN CONTRACEPTIVES IN CONFLICT SETTINGS OF AFRICA

Jerome Isoh Kume (Cohecf) Jerome Kume Isoh (Cohecf), Nkwa Anyao David (Cohecf)

Introduction and objectives: Globally, unplanned pregnancies and sexually transmitted infections (STIs) persist as significant threats to women's reproductive health. Barriers to the use of modern contraceptives by women might inhibit uptake of novel woman-controlled methods for preventing STIs/HIV. Use of modern contraceptives and perceptions and attitudes towards contraceptive use were investigated among women in conflict setting of Africa using qualitative research.

Methods: The hypothetical acceptability of the diaphragm—a woman-controlled barrier contraceptive device that also holds promise of protecting against STIs/HIV—was assessed. Women consecutively seeking care for vaginal discharge at a public health clinic were recruited for participation in a semi-structured interview (SSI) or focus group discussion (FGD). Of 46 participating women, 70% reported occasional use of male condoms, mostly for preventing pregnancy during their fertile days. Although women could name effective contraceptive methods, only 14% reported using hormonal contraception.

Results: Three barriers to use of modern contraceptives emerged: gaps in knowledge about the range of available contraceptive methods; misinformation and negative perceptions about some methods; and concern about social opposition to contraceptive use, mainly from male partners. These results demonstrate the need for programmes in both family planning and STI prevention to improve women's knowledge of modern contraceptives and methods to prevent STI and to dispel misinformation and negative perceptions of methods.

Conclusion: In addition, involvement of men will probably be a critical component of increased uptake of woman-controlled pregnancy and STI/HIV prevention methods and improved health.

Conflict of Interest: Barriers to use modern contraceptives in conflict setting of Africa.

Financial Support/Funding: Foundation.

PO-1223

ESTHETIC AND FUNCTIONAL ENLARGED LABIA MINORA REDUCTION

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Introduction and objectives: Hypertrophic labia minora can be functional or psychosexual problem. Local irritation, hygiene problems, difficulties during sexual intercourse as well as esthetical appearance are generally accepted as indications for surgical correction. We present our results in the reconstruction of enlarged labia minora.

Methods: Between April 2003 and May 2008, 21 women, aged 19 to 38 years (mean 22) underwent surgical correction of hypertrophied labia minora. The most patients (19/21) were dissatisfied with the appearance of their labia. In two cases, pseudoincontinence was presented due to urinary retention in vulvar and vaginal space. Excessive parts of both labia minora are removed including clitoral preputial skin to achieve good esthetical shape. The desired length of labia minora is discussed with the patient preoperatively and usually kept to be no less than 1 cm to minimally protrude to the level of labia majora. The wound is sutured using 6-0 resorbable suture. Compressive dressing is applied for first week to prevent swelling and haematoma. Urinary catheter was placed in only one case for three postoperative days.

Results: Good esthetical result with symmetrical reduced labia is achieved in all patients. In two patients with pseudoincontinence, there was no more urine leakage from vulvar region. There was neither haematoma nor infection postoperatively.

Conclusion: Reduction of enlarged labia minora is simple and safe procedure and restores natural rounded contour of the edge of labia minora. It should be considered for cases in which functional and esthetical reasons could be resolved by this technique.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1224

NEOVAGINAL PROLAPSE PREVENTION BY SACROSPINOUS LIGAMENT FIXATION IN MALE TO FEMALE TRANSEXUALS

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Introduction and objectives: Vaginal prolapse is one of the complications after vaginoplasty in male-to-female gender reassignment surgery. We pres-

ent our experiences of vaginal sacrospinous ligament fixation after vaginoplasty in male transsexual patients with aim to prevent its postoperative prolapse.

Methods: From June 1998 through March 2008, a total of 79 male transsexual patients (mean 28 years) underwent sacrospinous ligament fixation for neovaginal prolapse during male-to-female gender reassignment surgery. Neovagina was created from penile skin tube flap combined with urethral flap. Deep and wide perineal cavity between the urethra, bladder and rectum was created by dissection of the tendinous centre and recto-urethral muscle. The right pararectal space is opened by penetrating the right pararectal fascia and right ischial spine was palpated. Using ischial spine as a prominent landmark, sacrospinous ligament is palpated. Long-handled Deschamps ligature is used to pierce the ligament medially to the ischial spine. Vaginopexy to the sacrospinous ligament is carried out and the neovagina is placed deep in the perineal cavity.

Results: The median follow-up was 46 (7-113) months. Sacrospinous ligament fixation was successfully performed in all patients. The mean vaginal length was 11.2 (9.5-16) cm. In 56 patients normal sexual intercourse was present. The appearance of neovagina was aesthetically acceptable in 62 patients. Minor bulge of the anterior vaginal wall occurred in 4 cases and resolved by simple excision.

Conclusions: Vaginal sacrospinous fixation is feasible in male transsexuals for neovaginal prolapse prevention. However, extensive experience in male pelvic surgery is required to avoid possible complications.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1227

INFORMATION COMMUNICATION TECHNOLOGIES: INDISPENSABLE TOOLS FOR QUALITY SEXUALITY EDUCATION IN SUB-SAHARAN AFRICA.

Okolie Ugochukwu C (Ebonyi State University)

The purpose of this study was to identify effective strategies for promoting, improving and educating the Sub-Saharan Africans on reproductive health, sexual health and rights through Information Communication Technologies. The study was a descriptive survey guided by four research questions. A twenty (20) item questionnaire was administered to the population used. A four point modified Likert type scale was used for collecting data. Data collected were analyzed using mean. Items with mean scores above 2.50 were accepted as effective strategies. Two hundred and fifty people comprising of health professionals, ICT experts, HIV/AIDS and Sexuality-based Organization workers, Activists, Policy makers, Researchers, sexual health and sexual rights consultants from five Sub-Saharan Countries were randomly selected for the study. Literature reviews were conducted and the review covered numerous published books and articles, which have theoretical relevance to the study. Finding among others revealed that ICT have the capacity to expand the basic nature of sexuality education and improve sexual health and rights of all. Conclusion and recommendations

were drawn from the findings of the study.

Conflict of Interest: Due to lack of access to quality sexuality education, most women and young girls in rural communities in Sub Saharan Africa are humiliated, abused and are deprived of their sexual rights.

Financial Support/Funding: I nominate the following foundations; Ford Foundations USA, Clinton Foundation, Swedish International Development Agency, Department for International Development Agency UK and Gates and Melinda Foundation USA.

PO-1231

KNOWLEDGE OF PROBLEMS FACED BY MOTHERS AT THE TIME OF DELIVERY IN UGANDA, A CASE STUDY OF MOTHERS IN SSISA SUBCOUNTY.

Mubuuke Dorothy (Makerere University Kampala), Lubaale Moses Yovani (Makerere University Kampala)

The major objective of this study was to identify problems faced by expectant mothers during ANC, delivery and after delivery. The research was based on 96 women in their childbearing years in Kajjansi village, which lies between Kampala the capital city and Entebbe the international airport. A questionnaire was used to collect data on the background characteristics of respondents, pregnancy, childbirth, puerperium and sources of information. The study established variations between problems faced by expectant mothers and the age of the mothers at their first pregnancy, the knowledge about pregnancy complications and whether the mother is educated or not. The study also established the variations between the extent of the knowledge about pregnancy complications and education level. The knowledge of pregnancy and delivery related complications was universal for the respondents; only one out of ten did not know any of the pregnancy related complications while one out of twenty persons did not know delivery related complications. Many of the women mentioned were knowledgeable about severe vomiting (67%) and miscarriages (66%). 3 in 10 women least mentioned multiple pregnancies. The knowledge of bleeding was 51% while that of tubal pregnancy and abortion was over 40%. The respondents had almost equal knowledge about high blood pressure and anemia; that is 12.3 and 11.2 percent respectively.

Conflict of Interest: The respondents were shy to answer some questions so the process took a lot of time

Financial Support/Funding: parental funding

PO-1232

WHAT ATTRACTS TEENAGE EXPECTANT MOTHERS TO HAVE ANTENATAL CARE SERVICES :A CASE STUDY OF NAGURU TEENAGE HEALTH CENTRE, KAMPALA UGANDA

Nansubuga Resty (Makerere University Kampala Uganda), Lubaale Yovani Moses (Makerere University Kampala Uganda)

Pregnancy among adolescents is known to be of a high risk. Lubaale(2008) in his reanalysis of 2002 Population and housing census data showed that 1% of the girls are mothers by age 12 years. This Contributing to high maternal mortality in Uganda(Wandira, 2008). In Uganda most of the health centres donot have skilled manpower to deal with obstetric emergencies.The major objective of the study was to find out factors affecting utilization of antenatal care services among pregnant adolescents at Naguru teenage health centre found in Kampla Uganda.A sample of 96 pregnant and 2 health providers were used.Structured questionnaires were used to collect data. Data collected was analysed using Spss. The results revealed that the majority of the teenagers were aged 18-19 years with lower educational levels of these about 35% were not married implying they were going to be single mothers on birth. More than half (55%) attended theservices less than 4 times as recommended by ministry of health Uganda The reasons for lower attendance include:longwaiting hours; long distances; fear and lack pf educaton.In conclusion however, findings show that services at Naguru teenage health centre user friendly as reported by the majority of respondents, are for free compared to other maternity clinics.

Conflict of Interest: Some respondents were tired Respondents were shy to be interviewed.

Financial Support/Funding: Parental funding.

PO-1234

BURKI,S CLINICAL MODEL OF SEXUAL RESPONSE CYCLE

Khan Muhammad H (Sexual Health Institution Of Pakistan), Mukhtar Muhammad Z (Azm Center)Ahmad Mansoor (Allen Ora), Sana Nooshen (Sexual Health Institute Of Pakistan), Bakar Abu (Remedies International), Ahamad Anees (Mayo Hospital)

Introduction: Four phases of sexual response depict sequence of events during sexual intercourse or masturbation. It does not take into account etiology and pathophysiology of various sexual disorder.

Method: An electronic search was made at various database websites, followed by manual study of magazine and books of sexual health to study sexual response cycle.

Results: A clinical model was designed which could address clinical issues. First of libidinous impulse coming from CNS is conceived that travels via autonomic nervous system to reach sexual organ. It is supposed that sexual apparatus is composed of two chambers erectile and orgasmic chambers. .In erectile chamber parasympathetic nerve supply dominates and orgasmic chamber has richer sympathetic nerve supply. It is conceived that erectile chamber has erectile capacity which depend upon its anatomic constitution. Once capacity is full sympathetic activity takes over causing detumesences. Biochemical bases are the facilitatory or resistance factors which modulate functioning of chamber. Orgasmic chamber has fix capacity for holding sympathetic discharge. Beyond this capacity parasympathetic system initiates ejaculation reflex. Orgasmic chamber has its own resistance and facilitatory factors that modulate sympathetic activity. Transition period of switching from sympathetic to parasympathetic mode is the

plateau phase. Two chambers and CNS form integrated system.

Conclusion: .Burki,s model provides frame work for application of modern knowledge on sexual dysfunction.. Most of the sexual dysfunctions and their subtypes can be explained on bases of this model. This clinical model can help sexologist in selection of treatment options..

Conflict of Interest: None disclosed

Financial Support/Funding: nil

PO-1235

ANGER IN SEXUAL DYSFUNCTIONS

Assalian Pierre (Mcgill University, Montreal, Canada)

In assessing couples and individuals,one is struck by the presence and importance of anger as a factor underlying sexual dysfunctions in males and females.Although it is noted in the literature,it is rarely emphasized or explicitly dealt with,particularly in «directive sex therapy» or in pharmacotherapy.This underemphasis of the role of anger may be in part be ascribed to workers in the area of sexual dysfunctions not being trained or sensitized to its importance or unwillingness to get into deeper issues. Kinsey pointed out that striking similarities do exist between physiological responses during sex and the bodily reaction that accompany the experience of anger. The biological relationship between sex and aggression has been suggested in male monkeys. MacLean showed that sexual and aggressive responses are in extremely close proximity to each other in the limbic system of the brain. Stekel claimed that anger may be expressed in erectile dysfunction. Cooper supported the clinical observation which associates hostility with arousal disorder in males and females. Helen S. Kaplan stated that the partner rejection, power struggle and sexual sabotage make sexual activity dysfunctional instead of pleasurable. Lief stated: sex therapy can't be conducted separately from an examination of the couple's communication pattern and their wishes for and fears of intimacy and power. I would add: sex therapy can't be conducted separately from an examination of the couple's hostility. It is my belief that exploration of anger must be pursued if treatment is to be truly and long lastingly successful.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None disclosed

PO-1236

LEGAL ISSUES IN SEXUAL PRACTICE

Packirisamy Ranuga Devy (Malaysian Healthy Ageing Society), Vy- tialingam Nathan (University Putra Malaysia)

There are various issues one has to consider when dealing with sexual offences,e.g rape, incest, unnatural offences, sexual offences involving young people, indecent exposure, abduction and sexual harassment to name a few. Various types of evidence are needed in order for the offender to be brought to justice. When looking into evidence ,one should be aware of fabrication, specially when children are involved, as they are unable to distinguish facts

from friction. However children should be educated in the various sexual offences that can be committed against them by their own family. The various laws that are there to protect the victims and is important that the professionals dealing in these cases to be aware of the law. Counselling is an important component in dealing with these issues. In developing countries, sexually harassment is becoming an issue. In some developing countries, there are adequate laws already in place, the government and the NGOs have become proactive in these areas. The author will discuss the various laws affecting sexual issues in developing countries.

References- Malaysia Law Journal.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1238

THE APPROACH TO SEXUALITY IN INGO GUIDELINES OF SEXUAL AND REPRODUCTIVE HEALTH SERVICES

Van Belle Sara

Introduction: The study consists of a meta analysis of materials of INGOs active in the field of sexual and reproductive health service delivery in developing countries (FHI, MSI, IPPF, Engenderhealth etc.) These INGOs develop and disseminate clinical protocols and guidelines for sexual and reproductive health services; and Information Education Communication/Behaviour Change communication materials to guide family planning counselling and other sexual and reproductive health counselling inside and outside the health services centre.

Method: The objective of the study is to perform a critical discourse analysis regarding the way sexuality is (re)presented in 'text' in all its forms produced by INGOs that is to be used as guidance in sexual and reproductive health service delivery.

Findings and discussion: hypothesis for now (based on the author's field experience working for sexual and reproductive health NGOs) is that guidelines and materials present a standard and overtly biomedical approach to sexuality, thereby missing out on the critical engagement with local cultural practices and failing to acknowledge the importance of sexuality in life quality. Where materials and guidelines are adapted to local cultural contexts, the materials/guidelines often present the dominant cultural view, thereby excluding some underserved groups.

Recommendations: -devote time in development of SRH service delivery programs to the local appropriation and translation of guidelines and materials with (also vulnerable) communities.

References: -Studies on sexuality performed by IDS, Sussex -Reproductive Health Matters, Vol. 15 no.29 -Global Public Health 2008, vol. 3(S2) -SRH INGO service delivery guidelines and IEC/BCC materials

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Salary researcher paid by Institute Of Tropical Medicine Antwerp

PO-1241

SETTING YOUR MOOD WITH BACKACHE

Nathan Vytialingam (Dept Of Medicine, Universiti Putra Malaysia),

It is important to understand the anatomy of the spine in managing patients with backache. Common for patients to complain of pain but their sexual function are effected besides activities of daily living. It is quite common for clinicians not to ask of their sexual health but look at the spine only clinically. Relationships are often put in a stressful situation due to this and common in developing countries that advise on sexual positions are not discussed. sex and back pain causes, tips are discussed, to create awareness that sex is not only penetration but more than that. Various sexual positions are discussed and the methods to still enjoy sex with backache will be highlighted and precautions to be taken. Take home message for men and women will be highlighted.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1245

CONDOM USE AMONG NORWEGIAN ADOLESCENTS AND YOUNG ADULTS 2008

Traen Bente (University Of Tromsø, Department Of Psychology), Myrberg Arild-Johan (The Norwegian Directorate Of Health)

Adolescent sexuality in Norway is socially accepted on the term that the teenagers are in love. Sex is legitimized by love. Another term is that they act responsible and use contraception for protection against unwanted pregnancy. In spite of the ideal of responsibility and the fact 2 of 3 adolescents in Norway use contraception, it appears that it is not as simple to make them take adequate precautions for protection against sexually transmitted infections (STIs). One reason may be that most adolescents naturally, and positively, perceive themselves and their partner as fecund. Therefore, it is regarded as equally «natural» to integrate contraception. They take a mutual responsibility for the possible consequences of the assumption that they are both fertile. As far as STI protection is concerned the situation is considerably more complex and poorly understood. As of today we know that adolescents rarely in their behavior accept as natural that they or their partner may be carriers of STIs. There is nothing natural about STIs. This project further explores the complexity in motives underlying the use of STI protection and use of contraception for unwanted pregnancy among Norwegian adolescents. The data collection will be carried out in December 2008 by means of anonymous, self-administered questionnaires among a random sample of 1100 persons in the age between 16 and 25 years. The questionnaire is designed to be comparable to other Norwegian and Nordic studies on use of condoms among adolescents. Results and conclusions are forthcoming.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: The Norwegian Directorate of Health

PO-1250

NEW DIMENSIONS IN RISK BEHAVIOR IN SEX WORKING: IS PREVENTION IMPOSSIBLE?

Ullah Akm Ahsan (University Of Dhaka, Bangladesh),

Introduction: This paper attempts to explore the risk behaviors and the vulnerabilities of the sex workers and their clients to HIV/AIDS.

Methods: 147 hotel sex workers were selected randomly for interview. The data were collected from April 2005 to November 2006. A standard methodology was employed to determine the sample size. Sample size from each category was determined according the sample fraction. Both open and close-ended questionnaire was used for the survey. Three qualitative sessions (FGD) were conducted. For analyzing the data, qualitative techniques and quantitative techniques were employed.

Findings: Data show that an overwhelming majority of the respondents 76 percent do not use condom and 71 per cent are not aware about HIV/AIDS. About 56 per cent of the sex workers use anti-septic cream before or after entertaining their clients and 41 per cent use soap and those use plain water as a measure to prevent this pandemic. Only 12% of the sex workers who claim to have knowledge about HIV/AIDS use condom. Apart from this side, a new dimension of unsafe sex was found rampant. 49 percent of the sex workers perform fellatio to offer more pleasure to the clients to retain them. Widespread practice of fellatio has plunged the possibility of mitigating the risk by using condom as they do it without condom.

Recommendations: The sex workers given their poor knowledge on HIV/AIDS and poor intention to use condom are spreading this pandemic. Awareness on STDs/HIV/AIDS should receive urgent attention.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: ARDS, Bangladesh

PO-1252

THE DEADLY MENACE OF HIV/AIDS: ENDANGERED COMMERCIAL SEX WORKERS AND THEIR CLIENTS IN BANGLADESH

Ullah Akm Ahsan (University Of Dhaka, Bangladesh),

Introduction: HIV/AIDS is spreading fastest in the third world countries. This paper attempts to explore the risk behaviors and the vulnerabilities of the sex workers and their clients to HIV/AIDS.

Methods: A total of 412 sex workers from three categories (hotel sex workers, 147; brothels, 140; and floating, 125) were selected randomly for interview. Both open and close-ended questionnaire were used for the survey. For analyzing the data, qualitative techniques as well as quantitative techniques i.e. descriptive and analytical statistics were employed.

Findings: A significantly higher percentage ($P < 0.000$) of the sex workers use anti-septic cream as compared to those who use condom before or after entertaining their clients as a measure to prevent HIV/AIDS. There is a marginally significant difference between those who use soap and those use plain water as a measure to prevent this pandemic ($P < 0.05$). A significantly

higher percentage of brothel sex workers use condom ($P < 0.004$) as compared to other two groups, while there is no significant difference in condom use between floating and hotel sex workers ($P < 0.067$). A significantly higher percentage of hotel sex workers use soap and anti-septic cream as compared to floating ones ($P < 0.000$) before or after sex and again, a significantly higher percentage of brothel sex workers know about HIV/AIDS as compared to other two groups ($P < 0.002$).

Conclusions: Awareness on STDs/HIV/AIDS should receive urgent attention from the government and the NGOs as well

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1254

PSYCHOSEXUAL DIMENSIONS AND QUALITY OF LIFE OF THE MENTAL PATIENTS

Portraits of patients dissatisfied with their male or female traits (DMF) as well as those of patients dissatisfied with their relationships with persons of different sex (DRPDS) and/or sexual relations (DSR) were drawn up using the characteristic of main components of human psychosexual sphere such as sex role behaviour, gender identity as well as orientation of sexual impulses. 196 mental patients with mean age of 27 years were investigated. Structured interview, semantic differential and clinical method of diagnoses of crosssexual accentuations of sex/gender role behavior. The male persons with diagnoses of schizophrenic spectrum and DMF are characterized by predominance of feminine radical of gender identity; those DRPDS—by predominance of the feminine radical of gender identity and not much differentiated sexual drives; those DSR—by coordination of the degree of cross gender accentuation of the sex role behaviour, and gender identity, that is to say the feminine figures of the behaviour and predominance of the femininity of there gender identity are characteristic for them (non-coordination with predominance of feminine gender identity is characteristic of those satisfied with sexual relations), not much differentiated sexual drives. The female persons with diagnoses of schizophrenic spectrum and DMF are characterized by coordination of the degree of cross gender accentuation of sex role behaviour and the gender identity, while non-coordination is characteristic of those satisfied (cross gender accentuation of the sex role behaviour is prevailing); females DRPDS display the same constellation of the sex role behaviour and gender identity; those dissatisfied with sexual relations didn't differentiated.

Conflict of Interest: None disclosed

Financial Support/Funding: State

PO-1255

DEVELOPMENT OF COMPREHENSIVE SEXUAL HEALTH POLICY : ROLE OF NGO'S IN RESOURCE POOR SETTINGS

Pramod D.S. (Health Alert Organisation Of India, [Ngo]), Vaishali P.S.Salgokar R.N.

Issues: sexuality big taboo in India. People living with sexual myths/disorders needs proper guidance/information/treatment-counselling outlets. Rights of transsexual/gay/bisexual must be protected. Such issues get social-boycott in India. We need to unite at sexo-Goteberg-2009-conference to develop comprehensive sexual-health-policy suitable for developing-nations. Incorporating NGO's in such efforts is necessary.

Methodology: Our 10 year-old-NGO started sexuality-advocacy-project in rural India. From April-2007 we started sex-education & HIV surveillance project to analyze social/anthropological issues of sexuality disorders. 71 subjects enrolled. Feedback questionnaires used for responses. Factors like community-inhibition, social-ostracism, economic-difficulties, sacked from job, non-availability of treatment-guidance centres, lack of trained-sexologists analysed. draft policy recommended to Govt-agencies.

Lessons-learned: role of NGO's in sexual-health/education crucial for cost-management, better-compliance. Community mass intervention projects has proven useful in rural communities of resource poor-nations. WAS-Goteberg-conference-participants can collaborate with NGO-activist to address this issue. Uniform public-health-policy needed to implement/expand newer strategies.

Recommendations: Dialogue between Government-health-services & NGO's accelerates sexuality-education-issues. NGO-participation must in Public-health-policy-issues. This would reduce difficulties faced by Asian people from resource poor southern countries. It is essential that WHO, WAS, UNAIDS form common guideline manual on this issue of sexual health affecting developing-countries. We graphically present our NGO's project on sexual-health to sexo-Goteberg-2009-conference-participants.

Conflict of Interest: None disclosed
Financial Support/Funding: No funding

PO-1256

HIV-VACCINES/ANTI-AIDS DRUGS : ARE ASIAN PEOPLE EXPLOITED IN NAME OF HOPE

Pramod D.S., Vaishali P.S.

Issue/Argument: Anti-Retrovirals has disadvantages as high-cost/long-therapy/non-compliance, severe-adverse-reactions. Design of HIV-vaccine-trials in developing countries is multi-dimensional ethical-issue. We focus on controversial issue identified in international/regional/local level meetings on HIV-vaccine trial. volunteers vulnerable to exploitation by foreign/local-research-groups and funding-agencies. protect autonomous capacity of volunteers to make decisions in their best interests in face of uncertain-benefits/substantial-risks. Interaction with seniors at sexo-Goteberg-2009-conference will be boost in fight for human-rights of HIV-affected in our developing-nation. Implementation

Methodology: Researchers/HIV policy-planners need to solve issues of vaccine trial participants. NGO play pivotal role-as community representatives. Researchers must create mechanisms to offset anticipated risks of participation in controversial-Risky methodology.

Conclusion: Pharma industry should include counselling & right to with-

draw from trial as basic-guidelines. unsuspected adverse reactions/deaths be properly evaluated/monitored. Researchers at Goteberg-panels need to evolve policy-guidelines to overcome barriers as variation in interpretation of essential ethical-ideas, legal-system-differences, educational/economic status. we Need to develop common consensus between research community/pharma sector to reduce suffering PLWHA.

Recommendations: HIV healthcare workers from NGOs should come together at WAS-conference like platform to form workgroup to settle these issues of clinical trials of HIV-Vaccines/Anti-Retrovirals. We shall raise our experiences on this burning issue of developing nations & present our findings to other participants at Goteberg-conference-venue.

Conflict of Interest: None disclosed
Financial Support/Funding: No

PO-1257

RESOLVING PSYCHO-SOCIAL STIGMA & DISCRIMINATION ASSOCIATED WITH HIV INFECTION : FAITH BASED COMMUNITY MODEL OF INDIAN NGO

Pramod D.S., Vaishali P.S., Salgokar R.N.

Issues: NGO's from resource-poor nations notice stigma/discrimination suffered by HIV-patients. stigma/discrimination reduces patient-compliance to ARV-drug-administration. We devised community model with four community-volunteers & two traditional-faith-healers to overcome this hurdle. Our Interventions reduces stigma, therefore crucial for improving QOL, emotional-health of PLWHA. [people-living-with-HIV/AIDS]. Our NGO-team trains traditional-faith-healers who are backbone of tribal/rural health-care-system in developing-nations. They incorporates messages of love/compassion.

Methodology: This NGO initiative was trial-project. Project components with two traditional-faith-healers [TFH] . We work in 21 villages with 23 patients enrolled. TFH advocated awareness raising/spiritual health/ community support. Social/community efforts reduces stigmatization/discrimination

Results: In 7 workshops, 48 responses analyzed. It shows positive outcome in >74% subjects. Negative attitude of PLWHA towards health-care providers analyzed. Among 11 who underwent full course, 60% reported positive outcome/mind-frame. Incidences of forced sex is 32%; physical abuse is 57%; verbal abuse 84%; & threat to job 36% communicated to appropriate higher authorities for action.

Conclusion: Stigma/discrimination changes attitudes of PLWHA towards ARV-therapy & reduces compliance. Involvement of local/respected faith-based leaders for AIDS control and creation of environment where faith plays important role.

Recommendations: NGO's play vital role for sensitization of general-population/health-care-workers towards sex workers/PLWHA. study demonstrated that multi-disciplinary approach by NGO's will improve ARV-treatment outcome & overall QOL. Our model seeks explored approach in promoting compassion/support to HIV-community. sexo-Gote-

berg-2009-conference is platform to show needs/concerns of NGO workers from resource-poor-nation working inHIV.

Conflict of Interest: None disclosed
Financial Support/Funding: No

PO-1263

CULTURAL FACTS THAT IMPACT SEXUAL HEALTH IN COMMUNITIES

Murillo Margarita (University Of Costa Rica)

This dissertation is characterized for investigating a multi-factor problem with both statistical and cultural elements, which required an integrating methodology that allowed an in-depth investigation of the social and cultural conditions in which the papiloma virus affects sexual and reproductive health. Statistics were used for the incidence and mortality rates of uterine-cervix cancer and development indexes. These indexes are used as basic information in the establishment of health policies in the different countries. The results showed the low determination that exists between the indexes of social development, human development, social backlog and demographic - sanitary dimension against incidence and mortality rates. Based on this information there was justified an investigation and an analysis of the causes why some counties in Costa Rica, with similar development indexes, showed contrasts in their incidence and mortality rates for cervical cancer. Significant differences were found in the results of every county, between incidence and mortality indexes and rates as well as in the identity structure development and role experience. The theory and methodology of Social Representations became the reference point par excellence for analyzing and determining the multiple causes of these differences. The social representation of hpv is over the chronic illness of the woman, cervix uterine cancer, its anchoring is based on gender-related practices and objectivization; it is justified by stigmas with the consequent invisibility of vulnerability elements. At the same time, the results obtained became necessary points of reference in the building of future public health models.

Conflict of Interest: Why two communitities with the same devopment level have difference in the incidence and mortality level with papiloma virus? The sociocultural facts impact in there sexual practices (stigmas-identity theory)
Financial Support/Funding: University of Costa Rica

PO-1264

EXPERIENCE OF SEXUAL EDUCATION WITH DIFFERENTS GROUPS - RELIGIOUS PERSPECTIVE AND HEALTH NECESSITIES

Murillo Margarita (University Of Costa Rica / Foundation To Promote The Sexual Health)

A sexual education community experience. Create new theory and methodological perspective. The basic point of view is to promote the mature of feelings, that's means that the principal focus is to create better conditions for the

communications of the necessities of each one. In the workshops we began talking about cultural facts that block the capacity to promote the sexual health. Our position is not to teach first about how to prevent pregnant or disease, our priority is to teach about the benefits of the sexuality in the body, health, relationship and bones between folks. The position is to create better places in their communities, to talk about their problems with their practices of sexuality. We teach at least three groups: teacher, parents and children. All of them are introducing in: sexual impulse and their impact in the health, aggressive versus tender instincts, dialogue with feelings, component of the sexuality, and ages of sexuality, gender, power, human rights, identity sexual. The immediately benefits is that each communities take a new attitude, their feel are less afraid about sexuality, they promote the parents guidance more comfortable with their children taking their histories , values and practices. They promote the communications with their kids and between. They find new and healthy social and cultural practice and answer for their problems, like drugs, young pregnant, disease, etc. They have the option to create more workshops or more training in specific field of sexual health.

Conflict of Interest: How to teach in groups with different educational level and differents religious and traditions cultural perspective and values
Financial Support/Funding: University of Costa Rica. Foundation to promote the sexual health - Costa Rica

PO-1268

STUDY OF DIETARY PATTERNS AND SELENIUM LEVELS IN SOILS AND FOODS OF HIGH HIV PREVALENT DISTRICT OF BONDO IN KENYA

Otieno Samwel Boaz (Ministry Of Livestock Deve.Aids Control Unit/University Of Nairobi)

Study of Dietary Patterns and Selenium Levels in Foods among High HIV prevalent District of Bondo in Kenya ABSTRACT An investigation of dietary patterns and selenium levels in diets of smallholder farmers and agricultural soils was carried out in Pala Sub-location between June and August 2008. In this study a total of 386 respondents selected randomly were interviewed in the four villages in the sub-location. The data was coded and analyzed by SPSS program while food and soil selenium levels were analyzed by AAS. It was shown that most of the respondents (61%) were small holder Farmers and Fishermen (P < 0.000), and most of them (91.2%) had up to college education (P<0.000), while the number of males were only slightly more than the females (P=0.263) and 83.5% of respondents were married. The investigation also revealed that most of the respondents own between 0.25 and 5 acres (P= 0.000) and that most of them plant maize (82.6%),millet(55.4%),beans (37.6%) and sorghum(21.2%0 while they also kept goats(48.2%),cows (46.9%) and chicken (42.7%) .The study showed that most respondents take at least three meals a day, and that in most households (82.6%) food is prepared by the mother and further that most foods (50%) eaten in that community are purchased. The foods eaten by most of the respondents were fish- Tilapia/Nile perch (by 75.2%), sorghum/millet (by 75.2%) and vegetables by 64.1% and that both children

and adults eat same types of food and that traditional foods which have become extinct are mainly vegetables (46%).

Conflict of Interest: None disclosed

Financial Support/Funding: Keneth Kaunda Foundation/Swedish International; Development Agency

PO-1271

A HOLISTIC “ISIS” MODEL FOR SEX THERAPY AND SUPERVISION

Ogden Gina (Institute For Advanced Study Of Human Sexuality)

Introduction Brain studies now confirm that sexual response is multidimensional, yet most therapy and supervision methods continue to focus only on physiological function, especially intercourse and orgasm. This speaker describes a more comprehensive holistic model that emerged from results of her independently conducted national (U.S.) survey on integrating sexuality and spirituality (ISIS).

Action A visual representation of the ISIS model suggests diverse ways the model can be incorporated into existing approaches to sex therapy and supervision to elicit meaningful connections between physical, emotional, mental, and spiritual experience.

Outcome Incorporating the ISIS model into therapy sessions has helped clients broaden their awareness of sexual experience—engaging them in all aspects of their own stories: body, mind, heart, and spirit; past, present, and future. It has offered an organizing principle through which clients can articulate nuances of sexual desire, emotional attraction, and memories that affect pleasure and satisfaction. It has created a non-judgmental arena for partner communication. In supervision, teaching, and group settings, it has provided a safe container for participants’ sexual stories, and created multiple perspectives from which to understand these stories.

Discussion and recommendations Routinely acknowledging mental, emotional, and spiritual aspects of sexual experience during sex history-taking, intake assessments, and treatment plans can aid both clients and therapists by broadening the number of avenues for awareness and healing.

References Ogden, Gina: *The Return of Desire* (Boston: Trumpeter, 2008)
Ogden, Gina: *The Heart and Soul of Sex* (Boston: Trumpeter, 2006)

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Self-funded research

PO-1274

SEXUAL LEGISLATION IN KENYA: THE SEXUAL OFFENCES ACT OF 2006

Otieno Hezron N (Egerton University/ Independent Researcher)

Introduction: The Kenyan constitution has scattered laws relating to sexual offences hence the need for the enactment of Sexual Offences Act (SOA), No. 3 of 2006. The SOA introduced new sexual offences such as gang rape, child pornography, child prostitution, child sex among others in

one statute. This study makes a comparative analysis of the Act in lieu of the rising sexual offences in the country. The findings reveal that while SOA intended to curb sexual offences, a woman is raped in Kenya after every thirty minutes. This is attributed to weaknesses in the Act. Section 38 of the Act provides a person making false allegations that another person has committed an offence is liable to punishment consummate to offence complained of. The legislation has not been disseminated countrywide, and the judiciary is still using the repealed provisions of the penal code to adjudicate sexual offences. The Waki Report on Post-Election Violence in Kenya indicates that the perpetrators of sexual offences included security agents who are tasked to investigate cases. In conclusion the implementation of SOA is experiencing challenges. Similarly, the prevailing cultural practices hinder the development of sexual friendly legislations. At the moment there is a need to ensure that more friendly sexual legislation are enacted.

References Caroline Wafula, *War on Sexual Violence Stepped Up*. Daily Nation August 13, 2008 Nairobi Sexual Offences Act, No. 3 of 2006 Waki Report on Post Election Violence in Kenya

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1277

SURGICAL TREATMENT OF PENILE FRACTURE: OUR EXPERIENCES

Jagodic Klemen (General Hospital Celje), Bizjak Igor (General Hospital Celje) Erklavec Marko (General Hospital Celje), Poteko Sandi (General Hospital Celje), Korosec Jagodic Helena (Hospital Vojnik)

Introduction: Fracture of the penis is relatively uncommon form of urological trauma. It is a disruption of the tunica albuginea of one or both corpus cavernosum due to the blunt trauma to the erect penis. It can be accompanied by partial or complete urethral rupture or with injury of the dorsal nerves and vessels. The classic, “text – book” history of penile fracture is: a sudden cracking sound as the tunica tears followed by pain, rapid detumescence, swelling and discoloration of the penis with or without voiding problems.

Patients and methods: From 2002 to 2007 7 patients with penile fracture were admitted to our department. They presented with acute penile pain during sexual intercourse followed by rapid detumescence, penile swelling and discoloration of the penile skin. All patients underwent immediate surgical exploration and repair of the fracture. In four patients surgical exploration revealed fracture of one corpus cavernosum, in 2 patients fracture of both corpus cavernosum and in one patient fracture of both corpus cavernosum with complete urethra disruption. In all cases vicryl interrupted sutures were used to repair rupture of corpus spongiosum. In one case urethra was anastomosed in one layer, tension free over an indwelled Foley catheter. All patients received low molecular heparin and diazepam. Patient with urethra disruption also received a broad spectrum antibiotic. Mean hospital stay was 6 days.

Results: One year after the fracture all patients presented with normal voiding and sexual function. Also patient with urethral disruption had no voiding problems. His urethrogram 12 months

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1287

LIVING MONTREAL PRIORITIES: MYTH OR REALITY – CASE STUDY BOTSWANA

Seeletso Mmabaledi K. (Bocodol),

Introduction: This paper sets to explore how much Botswana has done to meet her citizens' sexual health and rights, a global challenge facing all countries of the world as stipulated in the 2005 Millennium Declaration in Montreal. The paper first looks at what Sexual Health and Rights means, and how much Botswana has done to ensure that she meets the Montreal priorities. This paper will also introduce Botswana, a Sub Saharan African country considered the shining example of democracy. It will further explore best sexual health and rights practices in Botswana - interventions to HIV/AIDS pandemic and issues of same sex relationships which has proved to be a total failure in the case of Botswana.

Methods: Different thoughts of those affected both positively and negatively in matters of sexuality will be explored through in depth interviews and drop in close ended questionnaires.

Findings and discussion: The main assumption is that Botswana has success stories on issues of sexual Health and Rights, but also has challenges that legislatures have to consider that violate human rights. Botswana has successfully handled social, political and economic challenges but still fails to rise to the challenge of Sexual Health and Rights. This tends to work against Botswana's own Vision 2016 Pillar of a compassionate and tolerant nation.

Recommendations: It is important for different stakeholders to encourage Botswana government to accept people with diverse sexual establishments as human development cannot be achieved without sexual health of the people. References • Related newspaper cuttings • Available literature

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1290

CHILDBEARING INTENTIONS OF PEOPLE LIVING WITH HIV/AIDS AND ARE ON ANTIRETROVIRAL TREATMENT IN UGANDA

Musoke Iren Nakazzi (Nkumba University)

At the start of the HIV/AIDS pandemic, reproduction by PHAs was roundly discouraged because of the risk of sexual and vertical transmission of HIV. ART has now significantly reduced both these risks. This paper examined childbearing intentions by PHAs on ART and identified factors associated

with it. The paper used quantitative and qualitative data collected from randomly selected PHAs using a structured questionnaire and focus group discussions respectively. chi-square and stepwise binary logistic regression were used to analyze quantitative data while the master sheet method was used to analyze qualitative data. The results showed that, 30% of PHAs of which 33% were males and 28% were females reported intention to bear children. Females; persons older than 29 years; persons with one or more children; the widowed; separated/divorced persons; Catholics; and women engaged in household chores were less likely to report intentions to bear children. Conversely younger, childless, never married and PHAs engaged in business reported intentions to bear children. This finding shows that ART has the potential to make PHAs to review their reproductive intentions. It calls for measures that protect reproductive rights of PHAs while at the same time prevent the spread of HIV.

Conflict of Interest: people were not free to directly talk about HIV/AIDS.

Financial Support/Funding: self funded research

PO-1291

KNOWLEDGE AND PRACTICES RELATED TO SANITATION AMONG THE COMMUNITIES IN MBALE DISTRICT UGANDA.

Nakwoza Maria Goreth

The problem of sanitation is severe for most countries. In 1980s half of the population of developing countries had no safe drinking water and three quarter had no health sanitation (UN Report, 1980). The objective of the study was to find information on knowledge and practices related to sanitation among the rural communities of bumbo, buwundu parish mbale district. A survey was done in order to get information on the above and systematic random sampling was used to get the respondents. A standardised questionnaire 8 was administered to 50 respondents that were selected. The major findings of the study indicate, the majority (78%) had knowledge on sanitation. Further 60% of the people were able to practice sanitary related issues such as use of latrine and sweeping of the compound. Culture was found to have an effect on sanitary practices in the area more especially on side of women where by 50% of the women were unable to use the latrine due to traditional beliefs and taboos. In conclusion recommendations of the study include: Educating and sensitizing the people of the area about practicing good sanitation by the government. the government should plan for extension staff and should be well motivated to help in awareness of good sanitation in their communities.

Conflict of Interest: Data on the study was difficult to collect from the field.

Financial Support/Funding: Self funding.

PO-1297

EFFICACY AND SAFETY OF HORMONAL THERAPY WITH LONG-ACTING TESTOSTERONE INJECTION

Seilhanov Ilyas (Multi-Discipline Medical Center «Private Clinic Almaty»), Kasymaliyeva Rita (Multi-Discipline Medical Center «Private Clinic Al-

maty»)Seilhanov Ilyas (Multi-Discipline Medical Center «Private Clinic Almaty»)

Introduction: significant progress in understanding of androgens role in erectile dysfunction was achieved in last few years. Symptoms of testosterone deficiency are non-specific, and often not well recognized. Excessive weight, abdominal obesity and hypertension are often in hypogonadism, and they increase cardio-vascular and diabetes risk. This makes innovative testosterone therapy of much practical value. Objectives: To assess efficacy and safety of testosterone undecanoate (Nebido) in patients with testosterone deficiency.

Methods: Nebido treatment in approved dosage, 4 times per year, was provided in 38 patients with erectile dysfunction and testosterone deficiency. Patients age was 36-70 years (mean 53.3 + 6.9); serum testosterone 6-18 nmol/l, all patients were not previously treated with testosterone. Hypertension of I-II grade was in 52.6% of patients, abdominal obesity in 63.1% (mean waist circumference 116-152 cm), carbohydrate metabolism disturbances in 31.5%. Testosterone insufficiency symptoms included decreased sexual desire, diminished ejaculate volume, low orgasm intensity, various impairments of sexual function, decreased work efficiency, fatigue, depressive moods.

Results: testosterone levels increased at 3-5 days after injection, within physiological range. Patients reported increased sexual desire, satisfaction, orgasm intensity, erection improvement, positive changes of general well-being and mood, increased muscle mass.

Conclusion: Nebido provides good patient compliance, and maintains physiological testosterone levels important for effective and safe treatment. Nebido therapy has positive influence in sexual function impairment. Nebido has preventive influence in obesity, cardio-vascular complications, osteoporosis, diabetes mellitus and metabolic syndrome. All patients are under follow-up.

Conflict of Interest: None disclosed

Financial Support/Funding: own clinic funding

PO-1298

SEXUAL HEALTH & RIGHTS; A REFLECTION ON BOTSWANA

Seeletso Mmabaledi K. (Bocodol)

Introduction: This paper reflects on what Botswana has done to address issues of sexual health and rights. The paper first examines Sexual Health and Rights conceptions before exploring best sexual health and rights practices in Botswana including HIV/AIDS and same sex relationships. Methods Different perspectives of those affected both positively and negatively in matters of sexuality are explored through a questionnaire and in-depth interviews.

Findings and discussion: The main findings are that Botswana has success stories on issues of sexual Health and Rights particularly in fighting HIV/AIDS. However, she still has challenges with regard to legislation when it comes to issues of same sex relationships and other sexuality issues

such as abortion. Other challenges include behavioural changes because of culture.

Recommendations It is important for different stakeholders to encourage Botswana government to accept people with diverse sexual establishments as human development cannot be achieved without sexual health of the people.

References • Related newspaper cuttings • Available literature • Internet
Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1301

DEVELOPMENT AND PSYCHOMETRIC ANALYSIS OF QUALITY OF SEXUAL LIFE FOR CHINESE MARRIED MALES AND FEMALES

Hu Peicheng (Peking University Health Science Center), Hu Lei (Shangdong Psychiatry Hospital) Wu Junyi (Guangdong Daily)

Objective: To develop the questionnaire for The Quality of Sexual Life for married males and females(QSL) and assess its reliability and validity, and develop its norm of Chinese married males and females.

Methods: For female, the initial questionnaire was administered to 366 married women for exploratory factor analysis, and then to 1529 married women for confirmatory factor analysis. For male, questionnaire was administered to 520 married males aged 22~70 from 9 provinces of China. Norm sampling surveyed 1,425 married males aged 22~75 from 9 provinces of China.

Results: For female? Development of sexual quality of life questionnaire and establishment of norm. After exploratory factor analysis, a questionnaire consisted of 32 items was established, which had six factors: satisfaction, communication, anxiety, sexual response, attitude and self-image. For male, the correlations between SHS-M's subscales (sexual physiology, sexual psychology, sexual caress, sexual desire, sexual communication) and 3 subscales (husband-wife communication, sexual life, marriage satisfaction) from Olson's Marital Quality Inventory (ENRICH) and the 5-item version of the International Index of Erectile Dysfunction (IIEF-5) are positive, r ranging from 0.249 to 0.710. This QSL software is using in the website of Chinese Sina and got good feedback.

Conclusion: QSL has good psychometric properties and formed its norm of Chinese married males and female, thus it can be used in assessing quality of sexual life of Chinese married males and females.

Conflict of Interest: None disclosed

Financial Support/Funding: 985-II(985-027-39)

PO-1304

SPILLING OF SEMEN: REPRESENTING MALE SEXUALITY IN THE ARTWORKS OF KENDELL GEERS

Du Plessis Rory Frederick (Institute For Women'S & Gender Studies, University Of Pretoria)

Introduction: The paper traces the gendering of bodies into a binary of self-contained (men) versus 'leakiness' (women). The impetus behind such a gendered binary reveals the need for patriarchy to differentiate the male body from the female body. This gendered binary is challenged by the artworks of Kendell Geers, a contemporary South African artist. Geers' uninhibited 'spilling of his semen' defies the perception of hegemonic masculinity as self-contained and self-controlled. Approach A qualitative study that outlines the historical conceptions of masculinity and the changes in the representation of male sexuality.

Findings and discussions: Geers' 'spilling of his seed' constructs the male body, like the female body, to be constructed as 'leaky'. For women, this 'leakiness' is inherent, for men, it is understood as a matter of excess sexual activity. Thus, by Geers' expressing unbridled male virility he destabilises hegemonic masculinity by transforming the male body into a threatening permeability that constitutes the male body as a site of pollution and endangerment for patriarchal management. Thus, in focusing on the issues of permeability, of boundary pollution and fusion, the analysis aims to privilege the recognition that both male and female bodies are fluid.

References: Kristeva, J. 1982. Powers of horror: an essay on abjection. New York: Columbia Shildrick, M. 1997. Leaky Bodies and Boundaries: Feminism, Postmodernism and (Bio)ethics. London: Routledge. Stephens, E. 2004. Disseminating phallic masculinity: seminal fluidity in Genet's fiction. Paragraph 27(2). Thomson, M. 2001. eXistenZ: bio-ports/boundaries/bodies. Legal Studies 21(2).

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1305

SEXUAL PRACTICES AND KNOWLEDGE OF HIV/AIDS IN BIOLOGICAL AND NO BIOLOGICAL UNIVERSITY STUDENTS IN YUCATAN MEXICO.

Vera Ligia C (Universidad Autonoma De Yucatan. Centro De Investigaciones Regionales Dr Hideyo Noguchi), Rodriguez Leira A (Universidad Autonoma De Yucatan. Facultad De Medicina)

Introduction and Objective. - The sexual transmitted infections (STI'S) represents one problem of the public health linked to the sexual behavior of populations. The objective was to compare the sexual practices and level of knowledge about STI's on university students from biological and no biological area at the Universidad Autonoma de Yucatan, Tizimin Campus in Yucatan, Mexico.

Methods. - Comparative study. Including all matriculated students (245) from biological (Nursery) and non biological (Mathematics, Account and Education) areas of the Tizimin Campus. It was applied a questionnaire in May 2007, containing personal information, sexual practices and knowledge about STI's. For to compare the level of knowledge on STI's and the sexual practices it used the X2 test.

Results. - 46.6%(107) of students referred have had intercourse and of them the mean age were 18 years old for men and women in both groups. Ho-

moerotic practices were showed on men, one the biological area vs 3 of the non biological area. Anal intercourse was present in the booth groups without differences ($p=0.067$). The 10% (biological area students) vs 14.3% (non biological area students) they said never were used the condom. The level of knowledge were enough in the 85% of the biological area vs 50% non biological area ($p=0.00$).

Conclusion.- The students from biological area showed more knowledge on STI's, however, the risk sexual practices were similar by the two groups. On the other hand, one important percentage of these students didn't use the condom despite to the knowledge about STI's.

Conflict of Interest: We don't have a conflict of interest

Financial Support/Funding: This reesearch was fiancied by the investigators.

PO-1308

EROTICIZING REVENGE: IF YOU CAN'T JOIN 'EM, BEAT 'EM!

Anderson Kimberly Resnick (Summa Center For Sexual Health)

Many theories have been offered on the origins of paraphilia. From Kraft Ebing's groundbreaking book *Psychopathia Sexualis* in 1886; to Freud's compelling essay on the diagnosis and nature of paraphilia; to John Money's brilliant categories of sexual pathology, aspects of this courtship disorder have long been examined. After fifteen years of talking with paraphilic men about their sexual scripts, this author has noticed some universal themes that lend support to John Money's risk factors for development of paraphilia; including the timing of puberty, negative social interactions with peers, and the sexual "avoidance taboo". By using Money's concept of lovemaps and Richard Solomon's opponent-process theory, this author will provide clinical examples of how some men eroticize revenge by turning tragedy into triumph. The author will attempt to convey the essence of paraphilia based on thousands of conversations with men about their subjective eroticism. Video clips of actual patients will be shown to underscore some of the common themes and struggles associated with long-standing, deeply ingrained paraphilic imagery.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1311

VALIDATION OF SELF-REPORTS OF PERINEAL TEAR BY THE PAROUS WOMEN

Sultana Samina (Icddr,B)

Introduction and Objective: Injury to the perineum during normal vaginal delivery which is known as perineal tear is a source of dyspareunia and significant discomfort to many women. Home delivery remains a major cause of perineal injury among Bangladeshi women. The objective of the study was to validate women's self reports of old perineal tear by physical examination.

Methodology: From May 2005 to August 2005 a cross sectional study was conducted to include women who had delivered between 12 to 24 months prior to the date of interview in the urban slum of Mirpur, Dhaka, Bangladesh.

Result: Of 196 women who were interviewed, 183 were physically examined for confirmation of old perineal tear. Self-reported prevalence of perineal tear at the time of interview was only 3.8% (7). The physical examination identified 33.3% (61) cases of perineal tear. Self-reported prevalence of perineal tear during the index delivery was 13.1% (24) and at first delivery was 31.1% (57). Sensitivity, specificity, positive predictive value and negative predictive value at the time of interview were 5%, 97%, 43% and 67% respectively. Most of the respondents reported that the traditional birth attendant did not inform them anything about the tear when they delivered. Some reported that, the birth attendant informed them about the tear and assured of spontaneous healing. In association with perineal tear 44.3% (27) and 21.3% (13) women were found to have genital prolapse and dyspareunia respectively.

Conclusion: Prevalence of perineal tear was high among the respondents, hence self-reports was not reliable.

Conflict of Interest: None disclosed

Financial Support/Funding: The financial support was provided by Swiss Agency for Development and Cooperation (SDC)

PO-1313

THE NEW FACE OF HIV/AIDS: WHAT NEW INFORMATION NEEDS TO BE GIVEN TO YOUNG PEOPLE

Nampeera Viola (Makerere University), Nassali Primrose (Makerere University), Nambiro Maria (Makerere University), Nakaggwa Florence (International Health Sciences University)

The symptoms that were common in the early days are hardly visible today, hence the phrase, "The new face of HIV/AIDS" and this literature on symptoms of the early days is still used in schools by these vulnerable children, so when they go out, they will come into contact with these HIV/AIDS patients who do not show the signs that they always read about and they will fall prey. The program entails going out to the community and schools advancing new information to young and vulnerable people. Schools are a highly effective and appropriate place to teach young people HIV prevention information and skills before they begin risky behaviour. Stigmatization has reduced due to awareness and sensitization. Young people have become complacent, they do not mind about contracting the virus because they think it has been put under control. This is in the long run going to reverse the prevalence rate to even dangerous statistics. Young people who are virgins guarantee themselves to be HIV negative forgetting to put forth the prospect of mother to child transmission. Young people need to know that much as HIV/AIDS is under control, they should not put their lives at risk. When educating virginity to young people, we should let them know that being a virgin is not a guarantee that one can not be positive because one may have been born with the virus (mother to child transmission) So they

should be encouraged to always go for HIV testing.

Conflict of Interest: None disclosed

Financial Support/Funding: REPRODUCTIVE HEALTH UGANDA-IN MAKING OUTREACHES

PO-1317

PERSONALITY AS A PREDICTOR OF THE PREFERENCE FOR AND IMPORTANCE ATTACHED TO ROMANCE IN COMMITTED RELATIONSHIPS: WHAT HAPPENED TO THE GENDER STEREOTYPE?

Hald Gert Martin (Clinic Of Sexology, Copenhagen University Hospital & University Of Copenhagen), Skogerbø Åshild (University Of Copenhagen, Department Of Public Health) Öberg Katarina (Centre For Andrology And Sexual Medicine, Department Of Medicine, Karolinska University), Sørensen Dagfinn (University Of Tromsø, Department Of Psychology), Sommer Ingvild (Q500.No), Træen Bente (University Of Tromsø, Department Of Psychology)

Introduction: Common stereotypes hold that the preference for and importance attached to romance in a committed relationship in everyday life (PRE-ROMAN) is higher for women than men. In the present study PRE-ROMAN was investigated by measuring the importance attached to romance in everyday life, preferences in frequency of partner gestures symbolizing romance e.g. gifts, messages of love etc., and romantic beliefs e.g. sharing and signaling lifelong companionship. Objectives: 1) To test if PRE-ROMAN was significantly higher for women than men. 2) To investigate if gender subsequent personality (Big Five) predicted PRE-ROMAN.

Method: Using the website of Q500, a leading dating website in Norway, Denmark and Sweden, members were asked to answer questions relating to PRE-ROMAN and personality (Big Five). 818 women (mean age 45.1 years; SD = 10.8) and 641 men (mean age 43.4; SD = 11.6) returned the questionnaire.

Results: The results showed that PRE-ROMAN was not significantly higher for women than men ($t = .964$, $df = 1390$, ns). Furthermore, gender did not significantly predict PRE-ROMAN ($F(1, 1390) = .930$, ns). In contrast, personality was found to significantly predict PRE-ROMAN accounting for 13.1% of the total variance ($F(5, 1385) = 42.918$, $p < .001$, Adjusted $R^2 = .131$).

Conclusion: The study shows that contrary to common stereotypes the preference for and importance attached to romance in a committed relationship is not significantly more pronounced for women than men in the tested age group. In addition, personality (Big Five), as opposed to gender, significantly predicts PRE-ROMAN.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1318

REPRODUCTIVE HEALTH NEEDS AMONG FEMALE SEX WORKERS IN THE DOUALA METROPOLIS OF CAMEROON.

Isoh Jerome Kume (Cohecf (Christian Community Health Care Foundation))

Introduction and objectives: Unplanned pregnancy is a relevant issue for female sex workers (FSWs). The purpose of this is to determine contraceptive utilization among female sex workers in the Douala metropolis of Cameroon. **Methods:**Female sex workers in Bonanjo, Bonapriso, and Akwa were recruited between October 2006 and January 2008 through outreach programs. Following written informed consent, participants completed an interview-administered survey describing demographics, risk behaviors and reproductive health history. Descriptive statistics were generated and correlates of unplanned pregnancy risk were assessed with logistic regression analysis.

Results: Of 543 sex workers, 520 (95.8) were female. Of the FSWs, mean age was 28.5 years (range: 18 to 45) and mean duration of sex work was 4.6 years. Most (69.4) were not married, 94.2% were born in Cameroon, and 76.9% had no formal education. Most (79.5%) of FSWs had children, with a mean age of 4.9 (SD=2.7, range: 1-17) pregnancies and 3.9 (SD=2.4, range 0-12) living children. One-third (36.7%) had at least one prior unplanned pregnancy, and 33, 2% stated they had a prior pregnancy termination. Most FSWs (90.0%) stated that they did not desire a pregnancy at this time and 85.2% were using a contraceptive method.

Conclusion: Though FSWs in Cameroon appear to utilize contraception at high rates, some are at persistent risk for unplanned pregnancy. Programming for FSW should include reproductive health services to reduce risk of unplanned pregnancy

Conflict of Interest:

Financial Support/Funding: COHECF FOUNDATION.

PO-1320

COMMUNITY STUDY ON PREVENTING HIV INFECTION IN CONFLICT AREAS OF AFRICA.

Jerome Kume Isoh (Cohecf (Christian Community Health Care Foundation))

Background and objectives: Condition in emergencies increase the risk of exposure to HIV and other sexually transmitted infections. Displacement and the disintegration of families and communities-combined with the breakdown of health and education infrastructure and sudden unavailability of condoms-can lead to a rise in unprotected sex, leading to increase in the spread of HIV and other STIs.

Methods: However UNFPA has been providing health facilities with emergency supplies and equipment and trains health workers in their use. It also combines a variety of strategies to empower displaced people with the knowledge they need to stay HIV-free. These include mass media campaigns, life-skill education, voluntary counseling and testing, and the creation of 'safe spaces' where adolescents can freely access information,

services and peer support networks.

Findings: Desperate condition may force unaccompanied women and adolescent to exchange for food, shelter or protection .When families and communities are torn apart, women and young people become more vulnerable to sexual violence .In many conflicts rape has used as a weapon of war to terrorize and drive out enemy population. The possibility of sexually transmitted infection is greater in cases of rape and other forms of coercive sex due to the increase likelihood of vaginal tearing and bleeding.

Conclusion: In an emergency, condoms and other means of HIV prevention may seem less urgent than other humanitarian assistance but can be just as important in saving lives in Africa as a whole.

Conflict of Interest: COMMUNITY STUDY ON THE MANAGEMENT OF STIs AND HIV/AIDS IN EMERGENCIES.

Financial Support/Funding: COHECF FOUNDATION

PO-1321

LOVE LIFE AND SEXUAL HEALTH AMONG YOUTHS IN NIGERIA

Akinwale Akeem Ayofe (University Of Ibadan, Nigeria)

Sexuality affects youths in Nigeria, a highly patriarchal heterosexual society. They are known for robust sexual expressions without adequate ability to manage their sexual health. Thus, this study examines love life and sexual health among youths in Nigeria. Using 800 copies of questionnaire and 32 cases of in-depth interview, data were collected from 832 male and female youths in Ibadan, Nigeria. In light of different socio-demographic factors, love life significantly related with sexual health (p<0.005). All participants were unmarried, 72.5% disclosed their sexual experience and 25% had multiple sexual partners. Knowledge of sexual partnership and awareness of sexual health problem related significantly (p<0.005). More female repeatedly experienced sexual health problem compared to their male counterparts (60% vs 45%). Participants conceived «falling-in-love» as spontaneous feeling towards persons with desired or admirable qualities. Consequences of falling-in-love included companionship, romance, sex, pregnancy, abortion, fertility, engagement, marriage, separation, divorce, morbidity, and mortality. Primordial factors (family background, religious affiliation and ethnicity) affected their love life with exclusion and inclusion processes in the elimination of the beloved and the choice of the preferred or the recommended. Love interpretation was diverse and women were more vocal in the discourse of love life challenges. Different sexual health problems were mentioned. The prevalence of love life crises and high awareness of sexual health problems indicate an urgent need for intervention. Therefore it is recommended that sexual health education and mass movement for prevention and management of love crises should be top priorities in Nigeria

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1322

PUBLIC DISCOURSE OF SEX WORK IN NIGERIA

Akinwale Akeem Ayofe (University Of Ibadan, Nigeria)

Though sex work attracts international attention under the auspices of human rights organisations, many Africans discourage it. In Nigeria, the growth of sex work became unprecedented since the collapse of the 1986 Structural Adjustment Programmes. Therefore, this study examines public discourse of sex work in Nigeria. Drawing on secondary data and oral narratives obtained from 10 Focus Group Discussion groups including the clergy, community leaders, police officers, media practitioners and family heads, findings showed that sex workers were found in public spheres such as brothels, hotels, streets, car parks, and schools. Discussants generally stressed that in addition to pervasive poverty, dwindling traditional values and moral decadence were largely responsible for sex work in Nigeria. It was largely argued that, while religious institutions and community leaders support pre-marital chastity, the police and the media contributed to the increase in the magnitude of sex workers through corruption and uncensored phonographic media images. Many parents were said to be ignorant of sexual behaviour of their children. As demonstrated in different oral narratives, culture of silence and parental negligence are the principal motivators for sex work in Nigeria. The civil society organisations have taken some measures to control sex work. These measures include religious programming, advocacy by Non-Governmental Organisations, parental guidance, police surveillance and school orientation. The study shows wide circulation of information, education and communication (IEC) materials, intimate parent-child communication and income generating skills building should be provided to control excess reliance on sex work for survival.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1326

HEALTHCARE PROFESSIONALS' OPINIONS OF SERVICES FOR MALES SEXUALLY ASSAULTED IN ADULTHOOD

King Nicole J (Curtin University Of Technology)

Services for males sexually assaulted in adulthood (MSAA) are said to be decades behind that of their female counterparts (Walker, Archer, & Davies, 2005). Reasons for this range with the common explanation being men are rarely considered susceptible to sexual assault (Donnelly & Kenyon, 1996). This notion is supported by traditionally low percentages of reports from MSAA to service formats such as the police and counselling centres. This union of misguided beliefs and low reporting and has led to faulty perceptions of MSAA and their experiences. The information presented will be recommendations from a paper prepared for a Masters level research project completed within a Forensic Sexology degree. The research conducted was a qualitative investigation incorporating the Delphi Methodology. The overall aim was to provide an understanding of the service platform for MSAA through the opinions of Healthcare Service Professionals. Six pro-

fessionals from Western Australia volunteered for the study and the data was collected using one interview, and two follow up discussions. Research revealed a thematic network that connected myths about MSAA, and education and knowledge to elements of society (Victims, Citizens, Services, and Legal/Political structures) as a means of describing the reporting and service environment for MSAA.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1327

GENDER-BASED VIOLENCE AGAINST TEACHERS AND STUDENTS IN THE SCHOOL CAMPUS: AN ANALYSIS OF ITS THEORETICAL AND CULTURAL

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Introduction: School campuses are not spared with violence committed against their constituencies. They were reported as places where sex-related violence occurred. The victims are female students and teachers who experienced sexual abuse at varying degree. While schools are perceived to promote human rights through its educational endeavor, they become the places where students and teachers become victims of sex-based abuses.

Objectives: This study aims to describe cases of violence against the female teachers and students in school campuses of Higher Educational Institutions (HEIs) in the Philippines. Specifically, it presents cases of sexual abuse, inside the school; describes the perpetrators' socio-economic status, the severity or frequency of the commission of violence; analyzes the interplay of culture and political economy in these issues.

Methods: Data are gathered using referral system through the schools' guidance office, documentation from official records/ reports. Focus group discussions are conducted with NGOs and workers of pertinent government agencies and concerned school officials.

Results: The female teachers and students are prone to violence based on their gender. Most common abuses to students are sexual harassment committed by male teachers. To be subjected to humiliation kept them from divulging their experience to authorities. Among female teachers, sexual harassment is committed by the immediate superior's sexual advances or demand sexual gratification for favor received.

Conclusion: The lack of education that focuses on human and legal rights to respect others regardless of gender, nationality, age, and social status is one cause of gender-based abuses in the school campus.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Local Government unit of Malaybalay City

PO-1328

WHY HUMANS DO NOT HAVE SEX

Aavik Toivo (Institute Of Psychology, University Of Tartu, Estonia)

Objective. The main purpose is to investigate the reasons for not having sex and examine whether these reasons could be divided into smaller number of units. Design and method. 228 unique reasons for not having sex were identified by a nomination and selection procedure in Study 1 (n=546). In Study 2, participants were asked (n=468) to evaluate the degree to which each of the 228 reasons had led them to refuse to engage in a sexual intercourse.

Results. Factor analysis revealed a hierarchical taxonomy of four major factors and eighteen subfactors. The main reasons were labeled Interpersonal Reasons (included six subfactors, that were labeled Manipulation, Insecurity, Repulsive partner, Health related issues, STD-s and Nonaccepted sexual variability), Emotional Reasons (included five subfactors, that were labeled Lack of attractiveness, Shyness, Dignity, Lack of emotional bonding, and Unfamiliar partner), Occasional Reasons (included four subfactors, labeled Stress, Wrong time, Environment and Quarrels), Persistent Reasons (included three subfactors, that were labeled Sex is waste, Shame, and Avoidance). Significant differences between genders were found, supporting the previous findings in the field and evolutionary approaches.

Conclusions. Based on the analysis, we suggested the existence of four dominant themes why humans do not have sex around which more specific reasons could be grouped. These specific reasons are not limited and every researcher can add reasons to the taxonomy. It is hoped that the present study will stimulate further cross-cultural investigation of the structure and correlates of reasons why humans not have sex.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1330

SEXUAL AWARENESS AMONG TEENAGERS - THE SRI LANKAN SITUATION

Gonsalkorala Lalith R (The Open University Of Sri Lanka)

Sri Lanka is a developing country steeped in traditional culture and values. It has a multiethnic society as well. Free and open dissemination of sexual knowledge is almost non-existent. Inclusion of sexuality education to the school curriculum is still a matter for the future. However, there is a risk as sexually transmitted diseases and unwanted pregnancies among teenagers are on the increase. Studies conducted in this area in the country are almost non-existent apart from a UNICEF (2004) study. This study is intended to find the level of sexual awareness of Sri Lankan teenagers. The sexual awareness is the dependent variable of the study while age group, gender, location (rural/urban) and ethnicity (Sinhala/Tamil/Muslim) would be independent variables. The sample of teenagers would be selected by using stratified random sampling techniques and is expected to be around 1000. The data collection instruments are questionnaires and interview schedules. The questionnaires would be administered to the full sample while interviews would be conducted for 10% of the sample. There would be mainly quantitative data. Statements in the questionnaire given on a rating scale will generate data for quantitative analysis. Significant testing for weighted

scores of sub groups corresponding to independent variables will be part of data analysis. Data obtained from open ended questions of the questionnaire and also from interviews would shed more light on the existing situation. The interpretations of findings and outcomes of the study would make way for suggestions to be made to improve the situation.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Not yet decided

PO-1331

EXPLORING THE IMPACT OF DOMESTIC VIOLENCE ON WOMEN'S SEXUALITY AND HEALTH IN NIGERIA

Danesi Jafar Abdulkadir (Policy Research Nigeria)

Introduction: On a daily basis women are beaten and «punished» for supposed transgressions, raped and even murdered by members of their family. A large number of women are regularly subjected to physical, sexual and psychological violence in their family. Husbands, partners and fathers are responsible for most of this violence.

Methods: Purposive survey method was used to select married 150 women (identified by their wedding rings) that were administered with the survey questionnaire and those that reported they had suffered from domestic violence were invited for a focus group discussion (FGD) which was organized to bring women that have suffered domestic violence together to discuss how to effectively eradicate it in Nigeria.

Result: It was discovered that 95% of the women had suffered from domestic violence. 72% of those that had suffered from domestic violence did not report to the police and when asked why 68% claimed the police will not take any action, 20% said they earlier reported similar incident to the police and nothing happened.

Conclusion: The criminal justice system in Nigeria fails to offer protection, justice or redress to women who have been subjected to violence in the home. The Nigerian government is yet to provide a protective framework for women seeking escape from family violence, to amend or repeal discriminatory laws, or take action to end discrimination against women. In practice, women are actively discouraged from lifting the veil of silence over violent crimes in the home.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Policy Research Nigeria Baseline/ Project formative survey funds

PO-1332

THE PURPOSE OF GENITAL FLAPS IN URETHRAL RECONSTRUCTION IN SINGLE STAGE METOIDIOPLASTY

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Pandey Sanjay (Kokilaben Institute And Research Center, Mumbai, India)

Introduction: Urethral reconstruction presents the most complex part in female transsexual surgery. We evaluated the role of local vascularized genital flaps (vaginal wall, clitoral and labial skin) in reconstruction of neourethra as a part of metoidioplasty.

Methods: Total of 88 patients underwent metoidioplasty from August 2003 to May 2008. Urethral reconstruction consists of two parts: (i) the flap formed from the anterior vaginal wall is anastomosed with the urethral plate creating bulbar urethra and (ii) reconstruction of distal urethra that includes use of different genital flaps; in 22 cases longitudinal island clitoral skin flap is button-holed ventrally and tubularized (group 1); in 66 cases, buccal mucosa was used for posterior part of neourethra; ventral part of neourethra was created from dorsal island flap in 27 patients (group 2), in remaining 39 patients labia minora flap was used for urethral reconstruction (group 3). Single stage metoidioplasty is done as previously reported.

Results: The mean follow up was 32 months (range 7 – 59 months). All patients reported voiding while standing. Comparing these different types of urethroplasty, better results are achieved in groups with combined buccal mucosa graft and vascularized genital flaps. Success rate ranged from 68% to 90% in described surgical procedures. The best results were achieved in the group 3, where fistula occurred in 3, and stricture in one patient.

Conclusion: Urethral lengthening in female transsexuals underwent metoidioplasty as single stage procedure is simple and safe. Outcome depends on experience in genital surgical anatomy and skills in creation of different flaps.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-1340

SEXUAL BEHAVIORS OF OLD ADULT IN SOUTHERN TAIWAN

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The aim of this study is to investigate the relationship of demographic variables to sexual behaviors, sexual desire, sexual satisfaction of older population in Southern Taiwan. There were 283 individuals over the age of 45, recruited from communities in Southern Taiwan. They were hospital volunteers, non-psychiatric patients, and residents in community, nursing homes and veteran's homes. In the past year, except for masturbation (20.1%), the proportions of general sexual behaviors at least once a month are near 40% for most elderly adults, including touching/hand holding (42.8%), embracing (42.8%), kissing (38.2%), mutual stroking (41.7%) and sexual intercourse (40.3%). Most common sex problems are hypoactive

sexual desire in male and female participants. This study clearly shows age, partner, education level and health status influences sexual activity, these items also have relevance to sexual satisfaction, sexual desire. If sexual satisfaction is classified into binary outcome, then the relative factors of sexual satisfaction have partner, drinking and sexual desire by forward model selection of multiple logistic regression analyses.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1344

SEXUALITY IN DELIVERY

Saotome Tomoko T (Kanagawa Prefectural Shiomidai Hospital)

Deliver baby and breast feeding are women's natural Physiological phenomenon succeed to intercourse. Women's body change as it is, so naturally no place to cut in series of labor. Medical interventions performed to avoid risk of pregnant women, but too much intervention may make women's medical and mental risk. There are two standpoints: medical intervention must be any time appreciated to avoid delivery risk, or medical intervention must be minimized because natural delivery is woman's sexual experience. To interview delivered women in midwifery birth house, and to interview doctors in hospital we revealed they are looking another side of delivery. It is in short: safety vs comfortability=sexually. Most of the doctors don't think comfortability second. But most of the mothers delivered in midwifery birth house think safety is also important, but comfortability cannot dispose. Why two way of thinking compromise with each other? Basically two opposite standpoints are different with sexual recognition on delivery and family function. Family composition is built with intimacy, sexuality, communication, etc. Recently in Japan, circumstances on delivery are worsening because of shortage NICU and obstetrician and midwives. The thought of sexuality of delivery may effect after birth communication between the couple and child care. We must consider happier delivery style contains both safety and sexual satisfaction.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: NONE

PO-1350

SEXUAL EDUCATION

Nadège Kpaina Fiossem

Sexual education is to educate young people on reproductive and sensual related activities. It may also be concerned with expression and discussion, sexual practices, and mutual respect. The liberalization of morals and public health problems, especially AIDS, raised awareness of the importance of sexual health, behaviors and attitudes that allow us to maintain and improve it. The goals are to: education and teaching sexual education to children especially young people, providing upstream work with parents, insert sexual education in the curricula in schools, put an emphasis on sexual education in the family, awareness and encourage young people to live healthier and better.

Methods: Make presentations and debates, produce leaflets, doing group work, role-playing

Results: At least 95% of young people (boys and girls) to realize communication for behavioral change

Conclusion: Young people without access to education in sexual health in general tend to be more vulnerable to exploitation and sexual assault, unwanted pregnancies and Sexually transmitted infections. Young people who have access to education in sexual health will be better able to make informed choices leading to the achievement and maintenance of sexual health throughout life.

Conflict of Interest: getting young people to change their behavior and make decisions in their communities and society

Financial Support/Funding: school health center and university

PO-1351

SEXUAL CONSEIL

Guy Alain Segoroye (Cisjeu)

The advice can save patients and a tease to be on them in their environment they live or their children or young adults. To test the effectiveness of memory, sex protected by medical advice to patients during medical visits. The clinics were randomized to the intervention arms evaluated cohorts of patients selected randomly measured before and after surgery.

Methods: Preventive medical advice supplemented by information providers in writing. Two of them have used a cynical approach gain cadre (positive consequences of sex), two used a loss framework approach (negative consequences of unprotected sex) and two were attention control clinical (drug adherence)

Results: Among participants who had two or more sexual partners in the beginning, the rate was reduced by 52%. Among those who received the loss intervention framework. The rate of follow-up was significantly lower in the loss of arm-frame. Similar results were obtained with the participants in casual partners at the baseline. No effects were observed in participants with a partner or just one of the main partners in the baseline. No significant changes were observed in the arms of earnings.

Conclusion: Brief advice provider focusing on the negative consequences of unprotected sex can reduce HIV transmission behaviours in patients infected with profiles of risk behaviour.

Conflict of Interest: Medical advice, prevention tips, negative consequences

Financial Support/Funding: Center for Documentation and Information on AIDS, and OMS

PO-1353

WOMEN «SURVIVED» TO CHILD SEXUAL ABUSE

Tampelli Anna (Sexological Service, Department Of Psychology, University Of Bologna)

Objectives: The aim of this pilot research is to examine the effect of child sexual abuse on women. The study investigates representations of Self and

psychological, sexual and relationship dynamics, focusing on Self imago, sex and pleasure.

Method and materials: The sample is composed by 50 women with CSA. Voluntary participants were equally distributed between clinical/non-clinical context. Two tests were given: the Adjective Check List by Gough and the Semantic Differential Calculus by Osgood. Each Differential is composed by 16 adjective pairs ranged on a 7 points scale. Results "I am" concept is perceived in a negative way: confused, sweet, full, rough, heavy, hard. "My body is" assumes positive as well as negative features: sweet, hot, full, active, smooth, soft, dry, rounded, weak, dirty, heavy, closed. "Sex is" is described in a negative or ambivalent way: confused, heavy, noisy, wet, angular, hard. The idea of "peasure" is experienced in a positive way. Observing the differentials related to sex and pleasure it is evident how they are completely shifted towards the positive and the negative poles. Results of the ACL, present general traits of insecurity, instinctivity, affiliation want, interpersonal relationships wavering and holding of defensive behaviour.

Conclusions: The results indicate the presence of a censure between body and sex, and desire, where as the formers narrate and represent the traumatic experience, and the latter represents the direction to be followed in order to take back again a path able to reconcile body and desire, self and others.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1355

SEXUAL EDUCATION

Edwige Fleur Kpomako (Recaljes)

Nowdays many thousand of people are suffering from the multiple sexually transmitted deseases among which some are chronicles and incurable. These deseases in way or the other weaken the functioning of genital organs and most of the time lead to the death of the patient. With regard to our them we are going to educate people about the problem which can permit them to struggle and to reduce the rate of sexually transmitted deseases through sensibilization and the vulgarization of knowledges about these deseases in different social sectots so that a satisfactory results can be reached for a discret life of every individual

Method: There are several methods thar can be applied in this domain. The organization of forum and congress by the differents presentation of sketches, theatre etc. permit people to have more knowledge about dangious of sexually transmitted deseace such us: preservation, herelly, abtinance,faithfulness, using condom then the good understaking of the genital organ is also advised.

Results: Thus the more there is a wide communicate camong people about these facts the clearer, they can see how to flee the danger that is represented by those sexually transmitted deseacs. Then, we find it better that young people can serve as spokes persons toward their communicaties. They should go section per section to present sketches related to this issues.

Conclusion: To sum up, sexuality education is a good way which can open eyes of people to take conscious of their sexuality and to etruggle against sexually transmitted deseace.

Conflict of Interest: my research help many people to change theirs ways and to take control of their sexuality

Financial Support/Funding: GETRAD, OMS

PO-1357

HEALTH AND SEXUAL BEHAVIOR OF MENTALLY RETARDED PUPILS – A COMPARATIVE STUDY IN JAPAN AND BRAZIL

Tsutsumi Angela Aparecida (Tohoku University)

Sex has always been a controversial topic. Although sex orientation at school has improved in general, sex orientation for mentally retarded pupils still encounters prejudice and conservatism as the result of several misconceptions about the subject. This research was performed in the form of a survey of opinions about health and sexual behavior in special classes in ordinary public schools for mentally retarded pupils in Tokyo, Japan and Sao Paulo, Brazil. The information was collected through written questionnaires distributed to teachers and parents of pupils of both sexes, between the ages of 7 and 16 years old. Copies of the questionnaires were sent to ordinary schools with special classes located in Tokyo, Japan and in Sao Paulo, Brazil. A total of 552 teachers (235 in Japan and 317 in Brazil) and 826 parents (312 in Japan and 514 in Brazil) answered the questionnaires. This work aims to stimulate an open and broad discussion, as well as to help teachers and parents to improve their knowledge about the subject? The main results would provide a better understanding concern to the cultural differences between Japanese and Brazilian. In addition, it provides data to outline a more specific program in sex orientation for pupils with mental retardation.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1360

UNWANTED EARLY SEXUAL EXPERIENCES AND SEXUAL ADJUSTMENT AMONG FIRST-YEAR UNIVERSITY STUDENTS

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This present study examined the association between unwanted early sexual experiences (UESE) and sexual adjustment among 2,608 Belgian students (men = 1,017; women = 1,587) and 1,081 South African students (men = 335; women = 739) and the severity of the experience in its bothersomeness. Students attending the orientation programmes at a South African and a Belgian university were included in this study. The Early

Sexual Experience Checklist (ESEC) (Miller, Johnson & Johnson, 1991) was used to measure the UESE. Sexual adjustment was measured using the revised and adjusted Sexual adjustment scale, it was derived from the Maudsley Marital Questionnaire (MMQ) (Van Bussel, Enzlin, Ruytjens, Van den Berghe & Verhoeven, 2002). Of the respondents 21% indicated that they had had UESE before their 16th birthday (39.2% South Africans and 13.5% Belgians). Against expectations those without UESE showed significant poorer sexual adjustment. The severity of UESE was also associated with greater bothersomeness by all respondents except for Belgian men at the time of completing the checklist. However, no association was found between severity and bothersomeness at the time of UESE.

Conflict of Interest: None disclosed

Financial Support/Funding: Scholarship from University

PO-1366

WHAM BHAM , “ R.I.P” MA’AM , CRIMES OF PASSION: REVIEW AND CURRENT INDIAN SCENARIO

Dr. Vivek Jain, Practicing Sexologist , BARODA – GUJARAT - INDIA Abstract (Historical Survey)

Introduction: Crime is big business today. Human sexuality too has not been aloof. Crime and Sex have been bedfellows since ages – gory details would make one shiver. Some of the major Sex related crimes over years will be discussed

Approach: With changing times modus operandi too has kept pace , and some of the current sex related crimes make shockingly unthinkable and gruesome reading. A brief classification and Incidence of crimes world over will be shared.

Findings and discussions: A couple of recent cases in the headlines here in India will be analyzed . Maria Susiraj , Aarushi , Hanah Foster are some. Some get solved and others just go on to become file reports with the criminal going scott free. Procedural hassles, cumbersome delays often are the major factors in unsolved crimes in India. Special focus on crimes committed on foreigners Sex indeed can drive one to heights of pleasure and ecstasy and in others to commit some of the most heinous of the crimes

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1373

THE POSSIBLE GOODNESS OF GODLINESS – MINISTERS’ REFLECTIONS ON SEXUAL ABUSE

Rudolfsson Lisa (Department Of Psychology, University Of Gothenburg), Tidefors Inga E (Department Of Psychology, University Of Gothenburg)

Introduction: During times of crises and personal distress, Christian people turn to their ministers and congregations for support, comfort, and help in understanding what has happened to them. Thus, Christian congregations may function as an important actor in caring for victims of sexual

abuse. The aim of this study was partly to investigate the readiness within the Church of Sweden to care for victims of sexual abuse, partly to identify needs for future work with these questions.

Method: Questionnaire data was collected from ministers working in the Church of Sweden. Thereafter, some aspects were studied further using focus group interviews with ministers.

Results: A vast majority of the respondents had met victims of sexual abuse. They reported an interest of learning more about how to disclose sexual abuse and how to care for the victims. There was a perceived lack of forums for discussing sexual abuse and lack of central directives and guidance. The vow of silence was perceived as restraining ministers from reporting to local authorities when realizing that a minor is being sexually abused.

Conclusion: Due to the serious consequences of sexual abuse, the ministers' authoritative position, the professional secrecy, and the lack of central directives these questions need to be further studied. Cooperation between professions must be encouraged and an accepting attitude towards engaging in discussions about sexual abuse in the Church of Sweden needs to be further promoted.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1374

RELIGION AND SEXUALITY DURING TRANSITION: A LONGITUDINAL STUDY OF CROATIAN COLLEGE STUDENTS AND SEXUAL RISKS, 1998-2008.

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Introduction and objectives: Personal importance and political influence of religion increased substantially during the post-communist transition in Croatia. This paper examines the impact of religiosity on sexual risk taking among young Croatians in the period 1998-2008.

Methods: The analysis is based on survey data drawn from a longitudinal study carried out in 1998, 2003, and 2008 on probability samples of freshmen students from the University of Zagreb. A self-administered questionnaire contained questions on sexual literacy, sexual behaviors, and sex-related attitudes.

Results: Students scoring high in religiosity had less favorable attitudes towards condoms and were less sexually literate than those who scored lower. Religiosity was furthermore associated with a slight but significant, postponement of sexual debut for both women and men. Two explanations were

proposed for the observed lack of significant association between religiosity and condom use. The first is the specific nature of religious identification among young people in Croatia. As recent studies suggested, religiosity is more often a confirmation of young people's ethno-national identity than a matter of faith and moral guidance. The second explanation emphasizes the influence of sexual permissiveness discourse, promoted in popular media, on young people's framing and understanding of sexuality.

Conclusion: Considering that the observed increase in the proportion of sexually active students during the period between 1998 and 2008 was not matched by a parallel increase in consistent condom use, the introduction of a comprehensive school-based sex education seems essential for addressing this heightened vulnerability to HIV and STIs among Croatian youth.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: This study was part of the research project Behavioral HIV Surveillance funded by the Croatian Ministry of Science, Education, and Sports.

PO-1379

ATTITUDE AND KNOWLEDGE ON SEXUALITY EDUCATION AMONG PARENTS OF TEENAGERS IN PORT-HARCOURT CITY OF NIGER-DELTA REGION OF NIGERIA

Inyang Mfrekemfon P. (University Of Port-Harcourt), Robinson-Bassey Grace C. (University Of Port - Harcourt)

Introduction and Objectives: Studies have shown evidence of insufficient provision of sexuality education to teenagers by parents. Parents tend to depend on teachers for this responsibility. Most teachers unfortunately lack adequate knowledge for effective sexuality education. Most teachers also think that it is the sole responsibility of parents. Most studies known to us focus only on school-based sexuality education. Not much work has been done in the area of parent-based sexuality education. Incidentally the parents are those that should be looked up to as primary sexuality educators. It is believed that parents will handle the sexuality education of their children more passionately than school teachers. This could only be possible through a good knowledge base and positive attitude. Methods A descriptive survey with thirty (30) questions reflecting the knowledge and attitude of parents towards sexuality education. One thousand parents of teenagers constituted the sample for the study. Pre-tested self administered structured questionnaire was used as instrument for data collection. Results Parents exhibited poor perception of sexuality education and their responsibility in educating their children. Those that demonstrated knowledge and a positive attitude feel it is the responsibility of teachers at school.

Conclusion: Most parents lack adequate knowledge of sexuality education. Those that had knowledge feel they could not do it. They feel it is the teachers' responsibility. Therefore, there is need to intimate the parents on sexuality education and its applications to their children. The education should also aim at making parents realize, they are the primary sexuality educators.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1381

FISTULAS; CONSEQUENCES OF SEXUAL VIOLENCE IN THE DEMOCRATIC REPUBLIC OF CONGO.

Jerome Kume Isoh (Cohecf Foundation.)

Introduction and objectives: To determine the magnitude of traumatic gynecologic fistulas caused by sexual violence in the Democratic Republic of Congo.

Methods: A retrospective analysis of hospital records from 604 consecutive patients who received treatment for gynecologic fistulas at Panzi Hospital between November 2005 and November 2007.

Results: Of the 604 patients, 24 (4%) reported that their fistulas had been caused by sexual violence; of these, 5 (0.8%) had developed fistulas as a direct result of forced penetration with foreign objects and/or gang rapes. Of the remaining patients, 6 had a fistula before they were raped, 9 developed iatrogenic fistulas following inappropriate instrumentation to manage rape-induced spontaneous abortion or stillbirth, or after abdominal hysterectomy, and 4 developed fistulas after prolonged and obstructed labor.

Conclusion: Traumatic fistulas are rare compared to obstetric fistulas. Fistulas indirectly related to sexual violence are likely to be more common than those directly related. All fistulas resulting from sexual violence, whether direct or indirect, should be considered traumatic and special care should be given to these women.

Conflict of Interest:

Financial Support/Funding: FOUNDATION.

PO-1386

FAMILY PLANING BARRIERS IN MARGINAL CONTEXTS IN DISTRITO FEDERAL (MEXICO): VISION OF THE HEALTH SERVICES PROVIDERS

Agudlo Marcela M (El Colegio De México)

The objective of this study is to approach the barriers in family planning service providing at the marginal zones of Tlalpan and Iztapalapa (México city) from the perspective of health providers. The theoretical fundamentals is based on conceptual frames around some key subjects as: health unsatisfied needs, social inequality, marginality and poverty, attention barriers and the genre approach. The methodology consists on the qualitative exploration through focal groups with private and public health services providers, as well as the complementary quality of the quantitative tools obtained at the Encuesta sobre las Instituciones en Planificación Familiar en México (Eninplaf) of 1996. It was found that among the main obstacles for access to family planning we have disinformation, culture, people's beliefs, inadequate training of health professionals in the related areas, bad inter-institutional coordination, lack of infrastructure and resources and shortage of methods of contraception. From their vision, teenagers and

males are the ones who have the most needs in family planning and they manifest that there's a growing demand for sexual health services from older adults, especially men. Finally, it was established that the barriers perceived by the service providers are essentially the ones that come from the population and therefore it is hard for them to recognize the obstacles that derive from their personal and professional condition.

Conflict of Interest: None disclosed

Financial Support/Funding: El Colegio de México and El Colegio de la Frontera Norte

PO-1389

UNCONSUMMATED MARRIAGES (U.M.): A DIFFERENT CLINICAL ENTITY

Gindin León R., Rodriguez Floccari Elizabeth, , Fridman Cristina T.

Introduction: We bring our experience in the treatment of U.M. We postulate that it is an independent clinical entity and that it should be differentiated from recognized individual causes such as vaginismus, phobias or male sexual dysfunctions. For an appropriate treatment, it is necessary to take U.M. as a different clinical entity from others, and it also takes a special way to tackle it.

Method: In the past 20 years, aprox. 420 couples with UM sought treatment in Buenos Aires. The authors propose that UM should be considered a new clinical entity, different from the traditional sexual dysfunctions. The majority of the cases corresponded to female dysfunctions. One of our findings has to do with developing an intensive commitment between the medical team and the patients, in order to achieve effective actions. We make reference to a commitment of participation, to the whole medical team always attending sessions, and to a pledge to pay only if therapy succeeds.

Results: The outcome was a success (97%) of favorable results with coitus consummation with a new intensive methodology of approach. We make long term follow up. The advantages of this interdisciplinary approach are the brevity of the treatment and a lack of desertions.

Conclusions: UM is an independent clinical entity and for its proper treatment it should be separated from the etiology of the case We postulate that the impossibility of achieving penile vaginal intromission during a long period, arises a new problem that afflicts the couple as a totality.

Conflict of Interest: None disclosed

Financial Support/Funding: No financial funding

PO-1391

SOULD OLD VIRUS INFECTIONS JUSTIFY BREAST CANCER?

Bazarrá-Fernández Antonio (La Coruna University Hospital Trust)

Background: Breasts are very important constituent of a whole possession of the structural and functional traits of sex. Several causes for breast cancer have been thought. Steroid hormones have been thought to be probably link to breast cancer. It can not be seriously thought oestrogens and gesta-

gens were made by the nature for producing woman breast cancer. So, we have to look for the ethiology of this process. Objective: Deeping into aetiology of breast cancer.

Material and Method: We have performed a bibliography review on a worldwide basis and our experience.

Results: Lifestyle during adolescence played a role where these high-risk women developed breast cancer. People who inherits BRCA mutations is in risk too. The likelihood of a hybrid virus, resulting from recombination between endogenous and exogenous viruses or combination viral with genome is proposed. Several viruses are known to cause cancer and that can explain different sites of cancer. HHMTV (human homologue of mouse mammary tumour virus), a form of MMTV (mouse mammary tumour virus), bovine leukemia virus (BLV), are involved with breast cancer. Studies have also found cervical cancer-related HPV in breast cancer cells. Studies suggest a link between EBV and breast cancer. and could be sexually transmitted.

Conclusions: The possibility of an exogenous virus as the potential etiological agent of cancers is known. At younger ages, between childhood and a woman's first pregnancy, breast cells are more susceptible to damage from cancer-causing agents, in this moment act the virus becoming silent in the genome, until later.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1392

UTERINE CERVIX CANCER AND STATE OF THE ART SEXUALITY.

Bazarra-Fernandez Antonio

Introduction and Method: Long-term use of oral contraceptives could be a cofactor that increases risk of cervical carcinoma by up to four-fold in women who are positive for cervical HPV DNA. Up-to-date review .

Findings and discussion: Female sexuality overall is probably more complex than male sexuality and so it happen with genital human papillomavirus (HPV) infection. This infection is the most common sexually transmitted infection among sexually active couples. Spontaneous clearance of HPV infection occurs in most cases, but chronic infection with high risk genotypes is associated with the development of cervical cancer. Vaccination among females aged 9-26 years with composed of VLPs of HPV types 16, 18, 6 and 11, and a bivalent HPV vaccine for older women is recommended. Therapeutic vaccines are being developed to protect HPV-positive persons against tumor development. But there are data demonstrating an association between cyclooxygenase-2 (COX-2) activity and development of cervical cancer confirmed by studies in vivo and in vitro. So, the question is if cyclooxygenase-2 inhibitors will close the state of the art approach on prophylactic uterine cervix cancer vaccines or therapeutic vaccines, which is the track to go at present without risking for cardiovascular events?

Recommendations: In the absence of worldwide information about HPV status, extra effort should be made to include long-term users of oral contraceptives in cervical screening programmes. Sexual intercourse must not

be considered only in regards to contraception but in a global approach including all along information about HPV status and other STD.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-1400

STRESS COPING STYLES THAT RAISE GENDER IDENTITY AMONG THE TRANSGENDERED IN JAPAN

Sasaki Shoko

Objectives: The purpose of this study was to examine which stress coping styles influence gender identity among the transgendered. Methods Participants were 245 female to males (FTMs) (average age: 28.2±7.2) and 134 male to females (MTFs) (average age: 38.1±10.8). All of them had been diagnosed with GID and were out-patient. As for a dependent variable, "Gender Identity Scale" (Sasaki & Ozaki, 2007) was used. As for an independent variable, TAC-24 (Tri-Axial Coping Scale; Kamimura et al., 1995) was used. Participants also responded to whether hormone therapy and SRS have done.

Results: To examine whether effective coping styles differ depending on having physical treatments, multiple regression analysis was conducted, with three independent variables: "physical treatment", "stress coping style", and "physical treatment×stress coping style". The results showed that "gathering information (FTM)", "distracting (FTM)", and "catalysis (MTF)" had significant interaction with hormone therapy although no significant interaction with SRS. Next, to reveal which stress coping styles influence gender identity regardless of having physical treatments, multiple regression analysis was conducted while the interacted coping styles were eliminated from the analysis. The results were as follows; MTF: positive interpretation (+), catalysis (+), giving up (-), buck-passing (-), FTM: positive interpretation (+), planning (+), giving up (-/ only SRS), buck-passing (-).

Conclusion: The results suggest that an effective coping style for the transgendered who aim to raise their gender identity may be catalysis for MTF and planning for FTM. The results also indicate that catalysis may reduce gender identity of FTM not having hormone therapy.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: The Japanese Association for Sex Education (JASE)

PO-1401

FACILITATING WOMEN ACCESS TO HIV AND AIDS RESOURCES

Magoba Proscovia Namakula (Global Coalition Of Women Agianst Aids In Uganda)

In the wake of increasing global funding, there is realisation that many women and girls community based groups have not been able to access abig chunk of the funds. The Global Coalition of Women Against AIDS In Uganda was set up to act as a catalyst for HIV positive womens groups, women and girls advocacy and human rights groups to come together form

a strong coalition and voice to advocate, access and utilise resources. The GCOWAU has trained coalition member organisations to write tailor made proposals for funding focused on HIV prevention. The coalition is only a year old 7 community based groups have been identified as successful applicants for civil Society fund, ISSIS WICCE grant for women in post conflict areas and also for the Collaborative Fund for Africa and one member has been able to get a job through the regular communication. Members of the coalitions are strong on the inclusion of Sexual gender based violence interventions in the peace recovery programme for conflict areas and on development of the National Priority Action Plan for the National HIV Response Community groups can access HIV prevention funding if they are supported to develop proposals Funds for Women and HIV issues exist in the country, women's groups require constant information updates to be able to access and utilise existing funds Groups require less resources to accomplish or scale-up on philanthropic tendencies that often go unnoticed. Documentation of community work helps motivate community groups, also be lessons to other resource limited settings

Conflict of Interest: None disclosed

Financial Support/Funding: OSISA/OSIEIA, UNAIDS, GTZ/RHU

PO-1404

HIV/AIDS PREVENTION AMONG AFRICAN AMERICAN FEMALES: EXPANDING NEGOTIATION AROUND INTIMACY PAST THE BED ROOM

Banks Kieva A (University Of Maryland, School Of Social Work)

Introduction/Methods - Studies on HIV/AIDS prevention indicate that while educating communities about consistent condom use, has been seen as one of the most effective methods of HIV risk reduction, men are more likely to refuse to wear condoms. 1-6 . The purpose of this study was to explore the influence of partner interactions on the decision to wear condoms. Data was collected from 10 focus groups of African American females to examine this issue.

Findings /discussion - Close to a third of the women in this study indicated that either their partner would react badly to the idea that they should use condoms (32.8 percent) or that using a condom meant they did not trust each other (36.1 percent). Focus group data indicated that a portion of these women reported that the discussion of condom use with their partners aroused negative feelings between them and their partner. (he "thinks you're cheating" (9 comments), He "thinks she got something" (12 comments). Findings also indicate that successful condom use may require discussions before sex ever takes place (All that is needed is to "put it on him" (10 comments), "just tell him" (4 comments), "tell him in the beginning of the relationship" or "don't wait until you get in a relationship for six months and then use condoms")

Recommendations -Prevention programs should begin by addressing issues of partner relationships and influencing ramifications, (e.g., the sensations of sex, communication, gender and power, control, self efficacy and trust).

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1405

FIRST SEXUAL INTERCOURSE: A RESEARCH WORK CARRIED OUT WITH YOUNG PEOPLE FROM 13 TO 17 YEARS OLD, BELONGING TO POPULAR SECTOR AND MIDDLE CLASS, BUENOS AIRES, ARGENTINA.

Goldstein Beatriz (Department Of Education, University Of Buenos Aires)

Introduction and objectives: This work deals is a research/intervention one and it consists in searching and getting to know the age, perceptions, representations, attitudes and information level of two different social actors regarding their first sexual intercourse: (i) people that work informally classifying and recollecting urban "garbage" ("cartoneros"), and (ii) middle class students attending school.

Method: We used an oral interview-survey with closed and open questions which allowed a qualitative and a quantitative analysis. We asked ourselves: ¿did young people had their first sexual intercourse at the age they wanted to? ¿If not, why did they did it? ¿At what ages do girls and boys belonging to two different social sectors start sexual intercourse? ¿Did some of them were forced? ¿Did they were pushed to it without their will? ¿Did it involve power relationships with the other person? ¿Which age had the other person during that first intercourse? ¿Did he/she had any parenthood? ¿Did they protect themselves in their first sexual intercourses? If they say they do, ¿which contraceptive methods did they use? ¿Do they use them regularly?

Results: We present the obtained data.

Conclusions: This work offers information related to sexual education young people should get regarding sexual intercourse and how to protect themselves of pregnancy and ITS and Aids at Buenos Aires, Argentina, where sexual education is rare at schools. We intend to inform the lack of information young people still have at Argentina, as well as their risky sexual behaviour. We produced teaching and diffusion materials within this research/intervention

Conflict of Interest: None disclosed

Financial Support/Funding: UBACYT funding (Secretary of Research, University of Buenos Aires, Argentina)

PO-1407

CONDUCTING SEXUALITY RESEARCH ONLINE WITH HARD-TO-REACH POPULATIONS.

Iantaffi Alessandra (University Of Minnesota), Grey Jeremy (University Of Minnesota), Horvath Keith J (University Of Minnesota), Bocking Walter (University Of Minnesota)

Introduction and objectives: The Internet is an ideal social space for a range of populations who may experience stigma and geographic isolation and therefore seek anonymity and confidentiality in their interactions. For these reasons, the Internet has become a rich source of research opportunities, especially when trying to reach individuals who would be reluctant to

engage face-to-face. One such group is non-trans men who have sex with transgender individuals who are one of the targeted groups in our current NIH-funded study. The aim of this presentation is to provide an overview of issues facing researchers when conducting an Internet-based study focusing on sexuality.

Methods: Two US based projects on HIV prevention and transgender people, funded by the NIH, relied on online methods to both recruit participants and elicit data. A variety of online methods were used for this purpose: an extensive survey with transgender individuals, one-to-one interviews, an ethnographic study of chat rooms, focus groups, and bulletin boards. An online intervention targeting transgender people in relation to HIV prevention will also be created.

Results: Several issues related to protection of human subjects arose, such as adapting established protocols to an online environment. Other challenges encountered included scheduling participants on a national level; finding suitable websites for recruitment and identifying software platforms to maintain privacy and anonymity.

Conclusion: The Internet offers a wealth of opportunities, as well as novel challenges to sexology researchers. This paper seeks to highlight some of those to stimulate further discussion and explorations in this field.

Conflict of Interest: None disclosed

Financial Support/Funding: National Institutes of Health (NIH)

PO-1408

PREDICTORS OF PREMARITAL HETEROSEXUAL RELATIONSHIPS AND SEXUAL INTIMACY AMONG ELITE YOUNG FEMALES IN TEHRAN, A SEXUAL HEALTH APPROACH

Khalaj Abadi Farahani Farideh (Shahid Beheshti University), Cleland John Goodman (London School Of Hygiene And Tropical Medicine)

Introduction and objectives: In Iran, premarital sex is socially, culturally, religiously and legally forbidden, hence no formal education exists on sexual health for unmarried people. Hence, involvement in premarital sex is likely associated with considerable negative health outcomes. The objective of this research is to determine predictors of heterosexual relationships, intimacy and sex among female college students in Tehran.

Method: 1743 female college students from four multidisciplinary universities were enrolled into the study using two stage random cluster sampling and completed anonymous self-administered questionnaires. About 1400 were unmarried with a mean age of 21.4 years old. Bivariate and multivariate analysis was employed.

Results: A little more than half of unmarried females reported premarital heterosexual friendships, while less than one-fifth of those with experience of premarital heterosexual friendships reported involvement in sexual intercourse. Parents' liberal attitudes (OR=4.11, 95% CI: 2.64-6.39), low self-efficacy (OR=3.44, 95% CI: 2.12-4.89), peer liberal norms (OR=3.43, 95% CI: 2.17-5.43), age (OR=3.18, 95% CI: 1.83-5.54), mother's academic education (OR=2.38, 95% CI: 1.29-4.04), low religiosity (OR= 2.32, 95% CI: 1.41-3.84) and studying in private university (OR=1.62, 95% CI: 1.06-2.47) were im-

portant predictors of premarital friendships with the opposite sex. While important predictors of premarital penetrative sex were: low self efficacy (OR=10.86, 95% CI: 4.70-25.08), older age (OR=5.95, 95% CI: 1.90-18.60), liberal peer norms on virginity (OR=4.90, 95% CI: 1.90-12.68), parent's liberal attitude (OR=4.29, 95% CI: 1.63-11.28), respectively.

Conclusion: Successful interventional programs for encouraging Iranian youth to abstain premarital sex and practice of safe sex needs to take into account determinants of such behaviours.

Conflict of Interest: None disclosed

Financial Support/Funding: The wellcome Trust

PO-1409

BENEFITS AND CHALLENGES OF ONLINE COLLEGE/UNIVERSITY COURSES IN HUMAN SEXUALITY FROM INSTRUCTOR AND STUDENT PERSPECTIVES

De Villers Linda (Pepperdine University)

Introduction: Online Distance Education has exponentially increased in the past decade and has led to the increased availability of human sexuality courses. Experiential & Practice Samples Numerous examples based on nearly a decade of personal experience teaching online, and a professional literature review are included. A 2009 survey of others teaching online human sexuality courses also illuminates the special advantages and challenges, for both students and professors, of this format for sexuality courses.

Action: The new online survey provides additional examples of experiences teaching online human sexuality courses.

Outcome: For both students and professors, this medium provides flexibility for working professionals and others to complete their assignments without the restrictions posed by face-to-face classes. Students also love being able to talk about sensitive sexual topics with a greater sense of privacy than they would have in a face-to-face context. The online survey of other sexuality professors will be completed February 28 to further reveal benefits and challenges.

Discussion and recommendations: Special considerations are needed when offering human sexuality classes online, from confidentiality issues to other needs to protect the psychological welfare of students. Survey results summarize the most common concerns, as well as ways to manage these concerns. Additionally, the presentation reviews basic challenges posed by any online teaching format and how to minimize them. Strategies for organizing online human sexuality classes, creating useful assignments, and other ideas for maximizing their potential benefits are offered.

References: A professional reference list relating to college/university level online teaching is included.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1410

EFFICACY AND SAFETY OF HORMONAL THERAPY WITH LONG-ACTING TESTOSTERONE INJECTION

Seilhanov Ilyas (Multi-Discipline Medical Center «Private Clinic Almaty»), Kasymaliyeva Rita (Multi-Discipline Medical Center «Private Clinic Almaty»), , Seilhanov Ilyas (Multi-Discipline Medical Center «Private Clinic Almaty»)

Introduction: significant progress in understanding of androgens role in erectile dysfunction was achieved in last few years. Symptoms of testosterone deficiency are non-specific, and often not well recognized. Excessive weight, abdominal obesity and hypertension are often in hypogonadism, and increase cardio-vascular and diabetes risk. This makes innovative testosterone therapy of much practical value. Objectives: To assess efficacy and safety of testosterone undecanoate (Nebido) in patients with testosterone deficiency.

Methods: Nebido treatment in approved dosage, 4 times per year, was provided in 38 patients with erectile dysfunction and testosterone deficiency. Patients age was 36-70 years (mean 53.3 + 6.9); serum testosterone 6-18 nmol/l, all patients were not previously treated with testosterone. Hypertension of I-II grade was in 52.6% of patients, abdominal obesity in 63.1% (mean waist circumference 116-152 cm), carbohydrate metabolism disturbances in 31.5%. Testosterone insufficiency symptoms included decreased sexual desire, diminished ejaculate volume, low orgasm intensity, various impairments of sexual function, decreased work efficiency, fatigue, depressive moods.

Results: testosterone levels increased at 3-5 days after injection, within physiological range. Patients reported increased sexual desire, satisfaction, orgasm intensity, erection improvement, positive changes of general well-being and mood, increased muscle mass.

Conclusion: Nebido provides good patient compliance, and maintains physiological testosterone levels important for effective and safe treatment. Nebido therapy has positive influence in sexual function impairment. Nebido has preventive influence in obesity, cardio-vascular complications, osteoporosis, diabetes mellitus and metabolic syndrome. All patients are under follow-up.

Conflict of Interest: None disclosed

Financial Support/Funding: own

PO-1411

SEXUAL FUNCTION AFTER BREAST CANCER

Kiriakopoulos Nikos (Ippocraton General Hospital), Gavala Caterina (Ippocraton General Hospital), , Aggos Ioannis (Ippocraton General Hospital), Lambrinos Kiriakos (Ippocraton General Hospital), Kakatsios Stefanos (Ippocraton General Hospital), Kotsidas Ioannis (Ippocraton General Hospital)

Objective: Breast cancer affects a woman's body image and feelings of sexuality. Investigation of sexual quality of life. A qualitative inquiry was undertaken using in-depth interviews.

Material and methods: Sexual quality of life (QOL) was examined through a questionnaire on 24 women between 36 and 45 years of age who had had breast cancer diagnosed and surgically and chemotherapeutically treated in the last 24 months.

Results: Sixty percent of the sample indicated disruption in their sexual quality of life. Worse physical quality of life, chemotherapy, and depressive symptoms at the time of diagnosis were related to bad sexual QOL during treatment. Women that underwent chemotherapy showed worse sexual QOL during treatment.

Conclusions: Sexual QOL has a multidimensional aspect. Women that are younger, with advanced breast cancer and received chemotherapy have high rates of psychiatric and psychological disturbance. Increasing feelings of sexual attractiveness even after cancer treatment may help sexual behavior. More research on the specific medical and psychosocial needs of survivors is needed in order to be able to improve sexual QOL.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1413

SEXUAL FUNCTION IN MENOPAUSAL WOMEN UNDER HORMONE REPLACEMENT THERAPY (HRT)

Kiriakopoulos Nikos (Ippocraton General Hospital), Gavala Caterina (Ippocraton General Hospital), , Lambrinos Kiriakos (Ippocraton General Hospital), Kakatsios Stefanos (Ippocraton General Hospital), Aggos Ioannis (Ippocraton General Hospital), Kotsidas Ioannis (Ippocraton General Hospital)

Objective: sexual dysfunction is a highly prevalent, age-related and progressive problem. The various physiological and psychological changes that occur with menopause can have a significant impact on sexual function. A study in order to evaluate the effects of hormone replacement therapy (HRT) on sexuality was held.

Material and methods: Sixty-seven women with mean age 52+/-4 were enrolled in our study. Thirty-two of them underwent HRT. They all answered a questionnaire dealing both the physiological and psychological factors, to evaluate sexual functioning with or without, before and after HRT therapy.

Results: Six patients had had a hysterectomy and all had a stable couple. A significantly better sexuality was observed in HRT users. Women on HRT obtained a higher score in all of the test domains, especially in lubrication, orgasm and sexual satisfaction.

Conclusions: Female sexuality decreases with aging. HRT users have a better sexual function than non users. Menopausal women under estrogen replacement therapy, had significant relief of their symptoms of sexual dysfunction.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1420

A GYNAECOLOGICAL OUTPATIENT CLINIC FOR LESBIAN AND BISEXUAL WOMEN

Parmhed Sule I (Sesam-Sos, Sodersjukhuset, Stockholm)

Sule Parmhed, MD, Dpt of dermatology & venereology In 1998 Stockholm City Council decided to promote a gynaecological clinic especially designed to meet the needs of homo- and bisexual women. In 2002 it was relocated to SesamSöS, the Unit of Sexual Health at Södersjukhuset, a part of the dermato-venereological clinic in collaboration with the OB-Gyn dpt. This clinic also see women referred from the STI-clinic and the Youth clinics for a second opinion or further investigations. Women who have sex with women do not need referrals. They make their appointment by calling a special phone number. It is then clear to the attending doctor that they want to visit the clinic for lesbian and bisexual women. In 2007 the most frequent reason for a visit was fertility counselling, 37%. Then to have a gynaecological exam, including PAPsmear: 15%. The remaining with different gynaecological diagnoses, such as bacterial vaginosis, dysmenorrhoea, polycystic ovarian syndrome, candidosis, condylomatas, dysplasia etcetera. **Conclusions:** There is the same panorama of disease among lesbians as with heterosexual women, excluding the fact that they have less unwanted pregnancies, and less STIs. - Lesbians and bisexuals have suffered from invisibility in the contact with health services, and still many are hesitating to make appointments for a gynaecological exam. "The difference might be within me. I know that they know. I can be the person who I am: i e I'm not assumed to be heterosexual. And that's the big difference to me"

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1422

KNOWLEDGE-BASED HIV PREVENTION TARGETING MEN WHO HAVE SEX WITH MEN

Tikkanen Ronny Heikki

Introduction and objective: There is a need for effective HIV prevention interventions targeting sexual risk taking in specific subgroups of men who have sex with men (MSM). The objective is to show that there are effective methods in reducing sexual risk taking in these subgroups.

Methods: The presentation is based on the result from two studies financed by the Swedish National Board of Health and Welfare. The first study is a Swedish online questionnaire with 2564 MSM-respondents (2006). The questionnaire focuses on sexual risk taking and HIV preventive needs. The second study is a literature review of international research focusing on effective prevention intervention targeting MSM (2007).

Results: The result from the questionnaire shows that young MSM (under 25) and sexually adventurous men (i.e. men who have sexual experiences that challenges the prevailing sexual norms) are two groups in need of a certain preventive attention. The result from the literature review shows that HIV prevention interventions can be effective if including group-level

interventions and/or interventions that are theory-based. Moreover, peer-education and popular opinion leaders (POL) are effective methods to be used in reaching both young MSM and sexually adventurous men.

Conclusion: In order to combat the HIV epidemic in MSM we need to use effective HIV preventive interventions in specific subgroups where the level of sexual risk taking is high.

Conflict of Interest: None disclosed

Financial Support/Funding: the Swedish National Board of Health and Welfare (Socialstyrelsen)

PO-1425

THE GENDER DIFFERENTIAL EFFECT OF PORNOGRAPHIC MEDIA ON ADOLESCENT SEXUAL BEHAVIOUR IN NIGERIA

Effa-Heap Gladys A (University Of Hertfordshire)

Introduction and objectives: This study examines the effect of pornographic films on the sexual behaviour of adolescents with a specific analysis on the difference between genders.

Methods: A two part questionnaire method was used: the first on demographic data and the second was a Likert-type five point scale containing statements relating to the media and its effects on adolescents sexual behaviour. 200 adolescents were randomly sampled from two secondary schools in Ibadan, Nigeria. The data was analysed using percentages, Independent T-Test, Chi square, and analysis of variance.

Results: 60% of respondents claimed that their parents never discussed sex-related matters with them. 55.5% of the sample confirmed that they had been exposed to sex-related article or programme through the media. Of that total, 54.55% were exposed between the ages of 8 to 16. 25% of the respondents were sexually active, and of this number, 27% had their first intercourse before the age of 16. Other findings showed no significant relationship between socioeconomic class and utilization of pornographic films. More boys than girls were influenced by pornographic films. Conclusions The teenage stage in life marks a period of increased curiosity and experimentation, and the ever-increasing availability of pornographic materials encourages teenagers to be sexually active. Involvement in unprotected sex, in turn, results in the increased number of teenage pregnancies and sexually transmitted diseases. To rectify matters, the Nigerian Government should enforce relevant legislation, and introduce sex education and life skills curriculum into school timetables to increase awareness on sexual issues.

Conflict of Interest: None disclosed

Financial Support/Funding: Self-funded

PO-1430

SEX AND VIOLENCE IN THE NOVELS OF CHIMAMANDA NGOZI ADICHIE

Adejayan Adewole (University Of Ibadan, Ibadan, Nigeria)

This essay owes its title to the presence and interrelationship of the themes of sex and violence in the novels of Chimamanda Ngozi Adichie. Any discussion of sex and violence is a discussion of identity, relationship and abuse. In Africa, emphasis is placed on the sex of a child from birth. The male child is perceived a continuation of the family heritage, while the female child is considered an addition to her husband's family. Thus in tandem with this perception, the training and attendant expectations of a male differs greatly from that of a female ;the male child is taught to be independent, assertive, tough, competitive ,domineering and aggressive while the female child is taught to be submissive, affectionate, dependent, cheerful ,compassionate ,loyal and sympathetic. The above mentioned traits inform the identities of members of both sex and the tune of any relationship and ,subsequent abuse between them. The traits mentioned above ,and the political disunity caused by colonization has informed the violence that has come to characterize Africa today. The exploration of the themes of violence in Chimamanda Ngozi Adichie's novels, will be done via the application of literary theories of feminism ,post colonialism and multiculturalism.

Conflict of Interest: sex and identity/political disunity.

Financial Support/Funding: Self

PO-1434

WHAT HELPS SEXUAL AROUSAL FOR 510 HETEROSEXUAL MEN

Brendler Jaqueline

Introduction/Objective: Scientific literature on the issue is poor and research aims to find out what helps the arousal of Brazilian men.

Methods: At the www.terapiadosexo.med.br, they spontaneously chose or wrote about 10 behaviors/factors that help them and then pointed out the 5 most important ones.

Results: Average age was 31 years and 6 months. 71.66% of them were white. 38.87% had college education. 85% worked, 45.23% studied. 48.19% were single with an active sex life and 32.32% were married. The 10 most voted items were, for 12.38% of respondents "Her groaning", for 12.27%, "Watching her pleasure and arousal", for 10.58%, "Her body", for 10.54 % "Varying positions", for 9.99 % "Her keeping fondling during intercourse", for 9.22 % "Having oral sex before intercourse", for 9.18 % "Her saying 'certain words'", for 8.89 % "Her wearing erotic our sexy underwear", for 8.48% "Her smell", for 8.41% "Concentrating on intercourse. Getting involved with intercourse". The 5 most important behaviors were, for 19.41%, "Her groaning", for 17.61%, "Varying positions", for 17.04% "Watching her pleasure and arousal", for 16.38% "Her body". 14.77% chose "Having oral sex before intercourse" and "Her keeping fondling during intercourse".

Conclusions: What helps those 510 Brazilian men to get sexually aroused is mostly factors related to the woman and her erotic behavior.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1435

CHOICES , EXPECTATIONS, AND ATTITUDES IN SEX INITIATION OF 700 BRAZILIAN WOMEN

Brendler Jaqueline (Was (Advisory Committee), Flases (Ethical Committee), Sbrash (Advisory Committee) And Www.Terapiadosexo.Med.Br)

Introduction/Objectives: Sex initiation is surrounded by dreams, myths, and sex-related beliefs. That has driven the research on the variables involved in sex initiation.

Methods: At the www.terapiadosexo.med.br, women spontaneously answered about emotional factors and attitudes in their sex initiation.

Results: Average age was 23 years and 2 months and average age for sex initiation was 17 years and 9 months. 72.68 of them were white. 63.38% worked and 59.47% studied. 61.87% of them were single, with an active sex life, 24.17% were married. 29.09% had college education. For 67.28%, the men in initiation were their boyfriends, for 15.14%, boy with whom they had casual encounters. 50.72% waited months to have sex. For 30.6%, initiation was at his house, for 21.37%, at hers. For 36.45% of them the first time was "Below expectations", for 24.2% it was "According to expectations" and "Had no expectations". For 15,12%, it was "Above expectations". 81.94% of partners "Knew they were virgins". 38.61% say they "Felt pain and bled", 26.65% "Felt pain", 24.06% felt "Some discomfort, but it was not pain". 67.71% used contraception.

Conclusions: Most of those 700 women had sexual initiation with an affective bond and waited months to have sex. Preferred places were we his or her home. Most of them felt pain associated or not to bleeding and used contraception. For 39% of them, what happens fulfilled positive expectation.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1436

AN ANALYSIS OF ADOLESCENT'S CONDOM-USING THROUGH TRANS THEORETICAL MODEL

Lin Yen-Chin (Graduate School Of Human Sexuality, Shu-Te University, Taiwan R.O.C), Chu Yuan-Hsiang (Graduate School Of Human Sexuality, Shu-Te University, Taiwan R.O.C)

Objectives: The purpose of the research is to study the condom using among the adolescents in Taiwan who have had sexual intercourse and analysis it based on the trans-theoretical model. **Methods:**The subjects were students from high schools, colleges and universities of technology in Taiwan totally 10,200 cases. Out of them there were 9328 valid cases. Among them 1132 cases s who have had sexual intercourse were selected as the subjects to analysis.

Results: 12.14% of adolescents have had sex experience in Taiwan. The reason for most adolescents to using condom is contraception. By the concepts of stage-changing of the trans-theoretical model, adolescents's condom-using 24.82% in the pre-contemplation stage, 15.11% in contemplation, 11.22% in preparation, 22.53% in action and 26.33% in maintenance. Only less than 50% are using condoms in practice. According to this research, the decisional balance will impact on the condom using behaviors.

Conclusions: The ratio of actual usage of condom is not high, and mainly for contraception if used, further, most of usage are between the consideration step and the preparation step. The possibility and confidence of using condom may be raised more when people are affected by peers more. Nevertheless, people may lower their consciousness of using condom a bit in the step of maintenance.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1437

DISCUSSION ON THE MODEL TO PREVENT HIGH-RISK PREGNANCY OF ADOLESCENT GIRLS

Chu Yuan-Hsiang (Graduate School Of Human Sexuality, Shu-Te University, Taiwan R.O.C), Lin Yen-Chin (Graduate School Of Human Sexuality, Shu-Te University, Taiwan R.O.C)

The purpose of this research is to discuss on the model to prevent high-risk pregnancy of adolescent girl. The method is based on Resilience Theory and to analyze the influences of the causes of adolescent girls' pregnancies in individual, family and society from interviewing 19 sample cases. Therefore, the effective intervened plan can be developed based on the definition of the high-risk pregnant adolescent girls. According to the result of this research, adolescent girls are generally lack of cognition to sexual attitude and safe sexual behavior and ability to react to the risks they have. Support and acceptance from families, peers, boyfriends and social organizations greatly help pregnant adolescent girls to deal with their pregnancies and negotiate those steps. This research suggests that proceeding to an entire and continual service network for adolescent girl in a three-level precaution through Resilience Theory to help them to enhance their insights and be empowered, moreover encourage them reinforce their self-resilience power in order to have ability to grow up and develop themselves. Serving and helping adolescent girls by connecting school sex education and de-stigmatized education with families, medical and social organizations can help adolescent girls transform the risks they have to the turning points and strengthening their resilience and diminish the possibility of high-risk pregnancy.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1438

PERSPECTIVES FROM COMMUNITY LEADERS ON FAMILY PLANNING IN PAKISTAN: QUALITATIVE EVIDENCE ABOUT BARRIERS AND SOLUTIONS

Syed Khurram Azmat (Marie Stopes Society, Karachi, Pakistan), Graham Brown (Curtin University Of Technology, Perth, Western Australia, Australia)

Introduction & Method: This research focuses on perceptions of community leaders (imams, health professionals, and social workers) of the barriers and potential solutions they identify for family planning in the slums of Karachi, Pakistan. A qualitative study using semi-structured interviews with a purposive sample of 20 community leaders was conducted.

Findings & Discussion: Five barriers and two potential solutions were identified. Among the barriers were religious taboos and cultural pressures, leading to women being 'treated as machines'. The more promising solutions proposed were building capacity for understanding and cooperation among community leaders and community leaders as advocates for reproductive health programmes.

Recommendations: Cooperation among religious leaders and health professionals, in particular, which can provide information, counseling and advocacy on this issue, may be an achievable way forward for Muslims living in Asia and Europe.

References: Ali, M., & Ushijima, H. (2005). Perception of men on role of religious leaders in reproductive health issues in rural Pakistan. *Journal of Biosocial Science*, 37, 155-122. Hakim, A. (2005). Fertility trends and their determinants in Pakistan. In W. J. Jones & M. S. Karim (Eds.), *Islam, The State and Population* (2nd ed.). United Kingdom: C. Hurst & Co. Ltd. Pasha, O., Fikree, F. F., & Vermund, S. (2001). Determinants of Unmet Need for Family Planning in Squatter Settlements in Karachi, Pakistan. *Asia-Pacific Population Journal*, 16(2), 93-108. Stephenson, R., & Henink, M. (2004). Barriers to Family Planning Service Use among the Urban Poor in Pakistan. *Asia-Pacific Population Journal*, 19(2), 5-26.

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PO-1443

OBSESSION WITH FEMALE AND MALE VIRGINITY: SEX, GENDER, AND POWER

Chen Chieh-Ju (Graduate School Of Human Sexuality, Shu-Te University, Taiwan)

The purpose of this study is to re-examine Taiwan under the scope of sexuality research. Taiwan has a seemingly open social environment; the obsession with female and male virginity is thought to be outdated. However, to ensure the objectivity of the present work, the interviewees were all uni-

versity students who were not in the field of sexology. This study adopted a semi-structured interview approach to interview eight people with equal numbers of males and females. The results show that even though the obsession with female and male virginity seems to have gained positive progress due to the openness of the society and research in sexology, the idea has transformed from explicitly spoken to implicitly implied. During the social construction process, the difference and inequality of gender power and role of the two genders are all too obvious.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1444

PHYSICIAN ATTITUDES AND BEHAVIOUR REGARDING SEXUAL DYSFUNCTION

Atalla Elham Ahmed (Curtin University, Australia), Merimman Dr. Gareth (Curtin University, Australia), , Coats Rose Marry (Curtin University, Australia)

Sexual dysfunctions are a group of functional disorders that affect the sexual desire and that may affect psychophysiological sexual responses in males and females (American Psychiatric Association, 1994). These disorders have a prevalence of 10% to 52% in men and 25% to 63% in women. Sexual disorders have great impact on interpersonal relations and quality of life. Moreover, the wide spread accessibility to accurate and inaccurate sexual information through media, necessitate that the primary care setting should be ready to address and deal with these challenges. This necessity comes from the fact that the primary care service is considered by the community in Bahrain to be the first resource of advice. But are medical physicians will equipped to help or advise patients presenting with sexual complaints? In some situations the physician may lack training, which is usually compounded by embarrassment from the patient or doctor. This paper investigates the primary care physicians' attitudes in managing sexual dysfunctions, and the variables that can influence such management! For example gender of both physician and patient, board certified family physicians versus general practitioners. It also addresses the possible steps that can be made to improve the quality of care and the service offered to patients with sexual dysfunctions and other difficulties.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1445

EARLY EJACULATION IN A SEXUAL INTERCOURSE EVENT: AN ISSUE OF CONCERN AMONG MEN UNDERGOING MALE FERTILITY TESTS

Kaonga Kennedy (University Teaching Hospital), Mulebi John (Occupational Health And Research Bureau)

Introduction and objective: The issue of early ejaculation of semen dur-

ing sexual intercourse is beginning to emerge among men. In the past the problem was shrouded in secrecy and uncertainty. A study was carried out to determine the perceptions of childless married men on early ejaculation from January to October, 2008 at the University Teaching Hospital in Lusaka, Zambia.

Method: Prior to filling in the 4-item questionnaires on various aspects of early ejaculation of semen, the men undergoing semen analysis were counseled for 20 minutes on the importance of independent and truthful presentation of facts in order to minimize biasness. Early ejaculation was defined as the discharge of semen in the vagina within 10 minutes of sexual intercourse.

Results: Out of 125 men (age range 20-46 years, mean=30.5 yrs), 55 men (44.0%) said they often had early ejaculations and their wives complained because of lack of satisfaction, conception, and frigidity. Wives of 15 men of the 55 men suggested that they have sex elsewhere. Forty-five men (36.0%) said they had moderate ejaculations of 15-20 minutes sexual intercourse. Twenty-five men (20.0%) ejaculated after 30 minutes and their wives were satisfied.

Conclusion: Early ejaculation is an emerging issue of concern among childless men and their wives, and can wrongly be perceived to cause male infertility. Sexual intercourse of 30 minutes or more before ejaculation is appropriate for a wife or any woman. Sustainable counseling programs ought to be formulated in order to realize prospects of sexual health.

Conflict of Interest: There are no any potential conflicts of interests in the study.

Financial Support/Funding: The study did not attract any form of funding from anywhere. It was a laboratory based one done by the main author of this abstract, who routinely works in the male fertility laboratory at the University Teaching Hospital in Lusaka, Zambia.

PO-1446

SEXUALITY IN A GROUP OF MALE ADOLESCENTS WHO HAVE SEXUALLY OFFENDED: KNOWLEDGE, ATTITUDES, AND EXPERIENCES

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Introduction: There is almost a theoretical vacuum concerning the role of sexuality in sexual abuse. More knowledge regarding this factor might contribute to an understanding useful in treatment and prevention. Therefore, this study focuses on knowledge, attitudes, and experiences of sexuality in a group of 45 male adolescents who have sexually offended.

Method: The target group consisted of 45 adolescent males with a mean age of 16.2 years who had committed sexual offences towards children, adolescents, or adults. Nine of the participants were voluntary patients at psychiatric clinics, and 36 were placed at institutions. The instruments used were semi-structured interviews, a questionnaire measuring Sexual Knowledge and Beliefs together with Social Sexual Desirability, and staff-assessments.

Results: The target group had a lower degree of sexual knowledge compared to a comparison group of 61 boys in the same age, and scored lower on a scale measuring positive attitude and orientation/openness towards sexuality. The target group was younger when they first had consensual intercourse, compared to Swedish norm data. For 40% of the boys, the first sexual experience was as a victim of sexual abuse.

Conclusion: Since sexuality is important in the lives of adolescents, one cannot only focus on sexuality as related to the perpetrations when treating and preventing sexual abuse.

Conflict of Interest: None disclosed

Financial Support/Funding: The study was granted by the Swedish National Board of Institutional Care

PO-1449

ACCEPTABILITY AND WILLING TO USE MICROBICIDES AMONG ARGENTINEAN WOMEN

Zalazar Maria Virginia (Fundacion Huesped), Vazquez Mariana (Fundacion Huesped)

Background: Although microbicides are a hope to reduce the feminization of HIV epidemic, little is known about the willingness of Argentinean women to use topical microbicides to prevent HIV transmission.

Methodology: translation, adaptation and validation of two previous scales of acceptability. Survey: 100 women (14 to 49 years old) of low-income zones of the Great Buenos Aires. Tool: ACASI technology; increasing reporting of sensitive issues. Recruitment: health centers and grassroots organizations.

Results: 78% achieved incomplete secondary school; 87 % declare having a main sexual partner and 68% live with their partner; 73 % receive economic support; 38% are pregnant and 20 % are planning to have a child. 61 % have done HIV test generally during previous pregnancies. Only 25% always use condoms and 57 % didn't use it in their last sexual intercourse. Willingness was assessed using the Use Microbicides Scale, a 5-point Likert scale ranging from 1 (definitely not) to 5 (definitely), and had a potential score range of 8-40. Participant scores ranged from 9-40, with an overall mean of 29, 82 (SD 7, 06) and a median value of 30. Analysis: women unsure of the HIV status of their partners and with an HIV testing history have higher predicted scores. 33 % prefers cream, 37% gel and 29 % vaginal ring.

Conclusions: Though the majority of women does not use condom, 50% are willing to use microbicides in the future. Their couple behavior seems to be a significant variable for women when considering using HIV prevention methods.

Conflict of Interest: None disclosed

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PO-1454

ADOLESCENT SEXUALITY IN MALAYSIA

Mat Saat Geshina A (Universiti Sains Malaysia), Baki Mat Saat (International Islamic University Malaysia)

Incarcerated juveniles and adults of sexual offenses claim that sexual intimacy was based on mutual desire. In addition, mass media reports and increasing referral cases to the Social Welfare Department seem to depict that adolescent sexual intimacy is a growing problem. From a sociocultural perspective, this indicates the degrading of morality and religiosity in a dominant Muslim country. In order to determine the reality of this concern, this paper presents findings of adolescent sexuality in Malaysia. Semi-structured interviews were carried out in 2006. 159 female adolescents volunteered for this research. There were 32 cases of sexual aversion-avoidance, 30 cases of desire disorders, 20 cases of orgasmic dysfunctions, 15 cases of dyspareunia, 5 cases of vaginismus, 7 cases of non-consummation, and 10 cases of gender disorders. Findings from the semi-structured interviews were used to establish a management model of sexuality for use amongst social workers. The model explains issues regarding sexual intimacy prior to marriage; explains intuitive and destructive behaviours of adolescent sexuality; focuses on the alignment process between the social worker and the client; as well as sets a rehabilitation guide in a counselor-client setting.

Conflict of Interest: None disclosed

Financial Support/Funding: Self funding

PO-1455

EDUCATING SEXUALITY FOR OLDER ADULTS IN MALAYSIA

Baki Mat Saat (International Islamic University Malaysia), Mat Saat Geshina A (University Sains Malaysia)

Society assumes sexuality is not a topic that concerns older adults although older adults themselves claim the contrary. The definitive source of information for this paper was gathered from clinical clients between 2005 and 2008. Clients, most of whom were over 50; cared very much about their sexual experiences and relationships. They sought help for problems in sexual functioning. Towards this end, the purpose of this paper is to explore issues relating to the discussion and education of sexuality for older adults in Malaysia. This paper provides a framework to guide psychologists in helping older adults with sexual functioning. The emphasis is on the Malaysian culture as knowledge on this specialty is rare in the country. The framework involves four stages. The first utilizes an andropause checklist and a clinical interview. In the second stage, causes of the psychosocial sexual crisis are identified and clarified. Stage three involves the formulation of a treatment and review programme for the client. The last stage sets out secondary issues of sexual functioning for older adults. By using this framework, psychologists and counselors will be able to offer constructive help to older adults who want a more vibrant sex life. In addition, this paper encourages a greater understanding that sexuality is an important part of life, and is not restricted to the young.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1457

SEXUAL VIOLENCE IN MALAYSIAN HOSPITALS

Mat Saat Geshina A (Universiti Sains Malaysia)

Malaysian hospitals now face the unaccustomed position of having to deal with incidents of sexual violence inside their premises. It has become apparent that something previously unheard of was tangibly indicative of a organization-wide epidemic. The extent is unknown due to a lack of properly informative data about the phenomenon. This research addresses this concern through determining the prevalence of sexual violence in the sample hospitals, identifying the categories of sexual violence, and identifying the perpetrators of sexual violence. This paper presents the finding from a survey of 162 hospital staff (females 76%, males 24%) on experiences of sexual violence in the healthcare setting. Research was conducted between December 2004 and February 2005 in two Malaysian hospitals. About 39% of respondents were nurses, 15% were medical officers, 8% were social workers, 25% support staff, 4% health officers, and 9% from other occupations. The survey found that sexual violence was not prevalent. From nine categories of sexual violence, the most common form of sexual violence experienced was "had sexually suggestive gestures directed at you". Nurses were the most vulnerable to sexual violence. The perpetrators were generally known to victims. The conclusion was that although sexual violence do occur against hospital staff, incidences are not as prevalent as feared. Another explanation for the low prevalence rates is the fear of employer or peer reprisals if incidents of sexual violence were reported. This is namely due to the culture that violence is part of the job.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1461

PERSONAL CHARACTERISTICS OF JUVENILE SEXUAL OFFENDERS AND REARING ATTITUDE OF THEIR PARENTS

Tsai Ching-Hong (Kaohsiung General Hospital, Taiwan), Lin Yen-Chin (Graduate School Of Human Sexuality, Shu-Te University, Kaohsiung, Taiwan)

Method: In this study, we compared personality characteristics of juvenile sexual offenders and their parents' child-rearing style with those of juveniles who were not offenders. All subjects and their parents provided written informed consent. The study group included 50 juvenile sexual offenders, all males, living in prison. The control group included 43 age-matched male in high school students. They all received the Junior Eysenck Personality Questionnaire(JEPQ) and Parental Bonding Instrument(PBI), and all data of crime were collected.

Results: The study results show that the study groups have higher neuroticism and psychoticism personality characteristics than the general teenagers

. In terms of the parents' child-rearing style, it shows that the juvenile sexual offenders have lower the parental care than those of control group. It was also found that, the older the offender teenager, the use of violence is higher. In addition, they are likely to use violence to unknown victims.

Conclusion: The conclusion shows that juvenile sexual offenders who stay in low parental care in family structure, have tendency of higher neuroticism and psychoticism personality characteristics.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Kaohsiung General Hospital medical research funding

PO-1468

DESCRIPTION OF THREESOME SEXUAL EXPERIENCE AND PRACTICE (EPST) ON THE STUDENTS OF CENTRO DE INVESTIGACIONES PSIQUIÁTRICAS, PSICOLÓGICAS Y SEXOLÓGICAS DE VENEZUELA, INSTITUTO DE INVESTIGACIÓN Y POSTGRADO, CARACAS

Garzón Alicia A. (Centro De Investigaciones Psiquiátricas, Psicológicas Y Sexológicas De Venezuela), Bianco Fernando J. (Centro De Investigaciones Psiquiátricas, Psicológicas Y Sexológicas De Venezuela)

Introduction and Objectives: Threesome is defined as sexual activity of an individual with two people in reality or fantasy. According to Federación Latinoamericana de Sociedades de Sexología y Educación Sexual, there is no systematic information available on the subject. The objective of this research is to describe the EPST on the students of Centro de Investigaciones Psiquiátricas, Psicológicas y Sexológicas de Venezuela(CIPPSV), Caracas. Method(s) This research is a quantitative research. Its design is exploratory – descriptive and cross-sectional. The population to be studied are students from CIPPSV, Caracas. The research was made on 83 students. The technique used to collect data was a questionnaire, validated by experts and of high reliability.

Results: This research showed three groups: participants without threesome sexual fantasy and without exercise of threesome sexual function in reality, participants with threesome sexual fantasy and without exercise of threesome sexual function, and participants with threesome sexual fantasy and with exercise of threesome sexual function. The third group is characterized mainly by males, between 25 - 34 years old, single, caucasian, and catholic.

Conclusion: There is not a particular factor that shows that a person can have or not a threesome sexual fantasy, would or wouldn't like to make his/her fantasy a reality, or would or wouldn't experience the exercise of threesome sexual function in reality. Moreover, there is not a feature among the groups that supports or prevents a threesome sexual fantasy or the exercise of threesome sexual function.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1469

TOTAL VERSUS SUBTOTAL HYSTERECTOMY ON SEXUAL FUNCTION

Ohkawa Reiko (National Hospital Organization, Chiba Medical Center), Okuroda Kaori (National Hospital Organization, Chiba Medical Center), Okajima Yuko (National Hospital Organization, Chiba Medical Center)

Introduction: The advantage of total abdominal hysterectomy (ATH) is in postoperative drainage and the removal of cervix as a potential cancer site. Subtotal abdominal hysterectomy (STH) is beneficial on less risk of urinary tract complications. Recently STH is chosen more frequently than before considering of urinary and sexual function because it keeps structure of pelvic floor and vagina. But few reports have showed definite differences between both methods on this issue. This study aimed to find the outcome of ATH and STH on pelvic and sexual function.

Method: Objects of this study were 146 women who had been operated for benign condition from 2004 to 2007 in Chiba medical center, JAPAN. We sent a questionnaire by mail in January 2008, and got replies from 60% in both ATH (63/106) and STH (25/40) groups.

Results: There was no difference between ATH and STH in urinary function. Women who had better change or no change in sexual arousal was 65% in ATH vs. 94% in STH. Same in lubrication was 58% in ATH, 88% in STH. Also orgasm, sexual pain and feeling of sexual partner showed better tendency in STH than ATH. But there was no significant difference in those data.

Discussion: Because female sexual function has multi dimension, and the anatomical change due to ATH and STH are rather delicate, it's hard to prove the superiority of STH to ATH in sexual function. We have to collect more sample and more detailed information to suggest suitable operative method to patients.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1476

SWEDISH AND AMERICAN YOUTH; THEIR THOUGHTS AND PERCEPTIONS SURROUNDING SEXUAL LITERACY

Vallin Lisa M (San Francisco State University)

The United States and Sweden today are often described as opposites in regards to sex and sexuality. In 1955, Sweden became the first nation to implement mandatory, national sex education in the public schools. Since then, the country has been widely recognized for its open and progressive views of sex and sexuality. In contrast, controversy exists in the U.S. as to what is appropriate sex education. Contemporary Sweden has received severe criticism from a number of scholars and institutions about teaching a narrow sex education. This research examine two groups of young students, their perspectives and experiences of sex education and the process of developing sexual literacy using a mixed-methods approach: a combination of surveys and in-person semi-structured interviews. The first group comprises senior students attending an upper secondary school in southwestern Swe-

den and the second group comprises undergraduate first-year freshmen students attending a Northern California university in the United States. At the time of the study all students were 18-20 years of age and were taking general education courses that included sex education. Although this research is based on a convenience sample, the outcome of the study challenges the notion that Swedish sex education is more progressive than American. The findings of this research also support the concept of sexual literacy as a model to reframe sexuality education using a holistic approach focusing on pleasure, happiness, desire and wellness.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1487

YOUNG PEOPLE AGAINST THE HIV AND EARLY AND UNWANTED PREGNANCIES IN THE DISTRICT OF YAOUNDE II-CAMEROON

Fezeu Faustin

Introduction and objective: Youth of the district of Yaounde 2 are aware of their importance in the fight against the HIV. Their vulnerability is accentuated and the implication of authorities is important. The behavior of young people are manifested by early and especially unwanted pregnancies of young girls, multiple abortions...

Method and Activities • The behavioral analysis is a scientific activity made up of 10 stages. Out-of-school youth identify their problems with HIV, AIDS and unwanted pregnancy and leads effectively to the adoption of healthy behaviors and less risk as well as the development of a micro integrated plan of communication and the action plan of the site. • Restitution of the Behavioral Analysis: After each stage restitution is organized, and gathers all the youth of the district with in the presence of the Mayor, the prefect, the Imams, pastors, priests, chiefs of districts. They all understand level of vulnerability of youth of the locality

Results. After 3 months of activity we a better implication of authorities and religious (Moslem), best intergenerational Dialogue particularly on sex education within the families, Adoption of less risk behaviors by youth.

Conclusion The behavioral analysis made it possible to measure the level of knowledge which the young people have of the HIV pandemia. It also made it possible to appreciate the level of conscience of the target. The next stage will be the documentation of all the process and its availability with the researchers and the public authorities.

Conflict of Interest: None disclosed

Financial Support/Funding: UNICEF-Cameroon Ministry of Youth Affairs

PO-1491

ATTITUDES TOWARDS GAY MEN AND LESBIANS IN CHILE AND ITS RELATIONSHIP WITH DEMOGRAPHICAL VARIABLES

Barrientos Jaime (Psychology School, Universidad Católica Del Norte), Cárdenas Manuel (Psychology School, Universidad Católica Del Norte)

Attitudes towards gay men and lesbians have become an important topic in the last 20 years. But, although Chilean population currently seems to be more tolerant, prejudice toward sexual minorities have not changed much in the last few years, and neither has the discriminating actions deriving from them. The objective was to determine the attitudes towards gay men and lesbians and its relationship with demographical variables.

Methods: The final sample consisted of 504 participants. Participants answered demographic questions: sex, age, socioeconomic status, religion identification and political self-categorization and Attitudes Toward Lesbians and Gay Men Scale was used to measure sexual prejudice. A multiple regression analysis was made.

Results: The variables used give account of 44% of the dependent variable variance ($F(4, 487) = 29.46; p < .001$). The most important variable in the regression equation was political self-categorization ($B = -.30; p < .001$), sex ($B = .28; p < .001$) and religion ($B = -.11; p < .05$). The socioeconomic level variable has no effect on ATLG scores. Men report higher homophobia levels than women, as well as more negative attitudes toward lesbians than toward gay men ($t(272) = 4.94; p < .001$).

Conclusions: Secularization in Chile is related to the spread of social and sexual changes. But, the result shows the importance of Catholic Church and political conservatism in our country.

References: Herek, G. M. (1984) Beyond "homophobia": A social psychological perspective on attitudes toward lesbians and gay men. *Journal of Homosexuality*, 10, 1/2, 1-21.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1492

PSYCHO-SOCIAL-SEXUAL EXPERIENCES OF FRANCOPHONE CANADIAN WOMEN DIAGNOSED WITH CERVICAL CANCER

Rivard Sylvie R. (Laurentian University)

This presentation addresses a preliminary literature review addressing Francophone Canadian women's psycho-social-sexual experiences when receiving medical treatments in English for their diagnosis of cervical cancer. Although any cancer diagnosis potentially challenges one's own personal beliefs of health and body integrity, cervical cancer intersects women's relationships with their body, health, sexuality, and intimate and personal relationships in distinctive ways. (Caldwell, 2003; Wenzel et al., 2005) Fundamentally, sexuality situates the lived experience of the individual at the heart of the discourse. Discipline-specific approaches tend to fragment women's experiences into professional-specific domains of practice (medicine, nursing, psychology, social work), resulting in the exclusion of significant aspects of the full sexual experience. (Tiefer, 2004) In addition, discomfort, by healthcare professionals in addressing women's sexual concerns is often noted (Juraskova et al., 2003) and result in silence around women's psycho-social-sexual experiences. Cultural norms influence women's self-concepts, help-seeking and compliance behaviours. (Daniluk,

1998) In our current setting of North-Eastern Ontario, Canada, culture is also defined by language. Information concerning the health experiences of Francophone women diagnosed with cervical cancer, a linguistic minority who often receive services in English, is lacking and nonexistent. Thus, professional domains and culture compel the articulation of a research inquiry, exploring Francophone women's own meanings of their psycho-social-sexual experiences throughout the cancer trajectory, and including the perspectives of multiple disciplines that provide medical care and psycho-social support, linking culture, language, women's psycho-social-sexual experiences and cervical cancer treatments. This presentation constitutes the preliminary literature review of the author's proposed qualitative doctoral research.

Conflict of Interest: None disclosed

Financial Support/Funding: n/a

PO-1494

ERECTILE DYSFUNCTION IN MIDDLE AGE MEN CAN BE SUGGESTED BY A SPECIFIC BODY STATUS

Coca Vasile, Coman Ioan, , Coca Mariana C., Magherusan Monica, Mi-clutia Ioana, Inceu Georgeta

Introduction and objectives: Because erectile function is related to total fat mass and body composition, we aimed to establish a body (anthropological) specific status, suggesting erectile dysfunction (ED) in the middle age men.

Methods: In 88 ED men (by physical etiology, gr.A) and in 36 normal erectile function men (gr.B) prevalence and ED correlations to high BMI, large waist, increased waist to hip ratio (WHR), high serum lipids and vascular dysfunction (hypertension, endothelial dysfunction, IMT or plaque evidence) were calculated. Range of age: 49.4+/-6.8 years.

Results: Significant prevalence arise only for BMI>30 kg/m2: Gr.A=39 (40.9%) vs. Gr.B=5 (13.9%), P<0.001; waist>102 cm: Gr.A=65 (73.8%) vs. Gr.B=15 (41.7%), P<0.05; WHR>0.9: Gr.A=61 (69.3%) vs. Gr.B=14 (38.9%), P<0.05; triglycerides>150 mg/dl: Gr.A=59 (67.05%) vs. Gr.B=8 (22.2%), P<0.001; hypertension: Gr.A=63 (71.6%) vs. Gr.B=11 (30.5%); P<0.001. ED (Gr.A) significantly correlated to obesity: $r=0.067; P<0.001$, high WHR: $r=0.05; P<0.07$, high serum triglycerides: $r=0.07; P<0.001$, and hypertension: $r=0.08; P<0.001$.

Conclusions: Obesity with abdominal increased fat tissue but only adding high WHR, mostly associating hypertension and elevated serum triglycerides, represents a somatic (anthropological) status suggesting ED in middle age men.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1502

GROWING VIOLENT IN RURAL AREAS OF ETHIOPIA

Birkie Awraris Alemayehu (Population Council)

While emerging data on violence suggests a high rate of sexual and physical violence perpetuated by men on women, there is little research on the roots of men's violence in Ethiopia. We conducted a qualitative study to examine the underlying causes of men's violence against women and amongst themselves in the Amhara region of Ethiopia, in mid 2008. Sixteen men and women aged 15 to 39 were purposely selected based on their occupational, educational and marital situations. Each of the respondents was interviewed through three consecutive sessions to improve candidacy and honesty during the in-depth interview. Findings reveal that obedience is a highly valued and expected behavior for children. As boys grow older, they increasingly take on the role of disciplinarian and controller of girls, who are socially expected to be controlled and obey. Besides, girls are expected to commit non-consensual sex particularly in marriage. Violence is also part of boy's socialization. The study suggests that parents play major roles in constructing dominant and violent attitudes and behavior among boys toward girls. Specific messages for boys and men on power dimensions of sexual relationships are important. Emphasize on building boys'/men's sexual communication skills in intimate relationships and parents' skills on constructing non-violent attitude and behaviors at early ages are needed.

Conflict of Interest: I do not believe there will be any potential conflict of interest since the study is conducted by Population Council itself and I am the lead author of this research product.

Financial Support/Funding: Population Council, Addis Ababa (My employer) through PEPFAR and USAID fund.

PO-1504

SEXUAL ACTIVITY AND MARITAL RELATIONSHIPS IN SCHIZOPHRENIC PATIENTS AND IN HEALTHY CONTROLS

El Kissi Yousri (Psychiatry Department; Farhat Hached Hospital), Ayachi Mouna (Psychiatry Department; Farhat Hached Hospital), Gaabout Samia (Psychiatry Department; Farhat Hached Hospital), Ben Nasr Selma (Psychiatry Department; Farhat Hached Hospital), Ben Hadj Ali Bechir (Psychiatry Department; Farhat Hached Hospital)

Introduction and objective: Sexual activity and marital statute have received little attention as an important aspect of schizophrenic patients' care. Yet, they have been implicated as major factors of drug compliance and disease outcome. This study aimed to compare sexual activity and marital relationships in patients with schizophrenia and in healthy controls.

Methods: A consecutive sample of Sixty-nine patients meeting DSM-IV criteria of schizophrenia was constituted in psychiatry department of Sousse Farhat Hached hospital (Tunisia), during a twelve months period. They were drug naïve or drug free for at least three months. Sixty-nine age and gender matched controls were recruited among blood donors. They were free from psychotic disorders as screened by MINI-PLUS. Sexual activity and

marital relationships were assessed using a panel of questions.

Results: Schizophrenic patients were less married (26.9% vs. 63.2%; $p < 10^{-3}$) and had less often a sexual partner (51.9% vs. 91.2%; $p < 10^{-3}$) than healthy controls. However, no differences were found between the two groups regarding marital relationship duration. Schizophrenic patients reported similar rates of sexual activity (75.4% vs. 82.6%), but less regular sexual intercourses relationships (17.3% vs. 59.6%; $p < 10^{-3}$) than healthy controls. Also, they reported higher rate (75% vs. 31.6%; $p < 10^{-3}$) and higher last month prevalence (8.53 ± 7.12 vs. 2.89 ± 3.21 ; $p = 0.002$) of masturbatory activity.

Conclusion: In spite of lower prevalence of marital relationships, schizophrenic patients reported as frequent sexual activity as healthy controls. This may be related to higher prevalence of masturbatory activity which should be taken into account when assessing patients' sexuality.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1507

THEATRE FOR SOCIAL CHANGE

Muhammad Muhammad Shokat (Voice For Poor And Needy)

Title: Increased Awareness on Peer education, sexual health and HIV/AIDS through capacity building of Youth Organizations and NGOs Street Theatre Street Theatre is an effective tool for disseminating the challenging messages especially among the marginalized communities Helping people to become part of process Bringing marginalized communities close to generate discussion and talk about the issues regarding their practical life Objectives To reduce the risk of HIV transmission in Pakistan; and to mobilize NGOs and community support so that Life Skills and HIV/AIDS become cross cutting themes in development agendas and programs Technical capacity building of youth organizations and NGOs working for increased awareness on Life skills and prevention of HIV/AIDS

Methodology: Organized a mobile theater team to work closely with community NGOs and CBOs to raise awareness of community members through cultural activities (songs, skits and plays etc.). The play was developed keeping in mind cultural, social and religious sensibilities. Interaction with community members at a general level to collect basic information about cultural and religious believes and sensibilities Amend play according to the information gathered from community and local organizations Discussion with audience (community members) this discussion session was conducted as a part of the performance. As soon as the performance was completed the actors interacted with the audience and divided them into small groups to talk about issues raised in the play

Conclusion/Achievements: The project today has surpassed targets that were set and has mobilized communities through participatory street theaters and non-formal peer based sessions. The most remarkable achievement has been the willing and voluntary participation of

Conflict of Interest: None disclosed

Financial Support/Funding: Voice for Poor and Needy

PO-1515**YOUTH CLINICS IN SWEDEN, A SHORT PRESENTATION**

Öster Mia (Fsum), Vyth Rebecca (Fsum)

The first Youth Clinic (in Swedish: ungdomsmottagning) in Sweden was opened in 1970. Today there are 226 such clinics spread all over the country. These clinics serve all young men and women between the ages of 13 and 25. The clinics are easy to reach and free of charge. Persons under 18 can seek help without their parents' consent. The clinics have developed within a broad Swedish historical context from sexual education, the abortion laws and the development of sexual transmitted diseases. The overall objectives for the clinics are to promote general physical and mental good health, to strengthen young peoples' awareness and sense of self and more concretely help prevent unwanted pregnancies and sexual transmitted infections. Reaching out to both Swedish-born and immigrant youth, Youth Clinic staff adopt a holistic view, embracing varying social, cultural and gender perspectives. The work on issues of sex and sexuality is done in a non-moralising way, showing respect for different sexual identities and expressions. Youth Clinics offer individual consultations, medical examinations and treatment, group activities and outreach work. A broad range of professionals including social, psychological and medical professionals work together as a team and many of them have special training in sexology. The most frequently seen are midwives, social workers, physicians, psychologists and nurses. The Youth Clinics are organized by the Swedish Society for Youth Clinics (FSUM).

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1516**A WARMER**

Kato Ryukichi None (Md), Orio Jyunko None (Student)

I have been striving in treating frigidity over the past 50 years and successfully helped many female patients suffering from this condition so that they might be blessed with children and lead a fulfilled married life. I have dealt with about 3,000 of these patients. Frigidity, which is called "shi-ryoutan" in Chinese and cold-hearted woman in English, means a cold woman. In fact, she has a cold constitution, her body temperature is low and she is said to have a cold heart. Both men suffering from primary ED and women experiencing frigidity have difficulty in maintaining a happy marriage: the couples with these problems may be able to cohabit but their lives will be sexless with no likelihood of ever having children. Being involved in tending these individuals over the years, one notices that there are many young women who are well aware of the need for therapy yet too embarrassed to seek professional help actively. In reality, because of their immature personality, many are incapable of understanding the gravity of the problem that they face. If they only realize that sexual activity is important next to life itself, a therapeutic device, which has been patented and is currently pending approval by the Ministry of Health, Labor and Wel-

fare, may be privately used for autogenic training at home. This device allows one to measure pressure within the vagina, allowing the patient to determine her own sexual capability. On the other hand, there are those women who are sexually

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1519**YOUTH FEMININE SEXUALITY AND THE RISK OF HIV/AIDS: AN ANTHROPOLOGICAL APPROACH IN URBAN CONTEXT**

Brak-Lamy Guadalupe Cunha Silv (New University Of Lisbon/Faculty Of Humanities And Social Sciences, Departement Of Anthropology, Av. De Berna , N° 26-C, 1069-061 Lisbon),

The purpose of this study was to explore HIV/AIDS risk related to sexual knowledge, attitudes, taboos, beliefs and behaviours of young portuguese and Cape Verdean girls (15 to 30 years old), living in 4 slums in the Greater Lisbon area. Data was obtained from 80 interviews. The results indicate a ethnic difference regarding AIDS related knowledge, attitudes, taboos, beliefs and behaviours. The results highlight the impact of psychosocial and cultural factors in individual and group behaviour. These finding are discussed in terms of relevance to adopting preventive behaviours and the implications of research results in the design of culturally appropriate strategies to promote sexual health focused to these communities.

References: Bird, S., et al. (2001). Getting your partner to use condoms: Interviews with men and women at risk of HIV/STDs. *Journal of Sex Research*, 38 (3), 233-240. Decosas, J. & Adrian, A., (1998). Migration and Aids. *International Migration*, 36 (4), 445-468. Hobfoll, S. (1998). Ecology, community and AIDS Prevention. *American Journal of Community Psychology*, 26 (1), 133-144. Kelly et al. (1993) Psychological interventions to prevent HIV infection are urgently needed: New priorities for behavioral research in the second decade of AIDS. *American Psychologist*, 48, 1023-1034. Jemmott, J. & Jemmott, I. (2000). HIV risk reduction behavioral interventions with heterosexual adolescents. *AIDS*, 14, s40-s52. Lear, D. (1995). Sexual Communication in the Age of Aids: The Construction of Risk and Trust Among Adolescents. *Social Science & Medicine*, 9, 1311-1323. Moore, S. et al. (1996). *Youth, AIDS and Sexually transmitted Diseases*. London: Routledge.

Conflict of Interest: None disclosed

Financial Support/Funding: I'm waiting for the swedish scholarship decision.

PO-1524**DEVELOPING AND VALIDATING A TAIWAN VERSION OF THE FEMALE SEXUAL FUNCTION INDEX FOR PREGNANT WOMEN**

Chang Shiow-Ru (Department Of Nursing, National Taiwan University College Of Medicine), Chen Kuang-Ho (Chungtai University Of Medicine And Technology), Lin Ho-Hsiung (Department Of Obstetrics And Gynecology),

National Taiwan University College Of Medicine)

Introduction and objectives: An assessment instrument for female sexual function is needed for pregnant women in the Taiwanese population. This study aimed to translate the Female Sexual Function Index (FSFI) from English to traditional Chinese, and to evaluate the reliability and validity of this new version for pregnant women.

Methods: Test–retest reliability of the newly-developed Taiwan version of the FSFI for pregnant women was assessed in 55 pregnant women who completed this version of the questionnaire at two time points within 4 weeks. The internal consistency reliability and construct validity of the Taiwan version of the FSFI in a medical center in Taiwan were evaluated using a random sample of 121 pregnant women.

Results: The Taiwan version of the FSFI showed adequate test–retest reliability for pregnant women. The Pearson correlation coefficient of the total score was 0.69, Kappa statistics showed good reproducibility for most items, and McNemar’s test confirmed that there were no significant differences in the test–retest pair for the 19 items of the scale. The internal consistency reliability of the scale was excellent (Cronbach’s [alpha]=0.96). Three factors were identified with eigenvalues \geq 1.03, explaining 87.10% of total variance. The first, second, and third factors were “coitus”, “satisfaction”, and “desire”, accounting for 72.32%, 9.37%, and 5.42% of the variance, respectively.

Conclusion: The results provided evidence of the validity and reliability of the Taiwan version of the FSFI for pregnant women.

Conflict of Interest: None disclosed
Financial Support/Funding: No

PO-1526

SEXUAL BEHAVIOURS AND DRUG ABUSE AMONG THE STREET CHILDREN

Lamsal Shyam (B.P.Koirala Institute Of Health Sciences), Walia Indarjit (Postgraduate Institute Of Medical Education And Research, Chandigarh, India), Kumar Rajesh (Postgraduate Institute Of Medical Education And Research, Chandigarh, India), Kaur Baljit (Postgraduate Institute Of Medical Education And Research, Chandigarh, India)

Introduction and objectives: The present study was carried out in the markets of two sectors and a resettlement colony of Chandigarh (U.T.), Northern India, during the month of January and February, to describe the health profile of the street children.

Method(s): A descriptive cross sectional study through the purposive sampling method. Results Among the 100 conveniently chosen street children, 74 were Indians and 26 were Nepalese. Ninety-one children were Hindu, 80 were above 12 years of age with the mean age and SD 14.74 \pm 2.77, 72 had some education, 54 children at present worked as hawkers and servants at shops and 69 had a daily income between Rs. 30-90. Forty-two subjects had sexual exposure at various age with either girlfriend or prostitute in which two subjects were homosexual. Seventy subjects were substance/s

abusers, which included 49 alcohol abusers, 48 smokers, 42 tobacco chewers, 3 injectable drug abusers and 51 various other types of substance/s abusers. Majority of the children were uncertain about the amount and frequency of the substance/s they abuse except the tobacco chewers where majority i.e. 28 chew one or two packets of tobacco per week.

Conclusion and recommendation: It is recommended to establish “condom corners and “street children help line” and “de-addiction centre” in the city and urban slum areas and undertake action research on their health.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1531

PREVENTION OF STI, HEPATITIS, HIV AND UNWANTED PREGNANCIES IN A HIGH RISK POPULATION

Howatson Emma Svanholm (Centre For Sexual Medicine), Stenqvist Karin (Unit For Hiv/Sti-Prevention In Västra Götaland)

Introduction: Young people with experience of drug abuse and/or prostitution rarely seek medical advice on issues concerning SRH. Mental health and outpatient clinics for drug abusers, which are likely to have the majority of contacts with the target group above, lack routines for preventive measures against STI, hepatitis and HIV as well as unwanted pregnancies.

Action: The aims of the project are to prevent STI, hepatitis, HIV and unwanted pregnancies in the target group. In connection with the patients visits to the clinics, individual consultations are offered with testing against STI, hepatitis and HIV, information and counselling regarding safer sex practices and/or reproduction and the prescription of contraceptive drugs. The project leader, a registered midwife, has become a member of the social-psychiatric team. This means that questions regarding SRH, concerning individual patients as well as issues concerning general practice, can be raised. Another important aim is to develop routines and professional cooperation between care providers in order to attend to the needs of the target group concerning their sexual and reproductive health.

Outcome: The project functions as a bridge between the clinics of gynaecology, venereology and the detoxification clinic.

Discussion and recommendations: Team-work is beneficial as several professional views are represented. Cooperation between care providers from different disciplines, such as health care and social services, is a requirement for long term sustainability and a prerequisite to reach the target group.

References: Forsberg Margareta, Ungdomars sexuella hälsa, Internationella kunskaps sammanställningar och svenska erfarenheter av förebyggande arbete, Socialstyrelsen, 2007

Conflict of Interest: None disclosed

Financial Support/Funding: N. A.

PO-1533

INTELLECTUAL DISABILITIES AND SEXUALITY: YOUNG GAY PEOPLE AS AN INVISIBLE GROUP

Löfgren-Mårtenson Lotta (Health And Society, Malmö University, Sweden)

Introduction and Method: Today the term sexualities in plural are used to stress that there is a wide spectrum of sexual preferences and orientations. It is reasonable to expect this to also exist among people with intellectual disabilities (ID). The aim of this qualitative study is to identify, describe and understand the opportunities and hindrances for people with (ID) in showing a variety of sexual expressions. Interviews with 13 people with ID in the age of 16-27, 13 staff members and 11 parents were conducted.

Findings and discussion: The study show that young gay people with ID are an invisible group, and that the possibilities to show a variety of sexual expressions are depending on the attitudes and behaviours of people surrounding the youngsters. Both staff members and some of the young people themselves express mainly negative or restrictive attitudes.

Recommendations: Therefore it is important to teach about different sexualities in the sex education at special schools and also to do more research concerning homo- and bisexuality and intellectual disability, without having the heterosexual norm as a starting point. Finally, it is vital that staff members both get further education in sexology and supervision in their daily work.

References: Löfgren-Mårtenson, L. (2008) The Invisibility of Young Homosexual Women and Men with Intellectual Disabilities. In Press. Sexuality and Disability. Published on-line 08-10-09 <http://dx.doi.org/10.1007/s11195-008-9101-0>

Conflict of Interest: None disclosed

Financial Support/Funding: Stiftelsen Sävstaholm, Sweden

PO-1535

FEMALE GENITAL MUTILATION;THE UNENDING CHALLENGE IN NIGERIA.

Hygie-Enwerem Grace N (Center For The Right To Health.), Oparaku Patsy N (Dohealth Foundation)

Introduction and Objective: Women empowerment is fundamental to the achievement of equality, development and peace. Basic to women's empowerment is the recognition that women have the right to all aspects of their lives-in particular their health. Female genital mutilation, locally known as female circumcision is a traditional practice originally Embedded in patriarchal power structures routed in a desire to control women's lives. It serves the same purpose as bride price and early marriage. 'Female Genital Mutilation is a first degree obstacle to the attainment of physical and mental Health. These women whose genital are mutilated cannot be healthy. World Bank statistical data indicated that 29.2 million women in Nigeria are affected by FGM. All these women are suffering from ill health and do not attain the highest standard of physical and mental health. Results; Female Genital mutilation is not just a health issue; • It is violence against women. • It is a strate-

gic action to lower the status of women and impede their advancement. • It is an identified obstacle to the attainment of good health by women.

Objective: To see how to put a stop to harmful traditional practices in Nigeria and eradicate all obstacles to the advancement of women.

Method: Conducted research and identified people who are doing this operation in Nigeria.

Conclusion: The eradication of female circumcision has become unnecessarily slow and difficult. We have not adequately educated the community of the negative result of FGM. Most information circulates in urban areas with the exclusion of rural areas. Nigerian government has to do something openly and condemn FGM by proclaiming a decree forbidden

Conflict of Interest: No conflicts of interest

Financial Support/Funding: self effort.

PO-1536

GENDER BASED ADVOCACY ON VIOLENCE AGAINST WOMEN.

Hygie-Enwerem Grace N (Center For The Right To Health.), Oparaku Patsy N (Dohealth Foundation)

Introduction. While very few women in Nigeria knew their rights and confront t abuses, very many of them are not assertive and aware of their rights being abused.

Objective: • To address the negative experience through reporting to the appropriate quarters and resisting abuses.

Method: Focused group discussions were employed to get to the grass-root to uproot the different problems women face in the community on issues like rape, wife beating, indecent assault, unlawful detention with intent to defile, abduction, oppressive authorities against women, circumcision and sexual harassment.

Result • Women knew their rights • Women knew the need to confront abuse • Women knew access points were complaints would be addressed • Women knew they will be supported to follow through when they have complaint.

Conclusion: Effective communication and demonstration must be employed to let the women understand that their rights are been abused. Violence against women must be seen against a background of gender inequality, whereas the victim of such violence is most often women and the perpetrator most often the men and wherein the structure of the society be this economic, political or legal act to confirm this inequality. Advocating to grass-root women on what constitute violation of these rights is a good development but due to lack of funds my organization cannot carry it out as often as expected and to cover as many communities as possible .

Conflict of Interest: No conflicts of interest

Financial Support/Funding: self help

PO-1551

INCIDENCE OF PREGNANCY AND USE OF FAMILY PLANNING AMONG FEMALES IN HIV SERO-DISCORDANT COUPLE RELATIONSHIPS, ENTEBBE UGANDA

Byabagambi John Bekiita (Mrc/Uvri Uganda Research Unit On Aids), Mutonyi Gertrude (Mrc/Uvri Uganda Research Unit On Aids), Kadama Phillipa (Mrc/Uvri Uganda Research Unit On Aids), Agaba Harriet (Mrc/Uvri Uganda Research Unit On Aids), Woodburn Patrick (Mrc/Uvri Uganda Research Unit On Aids), Twesigye Rogers (Mrc/Uvri Uganda Research Unit On Aids)

Introduction: The objectives of this study were to determine the incidence of pregnancy and prevalence of family planning (FP) use among women in HIV sero discordant couples relationships.

Methods: HIV Discordant couples are identified through voluntary counseling and testing. Couples are invited to the clinic for detailed study information and eligible couples are recruited. HIV risk reduction counseling, condom promotion and provision, FP counseling and referral to the FP clinic, HIV and pregnancy (females) testing are done.

Results: Between July 2006 to December 2007, a total of 297 (137 F+M- and 160 F-M+) HIV sero discordant couples were enrolled. A total of 39 women (13%) were pregnant at enrollment (19 HIV positive women; 20 HIV negative). 23 pregnancies were observed among 178 women (51 HIV positive; 127 HIV negative) in 120 women years of follow up (wyo). The overall pregnancy rate at follow up was 19/100 wyo (14/100 wyo among HIV positive women and 21/100 wyo in HIV negative). At enrollment 142 (48%) of women reported current use of any modern FP method. 71% of women using FP reported using condoms as the main FP. Only 31% women used condoms consistently. At one year there was an increase in overall reported condom use and consistency use among women using FP from 71% to 90% and from 31% to 49% respectively.

Conclusion: Despite regular HIV and FP counseling provided, we have observed a high pregnancy rate, low condom use and FP uptake among HIV discordant couples

Conflict of Interest: None disclosed

Financial Support/Funding: International AiDS Vaccine initiative MRC/UVRI Uganda Research Unit on AIDS

PO-1563

INFLUENCE OF STRESS, DEPRESSION AND ANXIETY ON SEXUAL DYSFUNCTION.

Cedres Santiago (Centro Plenus - Uruguay), Dartayete Gabriela (Centro Plenus - Uruguay), Pombo Rosana (Centro Plenus - Uruguay), Martinez Adriana (Centro Plenus - Uruguay)

Introduction: Sexuality is a psychological construction of the personality resulting from the interaction of organic, factors, congenital characteristics, environmental circumstances and social phenomena, in which the individual develops himself. That is why it has to be dealt with through a multi-

disciplinary, systemic and holistic approach. This paper was made at Centro Plenus in Uruguay, where there is a multidisciplinary group that gives attention to all those patients that think they have some type of sexual dysfunction.

Objectives: To determine the influence of stress, depression and anxiety on sexual dysfunction

Methods: Of the studied cases, 100 predominantly psychogenic subjects with sexual dysfunction were selected. DASS score was used to determine level of stress, depression and anxiety.

Results: There was a relationship between bad sexual performance with high levels of stress, medium levels of depression and anxiety. Among the results, it was observed more stress in man with high educational level, work with people above, erectile dysfunction for more than 3 month. In women, the high stress was observed when they had teenager sons, low sexual desire for more than 3 month, bad relations with their partner for being unable to respond to the partner's sexual demand.

References: Brown, T.A., Korotitsch, W., Chorpita, B.F. & Barlow, D.H. (1997). Psychometric properties of the Depression Anxiety Stress Scales (DASS) in clinical samples. Behaviour Research and Therapy, 35, 79-89.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1565

OSTEOPOROSIS AND MALE AGE-RELATED HYPOGONADISM.

Cedres Santiago (Centro Plenus - Uruguay), Palasti Silvia (Centro Plenus - Uruguay), Maciel Gabriel (Centro Plenus - Uruguay), Gonzalez Carolina (Centro Plenus - Uruguay)

Male age-related bone loss is caused, as main factor, by idiopathic hypergonadotropic hypogonadism that occurs with advancing age.. All men with hypogonadism should have their bone mineral density (BMD) measured, because It is known that it is low in this men. However, the rate and sites of bone loss following testosterone deficiency are not known.

Objectives: Review the BMD in hypogonadal men that consulted for sexual dysfunction.

Methods: BMD measurements were performed in the lumbar spine (LS) and femoral neck (FN) using Osteodensitometry Equipment DXA Fan-Beam, GE Lunar Prodigy Advance, Software 9.0 version, results compared with same age not hipogonadal men with T-score and Standard Deviations (SD). Hypogonadism was defined by calculating Free Serum Testosterone (FT).

Results: 33 patients were included. The mean age was 54. All of them had hypogonadism as the only risk factor for osteoporosis. There was a relation between reduction of FT with reduction of BMD. 13/33 had T-Score > -1.0 SD (normal BMD) with low hypogonadism and 4/33 had T-Score < -2.5 SD (osteoporosis). The observed reduction in BMD in the LS and FN did reach statistical significance (p<0.005).

Conclusion: These findings demonstrate a significant loss of bone in hypogonadism and the femoral neck and lumbar spine are the preferred sites

for monitoring bone loss in older men. In addition, markers of bone resorption may be helpful.

References: Orwoll ES. Osteoporosis in men. *Endocrinol Metab Clin North Am.* 1998;27:349-67.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1567

RELATION BETWEEN BODY MASS INDEX, WAIST CIRCUMFERENCE, BODY FAT AND VISCERAL FAT WITH SEX STEROID HORMONES.

Cedres Santiago (School Of Medicine - Uruguay), Goñi Mabel (School Of Medicine - Uruguay), Dufrechou Carlos (School Of Medicine - Uruguay)

Cross-sectional data suggest that visceral fat is associated with decreased production of testosterone. It has been hypothesized that there is increased aromatization of testosterone to estradiol and alteration of the hypothalamic-pituitary-adrenal axis in obese ageing men. Our objective was to examine the relation of obesity (body mass index (BMI) > 30 kg/m²), of central obesity (waist circumference > 100 cm), of body fat (> 20%) and of visceral fat (> 10%) to change in sex steroid hormones in men.

Methods: One hundred men with complete anthropometry and sex hormone level were included between April and July of 2008 from consulting in Uruguay. Free and total testosterone (FT and TT), were assessed at 10:00 AM. Health behaviours and medical history were obtained by structured interview. Body Composition Monitor was used to define the visceral and body fat. Repeated measures regression was used to describe trends in steroid hormones in relation to obesity status, adjusting for age, smoking, alcohol, chronic illness, and physical activity.

Results: Visceral fat rather than body fat or BMI was associated with decreased levels of total and free testosterone.

Conclusions: Visceral Fat may predict greater decline in testosterone levels with age than central obesity or body mass index.

References: Hypogonadism and Metabolic Syndrome. J. Shah, G. The Journal of Urology, Volume 175, Issue 6, Pages 2366 - 2367

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1570

IMPACT ON PEOPLE LIVING WITH HIV/AIDS (PLWHA) FROM A GENDER PERSPECTIVE

Joshi Nemu (Nepal)

Existing gender inequalities and social imbalances propel discriminatory practices and violation of human rights more in women group than men. My study brings how pervasive stigma and violations affect women. The findings are helpful understanding the significance of placing gender perspective at the centre of planning, policies and implementation with rights based

approach. My study took place at the Shukraraj Tropical and Infectious Disease Hospital, Nepal in 2004, was exploratory based on purposive sampling method. I carried out the research for three months on people living with HIV/AIDS, fifteen male and fifteen female and their family members. Respondents had come for medical assistance or been admitted at the hospital during my study. The biggest challenge was approaching female respondents during study. The major findings were that challenges, stigmatization, levels of impact on PLWHA observed from gender lens have brought novel insight to understand the importance of human rights in tackling HIV/AIDS. Gender inequality was center of my research. HIV/AIDS have hit women harder; in present context, they face rejection, no support, left to survive epidemic alone. Many women, who had contracted from their husbands, after their death, were facing economic burden, deprivation from care and support. This has led epidemic intensify in Nepal. Further information is required for better understanding of violation of rights. Rights of PLWHA needs to be ensured, policy makers need take up strategic gender interests to safeguard human rights and dignity.

Conflict of Interest: None disclosed

Financial Support/Funding: i would like to request for a suitable funding if they are available.

PO-1583

SEXUAL INTERCOURSE DURING PREGNANCY AS A SOURCE OF ANXIETY OF A PREGNANT WOMEN

Wróbel Beata (Nzoz Dla Zdrowia Rodziny), Wróbel Jolanta (Szpital Specjalistyczny D?Browa Górnicza), Sadowski Krzysztof (Klinika Ginekologii I Po?O?Nictwa ?Um Katowice), Lukasik Adrian (Klinika Ginekologii I Po?O?Nictwa ?Um Katowice)

Objective: The assessment of appearance of feeling fear, connected with the possibility of occurrence of threat to the foetus resulting from undertaking sexual contacts by healthy pregnant women during pregnancy. Material and Methods: 373 women were examined by means of a self-constructed questionnaire concerning questions about sexual life during pregnancy. The examination took place between 1-5 day after delivery, when examined women stayed in an obstetric ward. All women delivered at term healthy children. Obtained research' results were submitted statistical analysis.

Results: Among 373 examined women between 1-5 day after delivery, 319 (85,5%) had sexual intercourses during pregnancy, 54 (14,5%) did not undertake sexual activity during pregnancy. In the group of sexually active women during pregnancy, 196 (52,2%) had a feeling of fear for the threat to the foetus resulting from this activity.

Conclusions: 1. Pregnant women feel the need of sexual activity which they accept, and in most cases undertake sexual intercourses during pregnancy. 2. More than a half of pregnant women undertaking sexual intercourse, in spite of their acceptance and willingness to have sex, have an accompanying feeling of anxiety and fear for the threat to pregnancy owing to this activity. 3. It is advisable for the doctor running the pregnancy and an obstetrician to talk with a pregnant woman about differences in sexual in-

tercourse and the quality of sexual life during pregnancy, minimizing the occurrence of fear for the threat to the foetus.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1584

EVOLUTIONARY PERSPECTIVE ON SOCIAL AND PERSONAL CORRELATES OF MALE BISEXUALITY IN BRAZIL, TURKEY AND THAILAND

Cardoso Fernando Luiz (Santa Catarina State University - Udesc / Brazil)

Introduction: This study examines male bisexuality in three cultures: Brazil, Turkey and Thailand, in both lower and middle classes. It uses quantitative techniques to compare the social and personal characteristics of young men with same-sex and opposite-sex orientations or behaviors to the characteristics of exclusive homosexuals and exclusive heterosexuals.

Methodology: It began with the intention of comparing bisexuals to heterosexuals in order to help gain a better picture of cross-cultural similarities and differences. By comparing traditionally Christian, Moslem and Buddhist cultures in different regions of the world, it also provided for a good deal of cultural variation.

Results: Indeed, this study found many similarities across the three cultures. Most dramatically, many of the sexual proclivities and childhood backgrounds of homosexuals differed in a parallel fashion from the sexual proclivities and childhood backgrounds of heterosexuals. While the differences between bisexuals and heterosexuals were far less marked, there were also parallels here – In particular bisexuals (especially middle-class bisexuals) scored “intermediate” between heterosexuals and homosexuals on more girlish childhood backgrounds. In all three societies the lower-class bisexuals were also somewhat more likely than lower-class heterosexuals to lack a steady job and to give credence to clientelism.

Conclusion: This study showed bisexuality to involve many different factors, but one factor in particular may be especially helpful in explaining some of the cross-cultural variation in homosexual systems – the recent rise of the “gay system” in which exclusive homosexuals have sex primarily with other exclusive homosexuals.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Capes and UDESC - Brazil

PO-1586

SEXUAL INITIATIVE AND INTERCOURSE BEHAVIOR DURING PREGNANCY AMONG BRAZILIAN WOMEN: A RETROSPECTIVE STUDY

Cardoso Fernando Luiz (Santa Catarina State University - Udesc / Brazil), Sacomori Cinara (Santa Catarina State University - Udesc / Brazil)

Introduction: Sexual behavior may be altered during pregnancy.

Methodology: to investigate the behavior of pregnant women in terms of

level of sexual initiative and change in sexual positions for intercourse we used a retrospective research with 156 pregnant Brazilian women who completed a questionnaire.

Results: before pregnancy, both partners usually initiated sex, while during pregnancy the male partner generally did. In general women that took the sexual initiative showed better scores in the sexuality variables. During pregnancy the use of each sexual position reduced significantly. Couples where both partners take the sexual initiative tend to accept a wider variety of sexual positions.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: CNPQ and UDESC - Brazil.

PO-1588

A WARMER

Kato Ryukichi None (Md), Orio Jyunko None (Student)

Both men suffering from primary ED and women experiencing frigidity have difficulty in maintaining a happy marriage: the couples with these problems may be able to cohabit but their lives will be sexless with no likelihood of ever having children. Being involved in tending these individuals over the years, one notices that there are many young women who are well aware of the need for therapy yet too embarrassed to seek professional help actively. In reality, because of their immature personality, many are incapable of understanding the gravity of the problem that they face. If they only realize that sexual activity is important next to life itself, a therapeutic device, which has been patented and is currently pending approval by the Ministry of Health, Labor and Welfare, may be privately used for autogenic training at home. This device allows one to measure pressure within the vagina, allowing the patient to determine her own sexual capability. On the other hand, there are those women who are sexually normal but not capable of a full sexual act. Because of frigidity, some women do not get full satisfaction in spite of sexual acts: their sexual desire, being left unfulfilled, results in stress, which presents in the form of undefined physical complaints or psychosomatic symptoms.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1591

INTRODUCING A NEW CONCEPT IN SEXUAL AND REPRODUCTIVE HEALTH CARE BY HJÄRTANS LUST

Ivarsson Irene E M (Private Clinic, Hjärtans Lust, Magasinstorget 5, 582 26 Linköping, Sweden)

Introduction: According to the WHO all people should have the same access to Sexual and Reproductive Health Care Services and the right to achieve a satisfying, safe and pleasurable sexual life. This goal, however, has not yet fully been achieved for men in Sweden. The Public Welfare System is focusing on women in regard to sexual and reproductive health. Sweden has many Gy-

naecologists, but a few Doctors in Andrology. There are many Women's clinics, but a few Men's clinics, General health screening for women, but not for men. AIM To provide professional counseling and treatment in sexual and reproductive matters to men and women in all ages, and on equal bases.

Concept: February 1. 2007, Hjärtans Lust (private clinic, authorized by Socialstyrelsen) was opened with a network to specialized Doctors and authorized Psychotherapist. The focus has been directed to three areas: Erectile dysfunction, Infertility and Vestibulit. Couples are consulting for decreased sexual interest or satisfaction in their relationship, or looking for advice in family planning. The counseling method used is based in Cognitive Behaviour Therapy and Mindfulness. Couples with infertility problems get guidance in Natural Family Planning. Acupuncture is practised according to the Western standards. This kind of treatment is offered to clients with Infertility, PCO's syndrom, or Vaginism, Urine incontinence or problems at the Menopause.

Results: Most of the problems listed above have responded favourably to the treatment and counseling. The general impression is that both sexes fully accepted the ideology of Hjärtans Lust.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None

PO-1598

RELATIONSHIPS, LOVE AND SEX AMONG ETHIOPIAN IMMIGRANT ADOLESCENTS IN ISRAEL

Nudelman Anita (Eotvos Lorand University)

Introduction: Beta Israel - the Jews of Ethiopia - lived for centuries according to a traditional life in their villages in Ethiopia. During the past three decades, the community has immigrated to Israel. Their integration process has affected most life spheres, among them gender relations and marriage patterns. This paper is part of a comprehensive study on sexuality among Ethiopian immigrant adolescents studying in residential schools in Israel. It dwells on their perceptions, attitudes and beliefs concerning relationships, love and sex.

Method: Focus groups were selected as the most appropriate research method due to its explicit use of group discussion to produce data and insights on sensitive issues related to sexuality in a friendly atmosphere.

Findings and discussion: Ethiopian adolescent immigrants distinguish three main categories of relationships between girls and boys: friendship, casual and steady romantic ones. Most of them aspire to the latter kind of relationship, although some do not really understand its significance. Love and trust are perceived as important qualities in a steady romantic relationship. Sexual relations are also usually considered a part of it, although they sometimes raise ambivalent feelings, especially for girls. Additional motivators and barriers for engaging in sexual relations are also investigated.

Recommendations: The findings of this study enable the understanding of the dilemmas facing Ethiopian immigrant adolescents and will be used to improve culturally-significant sexual health education for this target population in residential schools in Israel.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1603

EJACULATION LATENCY TIME

Díaz Rafael A (Instituto De Angiología E Impotencia Sexual), Eguez Fernando, , Beltran Dorys G (Instituto De Angiología E Impotencia Sexual)

Introduction.- Ejaculation is neurological reflex with two mechanisms: afferent reflex begins by stimulating penis receptors than travel through dorsal to pudendal nerves, sacral cord and hypothalamus. Parallellement uretra's stimulation goes S2-S4 ejaculatory centers. Efferent reflex is response from hypothalamus to parasympathetic nerves and ganglia. There are three states of sensitivity and response sexual stimulation : normal, hyposensitivity and hypersensitivity. To know the lenght on time of partial afferent, efferent or whole reflex arc we use several tests.

Methods.- For to know ejaculatory latency time we use: a) sensitivity vibratory threshold, that is very easy test, that consist to put penis over a vibratory machine and wait 4 minutes maximum. Normal is if patient can get a rigid erection but not ejaculation. If patient ejaculates less than one minute is equal a high sensisitivity. b) For skin sensitivity test we use a electrode which is applied on several places on penis in accordance with a map. Patient recognize signals emitted by the machine. c) For neurophysiological tests we perform : bulbocavernous reflex, evoked genito-cerebral potentials, bulbocavernous latency time, dorsal nerves latency time ,and sural and tibial nerves latency time as check test.

Results.- We have performed almost, every test for each patient, and only the average is bigger than the 70-80 per cent we take it us a positive result. (see pictures)

Conclusions.- Waves amplitude and morphology are so important as conduction times.- Latency time is more important than evoked potentials.- evoked genito-cerebral potential reflect ability for communication between brain and genital area.-

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1607

WANTED SEX: WOMEN DESIRE VS SOCIETAL NORMS

Kambona Caroline A. (Family Health Options Kenya)

Wanted sex or "good" sex is a concept that has never attracted the concern of many programmers, researchers and policy makers. Majority of interventions seeking to address sexual and reproductive health and rights have often focused on the consequences of what is considered as "bad" sex such as unplanned pregnancies, unsafe abortion, STI and HIV among others. The tendency to stress problems related to sexuality pose a risk to reinforcing negative stereotypes to sexuality across generations. This idea of looking at sexuality as a problem related concern has dominated scholarly work and has tended to homogenize and victimize female population. Women are

therefore viewed as victims of bad sex or objects of what is done for them. The underlying idea that men have absolute power in sex while women are just recipient and submissive to male authority is a notion that has been perpetuated by societal norms that placed men as head of households with absolute and express authority to make all decisions. This paper reflects on the spill over effects of an ongoing intervention, Young Men as Equal Partners (YMEP) implemented in partnership with The Swedish Association for Sexuality Education (RFSU) and supported by Sida. The paper therefore seeks to open dialogue in understanding women plight in regard to sexuality within a male dominated (patriarchal) society. The key questions addressed include: Do women have hope of desire in sex? What are some of the barriers to women attaining pleasure in sexual relationships?

Conflict of Interest: None disclosed

Financial Support/Funding: Project funding by the Swedish International Development Agency (Sida)

PO-1622

SEXUAL DYSFUNCTIONS IN WOMEN WITH DISORDERS OF SEX DEVELOPMENT. A CLINICAL REPORT

Ryding Elsa Lena (Dept. Ob Gyn, Karolinska University Hospital)

Introduction and objectives: Women with various rare disorders of sex development are referred to Karolinska University Hospital. Treatment includes sex counselling when considered needed. Women with these congenital disorders are faced with problems of fertility, identity and sexuality. **Method:** Case report of 15 women (age 15-48) with congenital adrenal hyperplasia (CAH), congenital androgen insensitivity syndrome (CAIS), Turner's syndrome (X0), Mayer-Rokitansky's syndrome (vaginal agenesis), or cervical agenesis, who were referred for psychosexual counselling. The cases will be sufficiently modified to avoid recognition.

Results: The main sexual dysfunctions of the women were: Orgasmic dysfunction (9) and dyspareunia (6). Two girls were sexually inexperienced. Four heterosexually oriented women with severe dyspareunia had developed a sexual phobia after painful trials of intercourse. Two married women experienced no sexual motivation or pleasure. Three women were in a relational crisis and four were depressed. The sexual problems were related to the specific inborn condition, but also to general issues: Sexual identity, sexual preferences, secrecy/openness and medical care during childhood and adolescence.

Conclusion: Both the inborn conditions and the operations performed seem to affect the sex life of women with disorders of sex development. Centralized multi-professional teams including sexologists are needed to care for girls (and their parents) and women with these rare conditions. Repeated examinations and operations during childhood should be avoided. Reasonable openness about the diagnoses during childhood seems to be related to less shame in the adult women.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1624

SPORTS AS A MEANS OF INTEGRATING REPRODUCTIVE HEALTH EDUCATION IN NIGERIA:YIRHEA WAY

Obinna Okonkwo Chijioko (Hope Givers Organisation/ Nnamdi Azikiwe University Awka Anambra State Nigeria), Scholarstica Amah Chioma (Yirhea), , Nnamdi Okoye Ernest (Yirhea)

Introduction/objectives: young people have different needs and problems from adults;thus,they have to be treated and their needs addressed differently.However,sports especially football passion for many young people in Nigeria is the most effective way to do so. This project uses Youth Integration on Rights Health and Eradication of HIV/AIDS(YIRHEA)Street Football(YSF)a reproductive health package to create a fun open environment in which young people can comfortably explore sensitive issues.

Methodology: This project which uses special football(Monkey post)was made up of a team of 4 with 2 players as reserves.It targeted young people within ages of 15-19 years. 8 teams made up of 48 young people were selected and registered.Participants were enroled in a compulsory 2-day workshop tagged YIRHEA Street Footbal(YSF) Institute.YSF Institute provided participants with basic Reproductive health education including life skills,access to condoms and information on its use.Prizes were awarded to the winners and outstanding players.

Result: YSF institute was compulsory for competing in the soccer competition,so no attrition was witnessed during the workshop that benefited 150 young people.This program was reported at young people favourite TV and radio sports programs including 4 National Dailies. It built the capacity of young people,provided them with resource materials,condoms and discovered new talents.

Conclusion: There is need for donor agencies and programmers to explore this avenue so that they can reach more young people as it is cost effective.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1637

RESEARCHING CHILD SEXUALITY IN A CONSERVATIVE SOCIETY: A FIELD EXPERIENCE

Rambaree Komalsingh (University Of Mauritius)

Introduction + Method(s): Mauritius is considered as a conservative society where sex is still taboo (Rambaree, 2008, Rambaree, 2007). This paper concerns the main challenges in carrying out qualitative social research on child sexuality issues in a conservative society, like Mauritius.

Findings and discussion: The findings of the paper concern (a) possible challenges in relation to respecting social research ethics, (b) practical advice on how to approach ethical considerations, in studying child sexuality in a conservative society like Mauritius.

Recommendations: Novice social researchers planning to study child sexuality in a conservative society must prepare a number of possible scenarios and strategies for successfully completing their research. These possible sce-

narios and strategies should be in line with social research ethical guidelines.
References: Rambaree, K. (2008) 'Internet-Mediated Dating/Romance of Mauritian Early Adolescents: A Grounded Theory Analysis', *International Journal of Emerging Technologies and Society*, 6 (1): 34-59
 Rambaree, K. (2007) 'The Ecology of the Internet and Early Adolescent Sexuality in a Technology-driven Mauritian Society' PhD thesis at the University of Manchester, UK.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None (I am one of the applicants for scholarship)

PO-1640

INFERTILE COUPLES WHO UNDERGO TREATMENT: EXPERIENCES OF THE CONSEQUENCES ON SEXUALITY

Järholm Stina

Introduction: About 10-15 % of adults have the experience not getting pregnant, when they have a wish to have a child. For some, this life situation is resolved spontaneously. Some undergoes investigation, followed by varying treatments, resulting in a child, some adopts, and for others this situation are permanent, and without a solution. When this is the case, existential questions often arise. Earlier studies show that couples who become parent after IVF-treatment are just as content, or more, with their relationships and sexuality compared to parent who conceived spontaneously. Little is known about the couples who continue their relation without a child. Clinical experiences are that many women and men struggles with questions concerning the meaning of sexuality.

Method: In a pilot study, located to the Reproduktionsmedicin Sahlgrenska Universitetssjukhuset Goteborg, these questions were studied. Women and men, patients in this clinic, answered a questionnaire about their experiences how infertility and treatment effected sexuality. The questionnaire also included open questions about experiences.

Results: Many women and men experienced that infertility and treatment influenced their sexuality in a negative way. However, an experience existed of a higher degree of closeness and a strength in the relation; however a closeness not always including sexuality.

Conclusion: In work with individuals who's life in some way is affect of infertility, the sexual dimension needs to be further investigated. Clinicians working with infertility ought not only focus on pregnancy. Another dimension is to work with the sexual dimension, neither there will be a child or not.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1641

SEXUAL LIFE FOLLOWING TOTAL ABDOMINAL HYSTERECTOMY

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public), Chmel Roman (Obstetrics And Gynecology Department, Charles University 2Nd Medical Faculty And Teaching Hospital Motol, Prague, Czech Republic), Novackova Marta (Obstetrics And Gynecology Department, Charles University 2Nd Medical Faculty And Teaching Hospital Motol, Prague, Czech Republic), Horcicka Lukas (Obstetrics And Gynecology Department, Charles University 2Nd Medical Faculty And Teaching Hospital Motol, Prague, Czech Republic), Gregorova Pavlina (Gona – Private Sexological Center; Prague, Czech Republic)

Introduction: The aim of this study was to assess the effect of total abdominal hysterectomy on sexual lives of patients in the postoperative period.

Method: Questionnaire study of women in which total abdominal hysterectomy for benign gynecological disease was performed. Eighty-five patients were asked about sexual desire, sexual arouse, sexual satisfaction, sexual fantasy, pain during sexual intercourse, frequency of sexual intercourse in the pre- and postoperative periods. Also reaction of the patients' partners was asked in the questionnaire. For statistical analysis we used the Chi square test.

Results: We did not find significant difference in dyspareunia and sexual satisfaction after the operation. Sexual desire was similar before and after the operation. We did not find significant difference in frequency of intercourse in the postoperative period. But we noted lower sexual fantasy of the patients and lower interest of the patients' partners in intercourse after the operation. When the patients were divided into two groups according to the presence of endogenous or exogenous estrogen, no difference was seen between the two groups in the postoperative period.

Conclusion: The majority of women and their partners didn't report any negative impact on sexual satisfaction after abdominal hysterectomy. The only predictor of negative sexual experience of patients after hysterectomy was negative sexual experience before hysterectomy.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1642

THE CONTENTS OF POSTGRADUAL PREPARATION OF ADULTERY SEXOLOGY SPECIALISTS

Rodtzevich Olga (Belmaps)

Adultery sexology is one of the most actively developing branches of Belarusian healthcare system. Preparing specialists in the system of postgradual education is very actual and important task taking in consideration its interdisciplinary character, further development of methodological, scientific and organizational basics. Courses of advanced training at adolescent medicine for doctors were organized at the chairs (pediatrics, obstetrics and gynecology, general medical practice) of Belarusian Medical Academy of Postgraduate Study (BelMAPS). Problems of physiology and pathology of reproductive system, its functional diagnostics, medical expertise of adolescence, etc. were added to the pediatrics curriculums of medical universities of the country. However, obtaining additional knowledge in childish

and adolescent sexology was still difficult. But due to the combined Swedish-Russian-Belarusian project “Healthy adolescent” with the help of UNICEF it became possible. From that moment educative seminars for specialists of the “Friendly to adolescents” centers (FAC) started. In 2009 the first course of advance training in adolescent sexology was held. The main aim of this work is to give an adolescent a complex medical and social help by united team of specialists. Standards of medical help were the basis of created FAC model. At the chairs of the BelMAPS basics of adolescent sexology teaching, curriculums and specialists’ preparation model were developed by now. From our point of view special preparation of specialists in adolescent sexology should be a complex system which consists of 2 levels: undergraduate (basic) and postgraduate study.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1643

AN IMPACT OF THE PHYSIOTHERAPY ON THE SEXUAL DYSFUNCTION AND THE CHRONIC PAIN IN THE PELVIS AREA

Bruhova Ludmila (University Of The South Bohemia In Ceske Budejovice, Faculty Of Health And Social Studies), Binova Alana (University Of The South Bohemia In Ceske Budejovice, Faculty Of Health And Social Studies)

An Impact of the Physiotherapy on the Sexual Dysfunction and the Chronic Pain in the Pelvis Area

Introduction and Method: A pelvic floor is one of the crucial areas among the locomotive organs. The musculature of the pelvic floor is crucial especially for sexual and reproductive health of the woman. Only thanks to the method invented by Ludmila Mojziso, we are able to influence this essential area of the locomotive organs. It is to highlight that the treatment of the musculature of the pelvic floor and a coccyx is just a substantial beginning of the therapy. We cannot expect any success without that.

Finding and discussion: Strictly speaking, the point is to manipulate the pelvis and all its parts into the right position. An asymmetry in the pelvic area causes uneven straining and shortening of individual ligaments and muscles, which just stimulates nerves located here. This situation might be the primary cause of many complaints such as dyspareunie, dysmenorhea or functional female sterility.

Recommendations: This method is highly recommended also for other diagnoses, for instance: vertebrogenic complaints, conditions after the gynecological surgery, obstipation, retention, urine incontinency and others. Dynamic exercises and massages as well as postisometric relaxation of the pelvic floor musculature, mobilization of the sacrolumbar joints, lumbar backbone and ribs – all that is also a part of the therapy.

References: Although, the usage of physiotherapy in the sexual dysfunctions treatment has not been clearly defined yet, the impact of the physiotherapy on clinical symptoms is indisputable though.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1650

TANGO AND SEXUALITY

Moreira Carlos (Clinica Masters), Damario Rossana (Clinica Masters), Ruiz Rodrigo (Clinica Masters)

Introduction: Tango is considered one of the most erotic folk dances and produces intensive feelings in its performers. Born in the Rio de la Plata (Buenos Aires and Montevideo) around the middle of the XIX Century by the combination of european (italian, german, polish), african and native music. Nowadays there is an explosive development of tango dancing all over the world. Approach: We show a couple dancing an specially erotic tango where the most common figures are performed and analysed. The dancing couple embraces and she continously follows similar and harmonius movements.the requirements of her companion. Many figures such as the sanwichito (her leg between his), the toboggan (he leans backwards and she slides down astride on his leg) and the cadence (the couple takes a few turns, lightly embraced, oblivious of music) are extremely erotic.

Findings and discussion: Is the tango dancing promoting sexual encounters? How much fantasies are created around this dance ? How the dominion of this dance may straight selfsteam? Video exhibition of 10 minutes.

Conflict of Interest: None disclosed

Financial Support/Funding: No financial funding at all.

PO-1655

DEVELOPING AN ONLINE SEXUALITY AND DISABILITY RESEARCH MODEL

Shuttleworth Russell (University Of Sydney), Weerakoon Patricia (University Of Sydney)

This presentation describes the development of a research website based upon a holistic understanding of the sexual health of disabled people that incorporates the perspectives of multiple disciplines and methodological frameworks. A holistic model and website were developed to assist scholars studying in this area. First, a systematic review of the sexuality and disability research literature since 1996 was conducted. This research was categorized across multiple dimensions including topic, discipline, methodology and theory. Certain trends and gaps over time were noted and this was incorporated reflexively into the model as an historical understanding of development within the field. An understanding of the range within each of the primary categories of the model also developed. For example, various methodologies were noted in the literature ranging from positivism to grounded theory. An online database of sexuality and disability research articles was subsequently developed as a scholarly resource and was archived according to the model’s categories and the findings within each categories range. A feature was also added to the website that enables searches in terms of multiple dimensions. For example, in a particular search one could tag multiple sclerosis, body image, questionnaire, and psychology to retrieve articles concerned with all of these aspects. The fact that researchers now have a resource available based on a holistic but historically transparent

model of sexuality and disability research to assist them in their review of the literature and plan for their own research should have enormous implications for growth in this area of study.

Conflict of Interest: None disclosed

Financial Support/Funding: International Development Program Fellowship, University of Sydney

PO-1656

SEX THERAPY FOR COUPLES WITH A PARTNER WITH DISABILITY IN CHINESE CONTEXT: A CLINICAL REFLECTION

Yau Matthew K. (James Cook University)

Introduction + Method: Acquired disability affects various aspects of human function. Difficulties in resuming sexual activities and intimate relationship are also the common complaints from persons who have acquired a disability. This paper intends to provide insight to the challenges confronting these couples. The author, who is rehabilitation professional, sex therapist and trainer, reflects on his clinical teaching and practice among the Chinese clients to document the experience of combining sex therapy and couple counselling to improve and enhance the intimate relationship between the client couples.

Findings and discussion: Couples in therapy with one partner suffering from disability can be a challenging task for counsellors or health care professionals. They do not only need to deal with the relationship problems which may or may not be directly arose from the disability. The burden of care and barriers to intimacy can add further stress to the already strained relationship. Expectation on marriage, level of disability, financial viability and family support also play a part in influencing the stability of relationship.

Recommendations: A pragmatic and eclectic approach seems to be cultural relevant in addressing the couples' needs, as well as promoting the harmonious, intimate relationship. Case illustrations will be used to describe the general principles in working with this target group.

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Conflict of Interest: None disclosed

Financial Support/Funding: NIL

PO-1657

THE EVOLUTION OF FEMALE MENOPAUSE

Kim Won-Whe (Graduate School, Seoul Women'S University)

Most animals remain fertile until they die, or until close to that time. So do as human male, but female undergo steep decline in fertility from around forty, leading to universal complete sterility at around fifty. Is it merely due

to recent increase in human expected life span? Or is it part of a widespread phenomenon of animal menopause? What is the rationale of depletion and aging of the egg supply at certain age and why did natural selection program women such that their eggs become depleted or unresponsive in their mid or late forties? The aging of female reproductive system also is like the aging of the other organs, such as kidney, heart and brain, etc. and/or is due to immune system, free radicals, hormones, and cell division. However, natural selection ensures that our body unconsciously maintains and repairs itself. Menopause can be explained as one of the most bizarre features of human sexuality. Sex is fun for us because women have concealed ovulations and are constantly receptive throughout her life. The evolution of female menopause with natural vs. sexual selection as well as the theory of biologic investment in repair are to be discussed.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1658

EROTIC PAINTINGS OF KOREA IN THE PAST

Kim Won-Whe (Graduate School, Seoul Women'S University), Lee Kyu Sup

Though sexuality brings similar physical and emotional manifestations, their expressions through art show many cross-cultural variations. Even among three East Asian countries under same influence of Confucianism for over two thousand years, the characteristics of the erotic paintings differed in many aspects. Chinese erotic painting focused more on physical sex postures and deal with the amusement of imperial family or upper class while Japanese ones developed their unique characteristics through the collaboration with Ukio-e(floating-world picture), in that the coloring, exaggeration of sexual organ, and the special shape of clothing and furniture fascinate the people. Korean erotic art was formerly influenced by China's Ming dynasty eroticism but in 18th century, Chosun erotic art was able to be developed to its own identity. They were very unique and reveal sexual custom of those days through its description of various social classes and situations. Korean erotic paintings, Choochwaha, show the real life of ordinary people of those days and make you feel warm and quite sensitive as well as a little humor.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1660

RELATIONSHIP BETWEEN SEXUAL POSITION AND SEXUAL SATISFACTION OF WOMEN DURING PREGNANCY: A TAIWAN STUDY

Lee Jian Tao (Chang Gung University), Lin Chao-Ling

The purpose of this cross-sectional correlation study was to investigate the sexual positions and sexual satisfaction of women during pregnancy. Two hundred and fifteen pregnant women were recruited through a purposive

sampling of outpatients registered at the ante-partum clinic of a medical center in Northern Taiwan. Participants were required to answer a self-reported structured questionnaire, which included a Sexual Satisfaction Scale (Young et al., 1998) and Sexual Activity Checklist (Lee & Yen, 2005). Data was collected in 2007. Descriptive and One-way ANOVA, Wilcoxon matched-pairs signed-rank test, Kruskal-Wallis one-way analysis of variance by rank and Chi-Square Test were used to analyze the data. The results are listed below: 1. A decrease in coital frequency from the first to the third trimester was found ($p < 0.05$). Most of the women in the first and second trimesters reported 0-1 frequency of intercourse per month. More than half of the women in the third trimester claimed that they had no intercourse for four weeks. 2. More women during pregnancy have sex with the man on top and face to face sexual positions (67.6%). There was no significant difference in sexual position in each trimester. 3. The women with better "sexual satisfaction" tended to adopt the "woman on top", "face to face", and "abdominal supportive" sexual positions than women with worse "sexual satisfaction". This suggests that pregnant women adopt the woman on top and face to face sexual positions, which may increase the sexual satisfaction.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-1661
FACTORS OF ADOLESCENTS' SEXUAL HEALTH IN TAIWAN: A STRUCTURAL EQUATION MODEL

Lou Jiunn-Horng (Jen-Teh Junior College Of Medicine & Nursing And Management),

Introduction and objectives: The purpose of this cross-sectional study was to test a cause-and-effect model of factors affecting sexual health among Taiwanese adolescents. Three hypotheses and a model were proposed in which the relationships among sexual knowledge, sexual attitudes, and safe sex behavior were explored.

Methods: The study collected data from 823 adolescent students at one junior college in central Taiwan. A structural equation modeling (SEM) was used in this study.

Results: The results revealed that sexual knowledge has a negative effect on safe sex behavior. Adolescents with higher sexual knowledge did not have greater support on practicing safe sex behavior.

Conclusion: The findings provide a reference for the safe sex behavior programs for adolescents in Taiwan. The study demonstrates the importance of sexual knowledge in predicting safe sex behavior. However, the improvement in sexual attitudes is found to be irrelevant to the promotion of safe sex behavior of adolescents.

Conflict of Interest: None disclosed
Financial Support/Funding: no funding

PO-1662
THE EXPERIENCE OF COMPLIANCE AND PSYCHOSOCIAL CARE IN CENTRALAFRICAN REPUBLIC

Bongopassi Rodrigue (Centre D'Information, D'Education Et De Communication Pour La Santé Sexuelle Des Jeunes), N'Vend Mozialo Luc (Association Of Mens Living With Hiv), Moindia Yvonne (National Congress Of Young Women Living With Hiv)

Introduction: The seroprevalence rate in Central African Republic is 6.2%. PLHAs 4389 are eligible for antiretroviral treatment. 60% of PLWHA on ARV do not taking the drugs, lack of education on the treatment and lack of health workers.

Action: Establishment of consultation teams of compliance, consisting of a doctor, a nurse and trained PLWHA 8 on aid to Observance. Establishment of a support program for compliance Identification of members eligible to ARVs Preparing for Treatment Organization of the «speech» of experiences on taking the drugs, Regular home members of the association in taking the drugs Monitoring and evaluation of aid activities in observance Outcome 300 PLHIV affected of which 144 are eligible for treatment 54 are under ARV prophylaxis and 73 in Cotrimazole 14 PLHAs overlooked and 3 died Followed 41 patients made 32 players trained 4 clubs created Observance

Discussion and recommendations: Compliance has been improved through the availability and involvement of members of clubs. The experience has helped prevent treatment failure and to propose strategies for structured support and effective level of aid to adherence. It is recommended that: Extending the scope of activity throughout the country Take into account the expectations and priorities of PLWHA,

References: MICS 2006, United Nations Fund for Population Centre National de Référence des Maladie Sexuellement Centre d'IEC pour la Santé sexuelle des jeunes Association des Hommes VIH+ Congrès National des Jeunes Femmes VIH+

Conflict of Interest: No conflicts of interest
Financial Support/Funding: International NGO ESTHER

PO-1663
SEXUAL ABUSE OF PREADOLESCENT CHILDREN: GENDER DIFFERENCES IN SYMPTOMS AND TREATMENTS IN SOUTH-WEST NIGERIA

Popoola Abiodun A (University Of Ado Ekiti)

The study explores the symptoms and treatments of sexual abuse of preadolescent children in Nigeria. Various articles, reports and studies confirm the need for exploration of sexual abuse perpetrated by both children between ages 6 to 9. Adolescents, teenage, baby sitters or other friends are common offenders. NHSLs data reports that preadolescents' sex abusers are usually males but are not frequently abused by females. Abusive preadolescents are products of dysfunctional family backgrounds with developmental and psychological difficulties. This raises a lot of concern on efforts to curb sexual

abuse of preadolescent children. About 300 preadolescent boys and girls were investigated in two senatorial zones of Ondo State, Nigeria. Eighty (27%) males and 220 (73%) girls who hawk around garages and motor parks were purposively selected for the study. The sample were subjected to sessions of in-depth semi-structured interview of open and close ended questions on sexual abuse received before puberty with efforts aims at reducing the occurrence in the socio-cultural sector of the state. The results were analyzed using simple percentages and multiple regression analysis. The symptoms and effective treatments include, a wide variety of early and long-term symptoms, problems of depression and difficulty trusting others, most of the abusing children do not confront their feelings and reactions until adulthood. The practice need concerted effort as it is resulted from a complexity of socio-cultural and economic dimensions. Crisis intervention is a line of action, safe environment be established, legal authorities be involved to handle criminal charges and sanctions.

Conflict of Interest: None disclosed
Financial Support/Funding: Self funded

PO-1666
CONTENT VALIDITY OF THE FEMALE SEXUAL DISTRESS SCALE-REVISED IN WOMEN WITH HYPOACTIVE SEXUAL DESIRE DISORDER

Derogatis Leonard R (Center For Sexual Medicine At Sheppard Pratt), Pyke Robert (Boehringer Ingelheim Pharmaceuticals, Inc.), , McCormack Julie (United Biosource Corporation), Hunter Adria (United Biosource Corporation), Harding Gale (United Biosource Corporation)

Introduction: The 13-item Female Sexual Distress Scale-Revised (FSDS-R) is a self-administered questionnaire to assess sex-related personal distress in women with Hypoactive Sexual Desire Disorder (HSDD). Objective: To assess the content validity (relevance, clarity and comprehensiveness) of the FSDS-R and to examine the potential of item 13 (bothered by low sexual desire) as a stand-alone measure of distress associated with decreased sexual desire.

Methods: Women with HSDD (n=25) were enrolled in a single-visit content validation study conducted in the USA. Saturation (no new information) was reached with 25 subjects. Subjects completed the FSDS-R and then underwent cognitive debriefing to capture information on their perception of the instrument. Subjects rated the relevancy of each item from 0 ('not at all relevant') to 4 ('extremely relevant').

Results: Item 13 was rated as the most relevant item, with a mean rating of 3.33. Eighty percent of subjects felt that no additional questions should be added. Item 13 alone demonstrated good content validity and 56% of subjects felt that it covered all of their feelings about their decreased sexual desire.

Conclusions: This study established the content validity of the FSDS-R and demonstrated that the FSDS-R score is a relevant endpoint for women with HSDD. Further, the tool's one item specific to low sexual desire (item 13) was given the highest score and highest relevancy rating, and was sufficiently comprehensive as a stand-alone measure for over half the sample.

Conflict of Interest: Supported by Boehringer Ingelheim. Leonard DeRogatis is a consultant to Boehringer Ingelheim.
Financial Support/Funding: Supported by Boehringer Ingelheim.

PO-1668
SEXUALITY AMONG STUDENTS OF A TERTIARY INSTITUTION IN KADUNA, NIGERIA.

Onwuhafua Polite I (Ahmadu Bello University, Zaria, Nigeria), Sule Sa, Adatu (Ahmadu Bello University, Zaria, Nigeria), , Onwuhafua Elsie U, Okafor Patrick A (Ahmadu Bello University Teaching Hospital, Zaria, Nigeria)

Introduction and objectives: Sex is what everybody does yet nobody wants to talk sex openly. It is now time to talk sex, with the recent government's positive disposition to all aspects of Reproductive Health.

Materials and Methods: Cross sectional questionnaire survey of female students of a tertiary institution.

Results: Self-rated desire for sex was, normal, 51.42%, high, 17.73%. Most sensitive parts of body to sexual stimulation were, breast, 47.51% and vagina 14.53%. About 82% desire sex once a while. About 11%, practice lesbianism. Only 106 women (37.59%) said they were satisfied with one sex act per session, 61(30.81%) have sex 2 days /week and 7(3.54%) have sex everyday. 49(34.27%) desire 2 sexual acts per session. 217(76.95 %) enjoy sex 230 (81.56%) attain orgasm; 96 (41.53%) require further stimulation to attain orgasm 140 (49.64%) reported having ever masturbated. The part of lunar month at which most women reported low desire for sex was at full moon (78; 38.05%) Sexual desire was highest at ovulation period (47.62%) Shame was the commonest reason for not discussing satisfaction with partner, 53 (62.35%) About 88% were aware that sexual problems can be treated Most women knew that sexual problems could be treated in orthodox hospitals.

Conclusion: Sexual problems are common and it is time Gynecologists in Nigeria began to play proactive roles in the emerging subspecialty of sexual medicine.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1671
AGE AT MENARCHE AND EARLY SEXUAL DEBUT AMONG FEMALE ADOLESCENTS IN NORTH CENTRAL NIGERIA AND THE CHALLENGE FOR SEXUALITY EDUCATION

Owoyemi Julius O (Kogi State University, Anyigba, Nigeria)

Although, Onset Of Menarche Is Often Cited As A Potent Factor For Early Sexual Activity Amongst Female Adolescents(10-19 Years) In Nigeria, Little Attention Has Been Directed At Understanding How Sexuality Education May Influence Positive Sexual Behaviour. This Descriptive Survey Is Designed To Examine The Relationship Between Menarche And Early Sexual Debut Among Young Girls In Selected Secondary Schools In North

Central Nigeria. The Sample Comprised Of 150 Volunteered Female Students, Randomly Selected. Participants Filled A Self-Administered Structured Questionnaire In A Class Room Milieu To Supply Data On Socio-Demographic Characteristics, Knowledge, Attitudes And Behaviours Related To Reproductive And Sexual Health. Data Gathered Were Analysed With Simple Percentage And Chi-Square Statistical Method. Findings Show That Female Adolescents Experience Early Menarche (I.E. First Menstruation) Than In The Past. In Particular, Majority Experienced First Menstruation At The Age Of 13 Years. Also, It Was Revealed That Age At Menarche Influences Early Sexual Debut, Sex Frequency And Early Pregnancy Or Child Birth. The Study Concludes That Risky Sexual Activities With Devastating Health Consequences Among Young Female Adolescents In Nigeria Due To Age Decline In Onset Of Menarche Is On The Increase. Therefore, These Findings Presented A Formidable Challenge For Promoting Qualitative Sexuality Education Programmes By Parents, Educators, Reproductive And Health Care Practitioners And Policy-Makers To Mitigate Risky Sexual Behaviour Among Young Girls In Nigeria.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: SELF-FUNDED RESEARCH

PO-1673
THE SEXOLOGY AND THE INTERNATIONAL COOPERATION
Lara Alba Carolina

Progressively, topics related to human sexuality are presented as priorities in the context of international cooperation. Countries in development ask for specialists to develop preventive programs for problematic such as AIDS, pregnancy no desired and Sexually Transmitted Diseases (STDs). Information and education are now transformed in important tools to empower population with respect to its own sexuality. In the Case of Latin America and Caribbean, international volunteers develop programs with the purpose to promote gender equity in the different areas (especially those related to family), doing an important emphasis in the elimination of every type of violence against women. In the case of Africa, volunteers' interventions in the area of health are mostly dedicated to AIDS prevention or improvement of life quality for persons with this condition. In the case of Asia, the women's educations and the gender justice are priorities in the international cooperation work. Therefore, international cooperation is moving in a way where sexologists have to ensure an active presence. In this regard, development of programs such as sexologist without barrier, managed by ASQ, represent good examples. References: - Programa de cooperacion internacional, acuerdo CEPAE (Republica Dominicana) y Carrefour de solidarite Internationale (Canada). - Projet: sexologues sans frontieres. Association de sexologues de Québec. - Agence Canadienne de Developpement Internationale. Objectifs de développement du millénaire WEB <http://w3.acdicida.gc.ca/CIDAWEB/acdicida.nsf/Fr/JUD-13173118-GPM> - Kuninobu, Junko. International Cooperation, Women's Education and Gender Justice. DVV International (WEB) http://www.iiz-dvv.de/index.php?article_id=359&clang=1

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1678
YOUNG WOMEN'S EXPERIENCES, ATTITUDES, AND PERCEPTIONS OF ORAL SEX
Bay-Cheng Laina Y. (University At Buffalo), Fava Nicole M. (University At Buffalo)

Introduction: Recently, adolescents' experiences of oral sex have received attention from researchers and the media. However, these empirical and popular reports often conflate fellatio and cunnilingus and only consider rates of incidence and prevalence. This mixed-method study aimed to diversify and enrich our understanding of young women's oral sex experiences.

Methods: We surveyed 418 heterosexual college women about their sexual experiences and attitudes. A subsample of 40 respondents participated in sexual history interviews.

Results: 70% of survey participants had experienced oral sex; fellatio occurred earlier, more frequently, and with more partners than cunnilingus. Sexual awareness, openness, and self-efficacy were positively correlated with the number of oral sex partners. In interviews, 33 participants described 115 relationships involving oral sex: in 48% both fellatio and cunnilingus occurred; in 37% there was only fellatio; in 15% there was only cunnilingus. There were differences in women's ratings of the desire, want- edness, and pleasure of fellatio compared to cunnilingus. Participants rated cunnilingus significantly higher than fellatio and believed that their partners enjoyed it as much as they did; however, participants believed that their partners enjoyed fellatio significantly more than they did.

Conclusion: These data indicate that while both fellatio and cunnilingus are associated with sexual awareness, openness, and self-efficacy, young women experience these types of oral sex differently. Although fellatio is more common, young women regard it less favorably than cunnilingus. Participants believed they enjoy cunnilingus to similar degree as their partners, but there was a significant discrepancy between their perceptions of fellatio.

Conflict of Interest: None disclosed
Financial Support/Funding: N/A

PO-1679
SUPPORTING VULNERABLE TEENAGERS-LIAISON BETWEEN SERVICES
Whitfield Claire (Central Manchester University Hospitals Foundation Trust), Pandit Parag (Southport And Ormskirk Hospital Nhs Trust), Lee Vincent (Central Manchester University Hospitals Foundation Trust), Cousins Darren (Central Manchester University Hospitals Foundation Trust), Abbott Mike (Southport And Ormskirk Hospital Nhs Trust)

Introduction and objectives: Younger sexually active teenagers are often

particularly vulnerable, and attendance at a sexual health clinic may provide an opportunity for additional professional assessment in a non-threatening setting. We wished to assess whether further liaison with other agencies was indicated in young people attending a sexual health clinic.

Method: We undertook a case note review of the risk assessment of adolescents, aged less than 16 years, attending a sexual health clinic. Data on domestic and school circumstances and involvement with other child welfare agencies were collected. UK Child Protection legislation and Fraser guidelines of competence were followed, and confidentiality issues were discussed.

Results: 66 adolescents were included in the study of which 39 were accompanied by an adult, 19 by a peer and 14 attended alone. The majority (74.5%) lived at home, 5 (7.5%) lived with other relatives, and 12 (18%) were in Social Services Care. 34.5% had a current Social Worker. Although 52 young people attended school, only 31 maintained regular attendance. 30 young people (45.5%) were in contact with counselling services, and 14 (21.2%) had seen health care professionals for contraception. Concerns requiring further disclosure to other agencies were highlighted in 5 cases.

Conclusion: Despite high current engagement with other agencies in young people attending this service, additional concerns highlighted during the sexual health consultation required further multi-agency disclosure.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1680

BASIC EDUCATION ON SEXUAL ISSUES AS PART OF FAMILY LIFE EDUCATION

Palmu Anna-Kaarina (Finnish Evangelical Lutheran Mission/ Ethiopian Evangelical Church Mekane Yesus), Palmu Matti S. (As Above)

The Ethiopian Evangelical Church Mekane Yesus (EECMY) is a rapidly growing African church with about 5 million members. The church' motto is "Serving the whole person". Since 2000 EECMY has had a specific program for Family Ministry, funded by the Finnish Evangelical Lutheran Mission. The five main sectors of Family Ministry: 1) Pre-marital teaching; 2) Marriage teaching for couples; 3) Teaching various target groups on marriage and family life; 4) Marriage and family counselling and 5) Training for Family Ministry [including Training of Trainers (TOT), Training of Trainers of Trainers (TOT-T), TOT Refresher Courses, and training for Family and marriage counsellors]. Through strengthening the Christian family model the program aims e.g. to improve the status of women and children. This program is also one way to prevent the spread of HIV and AIDS. Education on sexual issues is part of the program, included in all 5 sectors mentioned above. In Ethiopia the general knowledge on sexual matters is quite limited, since you are not supposed to talk about sexuality, a taboo. Sex education is to some extent given at schools. - Sexual pleasure is mainly thought to be for men. - Female genital mutilation is still widely practised. The response from participants has been very positive. We have heard many stories of the life of families being improved. People are ask-

ing why it has taken this long before this kind of education has been started in the Church.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Finnish Evangelical Lutheran Mission

PO-1686

PSYCHOSEXUAL DEVELOPMENT'S FEATURES OF ADOLESCENTS, WHICH SUFFER FROM CHRONICLE SOMATIC DISEASES

Dziachko Siarhei (Bmsu), Rodtzevich Olga (Belmaps)

Analysis of psychosexual development among 365 adolescents (201 male and 164 female) at the age of 16-18 years old, which suffer from chronicle somatic diseases (CSD), such as bronchial asthma, neurodermatitis, chronicle pneumonia, chronicle pyelonephritis and glomerulonephritis, etc., was held. Adolescents with CSD were registered to have more acute psychological reactions (conflicts, self esteem and willpower reduction) and chronicle mental disorders of neurotic character (dismorphomanias, depressions, uneasiness) as a result of physical changes in their organisms (including parameters and proportions of their bodies, integument condition, the size of mammary glands and genitals). 71.8% of adolescents had alertness of different levels because of the lack of recognition of their sexual appeal by nearest environment. The recognition of their sexual appeal was close connected with physical recognition. Social reactions to changes of their bodies (approval, admiration, sneer, contempt) were most painful for them. Inadequate behavior towards them resulted in crises among 48 (13.2%) adolescents. It negatively influenced adolescent's sexual development, individuality and authority. Girls were most vulnerable to it. Adolescents with CSD had disorders of psychosexual orientation's development, especially while forming erotic libido (it's second phase). High level of non-realized fantasies (caused by low communication skills, dismorphophobia, inadequate parents' behavior, etc.) resulted in occurrence of psychosomatic, sexual and mental disorders. Adolescents with CSD mostly had disharmonious and slowed psychosexual development. Models of gender and sexual education of adolescents with CSD within interdisciplinary cooperation of specialists and obligatory participation of the family were offered.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1687

MASCULINE HOMOSEXUAL BOYS AND THE RISK OF BECOMING A SEX OFFENDER. AN EMPIRICAL STUDY.

Langfeldt Thore (Institute For Clinical Sexology And Therapy)

This presentation is based on an empirical study showing that men who offend young boys are mainly masculine homosexuals. In this study masculine homosexuals are defined as those that was not bullied for being neither gay nor feminine as children and adolescents. If men offending boys are mainly

homosexuals, they are highly overrepresented compared to men who offend girls outside the family. This overrepresentation seems to be due to the fact that masculine boys have a more difficult time to develop a homosexual identity than do the feminine boys. Being identified as gay or feminine in childhood, supports the boys' development into a homosexual identity. Our traditional scientific focus on the relationship between femininity in boys and homosexuality leave out of interest a significant number of homosexual masculine boys and their problems. The present study should evoke our attention about the complexity in developing a homosexual identity for a significant group of boys. A better understanding of homosexual orientation in masculine boys will give us information to empower the development of a homosexual identity, and thereby prevent sexual offences against boys.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1689

SIN CONDON?... YA FUISTE! : A COMMUNICATIONAL CAMPAIGN IN LIMA-PERU, OUR EXPERIENCE AND OUR CHALLENGES

Girón J. Maziel (Universidad Peruana Cayetano Heredia), Olivos Fernando (Universidad Peruana Cayetano Heredia), , Perez-Luna Griselda (Universidad Peruana Cayetano Heredia), Cáceres Carlos (Universidad Peruana Cayetano Heredia)

Introduction: The use of social marketing is considered a key tool for the HIV prevention efforts. SIN CONDON?...YA FUISTE! was a communicational campaign developed as part of the CPOS-MMC Project, to improve health seeking behaviors to sexual partners of those MSM (homosexual men) participants with positive results to STI/HIV. Action: The communicational resources developed were: posters, banners, graffiti and flyers. The design considered: the sociocultural context and the graphic used to publicity local music parties. Resources included prevention messages using friendly and neutral language, to avoid the relation with MSM or MSWM (bisexual men). The implementation was in socialization spaces. Outcome: 60% of population who came to receive attention to the STI/HIV mobile health teams were sexual partners of MSM participants. 25% of attendance was MSM population and 15% was general population.

Discussion and Recommendations: The use of everyday cultural elements as communicational strategies constitutes an important tool for STI/HIV prevention efforts. Considering the success obtained, we are working in a broader intervention, which will include new communicational strategies in other spaces such Internet, TV and radio.

References: - Dadian, M. J. (1996). Casting a wider net: improving access to condoms. *Aids* 10(2), 21-23. - Family Health International. (1997). Making prevention work : global lessons learned from the AIDS Control and Prevention (AIDSCAP) Project, 1991-1997. Arlington, Va.: AIDSCAP/Family Health International. - Schensul, J. (1999). Mapping social networks, spatial data, & hidden populations. In *Ethnographer's toolkit* (Vol. 4, pp. 205 p.). Walnut Creek, Calif.: AltaMira Press.

Conflict of Interest: None disclosed

Financial Support/Funding: The National Institute of Mental Health (NIMH)

PO-1691

VARIABILITY OF 'EXTRA' SEXUAL ACTIVITIES OF AUSTRALIAN'S IN ONGOING RELATIONSHIPS: DATA FROM THE AUSTRALIAN LONGITUDINAL STUDY OF HEALTH AND RELATIONSHIPS

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Purpose: To present prevalence and incidence patterns during the previous 12 months of 'extra' sexual activities from Australian men and women in ongoing relationships.

Materials and Methods: 8656 Australian men and women aged 16-64 years were recruited as part of the annual Australian Longitudinal Study of Health and Relationships. At intake 75% (6541) were in a single regular heterosexual relationship. This data is based on the 53% (3467) who provided data at each interview panel. The extra sexual activities included called a telephone sex line, had phone sex, visited an internet sex site, met a sexual partner in a chat room, used a sex toy, attended strip club, watched x-rated films, swinging, and anal-digital stimulation.

Results: At intake the most common extra activities in the previous 12 months were watching x-rated films (23%), sex toys (15%) and attending strip clubs or sex websites (7%). 10% had engaged in anal-digit stimulation. At the second interview watching x-rated films, using sex toys, and strip club attendance decreased by 10%; there was little variation in visiting sex websites. Similar patterns were observed at the third interview – although using sex toys and visiting sex websites both increased. Anal-digital stimulation decreased by 35% at interview 2 but did not vary at interview 3. Incidence data are also reported.

Conclusions: Extra sexual activities are not uncommon in ongoing regular heterosexual relationships. Whilst there is some variation across the years the persistence of particular sexual behaviours seems to be ongoing.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: NHMRC

PO-1702

PEER EDUCATION AS A KEY STRATEGY FOR SAFE SEXUAL BEHAVIOUR AMONG FEMALE SEX WORKERS IN NEPAL

Bhandari Jhabindra (Hiv/Aids Pmu, Undp Nepal)

Introduction: Nepal is one of the least developed countries in the world. Poverty, migration, unemployment, illiteracy and poor public health system has significant impacts on the livelihoods of the majority of the people who are poor and socially disadvantaged in the communities. In the recent years, female sex workers (FSWs) are increasingly facing problems of sexually transmitted infections including HIV/AIDS. There are community-based interventions for HIV/AIDS prevention and promotion of safe sexual behaviour among FSWs.

Action: Peer education training was provided to 200 FSWs in selected 6 city areas of Nepal; and they were mobilized as Peer Educators for prevention and control of HIV/AIDS.

Outcome: Due to the intensive peer education, there has been increased trend of consistent use of condoms by FSWs; and reduction in the incidence rates of sexually transmitted infections (STIs) among FSWs. Their sex behaviour has dramatically changed from unsafe to safe sexual behaviour and reduction in the multiple sex partners

Discussion and Recommendations: Peer education is an effective strategy to reach the FSW for their empowerment towards safe sexual behaviour. Peer education adopts participatory and interactive process to provide information, education and communication services related to safe sexual behaviour and prevention of infectious diseases such as HIV/AIDS. Therefore, community-based peer education programmes should be expanded and scaled up among FSWs to promote safe sexual behaviour and prevent STIs and HIV/AIDS.

References: National HIV/AIDS Strategy, 2001-2006, Ministry of Health Nepal

Conflict of Interest: None disclosed

Financial Support/Funding: There was no funding for this research.

PO-1703

MALE ENGAGEMENT IN SEXUALITY DISCOURSE AS A POSITIVE INTERVENTION TO THE HIV PANDEMIC

Kambona Caroline A. (Family Health Options Kenya),

The paper explores the importance of contextual specific responses to the HIV pandemic while highlighting what must be addressed if interventions around HIV and AIDS are to be effective, especially among young people. It is the purpose of this paper to share a case intervention (Young Men as Equal Partners) that is more specific, gendered and sexuality linked in the context of HIV prevention. The paper argues on the need for broader policies that go beyond the standard means of defining 'safer sex promotion' campaigns to more comprehensive, gender specific and non-medicalized approach while talking to young people about sex and sexual health in a more open manner without stigma and fear. This paper therefore empha-

sizes on according justice to issues about male sexuality that have been silently left out in programme design on Adolescent Sexual and Reproductive Health and Rights (ASRH & R).

Conflict of Interest: None disclosed

Financial Support/Funding: Programme implemented in partnership with RFSU and funded by Sida.

PO-1704

SEXUALITY EDUCATION IN INDONESIA: EXPERIENCE FROM 2 UNIVERSITIES

Hanifah Laily (Mitra Inti Foundation)

Adolescence is a critical period of development because it represents the transition between life as a child, the quality that determined mostly by familial influence, and life as an adult, the quality that mostly self-determined. In 2007, it is estimated that in Indonesia, adolescents constitute 28.1 percent (around 63 million) of the total population. Unfortunately, data gathered in Indonesia showed the serious lack of sexual and reproductive health knowledge and information. However, until today Ministry of Education has not been adopted national-wide Sexuality and Reproductive Health education, only some pilot projects in several provinces. Therefore, in 2007 we conducted sexual education program for adolescents in 2 universities in Jakarta, Indonesia. The program started with preparation meetings among team members, had audiences with the Dean from the 2 faculties and meeting with lecturers appointed by the Dean. In a workshop, the researchers along with the lecturers developed module and booklet as materials for training. The program participated by 35 students from the 2 colleges. We measured the impact of the program by distributing the pre and post test. As a result, it was showed that their knowledge were improved significantly, they were truly benefited from this program and wanted to be trained deeper as peer educator. As the conclusion, this kind of education is highly needed among students. Therefore, this activity should be extended to other faculty in the involving university and other university as well and the government should release the policy to provide Sexuality and Reproductive Health education nationwide.

Conflict of Interest: None disclosed

Financial Support/Funding: I applied to receive scholarship from the XIX World Congress of the WAS Committee

PO-1705

ORALITY AND LITERACY: THE NEW SEXUALITY GAP AMONG JAPANESE YOUTH

Takahashi Masahito (Yamaguchi University)

Introduction and objectives: The information revolution in the late 1990's has transformed sexuality of Japanese youth. This change is often characterized as an anomie, or a moral crisis of the whole youth in Japan. The interpretation of a crisis, however, overlooks the sexuality gap between

mobile phone users and PC users. Mobile phone users are active in sexual concerns and behaviors, while PC users are passive. We will explore the vast gap between mobile phone users and PC users, and illustrate the contrast as the gap between orality and literacy.

Methods: The National Survey of Sexual Behavior of Japanese Youth (NSSB 1974 - 2005, funded by the Japanese Association for Sex Education) has concerned media influences on sexuality. Based on this quantitative survey, we will explore the following differences. 1) Mobile phone users and PC users have opposite social backgrounds. 2) There are various differences of sexuality between the two media user groups. 3) The personal influences by mobile phones are verified as accelerators of sexual concerns and behaviors.

Results: Mobile phone users cultivate their sexual concerns and behaviors through personal communication. In contrast, PC users have sexual knowledge without sexual concerns and behaviors. These media influences persisted even after the social backgrounds of the subjects were statistically controlled.

Conclusions: Text-messaging via mobile phones represents a new form of oral culture, while personal computers develop a new literal culture. The new sexuality gap among Japanese youth can be viewed from this new media differentiation.

Conflict of Interest: Sexological Sociology, Sexuality Education
Financial Support/Funding: The Japanese Association for Sex Education

PO-1706

SEXUAL BEHAVIOUR OF STUDENTS IN BELARUS

Domoratsky Vladimir (Dept Of General And Clinical Psychology, Belarussian State University), Zueva E (Dept Of General And Clinical Psychology, Belarussian State University)

308 students from the 2 biggest universities in Belarus had taken part in the anonymous questionnaire: 150 females (mean age ? 19,6 ±1,6), 158 males (mean age ? 19,7 ±1,3). The mean puberty age in males was 13,3 ±1,5, in females ? 12,8 ±1,1. Only 1% of males and 3% of females were married. 10% of males and 33% of females haven't had sexual relations. 3% of males and 6% of females consider sexual relations to be appropriate in marriage only. The mean age of the beginning of sexual activity was 16,4 ±1,8 (males), 15,9 ±1,8 (females), whereas the mean age of their first partners was higher: 17,4 ±1,8 (males), 19,5 ±1,9 (females). Students gave preference to a more experienced and mature person when choosing a sexual partner. 34 % of males and 8 % of females had been acquainted with their partners for less than a month before their first sexual contact which proves females to be more responsible when choosing a sexual partner. 90 % of males and only 30% of females gave a positive assessment of their first sexual experience. More than half of all sexually active students have had from 2 to 5 partners since their first sexual contract. Homosexual contacts are absolutely disapproved by 75% males and 41% females. 7% males and 18% females have had erotic fantasies about homosexual partners, and 4% males and 9% females have reported about their homosexual relations.

Conflict of Interest: None disclosed
Financial Support/Funding: The East Europe Committee of the Swedish Health Care Community (SEEC), Stockholm, Sweden

PO-1708

A PEER TAUGHT SEX EDUCATION CLASS FOR CHILDREN WITH DEVELOPMENTAL DISABILITIES

Miyahara Harumi (Nagasaki University Graduate School Of Biomedical Sciences), Yasuhi Yasuko (Yasuhi Women'S Health Clinic)

While the parents of children with developmental disabilities have high needs regarding sex education, carrying out sex education in traditional group settings poses many difficulties. Therefore, we drew on the opinions of parents and the advice of occupational therapists specializing in children with developmental disabilities to create a small-group sex education program. Strategies implemented in the program included adopting many hands-on learning techniques that employed peer education and devising management styles and materials tailored to the attributes of each child's disorder. The participants comprised 8 boys with developmental disabilities and their mothers. Interviews with mothers conducted after the program demonstrated that they clearly recognized the necessity of sex education. Furthermore, our observations revealed that the children enjoyed taking part in the program and that the program provided a personal learning opportunity for the parents. Parents expressed hope that this trial program would be continued.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1710

SEXUAL DOMINANCE AND SUBMISSION - A EXPLORATIVE STUDY

Södersten Wiktor (Department Of Psychology, University Of Stockholm)

Introduction and objectives: This is a study performed on users of a Swedish Internet BDSM (Bondage & Discipline, Dominance/Submission and Sadoomasochism) community with 20.000 users. The purpose of the study is to establish an empiric description of sexual Dominance and Submission as a base for further studies.

Methods: The study is performed with both quantitative and qualitative methods in successive iterations. First the sexual preferences and personal data registered by the users were statically analyzed to create a fundamental understanding. On the basis of this analysis a qualitative web survey is performed on a sample of the users of the community. The themes of the qualitative analysis was then translated into a number of items in a quantitative web survey presented to the entire community to verify the findings of the qualitative analysis.

Results: The statical analysis of registered data painted a more complex picture of the relationship between gender and sexual preference with concern to dominance and submission than earlier surveys performed on

smaller samples. The combination of the qualitative and quantitative web surveys showed how different subgroups have different understandings of the concepts of sexual dominance and submission.

Conclusion: Apart from a fundamental understanding of sexual dominance and submission we also find that within the major themes we find different subgroups.

Conflict of Interest: The author has been involved in the RFSU Stockholm Workgroup for BDSM and Fetish Policy Development as well as other BDSM and Fetish associations.

Financial Support/Funding: None

PO-1712

SEX DIFFERENCES IN SEXUAL AND EMOTIONAL INFIDELITY AMONG KOREAN STUDENTS AND ADULTS

Youn Gahyun (Chonnam National University), Ko Won Kyong (Chonnam National University), Yang Dong-Ouk (Chonnam National University)

Introduction: Previous researches have demonstrated sex differences in jealousy as a function of infidelity type. In general, a mate's sexual infidelity generates more anger in men than in women, while a mate's emotional infidelity generates more anger in women than in men. This study was to assess if the respondents' past experiences of committed infidelity and extravert tendency would affect the stability of participants' responses or not.

Methods: The participants were both college students (over 18 years old) and married young adults (aged 30s or 40s). They were asked to choose which type of infidelity would upset them more in a forced-choice response format and to respond to an extraversion scale that consisted of 8 items on a 5-point Likert type. They were also asked if they had ever committed either emotional or sexual infidelity while involving in a committed relationship with their opposite-sex mate.

Results and Conclusion: As predicted, women were more jealousy because of the mate's emotional infidelity than sexual infidelity. But men who reported of committed emotional infidelity as well as men who had lower scores in the extraversion scale responded very similar to women, while the other men indicated that the sexual infidelity generated more anger than the emotional infidelity.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1713

SEXUALITY OF PEOPLE LIVING WITH HIV/AIDS

Langa Artur P. (Ministry Of Health, Mozambique)

Introduction: Mozambique is obligatory reference, because he is the epicenter of the pandemic of HIV and AIDS. The epidemic continues an open wound, particularly for the African societies. Action Even in the organs of social communication they circulate news on transmissions of premeditated

HIV, it rules general of adults for children. In some neighboring countries it is frequent the sex practice with virgins or children, as part of treatment of own AIDS. In the sanitary units have children's cases systematically sexually violated by People Living With HIV/AIDS (PLWHA), in the base of faiths according to the ones which if an PLWHA to maintain sexual relationships with a virgin, he gets rid of HIV and AIDS [1].

Outcome: Several aspects of the epidemic are linked to the particularities of the sexuality and of the behavior sexual. Factors of order of personality, cultural and social they have been contributing positively to the prevalence and propagation of the epidemic of HIV and AIDS. For components of the sexuality they are crossed phenomenon strongly as initiation rites, marriages polygamies and traditional, rites of passage, regimes of taboos, traditional medicine, etc.

Discussion and recommendations: They are of recommending, in matter: the investigation, the education, the understanding, and advocacy; the work psychological on the personality and the family; creation of favorable conditions to the adaptation of postures and behaviors adapted face to HIV and AIDS. /40/

References 1 -

Conflict of Interest: None disclosed

Financial Support/Funding: Ministry of Health, Mozambique

PO-1714

MANAGING PATIENTS WITH SEXUAL DYSFUNCTION: EXPERIENCES OF RESIDENTS IN A TERTIARY FACILITY IN SOUTH WESTERN NIGERIA

Sangowawa Adesola O (Institute Of Child Health, University Of Ibadan), Adebisi Akindele O, Faseru Babalola A (University Of Kansas), Cadmus Eniola (University College Hospital), Popoola Olufemi (University College Hospital)

Introduction + Method(s): In the Nigerian context, sex/sexuality are not openly discussed and this affects clinical presentation of patients. In-depth interviews were conducted among 20 purposively selected resident doctors in the University College Hospital to explore their experiences with managing patients with sexual dysfunctions (SDs).

Findings and discussion: Residents interviewed were aged 31 to 40 years and from various specialties. They encountered about 0 – 6 patients with SD per month. Many of them were wary about broaching the subject of SD with patients to avoid being perceived as prying. One resident however said, 'I always ask patients in the STI clinic about SD upfront as I don't want them beating about the bush and wasting time'. Majority of residents said patients who were mostly men, often presented with vague symptoms like generalized tingling/crawling sensations. A few patients had more specific symptoms e.g. a female patient reportedly said, 'I can't bear my husband touching me; it makes my skin crawl'. The preponderance of males among patients who complained of SD was attributed to cultural factors that viewed men as the dominant players in sex. Many doctors opined that management of SD was discouraging because of inadequately trained person-

nel, limited and costly drugs and low success rates. An interesting emergent theme was the reported use of local aphrodisiacs by some patients.

Recommendations: These findings have highlighted the need to develop the field of sexual health and the importance of presenting management options in a culturally sensitive manner.

Conflict of Interest: None disclosed

Financial Support/Funding: I have applied for scholarship from the conference organizers

PO-1716

WHAT DO PARENTS NEED? DIFFERENCES BETWEEN STATEMENTS OF THOSE PLANNING PARENTHOOD AND PARENTS

Konecna Hana (University Of South Bohemia, Ceske Budejovice, Cr), Bubleova Veduna (Centre For Adoption And Foster Care, Prague, Cr), Janku Vit (Centre For Family And Social Care)

Introduction: The demographic crisis of a number of developed countries forces the politicians to seek possibilities to promote the natality and support the parents. The goal of the presented study is to ascertain what conditions are seen by childless people as necessary for starting a family and what assistance do parents need.

Methods: Quality contents analysis of 134 statements of childless persons about conditions to start a family and of 228 statements of parents about assistance needed in parenthood. The respondents were members of middle socio-economic class of the CR.

Findings and discussion: According to childless people, good housing, sufficient funds, stable employment, personality maturity, good partner relationship and both partners' agreement on parenthood is essential for the family. Support of family and close environment and good infrastructure (kindergartens, schools) were mentioned exceptionally. The parents, regardless from the age of their children, put support of close persons (possibility of babysitting), good partner relationship and availability of services (kindergartens, parents' clubs) on the first place. They mention financial support exceptionally (3 statements). Ideas of parenthood and reality differ very strongly. The main parents' burden is not the expected financial deficit, but the parents' psychical and physical exhaustion.

Recommendations: Educational programs should teach where and how the parents should seek and receive assistance. The state should respond by extending and making available the infrastructure.

References: Grant, J. et al. (2004). Low Fertility and Population Ageing. RAND Europe Feeney, A.J. et al. (2001). Becoming Parents. Cambridge University Press

Conflict of Interest: None disclosed

Financial Support/Funding: This project was supported by the grant from Czech Science Foundation No. 406/07/0274

PO-1718

AGE FEATURES OF DEVELOPMENT OF SEXUAL DYSFUNCTIONS AT MEN

Butkova Tatiana

Objective: Existence of age features in norm causes also features of occurrence of sexual dysfunctions in age aspect.

Methods: 276 men have been surveyed by us. We considered existence of three age groups: 1. Young age (18-24 years) 2. Middle age (25-54 years) 3. Advanced age (55-74 years)

Results: At young age the primary failure was a psychogenic trauma which was coupled with the situational easing of adequate erection, impossibility to achieve the defloration, ignorance of the technics of the sexual act. That led to neurotic fixing and development of coitophobia. Thus persuasive fears of sexual weakness, fear before forthcoming affinity were formed. In average age group at men representations about presence of sexual frustration in the form of a wrong estimation of the available sexual opportunities are caused by age reduction of parameters of sexual function, in comparison with former sexual experience, and absence of sufficient knowledge and correct representations about physiological fluctuations, pathological deviations of sexual displays prevail. The reasons of sexual inconsistency in patients of the senior age groups have been caused by physiological age reduction of potentiality; functional-psychogenic sexual frustration; the psychoinjured situations, caused by change of intrafamily relations and a vital stereotype; somatic diseases.

Conclusions: The character of sexual infringements, their expressiveness and dynamics depend on age, constitution and character features, valuable orientations and the situational influences arising in a pair dialogue.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1719

GO DUTCH – A PRACTICE SAMPLE

Gieles Frans E. J. (None - Pensionated)

GO DUTCH, A PRACTICE SAMPLE Youth and sexuality in the Netherlands Frans E J Gieles, PhD, the Netherlands

Introduction: Dutch politicians wanted to start a campaign to combat 'pornification' and 'sexualization' of youth, mentioned in TV documentaries. Is this really needed, or is it better to continue the Dutch way of action with youth and sexuality? I say: the latter.

Action: Sexuality of children and teenagers is actually accepted; it does not raise much great problems. Only real young rapists are convicted or better: get treatment. The Dutch are very open about sex. Sexual education starts at the age of toddlers. Contacts with the mothers are quite personal and openly, those with the fathers are friendly. Children have much privacy. Contraceptives are easily to obtain.

Outcome: Research shows that 'facts' are enlarged by media and politicians. Factually, in sexual respect problematic youngsters are a very small

minority. Most of the Dutch youth have good sexual ethics and act along those lines. Actually, they have sex, mostly on an age below the legal age. The Netherlands have a very low rate of abortions, young unmarried mothers and SOA's. Dutch children are nearly the happiest children of the western world, in sharp contrast to the UK and the USA.

Discussion and recommendations: Accept the fact that children are sexual beings and do have sexual experiences. Give sexual education from toddler age. Be open, give room. Do not criminalize or pathologize the sexuality of children and youth. References are all in Dutch.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None

PO-1720

THERE MUST BE A SCAPEGOAT

Gieles Frans E. J. (None - Pensionated)

THERE MUST BE A SCAPEGOAT Pitfalls, traps and mistakes in forensic personality examination Frans E.J. Gieles, PhD, the Netherlands

Introduction and Method: The objective is to formulate problems in the diagnostics in forensic examination of suspected pedosexual offenders. The method is content analysis of 25 reports made for the court about suspects, known by me as a counselor.

Findings and discussion: The forensic examination of a suspect inherently creates a difficult situation for both the investigator and the investigated. Three types of paradoxes should be recognized. For example: 'Speak frankly' – but all you say or don't say can be used against you. Also five pitfalls are formulated. Some of them are: to take the role of the judge, too much extrapolation and enlargement of the negative. Six diagnostic problems are mentioned, as well as three clear mistakes. Avoid at least estimating the recidivism risk too high, in contrast with the rates found in research. It appears that at least four strong beliefs play an important role in the background. Only two of the 25 reports show a consciousness of the paradoxes, pitfalls and other problems; in 23 reports a lot of mistakes showed up. Recommendations Investigators should have an eye for the paradoxes, pitfalls, problems and possible mistakes. The background vision might be criticized, as might be done with the solid beliefs. The revision of the vision should start with the view on the human being.

References are mentioned within this article: < <http://www.helping-people.info/scapgoat.htm> >.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None

PO-1722

THE STRUCTURE OF AFFECTIVE ABNORMALITIES AND SEXUAL DYSFUNCTIONS

Kibrik Nikolai

Objective: The structure and intensity of affective abnormalities, mainly in

the form of depressive disorders, influence as well on the nature of sexual dysfunctions, which are manifested either in the form of just a lowering of sexual activity and enterprise or a complete lack of libido.

Methods: Persons at the age from 18 till 50 predominate among patients who have asked for sexological help. There have been 109 patients under our observation. Among them there were 56% of men and 44% of women.

Results: The findings authenticate that in case of worried-phobic disorders accompanied by fear (coitophobia) and tendency to avoid traumatizing situations, because of sexual failure expectation a social isolation with erotic fantasies and autoerotism is formed. In particular interest are asthenic disorders, which influence mainly upon parameters of sexual manifestations, manifesting in a weakening of erection or a change in duration of coitus as well as a coloration of orgasmic sensations. Thus the nature of sexual dysfunctions is closely connected with detected affective disorders and depends upon their intensity, peculiarities and structure.

Conclusions: This therapy includes a method of cognitive psychotherapy, a courseware as well as a sex-therapy. In case of lingering sexual phobias with obsessive disorders it is recommended to add into the treatment regimen tranquilizers and antidepressants (inhibitor of serotonin recapture), that don't lower sexual activity.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1723

'BUR SIR, YOU ARE AN OFFENDER!'

Gieles Frans E. J. (None - Pensionated)

'BUR SIR, YOU ARE AN OFFENDER!' Narrative force as a form of changing behavior Frans E. J. Gieles, PhD, the Netherlands

Introduction and Method: The objective is a critical description of the usual methodology of sex offender treatment.

Method: a first exploration of literature and of reports of seventeen patients. The methodology is described with 'the seven elements of human acting', developed in my dissertation:

Findings and Discussion: (1) Interpreting the situation: the client is only seen as an offender. (2) Setting goals: no cure but control. (3) Choosing the way of acting: narrative coercion is the core. (4) Interpreting the outcome: low recidivism, but clients are "no stroke changed". (5) Feeling afterwards concerning the practical, emotional and ethical aspects: from staff no data, from clients extremely negative. (6) Formulating new knowledge and questions: from staff none, from clients only how to survive. (7) Improving the way of acting: from staff none, from clients "Listen to us, respect us." The methodology is described as "psychotherapy", but there is no attention to inner problems of the patients, only for their behavior and way of thinking. It is no therapy at all; it is behavior treatment within a very narrow ideology. **Recommendations:** The cognitive behavioral model of sex offenders treatment needs a critical review. The model is too one-sided, too narrow and uses too much narrative and other coercion. Start with investigating the feelings afterwards of staff and patients.

References are here: < <http://www.helping-people.info/Treatment/sot/of-fender.htm#sources> >.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None

PO-1727

SEXUALITY EDUCATION – HOW TO INTERLINK THEORIES WITH PRACTICAL METHODS

Schindele Anna Chuchu (Lafa, The Stockholm County Aids Prevention Programme)

The Main Thread is a handbook aimed at people working with issues concerning sexuality and personal relationships among young people. It aims to facilitate sexuality education by presenting over 70 models and methods that pass on knowledge and skills, as well as discussing facts, attitudes and values. Some are written exercises while others are more play-oriented, some use body language or the written word in media or in the form of references in books. The handbook has about 1000 clients in total all over Sweden; it was evaluated in 2001 and has been translated to English and Russian. The handbook is produced by Lafa in cooperation with schools and youth. The over all objective is to promote sexual health, prevent HIV/STIs and unwanted pregnancies. The Main Thread interlinks theory with practice and within the work of Lafa is as a bridge between ideas of theory and the practical work. This methods manual has a tab system, each section starts off with an inspiring text on the subject matter of the section; this is then followed by a series of methods. One of its theoretical starting point is social constructivism, which means that sexuality is regarded as determined by culture and historically specific. Sexuality changes and is recreated in a constant interplay between individuals, groups and society. Sexuality is a part of young people's lives which they choose to relate to in different ways depending on culture and society. Download your copy at www.lafa.nu/themainthread.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: The Swedish and English edition was State-financed by Socialstyrelsen and from the Stockholm County Council. Part of the funding was also through the Swedish speaking users paying a subscribers fee of 90Euro for each copy of the handbook. The English spea

PO-1728

THE DIFFERENT SEXUAL CONSCIOUSNESS OF JAPANESE YOUTH

Ishikawa Yukari

Japanese mass media suggests that Japanese youth are becoming more sexually active and at a younger age, but it cannot be said that Japanese youth are more sexually active than those in other countries. A bipolarity can be seen in youth sexual behavior. This report investigates the different sexual consciousness of Japanese youth extrapolated from the number of their sex-

ual partners. This report examines the results of the 6th «National Survey of Sexual Behavior of Youth». If one or two sexual partners reflects the common romantic love ideology, three or more partners suggests a differential, therefore the analysis is divided into three categories: those with «no partner», «one or two partners», «more than three partnes». Those in the «more than three» category do not show a tendency towards defiance of authority. They are both positive about, and have correct knowlege about, sex. However, there is a gender bias in favor of men; there is a tendency for the man's sexual desires to take precedence, and it cannot be said that those youth are normative about sex. Moreover, there are many girls who have experience of domestic violence or sexual abuse in this category. Among Japanese youth, romantic love ideology is a common belief, but those who have multiple sexual partners, one in three of college students, are detached from that ideology. The problem of a lack of sexual equality in their partnerships can be seen.

Conflict of Interest: None disclosed
Financial Support/Funding: JASE

PO-1730

IN THE SHADOWLANDS OF SEXUALITY

Abelsson Jonna B (Hiv-Prevention In Region Västra Götaland / The Prostitution Unit), Hulusjö Anna (The Prostitution Unit)

IN THE SHADOWLANDS OF SEXUALITY A study of youth who sell and exchange sexual favours Authors: Abelsson Jonna & Hulusjö Anna (2008)

Introduction and objectives: This study was initiated by the Prostitution Unit in Gothenburg. The main objectives were to examine factors of relevance for starting exchanging sexual favours and to open up the discussion concerning young people in prostitution, amongst decision makers and professionals. In this study selling and exchanging sexual favours (SESF) was defined as using ones sexuality as means of getting something in return, that doesn't regard sexual satisfaction.

Methods: An online survey (N=876) was performed at one popular youth community and one community for LGBT- groups. Interviews were conducted with professionals (N= 37) with experience of working with young people in different settings.

Results • Young people stating SESF differed from those without such experience: they were more sexually experienced, reported more criminal and anti-social behaviour, lower psychological well-being and experiences of emotional neglect and separation. • The number of young men reporting SESF was higher than that of young women. • Young people with experience of SEFS had often had contact with different social services but their problems with sexual exploitation had not been noticed.

Conclusions • Prostitution is usually associated with females as sellers of sexual favours. It is important that the possibility of young men as victims of prostitution is not neglected. • Social workers or other professionals need to ask questions regarding sexual exploitation and SESF, and thus making the unspeakable speakable.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1732

STOCKHOLM EMERGENCY CLINIC FOR RAPED WOMEN IN STOCKHOLM SOUTH HOSPITAL

Helström Lotti (Stockholm South Hospital), Möller Anna (Stockholm South Hospital), , Pettersson Kristina (Karolinska Institute), Ravald Klara (Karolinska Institute)

Introduction: The Emergency Clinic for Raped Women started in October 2005, to admit women who have been subjected to acute sexual assault. The clinic is open 24 hours a day; the staff includes gynaecologists special trained for gynaecologic forensic investigation, midwife nurses, psychologist and social workers trained for trauma treatment. The women are offered forensic investigation, tracing and post exposition prophylaxis for sexual transmitted diseases, medical follow up, as well as trauma counselling. The clinic has close collaboration with the police, social authorities, youth clinics, women shelters, psychiatric clinics and addiction centres. The clinic also provides internship for doctors from other hospitals. Data for the first three years will be presented.

Method: Data from patient files were analyzed.

Results: Roughly 700 women are met every year, and 4000 follow up consultations to gynaecologist, counsellor or nurses are performed. The most common perpetrator was a person acquainted to women (31%), a person completely unknown to the woman (17%), a partner or ex-partner (13%), while in every eight (12%) case more than perpetrator was involved. In 12% of the cases the woman had amnesia for the rape, often due to drug and/or alcohol and in 58% of the cases the women had been drinking at the time before the rape. The majority of the women (67%) showed signs of violence when examined, the most common sign being bruises or lacerations on arms or legs (87%). In 40% of the cases genital signs were seen; mainly slight damage to the mucosa. Signs were more common

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1736

SEXUAL FUNCTION IN PATIENTS WITH SEVERE NON-MALIGNANT LONG-TERM PAIN DISORDERS REFERRED FOR MULTIDISCIPLINARY ASSESSMENT

Moberg Kerstin, Andréll Paulin, Dahlöf Lars-Gösta, Arver Stefan, Mannheimer Clas

Aim: According to previous studies, long-term pain conditions have been associated with a negative impact on sexual function. The aim of the study was to assess and characterise sexual function in this group of patients.

Methods: The men were given a questionnaire on erectile-, ejaculatory dysfunction and satisfaction. The women received a questionnaire regarding lubrication, pain during intercourse, orgasm and satisfaction.

Results: 64 patients (28 men, 36 women) were included. Average age was 42, 5 years. 44 patients reported sexual activity but 36 of these patients were not satisfied. Out of the sexual active patients, 26 patients reported lack of desire in combination with pain, being the most frequently reported problem. Co-morbidity in terms of depression and anxiety disorders was reported in 41 (69%) of the patients. 32 (54 %) patients were treated with opioids and 33 (56%) patients were treated with adjuvant analgesics.

Conclusion: Patients with severe non-malignant long-term pain disorders report a comparatively high sexual activity compared with a general Swedish population. Lack of desire in combination with pain was the most common cause of sexual dysfunction in this patient group. Co-morbidity in terms of depression and anxiety disorders as well as pharmacological treatment of these disorders might have a major impact on sexual function in this patient group. It is of great importance to assess the presence of sexual dysfunction in patients with severe long-term pain in order to offer specialized treatment.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1737

PERFORMATIVE HEDONISM: AN ENTROPIC OR CONSTRUCTIVE TENSION? SEXUALITY IN THE MEDIA AND SOCIETY BETWEEN THE PUBLIC AND PRIVATE

Aliana Wilfredo A. (Werken)

Introduction: The performative hedonism is the trend to the search of pleasure from its statement, to the pretension to construct a pleasant reality from the stereotype of its formulation, extending the parcialización of the subject to his relations. Performative hedonism is materially in consumption, so it does not produce subjects who live in pleasure but produces alienación of status of subjects and inability of pleasure. Behind this trend pleasure that capitalism channeled into an individualism that cuts the subject from the group that is arisen, there are all the pain that filled clinics with people suffering for their inability to conduct identity according to expectations that are outside the reality of establishing relations with others. **Approach:** This requires discourse to sustain the pleasure, requires transverse instrumentalisation immediate, with different rhythms in their spread. Performative hedonism can be considered as ideology not mentioned, but persistent.

Findings and discussions: Is it still possible given our history (rich in references about community) to establish a distinction between public and private, as inherited from the parameters of the bourgeoisie and its methodologies? Experiences such as Spontaneous Theater, lead us to discover in the healing group through rituals that remind the tribal action, both in the enunciation of diagnosis and the participation of others in the healing process, updated with the knowledge that gives us the psychology, and the amazing creativity of the body on the scene in an unexpected come back.

References: Teatro de la Anarquía, Moysés Aguiar, Papyrus, 1988

Conflict of Interest: There are not potential conflict of interest in this research

Financial Support/Funding: This research is not cover financially yet. I've already sent my applying for a scholarship for the 19th WAS World Congress.

PO-1739

SEXUAL PROBLEMS OF WOMEN OF REPRODUCTIVE AGE SUFFERING FROM NEUROTIC DISORDERS

Domoratsky Vladimir (Minsk, Belarusian State University), Domoratsky Vladimir (Minsk, Belarusian State University)

Aims: research of sexual functioning of 102 married women of reproductive age (35.3±4,1 years old) suffering from neurotic disorders (F40-F45 ICD-10).

Methods: questionnaire, sexological and psychiatric examination.

Results: the examined women have demonstrated the following disturbances: phobic anxiety and other anxiety disorders, adjustment disorders, dissociative disorders, somatoform disorders. Sexological examination has revealed that 67 of 102 women (65.7%) had such sexual dysfunctions (F52) as: lack or loss of sexual desire ? 18 women (17.6%); sexual aversion ? 7 (6.9%); failure of genital response – 8 (7.8%); orgasmic disfunction ? 29 (28.5%) nonorganic dyspareunia ? 5 (4.9%). 22 women were determined to have had sexual dysfunctions and increased intensity of matrimonial conflicts preceding neurotic disorders. 29 women have been tracked to have time correlation between episodes of matrimonial conflicts connected with sex, sexual dissatisfaction and intensifying symptoms of neurotic disorders.

Conclusion: approximately 2/3 Belarussian women of reproductive age suffering from neurotic disorders have also had sexual dysfunctions, and that, in its turn, proves high comorbidity of these disorders. It has been revealed that in women with neurotic disorders psychopathologic and sexual disorders tend to mutually intensify each other. The so-called «vicious circle» is formed, and that has a negative effect on the neurotic disorders itself, and on feeling satisfaction from matrimonial relations. Combined neurotic and sexual pathologies in women of reproductive age considerably decrease their satisfaction from marriage.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1743

THE BODY FOR BETTER AND WORSE

Pontvik Ingela (Karolinska University Hospital)

Introduction: At Karolinska University Hospital a group therapy had started for young women with sexual problems. The treatment consisted of psychotherapeutic sessions in combination with body awareness therapy. I wanted to study the significance the participants gave the treatment and also understand more of the changes that had taken place with regard to sexual function and bodily experiences.

Method: The study was retrospective and conducted with semi-structured interviews of five women. Data was analyzed by qualitative content analysis.

Findings: The sexual problems, which consisted of lack of desire and vestibulitis, had decreased or disappeared. Two women were improved with a more accepting attitude to their sexual problems. The other three women had no sexual problems anymore. They had regular sex life with intercourse. They felt less afraid and more normal when they sometimes didn't want to have sex. Four of five women stated increased sexual function and all five less sexual problems.

Discussion: The important point in this process, including increased body awareness, seemed to be not avoiding the distress or pain but instead get to know it and deal with it. (1)

Recommendation: New studies with the same combination treatment to achieve evidence and to give young women the possibility to be more sexually satisfied.

Reference: 1. Afrell, M. et al (2007). Living with a body in pain – between acceptance and denial. Scandinavian Journal of Caring Sciences 3, 291-296.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1744

SOME ETHNOMEDICINAL PLANTS- REMEDY FOR SEXUAL PROBLEMS.

Petkar Dr.Alka Sudhakar (S.N.Arts,D.J.M Comm.& B.N.Sarada Science College,Sangamner), Petkar Sudhakar Vasant (S.S.T Medical College (Ayur) Sangamner)

Introduction & objective - India has got a centuries old medicinal heritage. Ethnomedicinal plants are nature's gift which are easily available and without any side effects to boost sexual desire, support performance and solve sexual problems. Sex is not merely and act but to enjoy the pleasure. When this sexual capacity is diminished or disturbed it creates psychological, physical disturbance. In nature there are certain medicinal plants which help to restore normal sexual capacity, to rejuvenate the sexual power and pleasure. Some useful Ethnomedicinal plants - 1] MUCUNA PRURIENS - Kavach Beej Part used - seed, dose 200 mgm 2] WITHANIA SOMNIFERA - Ashwagandha Part used - Root, leaves, dose 60 mgm 3] LOP-MEA DIGITATA - Bhuikohla, part - fruit, dose 60 mgm 4] ASPERAGUS ADSLENDENS - Shatavari, Part - Tuber, dose 100 mgm 5] ASPERAGUS RACEMOSUS - Safed Musli, Part - Root, dose 30 mgm 6] STRYCHNOS NUX - VOMICA - Kuchala, Part - Dry Seeds, dose 20 mgm 7] MYRSTIC FRAGRANS - Jaiphal, Part - Seed, dose 20 mgm Action of all these ethnomedicinal plants if given in combination are aphrodisiac, nerve tonic, reduce impotency, seminal debility, increases seminal secretion in quality and quantity, prevents UTI. Method - Dose of these Ethno Medicinal plants given in divided doses for twice a day for two months to 47 males in between the age of 31 to 56 years

Conclusion - Ethnomedicinal plants are complete Aphrodisiac for natural sources which boost sexual desire support performance and solve sexual problem.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1746

SEXUAL LIFE OF FEMALE PATIENTS IN A RURAL TURKISH SAMPLE WHOSE PRIMARY DIAGNOSIS IS MAJOR DEPRESSIVE OR ANXIETY DISORDER

Ozyildirim Ilker (Ünye State Hospital, Department Of Psychiatry), Kosecioglu Seval (Ünye State Hospital, Department Of Psychiatry)

Introduction and objectives: Psychiatric disorders are known to have significant impact on sexual functioning. This study aims to evaluate sexual functioning in patients who were diagnosed with either major depressive disorder (MDD) or anxiety disorder (AD) when they applied to the clinic.

Method: A total of 68 sexually active women who applied to a psychiatric clinic in a rural area, who were diagnosed primarily with either MDD (24 patients) or AD (44 patients) according to the DSM-IV criteria and who do not take psychotropic drugs were participated in this study. Detailed interviews were conducted in order to assess sexual functioning and Arizona Sexual Experience Scale (ASEX) was administered. Sexual dysfunction (SD) is defined as having either a score of 5 or more on any item; three or more items with individual scores of 4; or a total score of 19 or more.

Results: 38 of 68 patients (55.9%) were found to have SD. Frequency of SD was significantly higher in MDD group (79.2%; 19/24 patients) than the AD group (43.2%; 19/44 patients) ($p=0.004$). Also, the frequency of dysfunction was significantly higher in MDD group than AD group in items about drive ($p=0.002$); arousal ($p=0.036$); vaginal lubrication ($p=0.043$) and satisfaction with orgasm ($p=0.05$). There was no significant difference between two groups in terms of total coitus in the last week, age of first pregnancy or total number of children.

Conclusion: Although SD is frequent in both groups, sexual life is affected more negatively in MDD patients than AD patients.

Conflict of Interest: None disclosed

Financial Support/Funding: There is not any funding for this research.

PO-1747

SEXUAL PLEASURE WITHIN RELATIONSHIPS

Adebiyi Akindele O (College Of Medicine, University College Hospital, Ibadan), Sangowawa Adesola O (Institute Of Child Health, University Of Ibadan)

Introduction: Conservative social values in traditional African societies have a tremendous impact on the discussion of sexual matters within relationships. This study examines the issue of sexual satisfaction within relationships.

Methods: A cross sectional study of all members of staff registered in a

college staff clinic. Response rate was 91.8% out of which 7.8% were not eligible.

Results: Males accounted for 55.4% while 71.1% were married. First sexual experience was described as pleasurable by 57.8% of respondents while 77.1% described the last sexual experience as pleasurable. However, 48.2% reported that sexual intercourse was not always or often pleasurable. Only 53.7% of these discussed this with their partners. In addition, only 38.5% ever sought advice. Males were more likely to report last sexual intercourse as not pleasurable (OR 0.66, 95% CI 0.23-1.70). Those who were single were also more likely to have reported the last sexual intercourse as horrible (OR 0.34, 95% CI 0.12-0.99). A little over 50% of males and females reported one sexual disorder or the other while 4.8% expressed their need for consultations. Those who agreed with the sayings that sex was for making babies alone and that culturally a woman shouldn't discuss about sexual pleasure accounted for 13.2% and 8.4% respectively.

Conclusion: Sexual dissatisfaction within relationships is a reality while the ability to handle this is lacking among couples. We recommend that attention be paid to this unmet need.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Self sponsored

PO-1753

FREQUENCY OF VAGINISMUS COMORBIDITY IN SEXUALLY ACTIVE WOMEN WITH PRIMARY DIAGNOSIS OF MAJOR DEPRESSIVE OR ANXIETY DISORDERS

Ozyildirim Ilker (Ünye State Hospital, Department Of Psychiatry), Kosecioglu Seval (Ünye State Hospital, Department Of Psychiatry)

Introduction and objectives: Vaginismus is much more frequent in eastern societies than western societies and it is the sexual function disorder which is the most frequent application reason among female patients. This study aims to evaluate the frequency of vaginismus comorbidity in patients who were diagnosed with major depressive disorder (MDD) or anxiety disorder (AD) when they applied to psychiatric clinic.

Method: Participants of this study were 69 sexually active female patients who applied to a psychiatric clinic in a rural area and who were primarily diagnosed with either major depressive disorder (24 patients) or anxiety disorder (45 patients) according to the DSM-IV criteria. Detailed interviews were conducted first by a psychologist (female) and then by a psychiatrist (male) in order to assess vaginismus history after diagnostic interviews.

Results: While none of the 69 patients have current vaginismus, 25 (36.2%) of them were found to have history of vaginismus. 45.8% (11 patients) of the MDD patients and 31.1% (14 patients) of the AD patients had history of vaginismus. There was no significant difference between two groups in terms of frequency of vaginismus history ($p=0.226$). Only one of the patients with vaginismus history applied for sexual treatment in the past. Symptoms of other patients had disappeared without treatment. Improvement occurred in an average of 13 weeks (17 weeks in MDD group and 8 weeks in AD group).

Conclusion: History of vaginismus is frequent in psychiatric population. However, in most of the patients symptoms disappear without treatment.

Conflict of Interest: None disclosed

Financial Support/Funding: There is not any funding for this research.

PO-1756

SOME CONSIDERATIONS ON ETHICAL AND TRANSSEXUALITY: EPISODES IN A BIOGRAPHY

Fridman Cristina Tania

Through a case of sexual biography, processes the scientific progress as fundamental for the defence of the social level of life with collective improvements on health and ecology. Likewise, this case, illustrates the challenges and conflicts that erode beliefs supported by our ethical values. In transsexuality case, biology progress is indeed a work of nationalization, with different marks, with a strong ethical technical scientist context. It is a matter of single spheres and not only a global world. From the traditional medicine to medicine of Edges. ¿Biology with emptying and societal context? Decisions of a patient and the society.

Conflict of Interest: LEGISLATION AND PRACTICES AT HEALTH INSTITUTIONS ABOUT TRANSSEXUALS -ETHICAL ISSUES. LATIN AMERICA AND IN PARTICULAR ARGENTINA.

Financial Support/Funding: CETIS- CENTRO DE EDUCACION TERAPIA E INVESTIGACION EN SEXUALIDAD- ARGENTINA

PO-1758

SEXUAL DESIRE: A PREDICTIVE MODEL IN A SPANISH MALE SAMPLE

Santos-Iglesias Pablo (University Of Granada, Spain), Calvillo Gema (University Of Granada, Spain), Vallejo-Medina Pablo (University Of Granada, Spain), Sierra Juan Carlos (University Of Granada, Spain)

Introduction and objectives. According to Fuertes and López, human sexual desire is determined by the interaction of neuro-physiological arousal, cognitive-emotional disposition, and effective sexual stimulation. This reveals the multiple factors which determines sexual desire. Thus, the aim of the present ex post facto study was to analyze the influence of sexual attitudes, sexual assertiveness, anxiety, depression, and sexual fantasy on Dyadic and Solitary sexual desire.

Method. The sample consists on a total of 193 Spanish males, aging from 18 to 81 years (M = 31.75; SD = 10.47), who completed the Sexual Desire Inventory, Sexual Opinion Survey, Hurlbert Index of Sexual Assertiveness, State-Trait Anxiety Inventory, State-Trait Depression Inventory, and Wilson's Sex Fantasy Questionnaire. In order to analyze the influence of such variables two regression models were carried out separately for Dyadic and Solitary sexual desire.

Results. Results show that Dyadic sexual desire was predicted (R2adj = .16) by Intimate sexual fantasies (Beta = .35) and sexual assertiveness (Beta

= .16). Solitary sexual desire was predicted (R2adj = .24) by Intimate (Beta = .11) and Exploratory sexual fantasies (Beta = .18), sexual assertiveness (Beta = .30), Trait-anxiety (Beta = .26), and age (Beta = -.19).

Conclusion. Results support the idea that sexual desire is determined by several factors, and this influence is different between subtypes of sexual desire

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1759

CHARACTERIZING THE MODERN DAY VOLUNTARY EUNUCH AND EUNUCH WANNABE POPULATIONS

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Introduction: Some men desire to be emasculated, yet do not wish to be female. Some may have a nonspecific Gender Identity Disorder, a Body Integrity Identity Disorder, or an extreme sadomasochistic paraphilia. We are interested in what motivates these men; i.e., why, how, and where they get castrated, and the consequences of their castration.

Approach: In 2008 we posted a questionnaire for four months on www.eunuch.org for eunuchs and eunuch wannabes as a follow-up to our previous studies (references below) of these populations. The questionnaire explored sexual orientation, sexual history, medical history, personality profile, and a wealth of demographic parameters.

Findings and Discussions: The survey yielded data on 258 men who were voluntarily castrated, 23 who were penectomized only, 73 who had both an orchiectomy and a penectomy, and 1385 who had no genital surgery, but self identified as wannabes. In addition 1240 people «just interested in the topic» filled in the questionnaire. The survey confirmed that a history of childhood sexual abuse, homosexuality, and religious condemnation of sex were common among men who sought voluntary castration. A distressing fact is that less than half of the men, who obtained voluntary castrations and were not male to female transsexuals, had their surgeries performed by medically qualified surgeons.

References: Johnson et al. 2007 & Brett et al. 2007. Eunuchs in contemporary society (Parts I and II). *J Sex Med*, 4, 930-945, 946-955. Roberts, L., et al. 2008. A passion for castration. *J Sex Med*, 5, 1669-1680.

Conflict of Interest: No conflicts of interest

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PO-1763

SEXUAL TECHNIQUES IN LONG TERM CATHETERISED MALES BY INNOVATIVE COUPLES : AMAZING BUT TRUE

Pandey Sanjay (Kokilaben Dhirubhai Ambani Hospital & Research Institute)

Introduction: Inability to perform healthy sexual practice could have a bearing on the overall well being of the couple. Couples with long term catheterized males and active partners were included .It was intriguing as to how these young partners with permanent indwelling tubes could manage any sexual act.

Materials and Methods: 32 couples were identified on strict inclusion criteria in devised questionnaire.Young males ranging from 31 yrs to 54 yrs with active partners were on permanent catheter The main inclusion criteria was presence of libido and indulgence in healthy natural sexual act with assistance of partners. Males were asked about frequency, attempts, amount of assistance required, their build upto orgasmic release, refractory periods, multiple orgasms and comparisons of present practice to the days when they were without the catheter. Female partners were analysed for their robust ideas and assistance.

Results: These were innovative couples , probably unheard of in sexual medicine literature in terms of practising healthy penovaginal intercourse by attempting new techniques with catheter in situ.catheter rollover to catheter entrapment to catheter removal to catheter precedence were the satisfactory methods used. The study came up with most astounding results towards future of innumerable suffering couples.

Conclusions: Little has been written about pleasurable aspects of ejaculation and potential for orgasm long term catheterized males. Most are regarded cripples in terms of satisfactory sexual act and orgasm. This small patient group could be forerunners of innovations in sexual approach for select groups. Orgasm in such couple is a new and learned reflex.

Conflict of Interest: None disclosed
Financial Support/Funding: NIL

PO-1766

ACCESSIBILITY STATUS OF SLUM MALE ADOLESCENTS TO REPRODUCTIVE HEALTH CARE IN BANGLADESH

Banik Biwajit (Australian Research Centre In Sex, Health And Society (Arcshs), La Trobe University)

Introduction: A cross-sectional study was conducted at two slums of Dhaka City among male adolescents to determine their accessibility status to reproductive health care, ranges of RH services available for them and to correlate them with their socio-demographic differentials. Methods 112 male adolescents (14-19) were interviewed through a structured questionnaire. Households were selected purposively.

Results: Among 112 respondents, 49.1% mentioned that they had some access to reproductive health services. Those who accessed to RH facilities, 29 (52.73%) respondents mentioned that for RH problems visited Phar-

macy, 10 (18.18%) visited Private physician, 8 (14.55%) visited NGO clinics, 5 (9.09%) visited Homeopath and rest 3 (5.45%) visited Kabiraj. None of them found any 'adolescents friendly' services. Most of them prefer to go to the facilities at evening (81.81%). Majority (52.73%) told that the service providers were not friendly. The main reasons for dissatisfactions were unaffordable service (93.10%) and difficulty in understanding the advice given by the providers (79.31%). Shyness (89.47%) was the main reason among those who did not receive services though they perceived some reproductive health problems. Other reasons are ignorance (47.37%), cost (50.88%), poor quality (26.31%), privacy concern (26.31%) and considered that services were only for women (15.79%)

Conclusion The Researcher also found strong association between respondent's some socio-demographic characteristics and accessibility status to RH care, such as, access to RH care increased with the age, marital status and income.

Conflict of Interest: None disclosed
Financial Support/Funding: Not applicable

PO-1771

ANEJACULATORY ORGASM : DILEMMAS IN MANAGEMENT

Pandey Sanjay (Kokilaben Dhirubhai Ambani Hospital & Research Institute)

Introduction and objectives: An orgasm with no release of semen is a distressing condition for the young male; more so when its associated with infertility. We reviewed our recent series of anejaculatory orgasm and their management.

Methods: Patients presenting with primary anejaculation and those encountered during evaluation for primary infertility were included .Males with failure to collect semen specimen were the largest group (4) followed by odynspermia (2), haematospermia(2) and dry orgasm as reported by partner and one patient had persistent dribble of semen commencing after a lag phase of few minutes after orgasm. All patients were evaluated for their ejaculatory failure and managed on case basis. All had post ejaculate urine specimen negative for spermatozoa.

Results: Evaluation revealed • Bilateral seminal vesicle(SV) abscess in one patient, • Unilateral seminal vesicle abscess with a contra lateral seminal vesicle agenesis, bilateral ejaculatory duct obstruction, • Hyper viscous semen in one • Two cases had previous history of bilateral vasectomy. Patients underwent transurethral resection of ejaculatory ducts, Deroofing of SV abscess, marsupulisation of the SV abscess and rest were managed conservatively.

Conclusions: Anejaculatory orgasm is a difficult management dilemma, especially if associated with primary infertility. There is a surprising lack of international literature related to these disorders. Also surprising there is a lack of terminologies to describe these conditions for eg. anejaculatory painful orgasm. International consensus is required to recognize the conditions and for them to be named appropriately.

Conflict of Interest: None disclosed
Financial Support/Funding: NIL

PO-1773

DIFFICULTIES IN THE DIAGNOSIS OF YOUNG ADULT ASYMMETRICAL GYNecomastia - CASE REPORT

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Introduction: The development of the mammary gland is influenced by sex steroids, prolactin, growth hormone and thyroid hormones (1). The endocrine anomalies causing gynecomastia are intrinsic or due to the affected metabolic rates as seen in liver or renal failure (2).

Action: A 25 years old male patient presented for the last 2 years progressive painless left gynecomastia. The physical exam showed obesity and asymmetrical breast enlargement. The biochemical parameters showed hepatic cytolysis: ALT of 74.3 U/L (normal<41), AST of 41.6 U/L (normal<41U/L) and mild increase of total cholesterol. The serum proteins electrophoresis revealed hypergammaglobulinemia (20.3%, versus 10-19.2%) and hepatitis B was diagnosed. The total testosterone was normal 6.56 ng/mL (range: 2.41 - 8.27), but plasma estradiol was slightly increased (75.9 pg/mL). The ultrasound and mammography confirmed the diagnosis. The pituitary CT scan found a microadenoma of 0.49 by 0.38 cm, probably an incidentaloma.

Outcome: The patient lost in the next three months about 10 kg by diet, but the gynecomastia remained unchanged; that is why we considered that the breast enlargement was caused mainly by the gynecomastia, not by adipomastia. Surgical approach is under consideration (3).

Discussion and recommendations: A complex panel of investigations is necessary in a case of gynecomastia, starting with liver parameters, continuing with hormonal profile and ending with tumor markers (4). Nevertheless, very useful are the imaging methods. In our case, the causes of gynecomastia are probably relative hyperestrogenism due to increased aromatase activity in fat and liver tissue (because no hypogonadism was found).

References 1. Braunstein GD: Gynecomastia. NEJM. 328:490-495, 1993. 2.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1778

PERSONALITY DISORDERS WITH GENDER DYSPHORIA

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Objectives: psychopathological characteristics of persons with personality disorders and gender dysphoria. Material and method(s): 59 persons (23 male and 36 female) who sought to change their biological sex, with the diagnosis of personality disorders (F60-F69) in combination with psychosexual development disorders (F64.8, F66). Average age: 25,5±0,2 years.

Methods: psychopathological and sexological.

Results: Histrionic personality disorder seems to prevail among males with personality disorders (60.9%) along with mixed ones (17.4%) while among women dominate schizoid (38.9%) and paranoid (19.4%) ones. Among persons with mixed personality disorders, most common are histrionic-paranoid (13%) disorders in males and histrionic-schizoid or schizoid-paranoid in women (11.1%). Other gender identity disorders are diagnosed in 73.9% male and 61.1% female clients. Egodystonic gender orientation (F66.1) has been found in 13.6% of male and 16.7% of female patients; 45.7% have family history of mental disorders, 45.8% have the history of developmental problems in childhood including delayed motor development in 15.3% and premature mental development in 20.3% of cases. Signs of psychic dysontogenesis have been found in 34 persons (57.1%). Alcohol and drug abuse are common comorbidities (57.6%) along with asocial behavior (e.g. involvement in prostitution, pimp role) (85.7%) and anxious and phobic disorders (14.3%).

Conclusion: In comparison with general population, in which schizoid, epileptoid and psychasthenic disorders are most common in males and histrionic disorder in females, patients with gender dysphoria show opposite picture. Gender dysphoria in persons with personality disorders seems to be associated with psychosexual development problems.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1784

SOCIODEMOGRAPHIC INFLUENCES IN SEXUAL ASSERTIVENESS

Vallejo-Medina Pablo (University Of Granada, Spain), Santos-Iglesias Pablo (University Of Granada, Spain), Sierra Juan Carlos (University Of Granada, Spain)

Introduction and objectives. Gender, education, age or religiosity could be related to ability to initiate or refuse sexual activity as well as use of contraceptive methods to prevent Sexually Transmitted Diseases (STDs). The aim of this study is to assess sexual assertiveness differences according to sociodemographic.

Method. 780 participants took part in the study. Age was ranging from 18 to 71 (M = 30.99; SD = 9.69). All of them completed the Sexual Assertiveness Scale (SAS) and a sociodemographic report. Results. A vari-

ance analysis was used. Gender difference in Refusal $F(1,729) = 79.82$, $p < .01$ and STDs $F(1,729) = 52.58$, $p < .01$ SAS sub-scales were found. Concerning educational level, significant differences in Initiation $F(3,720) = 5.66$, $p < .01$ and STDs $F(3,720) = 7.05$, $p < .01$ were found. Regarding age, significant differences in all sub-scales Initiation $F(4,726) = 3.05$, $p < .02$; Refusal $F(4,726) = 6.53$, $p < .01$ and STDs $F(4,726) = 13.97$, $p < .01$ were observed. Finally, differences about religiosity were tested. ANOVA showed differences in Refusal $F(4,722) = 2.89$, $p < .05$.

Conclusion. Results have shown significant differences in some scales. Females seem to have more sexual assertiveness than males. People with higher educational level have more sexual assertiveness than people with lower level. Age seems to follow a similar trend: young people have more sexual assertiveness. Finally, people with the highest level of religiosity show the lowest level of sexual assertiveness.

Conflict of Interest: None disclosed

Financial Support/Funding: Ministerio de Educacion y Ciencia

PO-1786

PRELIMINARY VALIDATION OF THE SEXUAL ASSERTIVENESS SCALE (SAS) AMONG A SPANISH SAMPLE.

Vallejo-Medina Pablo (University Of Granada, Spain), Santos-Iglesias Pablo (University Of Granada, Spain), Sierra Juan Carlos (University Of Granada, Spain)

Introduction and objectives. Sexual Assertiveness Scale measures sexual behaviour related to initiation, refusal, and pregnancy-sexually transmitted disease prevention assertiveness. Present research provides first instrumental study to test Sexual Assertiveness Scale (SAS) among Spanish normal sample. Method. 780 participants took part in the study. Age was ranging from 18 to 71 ($M = 30.99$; $SD = 9.69$). All of them completed the SAS. Hurlbert Index of Sexual Assertiveness (HISA) was also administered in order to analyze convergent validity. All participants had at least a six month relationship and all them had sexual relationship.

Results. Psychometric items properties shown an acceptable discrimination index for all items except five one. Factor structure replicate the original three dimensions: Initiation ($\alpha = .68$), Refusal ($\alpha = .76$), and Sexually Transmitted Diseases (STDs) ($\alpha = .82$). This model explain 47.25% of total variance. Correlations between SAS and HISA sub-scales showed a significant ($p < .01$) range between $r = .17$ to $r = .54$. High and significant correlation between SAS sub-scales were also observed.

Conclusion. Spanish adaptation of SAS seem to replicate original dimensionality founded by Morokoff et al. Observed data evidence a good items properties as well as an appropriate convergent validity.

Conflict of Interest: None disclosed

Financial Support/Funding: Ministerio de Educación y Ciencia

PO-1787

A PREDICTIVE MODEL OF SEXUAL DESIRE IN A SPANISH FEMALE SAMPLE

Vallejo-Medina Pablo (University Of Granada, Spain), Calvillo Gema (University Of Granada, Spain), Santos-Iglesias Pablo (University Of Granada, Spain), Sierra Juan Carlos (University Of Granada, Spain)

Introduction and objectives. Human sexual desire is determined by several factors which include sexual, psychological, psychopathological and socio-demographic variables. Thus, the aim of the present ex post facto study was to analyze the main predictors of human sexual desire.

Method. The study was carried out on a sample of 290 Spanish females, ranging in age from 18 to 60 ($M = 29.56$; $SD = 9.53$). All of them completed seven questionnaires: Sexual Desire Inventory, Sexual Opinion Survey, Hurlbert Index of Sexual Assertiveness, State-Trait Anxiety Inventory, State-Trait Depression Inventory, and Wilson's Sex Fantasy Questionnaire. In order to test the main predictor variables two regression analysis were carried out separately for Dyadic and Solitary sexual desire.

Results. Results showed that Dyadic sexual desire was predicted ($R^2_{adj} = .46$) by Intimate ($B = .36$) and Exploratory sexual fantasies ($B = .21$), Sexual assertiveness ($B = .21$), and age ($B = -.19$). Solitary sexual desire was predicted ($R^2_{adj} = .30$) by Exploratory ($B = .27$), Impersonal sexual fantasies ($B = .21$), Sexual assertiveness ($B = .15$) and Intimate ($B = .11$)

Conclusion. The present study shows that predictors of dyadic and solitary sexual desire are different. Nevertheless, it is shown that results are consistent with findings on previous research.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1789

ATTITUDES TO SEXUAL HEALTH: EVALUATION OF QUESTIONNAIRE'S CONTENT AND RESPONDENTS' NEGATIVE ATTITUDE TO QUESTIONING

Zharkov Yuriy N (National Research Center On Addictions), Doudko Taras N (National Research Center On Addictions)

To study sexual health attitudes we worked out a questionnaire in accordance with WAS Declaration (1). It was taken into account during the questionnaire construction that in social psychology the duality of survey is evident not only because a researcher obtains information about a social group, but also because people who fill in questionnaires, receive helpful information (2). Methodology which allows minimizing language differences, was applied (3). To verify quality of the questionnaire created the study was made. Estimations were focused at Incomprehension of Content (IC), Negative Attitude to questioning (NA). Totality of 143 respondents (76 women, 67 men, average age 41) was invited. The data were computed. Frequency Characteristics (FC) was calculated. As results, FC for NA fluctuates from 0,006 to 0,084 that are why its influence to general results of questioning could be excluded. The same is related to IC, because its FC range is 0,045

– 0,127. Only one category should be excluded from this series. Sex Education Level, awareness about human sexual rights (FC is 0,258). It seems, respondents have no enough information. Therefore, the questionnaire could be applied for research in sexology. References 1. World Association for Sexual Health. (2008). Sexual Health for the Millennium. A Declaration and Technical Document. Minneapolis, MN, USA: World Association for Sexual Health. 2. Psychological Testing: By Anne Anastasi. (1954) New York: The Macmillan Company, Pp. 682 3. Zharkov Y. Methodology of questionnaires design for intercultural sexological investigations (2005) Sexologies. European Journal of Medical Sexology.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1793

THE JAMAICA YOUTH MOVEMENT FOR CHANGE

Melles Meheret

Introduction: Jamaica Youth Advocacy Network, a youth-led organization based in Kingston, supports Jamaicans Safely Tackling Adolescent Reproductive health (JSTAR), a national council of youth leaders working to develop, empower and sustain a movement to lobby for the rights, respect and responsibility of their peers to freely access youth-friendly reproductive and sexual health (RSH) information and services.

Methods: The council has implemented core advocacy strategies including creating a medium for policy makers to meet with council members and address objectives such as: a) institutionalizing youth participation at all levels to influence policy and funding on sexual and reproductive health rights for Jamaica's youth by 2010; and b) advocating for greater integration of HIV/AIDS and family planning programmes among Jamaican youth by 2010. In addition, the council is building a national youth activist network that raises public awareness, promotes positive sexual health behaviours, and shares techniques of positive advocacy with key stakeholders.

Results: Since inception, media outlets have requested interviews with the council members, representing them as leaders setting the stage for policy makers to address RSH appropriately and effectively for Jamaica's youth. The Ministries of Health and Education have shown interest in working with the council to ensure that the policies are executed effectively.

Conclusion: JSTAR will continue to work with stakeholders to initiate positive decision-making techniques nationally. The council will share best practices of movement building and lobby strategies in the long-term, once concrete outcomes in policy have been measured.

Conflict of Interest: None disclosed

Financial Support/Funding: Advocates for Youth

PO-1794

SEXUAL HEALTH ATTITUDES IN TEENAGERS, HEALTH PROFESSIONALS, TEACHERS, ADDICTED PATIENTS AND THEIR RELATIVES

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We studied sexual health attitudes using questionnaire created on WAS definitions (1) and methodology (2). It consists of the following three main categories (each of them have three subcategories). General notion about sexual health (GN), genders equality (GE), and sexual rights (SR) are the Sex Education Level category (SEL). Free love (FL), marriage (MA), and prostitution (PR) represent the Sexual Activity Preferred category (SAP). Intensity of libido (IL), intensity of sexual activity (SA), experience of pleasure and happiness (PH) concern the Self-estimation of Sexual Health (SSH). Teens (n=58), health workers (n=39), teachers and social workers (n= 69), addicted patients (72), and their relatives (n=48) participated in a survey. Totality of 286 cases was computed using database. Profiles SEL/GN-GE-SR, SAP/FL-MA-PR, SSH/IL-SA-PH were studied and compared. As result, we have found a common totality profile and characteristic profiles of each social group. For example, reducing frequency characteristics was detected in the SSH category of addicts social group. Our data show high level of informativeness of the questionnaire. One can assume that repeated studies over time or after educational programs will enable the dynamic monitoring of changing in sexual health attitudes of social groups studied.

References: 1. World Association for Sexual Health. (2008). Sexual Health for the Millennium. A Declaration and Technical Document. Minneapolis, MN, USA: World Association for Sexual Health. 2. Zharkov Y. Methodology of questionnaires design for intercultural sexological investigations (2005) Sexologies. European Journal of Medical Sexology.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1796

ADOLESCENT SEXUAL AND REPRODUCTIVE HEALTH RIGHTS: NIGERIAN YOUTH SPEAK OUT!

Melles Meheret

Introduction: Education as a Vaccine against AIDS (EVA) is a youth-led non-governmental organization whose mission is to establish systems and structures for young people to make responsible decisions about their development. EVA supports the Association of Youth Advocate (AYA), a national youth leadership council that works to: • Increase opportunities for young people to participate in the implementation of adolescent reproductive and sexual health (ARSH) policies and programs • Realize the full utilization of national budgetary allocation for ASRH policy implementation by December 2009 • Facilitate the establishment of ASRH units at state and local government levels

Methods: AYA has built support within the Ministries of Health and Education to ensure the responsible implementation of youth-friendly policies and programs on ARSH issues. AYA organized a series of activities including the commemoration of the World AIDS Day, for over 500 people in partnership to raise community awareness on HIV/AIDS. AYA was also involved in a campaign to promote the consistent and proper use of condoms to over 10, 000 participants. The council has broadcasted their message on National TV (NTA), Vision FM Radio, and the Daily Trust newspaper.

Results: The council has created a visible and respectable reputation as young leaders passionate about reproductive and sexual health.

Conclusion: AYA will continue to work with EVA and Advocates for Youth to ensure implementation of ASRH policies in Nigeria and meaningful participation of young people in the decision-making process.

Conflict of Interest: None disclosed

Financial Support/Funding: Advocates for Youth

PO-1798

REPRODUCTIVE AND SEXUAL HEALTH RIGHTS: ETHIOPIAN YOUTH SPEAK OUT!

Melles Meheret

Introduction: Talent Youth Association (TAYA)'s mission is to promote, initiate and advocate for the improvement of adolescent reproductive health conditions and combating the spread of HIV/AIDS through participation and partnership in rural and urban areas of Ethiopia. TAYA supports The Ethiopian Youth Council for Higher Opportunities (ECHO), a national youth leadership council that strives to make significant strides: 1) to increase access to modern contraceptives for young women between the ages of 15 to 29 years; and 2) to secure youth representation in the decision-making process of national policies, program implementation, and evaluation on adolescent reproductive and sexual health.

Methods: To date, ECHO has organized many activities, including an event in partnership with the Ethiopian Great Run, where council members disseminated materials to raise awareness of the council's work in the midst of a marathon of 32,000 participants. The council also commemorated World AIDS Day 2008 with a celebration in a local community of their campaign through music, drama, and educational sessions on HIV/AIDS broadcasted on Ethiopian TV. ECHO also contributes to a monthly newspaper distributed to Ethiopia's parliament and discusses human rights issues in Ethiopia.

Results: ECHO started in May 2008; concrete results of advocacy often require more time to obtain.

Conclusion: ECHO will continue to work with TAYA and Advocates for Youth, an organization based in Washington, D.C. to ensure that the national policies will reflect the needs and realities of the youth in Ethiopia.

Conflict of Interest: None disclosed

Financial Support/Funding: Advocates for Youth

PO-1801

IT'S NEVER TOO EARLY! PARENT'S ATTITUDES TOWARD SEX EDUCATION: AN ITALIAN EXPERIENCE

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Appropriate sex education have an important role in preventing some sexual problems in adulthood. The aim of this study is to survey the attitudes and views of 40 couple of Italian parents on the role of the family in children's sexual development and education. Parents were recruited at school during the presentation of a sex education program for their children. They were administered an anonymous questionnaire with closed and open questions exploring education attitudes and beliefs on sexual education. Answers to closed questions were elaborated by descriptive statistics, while those to open questions were treated by content analysis. Results indicated that both, mothers and fathers, believed that families today do not have adequate requirements to provide appropriate sex education. They refer that sex education should be provided by teachers and family, but they ask for sex education programmes supervised by a sexologist or doctor. Differences between mothers and fathers were analysed. Sex education school programmes which involve parents can support the dialogue at home, in particular because parents are confused about the right communication channel to use with their children, and generally they prefer to use their own words to explain. Parents and schools both need to explore with young people the messages that they get about sexuality so that to give them opportunities for discussion.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1802

TOWARDS AN EPISTEMOLOGY TO WORK ON SEXUALITY

Becker Alvear Maria Andrea

Introduction: After years of interest in and dedication to the understanding and apprehending of the human being I was drawn to studies that consider matters about the human being sexed and its implication in the developing of his potential for «enjoy, serve and transcend» and for living with another human being who is a «legitimate other in the coexistence». I hope to show the need for an epistemological post-rational focus that, from a multi-disciplinarian approach to the personal integrality and the communitarian individuality, favors the change towards a richer life.

Approach: Studies, conferences, workshops, debates, readings and conversations with people and historical knowledge in medicine, psychology, anthropology, art, religion, philosophy and others.

Findings and discussions: Community work in sexuality at universities, elderly clubs, and with persons and groups of diverse backgrounds, showed that participants expressed and evidenced a remarkable development of their sexual satisfaction's registration, their vital empowerment, improve-

ment of affective link's quality and overall quality of life.

References: Multidisciplinary work and the acquisition of different skills, provide the necessary opening to understand the complexity of these issues. This allows us to be more effective regarding the task of educating and healing to obtain both a personal and a communitarian experience of a satisfactory and responsible sexuality. Corporality and emotions experienced from art, spirituality conceived as immanent and transcendent, and science with its great achievements, converges from an epistemology that allows a know-how that propitiates an integral change in people.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1805

SWINGERS, DEVIANT, PERVERSE OR JUST DIVERSE

Alvarez-Gayou Juan Luis J. (Mexican Institute Of Sexology), Millán Paulina A. (Mexican Institute Of Sexology)

Swingers, deviant, perverse or just diverse Juan Luis Álvarez-Gayou Jurgenon The swinger life style recently has become more public and organized. Informal reports establish a growing popularity of this lifestyle in several countries such as France, England and the United States. The careful review of the scientific literature on the subject revealed it is a very poorly studied, since in over ten years only five research papers on the subject were revealed. The study was done on 157 persons (136 males and 21 females) from the swinger scene in Mexico, by means of an open questionnaire of 5 questions distributed via Email with the help of organizers that have a swinger radio program in an internet radio station. The results reflect the reasons for entering the swinger life style, if they share it with their children or not and the reasons for doing so or not, with whom they share the information about their life style, what benefits do they obtain from the practice of swinging, disadvantages of being swinger, how they feel they are considered by society at large, the rules within the practice of swinging and any general comments they wished to express. The results were analyzed with the help of the Atlas ti computer program and showed the group to be extremely conservative from the view point that they center their practice searching to benefit the quality of the couples relationship. They are also very common persons and couples. More research on the subject is needed.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1812

SPIRAL: DIVERSITY TEENAGER - ESPRIRAL: ADOLESCENCIAS DIVERSAS

Castillo Anabel (Centro De Estudios Para El Desarrollo Itzam Ná A.C.), Barrios Martha E (Centro De Estudios Para El Desarrollo Itzam Ná A.C.), Quino Josue A (Teatro / Sida A.C.), Delgado Benjamin (Teatro / Sida A.C.)

Introduction: In schools, young gays, lesbians, bisexuals and transgender don't exist. They are invisibles and there aren't any sexual health programs targeted specifically to this population in their schools, for this reason, they are discriminated, stigmatized and rejected. This leads them to dropout, increases their low self-esteem, therefore leaving this population vulnerable.

Action: We conducted a research-action with 1,000 teenagers and 700 teachers from 4 different junior high and 3 high school in Mexico D. F., to investigate whether there was discrimination and stigma towards LGBT teenagers, what kind of attitudes they had toward this population and care for HIV / AIDS / STI at the beginning of their sex life. We analyzed and created 1 Workshop for teachers, 1 Workshop for Teens and 1 show for the whole school.

Results: Survey: 30% of teachers and 47% of adolescents didn't answer the part of the survey where they were asked to describe what is LGBT and if they could live together. They said they supported LGBT adolescents. 39% of men said they could not live or have homosexual or bisexual friends, 75% of women said they could. Within these workshops, 70 teachers and 700 teenagers were sensitized to the importance of not discriminate and stigmatize LGBT adolescents, and consistent use condoms to prevent HIV / AIDS / STIs. Discussion and recommendations To Train teachers and youth with different awareness-raising and education, it allows changing attitudes. This type of project leaves whole school community sensitized.

Conflict of Interest: NO CONFLICT, RESEARCH WAS REALIZED ON NOVEMBER AND DECEMBER 2008

Financial Support/Funding: CO-INVERSION ITZAM NÁ A.C. and CEN-SIDA MEXICO

PO-1818

ESSENTIAL FACTORS OF PREOPERATIVE CONSULTATION IN PENILE AUGMENTATION AND ELONGATION

Jang Su-Yeon (Lj Urologic Institute), Lee Seung-Hoon (Lj Urologic Institute)

Introduction: The number of men who wish to have penile enhancement surgery is increasing recently. We intend to identify the postoperative courses of patients aiming to reduce their anxieties after surgery and meet the patients' satisfaction for the results.

Method(s): From 2003 to 2008, we have performed penile augmentation and lengthening procedure in 1380 cases. We adopted pre-pubic minimal incision and multi-layer suture lengthening procedure. 1. Inserted material for girth enhancement was artificial collagen dermis 2. Mean operation time was 46 minute and 2~5 postop follow-ups We have to explain several factors at preoperative and postoperative time. 1. Check the patient's clinical and psychological history 2. Select patients after consulting about patient's expectation for results and understanding post-op courses 3. We have to explain detail things A: Post-op pain in lifetime continues for 3~4 days. B: Patients have nocturnal erectile pain (for 3weeks) C: Prohibition of sexual behavior during a month D: The operative wound has to avoid contact with water during about 10days. E: Continuation of post-op discomfort and ten-

sion on penile erection during about 2months. F: More dull sensation on penile shaft and glans will last for about 3~4 months

Result(s): In penile augmentation and enhancement, we need to explain postoperative courses to patients to avoid bringing about anxieties from post-op symptoms.

Conclusion(s): The pre-op explanations of post-op courses should be done in order to get the successful post-op management

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1822

VULNERABILITY FACTORS ON SEXUAL DYSFUNCTIONS

Laja Pedro N J B C (University Of Aveiro), Nobre Pedro J S C (University Trás-Os Montes E Alto Douro)

There is a lack of experimental studies testing the main hypotheses derived from conceptual models of sexual dysfunction, with most studies using comparative and cross-sectional designs. Our aim is to test some hypotheses on the role of psychophysiological factors on sexual dysfunction, using an experimental design. We hypothesize that some psychological features (personality and dispositional factors, cognitive structures and sexual beliefs) act as vulnerability factors, predisposing individuals to develop sexual problems. This research project aims testing the predictive power of these psychophysiological variables on the subsequent development of sexual problems. A community sample of 200 individuals (100 men and 100 women) will be constituted. Participants will answer to a sexual dysfunction interview (SDI) and complete a set of self-reported measures assessing Medical factors (MHF), Relationship factors (DAS), Psychopathology (BSI and BDI), Dispositional factors (NEO PI-R and PANAS), Sexual Inhibition / Excitation (SIS/SES), Cognitive Schemas (SQ and QCSASC), Sexual Beliefs (SDBQ), Thoughts and Emotions (SMQ) and sexual functioning (IIEF). Participants will then participate in an experimental research conducted in a Psychophysiological Lab. Participants will be randomly assigned to 3 experimental conditions (neutral, false negative feedback, and false positive feedback of genital response). All groups will watch sexually explicit material, while measures of genital arousal and other psychophysiological responses will be continuously recorded. We expect to find a significant negative effect of false negative feedback on subjective and physiological sexual arousal in both men and women, with the proposed vulnerability variables playing a moderator role.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1826

THE VALORISATION OF SEXOLOGY EDUCATION AND TRAINING PROGRAMME AT THE JAMK UNIVERSITY OF APPLIED SCIENCES, DURING THE YEARS 2000-2007

Valkama Sirpa

At JAMK, sexology education and training has been developed since the year 1995. Based on the NACS programme, courses have been developed since 1999. The multidisciplinary group from the year 2007 was analysed more in detail. Specialist in Sexological Counselling – education and training programme was organised 18.1. - 14.12.2007. These questions were asked at the beginning and in the end of the programme: 1. How does the ethical approach affect your work with sexual issues? 2. Describe the essential elements of the therapy process. 3. Explain shortly what is sexual dysfunction 4. Evaluate your skills in the areas of research and development The knowledge and skills were not described separately, but as an expertise in the client relationship-building skills. The students described their work critically and analytically. Expertise had developed especially in therapeutical skills. The online questionnaire was carried out in February 2007, for the students in the Specialist in Sexological Counselling – programme between 2000-2007. Response rate was 41 %. Questions were about their education, work, client relationship-building skills, other activities and the work community's attitude. Almost 50 % felt that after the programme, their therapeutical skills were excellent. In the client relationship-building skills, eg.support, tools for counseling, identifying emotions and behavior and listening and understanding, more than 10 % felt their skills developed. The programme especially developed the skills in analyzing, building and implementing the client relationship process. The confidentiality and respecting the client, were skills that the respondents felt were excellent already before the programme.

Conflict of Interest: None disclosed

Financial Support/Funding: JAMK University of Applied Sciences

PO-1827

THE IMPORTANCE OF PSYCHOLOGICAL SUPPORT IN LA PEYRONIE'S DISEASE

Quattrini Fabrizio (University Of L'Aquila), Serena Romano (Italian Sexological Scientific Insitut (Iiss)), , Travaglia Stefano (San Carlo Di Nancy Hospital-Idi Sanità)

Objective: In S. Carlo di Nancy Hospital our equip works on La Peyronie's disease with shock waves treatment. We have collected information about sexual and relational difficulties, and we have supported patients during the medical treatment. The aim of this pilot study was to verify the utility of a psycho-sexological support during the medical treatment.

Method: The sample group consist of 20 individuals. We were asked to complete some questionnaire before the psychological support, in the beginning of medical therapy and later on. This sample group has been related with a control group, that it not had a psychological support, but

medical treatment only. We were used: 1. The “Sexrelation Evaluation Schedule Assessment Monitoring” (SESAMO) 2. The “Sexual Scale” 3. The test of human figure 4. The test of drawing of the penis.

Results: The preliminary analysis of data to point out relational discomforts and difficulties of compliance to new conditions. The hostile factors seem a concerning bodily experienced, in particular difficulty to accept own body, fear to be refused, episode of sexual dysfunction, negative experiences, inhibitions and difficulty to express and accept change of own sexuality too.

Conclusions: The La Peyronie’s disease can have an important organic and psychological effect for the patient, reflecting on couple life. The psychological factor seems to be fundamental in these subjects, with mixed feelings of shame, anger, insecurity and diffidence for own possibility. These things could established an indifference for sexual activity until a really mental and sexual inhibition.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-1829

EFFICACY EVALUATION OF PENILE LENGTHENING PROCEDURE AND DIAMOND-SHAPED SCROTOPLASTY FOR CORRECTING SMALL WEBBED PENIS

Jang Su-Yeon (Lj Urologic Institute)

Objective(s): To evaluate the efficacy and safety of penile lengthening procedure and Diamond-Shaped Scrotoplasty in small webbed and buried penis

Method(s): Between 2005 and 2008, Penile lengthening procedure and Diamond-shaped scrotoplasty were performed in 53 patients with webbed and buried penis We operated on 48 patients with girth augmentation penoplasty and 5 patients had lengthening procedure and Diamond-shaped scrotoplasty without girth augmentation With the use of prepubic incision, lengthening procedure was done with dissection of fundiform ligament After dissection of ligament, multiple transverse sutures were done for approximation of prepubic dead space with 2-0 PDS And then scrotoplasty was begun by diamond-shape incision from the penoscrotal junction to the point about 4~5cm lower along the median raphe The incised diamond-shaped scrotal skin was dissected from areolar layer and detached The subcutaneous tissue was transversely approximated and the skin was closed Dressing was applied and stitch was taken out on POD 12days

Result(s): Postoperative penile length(from the glans tip to the penoscrotal junction) after 3months was elongated to 4.7~7.3cm compared with preoperative length of 2.1~5.0cm. The average elongated length of penis was 2.4 cm There were complications including inflammation and wound dehiscence (3 cases),but we fixed them completely within 2weeks Conclusion(s): The penile lengthening procedure and Diamond-shaped scrotoplasty are an effective and safe method to elongate the penis in small sized webbed penis cases

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-1832

GLOBAL SYSTEM FOR MOBILE (GSM) COMMUNICATION: A FUEL TO SEXUAL PROMISCUITY AMONG NIGERIAN YOUTHS

Bakare Idowu - (Maids Club Of Nigeria (Maids))

Introduction: The introduction of GSM into Nigeria has greatly increased the level of sexual promiscuity among youths. This is because most youths, especially the educated ones now use the GSM as a connecting tool for quick sex and sharing of erotic discussions, pornographic texts, videos and pictures.

Action: 218 educated youths (aged 16-24) were interviewed in November 2008 on how the use of GSM had increased the level of promiscuity among youths. 26 people admitted that with or without GSM, youths may be sexually-loose; 79 believed that GSM had increased the level but does not affect their economic or academic pursuits while 113 were of opinion that GSM had increased the promiscuity level and has also affected the productivity of youths, as many youths now use the GSM links to chase about the opposite sex.

Outcome: It was established through the study that GSM now make it easy for youths to engage themselves in online erotic discussions, which they always practice when they see physically. Since some of them do not have the time to attend educative programs on reproductive health and safer sex practices; it was discovered they always get themselves infected with Sexually Transmitted Infections (STIs) including HIV & AIDS.

Discussion and Recommendations: From the above findings, it is hereby recommended that GSM companies should send «safer sex practices» messages to users in order to educate them as a way to prevent infections and make them economically productive.

References: 1. Focus Group Discussion (FGD) with youths, 2. In-depth interview

Conflict of Interest: None disclosed
Financial Support/Funding: Through Brilliant Concepts International (BCI), Nigeria.

PO-1835

DEVELOPMENT AND DEPLOYMENT OF GAME BASED LEARNING FOR SEXUALITY EDUCATION IN SCHOOLS

Axelzon Fredrik (Gr Experiential Learning), Heath Carl (Gr Experiential Learning), Fredholm Karin

This paper uses interview data from key personell within the formal school system, together with download statistics from GR Experiential Learnings webpage, in order to explore design and deployment perspectives for implementing game based learning in sexuality education in the formal school system. Prior experience and practice of design and deployment of game based learning for sexuality education shows that several factors play a crucial role for if, when, and how teachers use game based learning. These factors have also to some extent shown possible differences in the qualitative results of the teachers use of a game as well. This experiential and practice

sample will look into what factors have been shown to play an important part for a successful design and deployment of a game in sexuality education.

Conflict of Interest: None disclosed

Financial Support/Funding: Västra Götalandsregionen, Sweden

PO-1836

GENDER ISSUES AND SEXUAL DESIRE: THE ROLE OF MEDICAL, EMOTIONAL AND RELATIONSHIP DIMENSIONS

Carvalho Joana P (Universidade De Trás-Os-Montes E Alto Douro), Nobre

Pedro J (Universidade De Trás-Os-Montes E Alto Douro)

The aim of this study was to assess differences between men and women regarding the role of medical, emotional, and relationship factors on sexual desire. A total of 442 participants (205 men and 237 women) from general population answered to a set of questionnaires regarding these dimensions, as well the frequency of sexual desire. 2 (men/women) x 2 (low/high sexual desire) MANCOVAS (demographic variables as covariates) were used for psychopathology, dyadic adjustment, emotions during sexual activity and medical problems. Regarding psychopathology, findings indicated a significant main effect for gender (women presented higher levels of psychopathology), but not for group or interaction group x gender. With regards to dyadic adjustment, results showed a main effect for group (participants from low desire group presented less dyadic adjustment), but not for gender, or the group x gender interaction. Findings on emotions during sexual activity indicated main effects for group (with participants from low desire group presenting more emotions of shame and from high desire group presenting more emotions of pleasure), gender (with women presenting more emotions of anger and men presenting more emotions of fear), and the group x gender interaction (with men from low desire group presenting more emotions of shame while women from low desire group presented a similar emotional profile in relation to women from high desire group). Medical problems showed no significant effects for group, gender or group x gender interaction. Implications from these features as vulnerability factors regarding deficient sexual desire in each gender are discussed.

Conflict of Interest: None disclosed

Financial Support/Funding: Fundação para a Ciência e Tecnologia (FCT) / Portuguese Foundation for Science and Technology

PO-1838

PREDICTORS OF WOMEN'S SEXUAL DESIRE: THE ROLE OF PSYCHOPATHOLOGY, COGNITIVE-EMOTIONAL DETERMINANTS, RELATIONSHIP DIMENSIONS AND ORGANIC FACTORS

Carvalho Joana P (Universidade De Trás-Os-Montes E Alto Douro), Nobre

Pedro J (Universidade De Trás-Os-Montes E Alto Douro)

The aim of this study was to evaluate the main predictive factors of female

sexual desire, considering the role that medical, psychological and relationship dimensions play on this context. We evaluated 237 women from general population according to psychopathology, dysfunctional sexual beliefs, automatic thoughts and emotions during sexual activity, dyadic adjustment, presence of medical condition and menopause. Findings indicated that psychoticism was the only psychopathological dimension that significantly predicted sexual desire (beta = .37). Conservative beliefs (beta = -.33) and age related beliefs (beta = -.25) were also significant predictors of desire in women. Additionally, lack of erotic thoughts (beta = -.28), failure/disengagement sexual thoughts (beta = -.64), and thoughts related to female passivity (beta = .31) during sexual activity were significant predictors of desire. Regarding relationship dimensions, dyadic cohesion (beta = .37) and dyadic affection (beta = .45) were the best predictors of sexual desire. Moreover, post-menopausal women and women with medical problems presented reduced sexual desire. A multiple regression analysis (enter method) including all these variables plus age, as predictors of sexual desire in women, indicated that failure/disengagement sexual thoughts during sexual activity were the only significant predictor of sexual desire in women (beta = -.52) suggesting the role of cognitive dimensions in the maintenance of women sexual interest.

Conflict of Interest: None disclosed

Financial Support/Funding: Fundação para a Ciência e Tecnologia (FCT)/Portuguese Foundation for Science and Technology

PO-1839

PRIVATE AFFAIRS, PUBLIC SCORN: INTERROGATING QUEER POLITICS IN KENYA, 1890-2009

Chacha Babere Mr. (Egerton University)

Growing internationalisation of the sexual rights and identities, women's movement, and increasing demands for basic equality, just as it lies behind the escalation of effective new sexual orientation in many urban areas of Africa. These movements have opened up debate on homosexuality which has been bogged down by far too many myths and misconceptions, which must be corrected and clarified if Africa is to make progress on this critical issue. Some of the misconceptions include claims that homosexuality is un-African, and that gay sex is unnatural and a form of sexual perversion imported to Africa from the West. Consequently, I intend to trace the history of homosexuality in the public discourse and how such an identity has been influenced by international organizations in the sexual and gender identities and rights issues in Kenya. By examining archival materials, conducting oral data and reviewing literature from multiple works, the paper intends to delve into what it means to be male and female in modern Kenyan contexts; Historically, the different ways in which sexualities have been constructed, performed, resisted, transformed and transgressed; how tensions between traditions and modernities have played out in the arena of gender; the ways in which post-colonial movements and institutions mobilize gender ideologies.

Sources: O'Brien 'Revisiting' Woman-Woman Marriage «: Notes on

Gikuyu Women from NWSA Journal Volume 12, Number 1, 1998. Everlyn Blackwood, "Lesbian Behaviour in Cross-Cultural Perspective," Msc. Thesis, San Fransisco State University, 1984.

Conflict of Interest: None disclosed

Financial Support/Funding: EGERTON UNIVERSITY, NJORO, KENYA

PO-1840

POLITICAL AND EDUCATIONAL WORK WITH BDSM AND FETISH-RELATED ISSUES IN SWEDEN

Smith Marika (Rfsu Stockholm)

Introduction: Fetishism and BDSM are sexual expressions often surrounded by ignorance or prejudice. This often leads to discrimination and mistreatment in both private life and in situations such as health care or in the work place. The RFSU Stockholm Workgroup for BDSM and Fetish Policy Development was formed in 2006. The main issue was to convince the Swedish National Board of Health and Welfare to remove sadomasochism and fetishism from their registry of diseases.

Action: The workgroup has composed lectures and pedagogic methods to speak about sexual expressions that go beyond the normative, and the core of their work is to create a platform for dialogue in order to make a deeper understanding possible. During Europride 2008 the workgroup arranged a series of seminars and lectures such as «BDSM and parenthood» and «BDSM and discrimination». A brochure informing about BDSM and fetishism was published in the autumn of 2008.

Outcome: As of January 1th 2009, sadomasochism and fetishism are no longer listed as diseases in Sweden, partly due to the workgroup's efforts to get media to acknowledge the issue, and through their work within RFSU. Strengthened by this success, the workgroup continues to work towards an extended knowledge of these issues within society, especially health care and the legal system. The goal is to make BDSM and fetishism accepted parts of human sexuality, founded on the notion that they are sexual expressions based on lust, consent and reciprocity.

Conflict of Interest: None disclosed

Financial Support/Funding: RFSU Stockholm

PO-1842

TRANS LIVES: ASIAN VOICES

Winter Sam

Research on transgender people in Asia has until recently been scarce; concentrated on a few countries only. Especially scarce has been research across the continent that seeks to give voice to transpeople's own accounts of their lived experiences. The marginalisation of the 'transgender voice' within Asian transgender research is especially regrettable in view of the marginalised positions (social and economic) that transpeople already occupy across much of Asia. The 'Trans Lives: Asian Voices' attempts to fill that research lacuna, giving Asian transpeople a voice in their own research

literature. Transgender participants were recruited through internet and social networks and invited to provide accounts of their lives. Beyond providing autobiography, they were left free to choose what aspects of their lives to include, and what language and what format (written or spoken) to employ in doing so. According to language and format chosen by the participant, arrangements were made for recording, transcribing and translating. Eighty potential participants were approached. Thirty three finally supplied their autobiographies. They came from twelve countries. Many autobiographies revealed worryingly high levels of transprejudice, levels evident in most countries and at most levels of society (in family and school as well as in other wider aspects of society such as healthcare, employment, religion, law and the work of police). Findings imply a need for social activism for transpeople aimed at removal of stigma, eradication of prejudice and discrimination (social and institutional), and promotion of equal opportunities. Organisations outside Asia, including WASH, may have a role to play.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: University of Hong Kong Seed Funding programme

PO-1843

SEXUALITY, SEXUAL PATTERNS AND THEIR IMPACT IN CAMBODIA

Oukvong Vathiny (Reproductive Health Association Of Cambodia)

Sexuality, sexual patterns and their impact in Cambodia Vathiny Ouk Vong Sexual debut occurs relatively late in Cambodia, on average at age 17-19 years, for girls and boys. Debut is mostly linked to marriage, and virginity highly valued. Sexuality is a taboo topic, and sexual knowledge low. Marriage is seen as a union for (re)production, and divorce is seen as a failure, notably for the woman. She is expected to attend to the sexual needs of her husband, who will often frown on any expression of sexual enjoyment on her side. Many women will never get to know of the female orgasm in their life-time. Access to contraception, as other health services, is insufficient. Women cannot decide alone on contraception, without involvement of their husband. They may thus wish to avoid having sex, to prevent more pregnancies, or too frequent births. Men will often in turn go to brothels for sex, something that is very common. Since homosexuality is also taboo, many married men will seek same-sex contacts, also with male sex workers. Gender-based violence is common, also including marital rape, and male abuse of younger female family members. Older men will also try to purchase virginal sex, since this is supposed to promote male health. As young girls who no longer are virgins are considered "damaged goods", abuse of them also contributes to prostitution or sexual trafficking. HIV prevalence has fallen from over 3% to <1%, i.a. by a "100% condom campaign" in brothels, and by successfully reaching out to MSM. Brothels

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1844
NEW TYPE OF DATE VIOLENCE

Uchiyama Ayako

Domestic violence (DV) has become global social problem. In Japan, law which prevents DV and protects victims of DV for married couples was enacted in 2001. However this law is not applied for premarital couples. Nevertheless premarital couples of younger generation who suffered from date violence seem to increase recently. In this report, current trends among university students in metropolitan area on date violence were examined. Procedure; Subjects were 162 male and 204 female students; they were queried if they have had the experiences of batterer toward their partner or victims from their partners of various type of violence through questionnaire in 2008. Violence involved physical, sexual, economical type and monitoring behaviors directly or through mobile phone. Subjects were also asked about the attitudes toward marriage and love affairs and gender role. Experiences of batterer and victims and their background were analyzed statistically. Results; Some of subjects did not have partners(16.2%). Among those who have had partners, three fourth of subjects experienced some type of date violence. Results showed that both few males and females experienced physical victimization; however they responded higher ratio of monitoring behaviors toward their partners through mobile phone by checking mailing or calling so often. Experiences of being batterer and victim strongly related each other(0.7). As communication tools develop, the pattern of love has changed.

Conflict of Interest: domestic violence, date violence
 Financial Support/Funding: none

PO-1846
PREVALENCE AND CORRELATES OF SEXUAL GENDER BASED VIOLENCE IN UGANDA

Nayiga Joy H

Introduction: The 1995 Fourth World Conference on Women gave priority to the issue of sexual gender based violence which jeopardizes the women's lives, bodies, psychological integrity, and freedom. Similarly, WHO notes that Gender Based Violence is a major public health and human rights problem throughout the world and has profound implications on health if ignored. Nearly one in four women around the world experiences violence and women in Uganda are not an exception. However gender based violence has received insufficient attention from researchers such as the magnitude and extent of SGBV in Uganda. The overall objective of the study is to investigate magnitude of SGBV and the factors associated with SGBV in Uganda.

Methods: The study used a community based cross sectional study design to assess the magnitude and factors associated with violence against women, The study population was women in reproductive age group (age 15-49years).

Results: Findings show that most women believe that women should obey

their husbands in all aspects of life, and that their husbands have the right to beat them if they do not.

Conclusion: There is need to carry out national and community level educational campaigns to promote women's rights. More research is also needed to understand risk and protective factors for violence and to understand what types of interventions could be most useful to women suffering violence. The public health community can play an important role in this effort, study will help health workers to become active in violence prevention activities.

Conflict of Interest: No conflicts of interest
 Financial Support/Funding: self sponsored

PO-1847
CHARACTERISTICS OF SEXUAL LIFE IN PATIENTS ADMITTED TO INTENSIVE GROUP PSYCHOTHERAPY

Muldner-Nieckowski Lukasz (Jagiellonian University, Medical College, Chair Of Psychotherapy), Rutkowski Krzysztof (Jagiellonian University, Medical College, Chair Of Psychotherapy), Sobanski Jerzy A (Jagiellonian University, Medical College, Chair Of Psychotherapy)

Introduction and objectives: The aim of this presentation is to introduce a new instrument, used for assessment of symptoms connected with characteristics of sexual life in population of patients with neurosis and related personality disorders.

Methods: During the first week of psychotherapy the patients fill a questionnaire, containing statements which cover different areas of sexual life such as: overall satisfaction, present sexual relationships, present sexual activity, dysfunctions of sexual intercourse, experience of sexual trauma, feelings towards one's own body and attractiveness. Data from the pilot study were analyzed in search for preliminary, statistically significant differences between groups of symptoms.

Results: The pilot study on 80 patients (43 females, 37 males) confirmed, that different symptoms connected with sexuality are important component in distress of patients beginning intensive group psychotherapy. In overall, 58% of patients perceived their sexual life as unsatisfactory. Nearly 50% do not experience pleasure connected with sexual activity. Over 85% regard sexuality as important matter. Significant difference was found, as up to 85% patients expect improvement of their sexual life, but only 35% are explicitly interested in including sexuality as one of the themes in psychotherapy.

Conclusion: Results of the pilot study confirm clinical importance of symptoms connected with sexuality in neurotic disorders. Further group psychotherapy effectiveness assessment will bring an opportunity to recognize the specific role of these symptoms in diagnosis and psychotherapy treatment.

Conflict of Interest: No conflicts of interest
 Financial Support/Funding: Grant of Ministry of Science through Jagiellonian University, Medical College projects

PO-1852

EDUCATION FOR ALL AGREED SEXUALITY EDUCATION FOR ALL...? WHY STILL A QUESTION MARK

Ashraf Saima (World Population Foundation), Baig Qadeer

Pakistan is the sixth most populous country of the world with a total population of 169.3 million, whereby 60% of the population lives below the line of poverty. The projection of this dilemma lies in the large number of young people who currently make up 54.2 million aged between 10- 24. Due to inadequate information and skills they not only tend to involve in risky situations such as drugs, unsafe sexual practices and are also vulnerable to sexual violence, sexually transmitted infections including HIV & AIDS. The prevalence of sexual violence among young people is 32%. 50,000 adolescents in six districts (urban and rural) have completed the sexuality education curriculum during last four years while 15,000 students are enrolled in 2008 in 11 districts with voluntary support of 700 teachers and heads. The Impact Assessment of this 4 year programme shows that 84% of the trained teachers adopted interactive teaching approaches to deliver the LSBE curriculum as well as in their teaching profession. 65% of students could identify at least two major puberty changes where as, 87% could identify two ways of prevention from HIV infection with 72% of boys and 64% of girls identified the use of condom as one of the effective ways of prevention. The efficiency can be increased by incorporating youth perspective in planning, implementation, evaluation and advocacy. Initiatives to involve policy makers to integrate it in National Curriculum are vital to reach out to the largest cohort of Population in Pakistan.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Still looking or Self Finance

PO-1858

PROMOTION OF USE OF THE FEMALE CONDOM IN STEADY COUPLES

Fernandez Maria Lameiras (Universtiy Of Vigo (Spain)), Fernandez Maria Victoria Carrera (Unviersity Of Vigo (Spain)), , Garrido Jose Maria Failde (University Of Vigo (Spain)), Lorenzo Carmen Ricoy (Unviersity Of Vigo), Mangana Ana Maria Nuñez (University Of Vigo)

Introduction + Methods: This study evaluates the effectiveness of a session in which the female condom was promoted to a sample of 45 steady couples (N=90), carried out using a qualitative study.

Results and discussion: an acceptable amount of theoretical knowledge was obtained about the female condom during the informative session; only a minority of the participants expressed positive attitudes toward the method; the level of satisfaction after using the method is bigger in women than in their partners; female participants expressed a greater willingness to use the method again in the future with casual partners, whereas male participants were more reticent to consider using it again, and in the event of its future usage, said they would prefer to use it with a stable partner; and, the female participants focused more on the advantages of using the female condom.

Recommendations: The devaluation carried out reveals a clear need to design and implement educational interventions aimed at promoting the female condom.

Reference: Lameiras, M., Nuñez, A.M., Rodríguez, Y., Breton-López, J. y Agudelo, D. (2007). Conocimiento y viabilidad de uso del preservativo femenino en jóvenes universitarios españoles. *International Journal of Clinical Health Psychology*, 7, 207-216. Lameiras, M., Failde, J.M., Saco, A. y Rodríguez, Y. (2006). A qualitative study of the viability of usage of the female condom among university students. *International Journal of Clinical and Health Psychology*, 6, 189-199.

Conflict of Interest: None disclosed

Financial Support/Funding: UNIVERSITY OF VIGO. CATEDRA CAIXANOVA DE ESTUDIOS FEMINISTAS

PO-1859

BODY IMAGE DISTURBANCES IN VAGINISMUS PATIENTS

Tihan Aysu K?Vrak (?Stanbul Medical Faculty, Department Of Psychiatry), ?Ahin Do?An (?Stanbul Medical Faculty, Department Of Psychiatry)

Introduction and objectives: Vaginismus is a frequent condition and a common reason for applications to sexual dysfunction treatment units in Turkey. Vaginismic women may have dissatisfaction about their bodies and their genitals, they may avoid light and nudity during sexual intercourse. The quality of sexual life is related to assertivity, positive self and body image. Bodily shame is not unusual in these patients. The purpose of this study is to evaluate the body satisfaction, body image disturbances and self esteem of vaginismus patients, and the effect of body image on their quality of life before and after vaginismus treatment.

Method: In this study, Body Image Disturbance Questionnaire (Cash et al., 2004), Body Cathexis Scale (Secord and Jourard, 1953), Body Image Quality of Life Inventory (Cash, 2004), Rosenberg Self esteem Scale (BIQLI, Rosenberg, 1965) were used. These scales were applied to 42 vaginismus patients who attended group psychotherapy for vaginismus during 16 sessions in 8 week, before and after group psychotherapy.

Results: Most of the patients have dissatisfied parts on their bodies but none of them fulfilled body dysmorphic disorder criteria. The patients mostly worried about their weight. When assessed by the scales, significant differences were found in Body Cathexis Scale and BIQLI before and after vaginismus treatment.

Conclusion: Disturbances of body image can contribute to the development of sexual dysfunction, and also sexual dysfunction may lead to bodily shame and dislike of one's body. Group psychotherapy improves sexual dysfunction and provides increases in bodily pleasure of vaginismus patients.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1861

ASSESSING FEMALE CONDOM ACCEPTABILITY AMONG HETEROSEXUAL SPANISH COUPLES

Fernandez Maria Lameiras (Universtiy Of Vigo (Spain)), Garrido Jose Maria Failde (Unviersity Of Vigo (Spain)), Fernandez Maria Victoria Carrera (University Of Vigo (Spain)), Castro Yolanda Rodriguez (Unviersity Of Vigo), Mangana Ana Maria Nuñez (University Of Vigo)

Introduction: To assess the acceptability of the female condom in a sample of young heterosexual Spanish couples. **Methods:** The sample was made up of 45 couples (90 participants) from Spain. The age range was from 19 to 42 years. The study was carried out in three stages: pre-trial, post-trial, and follow-up (one year later).

Results: Before the intervention, 88 participants (97.8%) had heard about the female condom, although 73 participants (81.2%) claimed to know very little about the method, and barely one-third had seen one. The appraisals after the trial period reveal differing levels of satisfaction with the method, with no significant differences found by gender. Those participants who used a greater number of condoms during the trial period pointed out more positive points about the method, but also more negative points. Of the 17 couples who continued to participate in the follow-up stage (one year after the trial stage), only one (5.9%) still used the female condom. However, 10 men (58.8%) and 8 women (47.1%) expressed a willingness to use it in the future, and 12 women (70.6%) and 11 men (64.7%) had told friends and acquaintances about it.

Conclusion: This study reveals that although the female condom is considered to be a useful method, it is still largely unknown and requires further promotion if it is to be used by young couples.

Conflict of Interest: None disclosed

Financial Support/Funding: UNIVERSITY OF VIGO. CATEDRA CAIX-ANOVA DE ESTUDIOS FEMINISTAS

PO-1862

SEXUAL BEHAVIOURS AND PRACTICES OF SPANISH TEENAGERS AND YOUNG ADULTS

Fernandez Maria Lameiras (Universtiy Of Vigo (Spain)), Garrido Jose Maria Failde (Unviersity Of Vigo (Spain)), Fernandez Maria Victoria Carrera (University Of Vigo (Spain)), Pedrola Jose Luis Bimbela (Escuela Andaluza De Salud Publica)

Introduction: To describe the sexual behaviours and practices of Spanish teenagers and young adults, and to compare them by gender.

Methods: A random sample was used, consisting of 2,171 teenaged boys and girls and young adults, ranging in age from 14 to 24 years old. The participants were from three distinct regions of Spain: Galicia, Madrid, and Andalusia.

Results: A total of 1,439 subjects (66.28%) claimed to have been sexually active in the last six months, with no statistically significant differences found between male (66.36%) and female (66.21%) respondents. Never-

theless, if they found differences with regard to the variables: To have practised the anal coitus, being the boys those who recount to have practised it in major proportion; Number of sexual pairs(couples), the girls demonstrated to have minor number of pairs(couples); and frequency of vaginal coitus, the girls presented higher levels of this practice. Also differences were with regard to the frequency of use of the condom in the practices coitus - annals and in the oral sex, in boys more frequently.

Conclusions: Given the differences depending on the gender, an important point which must be taken into consideration when designing and implementing educational and preventative campaigns.

Conflict of Interest: None disclosed

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PO-1863

BODY DISSATISFACTION AND BODY MASS INDEX IN SPANISH STUDENT: IMPLICATIONS IN SEXUALITY

Fernandez Maria Lameiras (Universtiy Of Vigo (Spain)), Otero Maria Calado (University Of Vigo (Spain)), Fernandez Maria Victoria Carrera (University Of Vigo (Spain)), Castro Yolanda Rodriguez (University Of Vigo)

Introduction: The purpose of this study is to examine the relationship between both gender and the Body Mass Index (BMI), and body dissatisfaction among secondary school students in Spain.

Methods: This research evaluates the relationships of 2 variables to Body Dissatisfaction (BD): BMI (Body Mass Index) and gender. 568 girls (49.1%) and 547 boys (50.9%) in secondary students responded to several measures on a self-report questionnaire.

Results: Results indicated BD were positively associated with BMI in girls and boys. So students presented higher BD with overweight and lower BD with underweight. Nevertheless the strength of the relationships varied by gender. Although the BMI was higher among boys ($t= 3.902, p= 0.000$), it was girls who were more dissatisfied with their bodies ($t= -7.467, p= 0.000$), and this dissatisfaction occurred across all weight categories. A variation in body satisfaction among subgroups (BMI and gender) implies that unrealistic expectations regarding desirable weight maintain a body dissatisfaction higher in girls -which can lead to unhealthy eating practices- are issues that need to be addressed in prevention efforts.

Conclusion: We find that teenage boys have a higher BMI and are more satisfied with their bodies than are teenage girls. The findings can be interpreted in terms of prevailing sex role pressures and expectations. We believe that such dissatisfaction with one's body can, in turn, lead to unhealthy eating practices. As such, we feel that these are issues that need to be addressed in future prevention efforts

Conflict of Interest: None disclosed

Financial Support/Funding: MINISTERIO DE TRABAJO Y ASUNTOS SOCIALES. INSTITUTO DE LA MUJER

PO-1867

A RANDOMIZED TRIAL ON THE EFFICACY OF VIBRATOR IN UNCONSUMMATED MARRIAGE

Eftekhar Ardebili Mehrdad (Mental Health Research Center; Iums), Mosh-tagh Bidokhti Nahaleh (University Of Rehabilitation And Social Welfare), Mehrabi Fereydoun (Mental Health Research Center; Iums)

Unconsummated marriage is a common reason of referral to sex therapists in Iran. Nevertheless, seeking treatment is usually postponed because of inhibitions out of shame and fears of losing face. Especially men are reluctant to show up at treatment centers because the problem may indicate a weakness in masculinity. Therefore, some couples prefer the situation in which woman alone asks for professional help. Some clinicians in Iran are used to prescribing vibrators in this situation. The current study investigated the efficacy of using vibrators as a treatment modality in unconsummated marriage. In this randomized trial 84 couples referred to a private sex clinic were assigned in two groups. The first group took Modified sensate focus therapy in 4 sessions. For the wives in the second group a short explanation about female anatomy was given and vibrators were prescribed. They were asked to use vibrator superficially and to stimulate clitoris 3 times a day for 1 week and afterwards, to try penetration in female superior position. 3 subjects (7.1%) of sensate focus group did not complete the therapy and discontinued it and 2 subjects could not do penetration despite completion of treatment. There was not a significant difference between response rates in two groups. 88.1% of sensate focus group and 85.7% of vibrator group succeeded in penetration. Vibrators can be used for unconsummated marriage especially among whom their husband does not cooperate in treatment. Gradual achievement of sexual pleasure in private helps women who are afraid of intercourse.

Conflict of Interest: None disclosed

Financial Support/Funding: Mental Health Research Center

PO-1868

THE DIRE STATE OF SEXUAL AND REPRODUCTIVE HEALTH IN ETHIOPIA: A QUALITATIVE STUDY OF KNOWLEDGE, ATTITUDE AND BEHAVIOR AMONG THE YOUTH

Zewolde Solomon Amare (Tulne University Technical Assistance Project Ethiopia)

The extant research literature on the Sexual and Reproductive Health of the Ethiopian youth reveals that the situation leaves a lot to be desired. (FHI, 2005; CSA, 2005; Erulkar et al. 2004B). The present study aimed at studying the current level of knowledge, attitude and behavior of youth between the age of 15 and 24 years and their broader life issues including aspirations, hopes and self-perception with a view to securing comprehensive information that would help to develop tailored programmatic interventions. The study employed qualitative research methods with special emphasis on focus group discussion (FGD) as a primary data collection technique with key informant interviews used to complement information from the FGDs.

Accordingly a total of 44 FGDs were conducted in four research sites using a discussion moderation guide and trained and qualified moderators. Analysis relied on the tick descriptions produced from the transcripts of the audio recording and the major points of discussion on the FGD guide are used as units of analysis. The findings indicated that open discussion about sex and sexuality among the local community mainly between children/youth and their parents and/or adults is considered taboo due to cultural and religious influences. The ethnographic data obtained from the target study sites showed that peer pressure, unemployment, economic problems, low self esteem, non-availability of services, lack of sex education and cultural influences are the most prominent causes accounting for the deplorably low KAB among the study participants. Based on the major findings of the findings and the conclusions the following recommendations

Conflict of Interest: None disclosed

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PO-1876

WOMEN VULNERABILITY TO HIV/AIDS IN THE EYE OF CULTURE: A CASE STUDY OF ANAMBRA STATE IN NIGERIA

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Introduction and Objectives: Culture is people way of life but some cultures are barbaric that they contain ingredients that relegate women to the background and the situation is worsen with HIV infection. The aspect that requires urgent attention is that majority of women involved think that these cultural practices are normal thus, do not perceive any risk to HIV infection. The objectives of this work is to evaluate the knowledge of rural women on mode of HIV transmission (cultural perspective) and predisposing cultural practices in Anambra State rural communities.

Methodology: Data were collected through questionnaires and In-depth Interview (IDIs) survey involved in the selection of 150 respondents through multistage technique. This structured questionnaires covered areas such as knowledge of HIV/AIDS and cultural practices that make one vulnerable to HIV infection in the area.

Result: Although that all the respondents have heard of HIV/AIDS but 78% of them do not know all the modes of HIV transmission. They all agreed to various practices that can enable women who are single (due to death of their husband or culture) to keep their husbands or their own family lineage alive. It is only few percentage agreed that they have sex for fun.

Conclusion: There is serious need for programmers to step up efforts towards addressing reproductive health of widows and families without child/children otherwise the aim of impact mitigation of HIV/AIDS among women of reproductive age in the selected rural communities will be defeated.

Conflict of Interest: None disclosed

Financial Support/Funding: Self sponsored

PO-1877

SEX WORKERS WHO PROVIDE SERVICES TO CLIENTS WITH A DISABILITY IN NEW SOUTH WALES, AUSTRALIA

Wotton Rachel (University Of Sydney), Shuttleworth Russell (University Of Sydney), Weerakoon Patricia (University Of Sydney), Arnot-Bradshaw Alison

Introduction: Research about sex workers has predominately been focused on sexual health, drug use and legal frameworks. A preliminary literature search identified limited research about their clients and practically nothing about clients with a disability. Since decriminalisation of the sex industry in New South Wales (NSW) in 1995, it is legal for people with a disability to access sex services.

Objectives: This research explores the extent to which sex workers in NSW, provide services to clients with a disability. It also explores location, frequency, type and range of services provided, whether clients arrange their own appointments, need third party assistance and any barriers experienced.

Method: This study involves sex workers, who work in NSW, completing a short questionnaire either on-line or in hard copy format. The questionnaire takes approximately 10-15 minutes to complete. As an exploratory study, snowball sampling methodology will be utilised with participants self selecting.

Results: This data obtained from the completed questionnaires will form the basis of the primary author's Masters by Research degree, being completed at the University of Sydney, NSW, Australia.

Conclusion: The final results will be used to educate and influence future development of training and awareness workshops for sex workers, disability services provider, clients with a disability, academics, policy makers and the general public. They will also assist sex worker organisations and disability service providers to gain greater levels of awareness about the frequency of this service provision and barriers sex workers may face when working with clients with a disability.

Conflict of Interest: None disclosed

Financial Support/Funding: NIL

PO-1880

A PERSONAL PERSPECTIVE OF A SEX WORKER WHO PROVIDES SERVICES TO CLIENTS WITH DISABILITY

Wotton Rachel (Isis Cats)

Introduction: Recently there's been a push for legislative changes in some countries to criminalise the clients of sex workers, malignantly portraying clients as 'social deviates' or 'rapists' who only wish to exploit sex workers. In my experience this is predominately not the case for sex workers and is especially ludicrous when one acknowledges that many clients present with a disability.

Action: As a sex worker with over 15 years experience in the sex industry my clientele has been incredibly diverse including many clients with disability. This includes people with hearing impairments, cerebral palsy,

Parkinson's disease, multiple sclerosis, acquired brain injuries, hydrocephalus and schizophrenia. By speaking publicly about my experiences I will present a more positive and balanced perspective of the clients of sex workers.

Outcome: My clients have been able to explore their sexuality in a safe and supportive environment, free from discrimination and prejudice. This presentation will overview some of the barriers we have overcome when arranging an appointment, why they have chosen to see me and what I have learnt from our interactions.

Discussion and Recommendations: While accessing the services of a sex worker is by no means the only option for people with disability to pursue sexual expression, it should be supported as an option if they choose to, in accordance with International working definitions of Sexual Health and Sexual Rights.

Conflict of Interest: None disclosed

Financial Support/Funding: NIL

PO-1882

CENTRE FOR SEXUAL MEDICINE, A CLINIC IN A PRIMARY CARE SETTING

Moraes Eva (Centre For Sexual Medicine)

Introduction: A new clinic targeting sexual health needs has recently been established in Gothenburg. The approach is multi-professional and everyone from age 23 is welcome with questions regarding SRH. The clinic is funded and organised by the local Primary Health Care department.

Action: The team consists of several professions such as physicians specialised in gynaecology and venereology, midwives, nurses, psychotherapist and psychologist. The team has a wide range of specific knowledge in gynaecology, venereology, sexology, andrology, contraception as well as gender awareness and LGBT competence. An overall aim is to be inclusive and to work strategically with diversity issues. The objectives are not only to serve the population with clinical consultations, but also to become a centre of collected knowledge, performing clinical research regarding SRH.

Outcome: The aim is work as an inter-professional team, where cooperation between professionals enhances the total outcome. Sexual health is a multifaceted discipline. It is obvious that working as a multi-professional team is beneficial for the patient. A number of various interventions from several professionals are common in the individual therapy. A retrospective follow-up study investigating the long-term effects of interventions performed by the multi-professional team at the Centre for Sexual Medicine is planned, to evaluate the care provided.

References: World Health Organization, Reproductive health strategy, WHO, Geneva, 2004 www.who.int/reproductive-health/strategy.htm WAS Declaration of Sexual Rights http://www2.hu-berlin.de/sexology/GESUND/ARCHIV/PSH.HTM#_Toc490155445

Conflict of Interest: None disclosed

Financial Support/Funding: N. A.

PO-1887

THE MAIN THREAD – A HANDBOOK FOR SEXUALITY EDUCATION

Schindele Anna Chuchu

Introduction: People who work with sexuality and personal relationships among young people need support by method materials. The Main Thread is a handbook which can help teachers and youth leaders to answer questions on sexuality and relationships asked by young people.

Action: The handbook is produced by Lafa in cooperation with schools and youth clubs. The overall objective is to promote sexual health, prevent HIV/STIs and unwanted pregnancies. It aims to facilitate sexuality education by presenting over 70 models and methods that pass on knowledge and skills, as well as discussing facts, attitudes and values. Some are written exercises while others are more play-oriented, some use body language or the written word in media or in the form of references in books. Each section starts off with an inspiring text on the subject matter of the section; this is then followed by a series of methods.

Outcome: The handbook has about 1 000 clients in total all over Sweden; it was evaluated in 2001. Results showed that 87 per cent had developed their work. The Main Thread has been translated into English and Russian and was best practice in the Swedish UNGASS-report in 2008.

Discussion and recommendations: The Main Thread is as a bridge between ideas of theory and the practical work and is therefore an important tool when starting sexuality education.

References: Olsson, Hans and Lagergren, Ulla. Lafa 2:2001. "Follow The Main Thread". ISBN: 91-972753-6-0

Conflict of Interest: None disclosed

Financial Support/Funding: The Swedish and English edition is state-financed with funding from the National Board of Health and Welfare and the Stockholm County Council. The Russian edition is funded by the Swedish Development Agency. Also; the Swedish edition is revised with new a

PO-1888

UNCONSUMMATED MARRIAGE IN IRAN

Moshtagh Bidokhti Nahaleh (University Of Social Welfare And Rehabilitation Sciences), Mehrabi Fereydoun (Mental Health Research Center), Eftekhar Mehrdad (Mental Health Research Center)

Unconsummated Marriage is a common clinical presentation in Iran. The affected couples usually conceal the problem even from their close relatives and friends and do not seek treatment trying not to lose face. Some traditional ceremonies and cultural attitudes may contribute in this problem in Iran. For example, the last part of the wedding ceremony necessitates the relatives of both parts to remain in the newly weds' house and wait for the intercourse to be successfully done. The sign of this success is, showing a tissue signed by the woman's blood out of breaking her hymen. Therefore, the groom proves his masculinity and the bride her virginity. Although in large cities people are not strictly traditional and do not follow this custom

any more, generally speaking women and men do not have pre-marital intercourse and women have to keep their virginity as a sign of their modesty. Traditionally, after official marriage they are allowed to engage in intercourse. In this way, sexual contact turns in to an emotionally loaded task which puts the couple under unnecessary stress and pushes away the natural and smooth flow of emotion which is the base of intercourse. The authoritarian families predispose men to castration complex and intermingling sex with guilt under dominion of cultural and religious rules; these factors make it easy to be afraid of sex instead of looking forward for it, consequently unconsummated marriage becomes a relatively common problem in our country.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1890

EXPLORATION OF THE FACTORS TO IMPROVE NURSING PRACTICES ON SEXUAL COUNSELING IN TAIWAN AND CHINA

Sung Su-Ching (Chang Gung Insititute Of Technology/Shu-Te University), Yeh Mei-Yu (Chang Gung Institute Of Technology), Lin Yen-Chin (Shu-Te University)

Introduction and objectives: For sexual health to be incorporated effectively into nursing care, nurses require knowledge and positive attitude on sexual health issues specific to their client groups. The purpose of this study is to explore the factors to improve current nursing practices on sexual counseling in Taiwan and China.

Methods: A 24-item self-directed questionnaire was used to determine the factors impacting nursing practices on sexual counseling. There were 293 nurses from three hospitals in Taiwan and 280 nurses from three hospitals in Beijing, China, selected in the study based on stratified random sampling.

Results: Most nurses (>60%) in Taiwan and China seldom or never discuss sexual concerns with patients. This was due to the factors of 'discomfort' and 'unclear job role' to nurses in Taiwan and China, and the factor of 'not my responsibility' in China. In China, 'lack of sexuality lectures in continuing education' and 'conservative sexual values' resulted in the factors of 'unclear job role' and 'not my responsibility'; 'lack of sexuality lectures in continuing/basic nursing education' contributed to the factor of 'discomfort'. In Taiwan, 'lack of sexuality lectures in continuing education' and 'conservative sexual value', and 'lack of clinical experience' resulted in the factors of 'discomfort' and 'unclear job role', respectively.

Conclusion: Providing sexuality lectures in continuing education may improve nursing practices on sexual counseling in Taiwan and China. Therefore, developing proper sexuality lectures for continuing education and promoting patients' sexual health will be critical.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1902

KNOWLEDGE AND PERCEPTION OF NIGERIAN LAWYERS ABOUT THE NIGERIAN ABORTION LAW

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Introduction and objectives: Abortion is an important medical subject with significant legal and human rights dimensions. In Nigeria, abortion is permitted only to save the life of the pregnant woman. As in many countries including Nigeria, medical experts have been in the forefront of the discourse about abortion but there have been little contribution from lawyers who are professionally trained to provide legal and human right perspectives on the subject. In this light, we conducted a survey among these professionals in August 2006; the objective was to explore their knowledge, attitude and perception about the Nigerian abortion law.

Methods: This study was conducted at the annual conference of the Nigerian Bar Association using a self-administered questionnaire. 81 of the 200 distributed questionnaires were completed and returned.

Results: Results showed that about one-fifth of the respondents were not aware of the existence of any legal indication for abortion in Nigeria. 54% felt the abortion law is too restrictive, this perception increased if the respondent was married or male. A comparison of these results with similar studies among medical care providers showed that medical providers were more likely to support abortion law reform compared to this group under study.

Conclusions: Perhaps providing this group with more information on abortion and its implications in restricting settings will foster more supportive and liberal attitudes among them. These results show that lawyers are a potentially effective and currently underutilized pressure group to support and advocate for law reform in Nigeria.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Ipas

PO-1903

CASE STUDY DEMONSTRATION OF A NEW RESOURCE FOR TREATING WOMEN WHO EXPERIENCE VAGINISMUS

Hallam-Jones Ruth (Nhs), Clegg Mary (Porterbrook Clinic)

Introduction: Case Study to show the possible value of combining oil and water based organic lubricant for the use of women with vaginismus. Action The use of lubricants, whether on the patient's finger, applied to the vaginal entrance, or on a vaginal trainer, is an established principle that can be used in clinical work with women with vaginismus. New (organic plant based) lubricant products are now available and they have been tried as a combination style treatment. The oil based is the initial lubricant with the water based on top.

Outcome: Result This appears to produce a higher level of glidability and has been found to be of value in women with vaginismus. It aids the ability to insert a digit or trainer and increase the confidence of the patient.

Using a confidence scale with these women demonstrated rapidly increasing confidence when using this technique Vaginismus treatments can be slow, and have limited success in terms of satisfaction for some women says Godson 2002, and increasing patient confidence is a vital part of improving satisfactory outcomes. This new technique can be used with any suitable treatment model It has produced shortened treatment times for these women. and is worth further research. Leiblum Principles and Practice of Sex Therapy Berman & Berman For women only 2001 Virago London Godson.S. Sex Book 2002 Cassell London

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1904

VOLUNTEERISM AND COMMUNITY MOBILIZATION FOR THE ABOLITION OF FGM: LESSON LEARNT FROM THE UNV PROGRAM PILOT PROJECT IN SUDAN

Bedri Nafisa (Ahfad University For Women And The Coalition For Sexual And Bodily Rights In Muslim Societies (Csbr))

Experience over the past two to three decades has shown that there are no quick or easy methods that can bring change in the practice of FGM. However, lessons show that for a programme to effectively produce results and create a change in the practice of FGM, there is a need for sustainable community-based interventions among youth of both genders. Experience also shows that NGOs have typically been the key actors in designing and implementing successful programmes (WHO, 2001). In different countries, the combination of a health-based approach and new behavioral change strategies, such as peer education, use of positive deviants and community conversation, were used to build the capacity of a targeted population to combat FGM. In 2006, the UN Volunteers program, along with the UNFPA and Ahfad University for Women, in Sudan implemented an innovative program to encourage volunteerism and to mobilize local communities to combat female genital mutilation/cutting in Sudan. It has attempted to utilize a combination of new and existing approaches to bring about change in its target area, Abu Saeed in Omdurman, Sudan. This paper will reflect on some of the lessons learnt from this pilot project. It will give a brief description of the situation of FGM in Sudan and the target area. Then it will reflect some of the major outputs, lessons and challenges that can be learnt from the pilot project.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1905

PRIMARY PREVENTION KNOWLEDGE OF PARENTS AND TEACHERS OF KINDERGARTEN AND PLAYGROUP ON CHILD SEXUAL ABUSE (CSA)

Paramastri Ira (Faculty Of Psychology, Gadjah Mada University, Yogyakarta, Indonesia)

Child sexual abuse (CSA) is world ealth problem which many researches suggest that CSA occurred on girls (85%) and boys (76%). The CSA molesters generally are the victim's closest and trusted persons (85%). Variable that related closely with CSA are age of children abused; length and form of abuse; relationship between children and molesters. This research aimed to explore CSA knowledge and prevention media among parents of students and teachers of kindergarten and play group. The research was conducted in qualitative methodology, through in-depth interviews and focus group discussions (FGD). In-depth interview held for 8 kindergarten and playgroup teachers. FGD was conducted toward 8 parents of kindergarten and 12 parents of playgroup. Data analysis was conducted through content analysis. The research suggested that parents's understanding on CSA are limited to physical touch. The proposed primary prevention media strategy for parents were speech and poster as well as for kindergarten and playgroup teachers whom understand the CSA's impact. Research concluded that parents didn't understand CSA concepts; media proposed for primary prevention are through dialogs and posters. Kindergarten and playgroup's teachers understood CSA and proposed speech with audiovisual, poster media and forming community as primary prevention approach. Parents and teachers were recommended to focusing the early prevention by building CSA knowledgable community. Van Dam (2001), Identifying Child Molesters: Preventing CSA by recognizing the patterns of the offenders, Kritsberg Wayne (2000), The Invisible Wound: A New Approach to Healing CSA, Bartholomew, Parcel & Gottlieb(2006), Planning Health Promotion Programs.

Conflict of Interest: None disclosed

Financial Support/Funding: The research was funded by the National Education Department of the Government of Indonesia

PO-1909

SEXUALITY, POWER DYNAMICS AND ABUSE AMONG FEMALE, MALE AND TRANSGENDER SEX WORKERS IN PAKISTAN

Collumbien Martine (Lshtm), Qureshi Ayaz A (Independent Consultant, Islamabad)

Introduction: Sex work and male-to-male sex are highly stigmatised and illegal in Pakistan, resulting in intricate power relationships and high levels of abuse from multiple sources including police, gatekeepers of sex work, and family.

Methods: Peer ethnographic research was used, training 3 separate groups of 15 female (FSW), 15 male (MSW) and 15 transgender (TSW) sex workers to interview their peers. We use data from in-depth interviews with these peer interviewers. Findings are triangulated with reported levels of abuse in a subsequent bio-behavioural survey among 533 FSW, 368 MSW and 269 TSW.

Findings and discussions: Sex workers live with a constant fear of being exposed in the community. Apart from indirect payments to the police by gatekeepers, FSWs used sex to build personal alliances with policemen, re-

sulting in a level of protection. This option is less available to MSW and TSW resulting in higher levels of reported police abuse. While male and transgender SWs draw on support from peers (strongly united by a common stigmatised sexual identity), these networks come with their own internal power structure. 'Home-based' FSW, living with husband and children, often depended on help and cover from other FSWs. Families became silently complicit and while her income often increased her power within the family, it was at the hands of husband that FSWs suffered most abuse.

Recommendations: In order to avoid increasing the sex workers' vulnerability, power dynamics within these different interpersonal networks need to be taken into account in the design of sexual health interventions.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Department for International Development, UK

PO-1910

THE NEED TO INCLUDE ADEQUATE RELEVANT SEXUAL EDUCATION WHEN USING THE EROS PHYSICAL TREATMENT WITH WOMEN EXPERIENCING FSD AND POOR VASCULARITY OF THE GENITALIA

Clegg Mary (Porterbrook Clinic), Clegg Mary (Porterbrook Clinic)

Introduction: Women experiencing FSD often have poor understanding of their own sexual physiology and this may prevent the best results from their physical or psychological treatments.

Action: Some of the women offered EROS equipment to aid their resolution of an arousal, pain, poor lubrication or other possible vascular difficulties were also given newly designed educational material to increase their understanding of the process.

Outcome: The women given additional specific information and educational resources appeared to be more confident in using the resource and less wary of the sensations they experienced.

Discussion and recommendations: All sexual therapy and treatments may need to consider what is the appropriate linked sexual education and how we can present it to women in an acceptable style and manner. Brewster & Wylie 2008 Schroder 2004 Hallam-Jones 2008

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1914

TV EXCESS OR PARENTS' ABSENCE? CHILDREN'S PROGRAMS ON TV AND THE CHILDREN SEXUALITY DEVELOPMENT.

Reis Sheila

TV has become a sort of children's «baby-sitter and company». Media in general, as well as groups in society, have been commenting on the exaggerated number of erotic stimuli children would be exposed to when they watch TV, claiming that many of them dedicate more time to TV than

school work and other activities. Parents seldom have time to advise them and most of them feel uncomfortable to talk about sex. Schools don't give information about that issue either. This work aims at identifying whether parents recognize which programs are directed to children audience, and whether they guide the choice or programs the children watch. Monitoring the most watched children's programs led to the conclusion that the rate of erotic stimuli in children's programs that could eroticize children precociously is very low. It was also detected that most parents cannot tell the difference between each one of the widely varied general programs. In spite of the fact that commercial TVs do not have any pedagogical functions, they do have social functions that cannot be ignored. But TV is not the single agent to be held responsible for that function. Parents' responsibility must be highlighted and it must be emphasized that it is their duty to guide the selection of programs their children are supposed to watch on TV. It must also be remarked that, if TV is more ethically concerned with its production and the family is better prepared to play its role, they will both be able to contribute

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1919

SOCIAL SEXOLOGY: HOW, WHEN AND WHERE?

Reis Sheila

The Sexology generated controversy between precursors of this field of study and those who believed that sexology and issues related to the area were too confidential, sacred or immoral for scientific research. In the 60's the study of human sexuality, the psychophysiology sexual cycle was recognized and described as a special mechanism. The Modern Sexology has expanded beyond the psychological and medical specialties due to multi-diversity of factors that affect it. It has been setting the theme in a interdisciplinary way and has been spreading to various other fields of research of study to examine men and women as bio-psycho-social beings, proving that the study of human sexuality requires combined efforts of the natural sciences and culture. The Social Sexology aims at studying the emotional and reproductive sexual behavior of different social actors and their influence in society, questioning the possible influence of the institutions and media with the various population segments. For this the professional, must has a broad view of the world and knowledge to develop strategies and projects of research in the area of sexuality, precisely to stimulate further studies of the similarities and differences between different types of groups. The more studies we disseminate about this diversity will be possible to change habits and attitudes that are rooted in everyday life and are continuously played by social culture, which often only hinder the well-being and sexual health of the individual. But, without determining, in advance, what or which behavior is appropriate, ethical or moral.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1921

THE PREVALENCE OF VAGINAL CANDIDIASIS AMONG SEXUALLY ACTIVE WOMEN IN OSHODI, LAGOS STATE, SOUTH WEST NIGERIA.

Godwin Chinemerem I. (Ebonyi State University, Abakaliki Nigeria)

A study on the prevalence of Vaginal candidiasis among sexually active women was carried out in Help Diagnostic and Research Laboratory, Lagos between the months of April and September 2007. This study was embarked upon to establish and determine the prevalence of Vaginal candidiasis among sexually active women in the study area, as well as to proffer effective control measures against the infection. A total of 400 sexually active women that came for medical screening, were screened for Vaginal candidiasis using appropriate laboratory techniques (High Vaginal Swab Microscopy and culture). Of the 400 examined, 252 (63%) were positive. Four *Candida* Spp were isolated and identified. *C.albicans* 192(76%), *C.Krusei* 25 (10%), *C.tropicalis* 20 (30%) and *C. Stellatoidea* 15(6%). Co-infection with *Trichomonas vaginalis* was observed with only *C. albicais* in 29 (15.1%) cases. Since Vaginal candidiasis are transmitted through unprotected sex with infected partner and from unhygienic practices and dirty toilets, good and hygienic sanitary practices as well as routine screening and prompt treatment are strongly recommended for the control of Vaginal candidiasis which cause infertility in women and disability and death of neonates.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: No source, it was personally funded. I wish to have sponsors.

PO-1924

PROMOTING SEXUAL HEALTH AND WOMEN'S EMPOWERMENT THROUGH PLEASURE: A LITERATURE REVIEW

Philpott Anne (The Pleasure Project), Philpott Anne (The Pleasure Project)

Introduction: Can aspects of pleasure be used to promote safer sex and empowerment? We explore this question through a literature review, building upon a preliminary examination of the evidence base published as a Viewpoint in *The Lancet* («Promoting Protection and Pleasure: amplifying the effectiveness of barriers against sexually transmitted infections and pregnancy», Volume 368 1, Dec 2006).

Approach: Sexual pleasure is recognized as a key factor in sexual health and is a primary motivation for having sex. The perceived lack of sexual pleasure associated with safer sex has been identified as a major factor in people having unprotected sex. Yet most HIV prevention programmes use fear of disease/negative incentives to try to motivate people to practice safer sex. Moreover, women's pleasure has been largely ignored in all research and interventions related to safer sex. This review explores the evidence for increasing safer sex practices through sex-positive approaches.

Findings: There is a paucity of research on the impact and potential of sex-

positive approaches. This review uncovers existing evidence and looks at: health and psychosocial outcomes of positive approaches to safer sex; how gender and power dynamics influence – and are influenced by – pleasure-oriented approaches to safer sex; whether pleasure promotion for safer sex can empower people to re-negotiate gender and sexual boundaries in order to practise safer sex; effectiveness of pleasure approaches compared to conventional disease/risk-oriented approaches; and contexts in which pleasure-focused safer sex campaigns may or may not be successful.

References: www.thepleasureproject.org

Conflict of Interest: None disclosed

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PO-1925

ASSESSING SUCCESS IN PENILE RECONSTRUCTIVE SURGERY

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Success with penile reconstructive surgery is not only defined by surgical success but also patients' satisfaction and proper function. Parameters usually rely on satisfaction and orgasm, but rarely assess penile sensitivity and sexual satisfaction with common sexual activities. This study developed a test battery to assess success with phalloplasty based on (1) penile sensitivity, (2) patient's satisfaction (appearance, function, well-being) and (3) sexual function. Fourteen patients with freeflap forearm (n=6) and abdominal (n=8) phalloplasty were assessed for touch (Semmes-Weinstein filaments), pressure (vulvogesimeter), vibration and pain on eight perineal and control sites (penis base and tip, perineum, anus, abdomen, forearm). Questionnaire involved four categories including medical complications, patients' satisfaction, psychosocial well-being and sexual function. Results showed better penile sensitivity for touch with abdominal compared to forearm phalloplasty (mean=4,5 vs mean=3,8 dorsal base, mean=4,4 vs mean=3,6 base ventral). Vibration was generally perceived on all sites, but pain lost. Better satisfaction with abdominal compared to forearm phalloplasty was reported for appearance (mean=8,9 vs mean=7,3), happiness ((mean=4,3 vs mean=3,8), optimism (mean=4,4 vs mean=3,8). Sexual function was better with forearm compared to abdominal phalloplasty on fantasies (mean=4,2 vs mean=2,3), activities (mean=18,2 vs mean=7,0) and orgasm (mean=13,0 vs mean=7,0). Results are discussed in terms of clinical implications for surgical success on various dimensions and for perineal and sexual function (and recovery).

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1926

HOMOSEXUALITY AND OBJECT RELATIONS: A STUDY BY THE OBJECT RELATIONS TECHNIQUE (ORT)

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The Object Relations Technique (Phillipson, 1955) is a projective test that was established to assess the object relationships of the subject and his ability to establish and maintain relationships. The theoretical framework of the instrument is based on the English school of object relations, especially to the thought of Klein and Fairbairn. The tables that make up the ORT are related to different degrees of reality content and emotional context, through a different modulation of colour and vagueness of stimulus-silhouettes. The present study applies this technique to the study of homosexuals object relations, male and female, using the first Italian scoring grid for the evaluation of ORT stories (Lis et al., 2002), which meets the cluster of variables indicated by Phillipson (structure of the story, perception of the characters, types of relationships) and provides the normative data. In addition to the ORT, the MMPI-2 and the BSRI (Bem, 1971) was given to a sample consisting of 40 people and through a between subjects factorial design with equivalent control group (10 heterosexual men, 10 homosexual males, 10 heterosexual females and 10 homosexual females). The results about the significant differences in the different groups will be discussed, at: 1) a level of structure of the "internal world" (aspects of narrative, perceptual, relational, emotional and psychodynamic statistically depth by ANOVA and ACM) – with a particular emphasis on the imbalance of the anal defence mechanisms which emerged in the group of homosexual men – and 2) at a comparative psychometric level between the tools used.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1928

SEXUALITY EDUCATION

Bello Titilola Omowunmi (Network Of Adolescents And Youth Of Africa, Nigeria Chapter)

Introduction: A. The Definition and Contents of Comprehensive Sexuality Education: (Modules 1-6) ACTION Includes: steps taken so far to raise awareness of Sexuality Education among the stakeholders of Sexuality Education namely: The Media, The Government Agencies, The Parents, The Teachers, The Youth • Response of advocates to shocking cases of low sexuality education knowledge • Resolution of Pathetic encounter of NAYA Nigeria, with a home- based abused Teenager • Establishment of Students for Choice Club which provides a permanent forum for discussing and teaching students and their leaders Comprehensive Sexuality Education in

selected Secondary Schools

Outcome • The refusal skill of adolescents boys and girls strengthened. • The power and the knowledge that empowers them

Discussion and recommendations: Reference will be made to the article 2.7-2.8 of ministers of Health and Education of Latin America and the Caribbean in the context of the XVII International AIDS Conference.

Recommendations: i) The need to establish a system that will teach Sexuality Education with passion, seriousness and vigour among Youths and Adolescents ii) Prepare realistic strategies that domesticate the African Youth Charter and other relevant instrument across the globe particularly the ratified instrument(s) iii) Promote introduction of Sexuality Education in School Curriculum and Refreshers courses on the subject within the professional bodies iv) Ensure legislation that plays a catalytical role and gives the programme a crucial legal framework; v) Develop (IEC) materials and programme for the target stakeholders vi) Institutionalize a mechanism for effective monitoring, evaluation and co-ordination of Comprehensive Sexuality Education

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1933

ATTITUDES TOWARDS MEN AND WOMEN SEXUAL ROLES: GENDER DIFFERENCES IN SPANISH ADOLESCENTS

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Introduction and objectives. In Spain, despite the fact that AIDS affects mostly men, between heterosexual and aged between 15 and 29 years have been reported more number of cases among women than among men (National Epidemiology Center and the Ministry of Health and Consumption, 2008). More specifically, one can identify a number of issues that relate the gender roles and power dynamics in relation to HIV/AIDS (Pulerwitz, Licea-Izazola and Gortmaker, 2001, Rudy et al. 2005). Thus, this study aims to analyze the differences between males and females Spanish adolescents in sexual double standard.

Method. Sample: The sample is composed by 1,936 Spanish adolescents ranging in age between 14 and 19 years. 49,8% were men (M = 15.39, SD = 1.13) and 50,2% were women (M = 15.42, SD = 1.15). Instruments: 1) Questionnaire on sexual behavior developed ad-hoc for this investigation. 2) The scale of double stand (Caron, Davis, Halterman & Stickler, 1993). Design: It was an “ex post facto” prospective study according Montero and Leon classification (2007). Procedure: The questionnaires were applied to groups of 15-20 students in the classroom by the same researcher. Results The results showed that men have more permissive moral to judge the sexual behavior of men than in women.

Conclusion: Considering the results, It's important to include variables as the double stand in sex education programs to prevent sexual risk behaviors.

Conflict of Interest: None disclosed

Financial Support/Funding: Junta de Andalucía, Spain

PO-1934

THE DETERMINANTS OF THE EARLY INITIATION OF SEXUAL ACTIVITIES AMONG THE COLLEGE STUDENTS

Ghatrifi Davood (Irdpi), Ghatrifi Rouhollah (Irdpi), Ghatrifi Maryam (Irdpi), Rashid Khosro (Boali University)

Introduction: The early initiation of sexual activities culturally defines any pre marital sexual activity for young in Iran. Although the majority of young people are not sexually active, while socio-culturally unacceptable, a significant number do engage in premarital sexual activity. The purpose of this paper is to explore the determinants of the early initiation of sexual activities among college students in our Islamic society.

Methodology: The focus of this study is to look at how, if at all, various factors influence the early initiation of sexual activities. A grounded-theory approach was chosen for this study. Focus group discussion was the main data collection method that was considered appropriate as the surveys were primarily qualitative. The focus groups, while according to common law, were conducted gender- separate in one public health school in Tehran.

Results: This study explored personal, sexual human instinct, family, peer, religiosity, economic and socio- cultural factors that predisposed student, especially who are far from family, to initiate premarital sexual activity. It is appreciation of sexual activity by girls for purposes such as marriage, love, sexual needs and economic gain. Although girls said marriage and love were their most important factors that caused premarital sexual activity, for males were sexual human instinct. According to rapid social change, controlling of early initiation of sexual activities needs the broader socio-cultural approach.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1935

BETWEEN LIE AND REALITY

Jakobson Pye

Introduction: Pro-Tukipiste, the Finnish Prostitution Group, has since many years a centre in Helsinki where they provide health care to sexworkers, one of the main focuses being on HIV and STI-prevention. Autumn 2007 they opened a second centre in Tampere where the target group is different than the one in Helsinki and the women were much more difficult to reach. I, Pye Jakobson, was asked to write a report on needs assessment to facilitate and improve the work of the centre.

Methods: The research is based on interviews with sexworkers. They were asked to grade (1-5) the need for a variety of services as well as sharing experiences they have had with healthcare provider. I interviewed 35 sexworkers working in the Tampere area and 35 working in Sweden. 64 women and six men, ranging between the ages of 20 to 70, and of 13 different nationalities.

Findings and discussions: Most of the persons interviewed claimed to need little or no help with HIV and STI-prevention but expressed a major need for well informed sexual health care-providers as they felt they have very specific questions and concerns and often get treated with prejudice and a lack of respect, therefore often choosing not to mention sexwork even when it was relevant.

Recommendations: Working with sexual health targeting sexworkers requires specific knowledge, attitude and respect for the individual. Most of the sexworkers expressed feeling a lack of trust due to being stereo-typed as they belong to a highly marginalized and vulnerable group.

References

Conflict of Interest: As a former sexworker doing research on needs among sexworker one could argue that my reseach could be biased, but my postion was very valuable when it came to reaching and establishing trust with the target group.

Financial Support/Funding: Pro-Tukipiste (the Finnish Prostitution group)

PO-1936

SEXUAL RISK BEHAVIOUR IN SPANISH ADOLESCENTS: DIFFERENCES BY GENDER

Santos-Iglesias Pablo (University Of Granada, Spain), Bermúdez-Sánchez Maria Paz (University Of Granada, Spain), , Madrid-Gutiérrez Juan (Centro Madrid Salud Joven, Spain), Ramiro-Sánchez María Teresa (University Of Granada, Spain), Castro-Vázquez Angel (University Of Granada, Spain)

Introduction and objectives. According of the Spanish Ministry of Health the number of HIV infections and AIDS cases diagnosed in women is increasing in recent years. Therefore, the objective of this work is to analyze the sexual behaviour of the Spanish adolescents women to determine whether they present higher levels of HIV infection tases.

Method. Sample: The sample is composed by 1,936 Spanish adolescents, between 14 and 19 years (M = 15.40; SD = 1.14); 49.8% are male (M = 15.39; SD = 1.13) and 50.2% are female (M = 15.42; SD = 1.15). Instruments: 1) Questionnaire made Ad-hoc to get information about risk behaviours. Desing: Is an “ex post facto” and cross-sectional study (Montero y León, 2007). Procedure: The instruments were applied individually and under the same conditions and by the same researcher for all the participants.

Results. The results show that 27.1% of the adolescents have had sexual relationships with vaginal penetration, of which 53.3% were female and 46.7% were male. There was no significant gender differences in age of the first sexual contact both in the use of condom in that contact.

Conclusion. Considering the results, it is highlighted the need of further researches with broader samples. Moreover, it is important to perform statistical analyses to to test whether there are significant differences according to gender.

Conflict of Interest: None disclosed

Financial Support/Funding: Junta de Andalucía, Spain

PO-1937

ADOLESCENTS COMMUNICATING SELF-CONTEMPT THROUGH SEXUALITY

Bendiksbj Olav Henriksson (Institute Of Clinical Sexology)

Clinical experience from therapies with adolescents in foster-care repeatedly uncovers how some of them express themselves though a wide variety of aggressive and self-destructive sexual behavior. This sexual acting-out generates severe problems with both peers and foster parents, and can seem incomprehensible. The aim of this paper is to explore these behaviors with an attempt to conceptualize and possibly understand them. It is a study in the context of discovery, focusing on the underlying motives of these behaviors. The paper utilizes a casuistic approach with an empirical basis in several long-term intensive psychotherapies with foster-care adolescents referred for problematic sexually-related behavior. This behavior is very varied, and ranges from lack of sexual autonomy and boundaries though sexual aggression and soiling with faeces related to sexuality. The study adheres to the perspective that these destructive and self-contemptuous behaviors can be understood, and that they to some extent constitute an expression and communication of the adolescents inner world. Through intensive psychotherapy it has been possible to explore these behaviors together with the adolescents themselves, thus enhancing our mutual understanding and to some extent also helping these adolescents to sometimes change the compulsion to act in sexually self-destructive ways. In this way the search for a mutual understanding also aids the adolescent to express him or herself sexually in a more constructive way, thus acheiving a more autonomous sexuality and better sexual health.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1939

THE EXPLANATORY MODEL OF THE EARLY INITIATION OF SEXUAL ACTIVITIES AMONG THE COLLEGE STUDENTS

Ghatrifi Rouhollah, Merghtai Khoei E. (Iran Public Health School), , Ghatrifi Rouhollah, Ghatrifi Leila

Introduction: Such as much of society, early initiation of sexual activity is a major problem confronting our country has led to a rising incidence of sexually transmitted diseases (STDs), emotional and psychological injuries. Early initiation of sexual activity is associated with serious health risks and detrimental social consequences for youth especially females. Speaking about sex is a Taboo in our society. Legally and culturally, premarital sexual activity isn't acceptable action and sexual activity is sensitive issue. Although the majority of adolescence and youth are not sexually active, a significant number do engage in sexual activity. Abstinence is commonly the most important strategy that has socio- culturally been suggested. The past research has demonstrated that interventions that are based on local cultures and condition are more effective than standard approach. These study tried To develop the explanatory model of the early initiation of sex-

ual activities among the college students in one of the selected public health school, Tehran, Iran, 2007-2008.

Methodology: The qualitative study with grounded theory approach was used to explore the young people's sexual activities influenced by the context they experience them. This approach allowed us for an explanation for what is actually happening in true practical life locally at a given time.

Results: Results suggest multidimensional approach must be considered in preventive programs for discouraging involvement of early sexual activity. According our society, this article proposes an explanatory model of early initiation of sexual activity among the college students.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1941

INVESTIGATING THE EFFECTS OF TYPE OF PARTURITION ON POST PARTUM SEXUAL QUALITY

Mashhadian Mina (Tarbiat Modares University/Faculty Of Medical Science), Lamyan Minoor (Tarbiat Modares University/Faculty Of Medical Science), Faghihzadeh Soghra (Tarbiat Modares University/Faculty Of Medical Science)

Introduction & Objective: Type of parturition is an important effective factor on sexual quality. The aim of this study is to investigate effects of type of parturition on post partum sexual quality.

Methods: In this analytical and prospective study, 100 women were selected randomly that was placed in two groups, 50 women with cesarean and 50 with normal delivery. Samples were hospitalized in three hospitals in Tehran in 2008. We followed them up for 4 months after parturition. The data was analyzed using descriptive and inferential statistics by SPSS.

Results: The findings indicate that women who had normal delivery started their first intercourse 46 days after parturition and in cesarean group, it was 62 days after parturition, ($p=0.0001$) At the end of the second month, all women in normal delivery group have started intercourse but in cesarean group 22% of them had no intercourse, The reason was exhaustion, (15.4%). At the end of the third month, all subjects in normal delivery group had intercourse, versus in cesarean group 16% of them had no intercourse. The reason claimed by them was fear of physical attraction, (25%) In normal delivery group, sexual satisfaction was higher than cesarean group and it was 74% and 48% respectively. The reason of dissatisfaction in cesarean group was fear of physical attraction, (34%)`

Conclusion: Postpartum sexual behavior is an important issue in women's health. It seems that the role a physician or midwife play in counseling plan is effective during the pregnancy and postpartum.

Conflict of Interest: In iran, women don't like speaking about their sexuality, because of shame. they usually don't speak about their sexual problems so it was too hard for us to convinced them to cooperation.

Financial Support/Funding: Institute Tarbiat Modares University/faculty of Medical Science

PO-1943

CHILD SEX ABUSE

Guy Alain Seogoroye

Introduction and objective: CAR is a country ranked 169 in the world rank among the poor country, which led to the phenomenon of sexual abuse on children. Thus, an information campaign and awareness among street children and sexually active young women, especially on the prevention and against sexual abuse. The goal is to raise awareness of the street on the risk of sexual abuse, their former street children in peer educators on prevention against sexual abuse, produce posters on the risk of sexual abuse.

Method: Doing local awareness about the risk of sexual Doing radio broadcast to children and parents

Results: 48 awareness sessions in 15 section of street children 1287 children affected, including 800 girls free 150 street children for training in IEC on prevention of sexual abuse Produce 250 different posters on the risk of sexual abuse.

Conclusion: During these campaigns, we want a change in behaviour among street children finally to adopt responsible behaviour for a better life. Because society needs children and large scale action must be carried out in their favor protecting children and put them out of any danger of incurable diseases

Conflict of Interest: communication for behavior change reduce the risks of sexual abuse among street children

Financial Support/Funding: NGO Friends of Africa in Bangui Boy Rabe

PO-1945

PERCEPTIONS OF WOMEN LIVING WITH HIV ABOUT PARTNER RELATIONSHIPS

Sandoval Clara

Introduction: This study explores women's living with HIV/AIDS life experiences related to their perceptions about their partner relationships.

Methods: Twelve In-depth interviews. Content analysis was undertaken. Findings and discussion Women experience different feelings about their former partners: missing them, feel angry because HIV was transmitted by them. The possibility to have a new partner are intercepted by perceptions about certain commitments for a couple, disclosure their HIV condition is an obstacle when women think on the couple's future: "I had a partner who was interested to be my steady partner, but I'm concerned about our future, if he want to have children, how can I tell him, I'm living with HIV». A different situation is the case of women who both partners are people living with HIV; they take as a misfortune to have HIV and are concerned about future of their children. In conclusion, women's perceptions about partner are influenced by gender conceptions and social mandatory gender behavior.

Recommendations: Studies need to consider partner relationships and other subjective issues of people living with HIV with a broad perspective of their lives.

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Conflict of Interest: No conflicts of interest

Financial Support/Funding: Universidad Peruana Cayetano Heredia

PO-1947

THE BODY-AND-BRAIN UNITY PRINCIPLE AND VAGINISMUS

Nivon Bolan María Del Rosario

Experimental & practice Sample.

Introduction: Perception and significance of the inner sensations of the pelvic floor and vagina during the sexual response enrich body fantasies. At the same time, these images module body reality; this dialectic relationship is considered in the Sexocorporal model and is shown in the paper. Action: In a case of vaginismus, sexual functionality was evaluated and therapeutic objectives and plan were proposed. The patient therapeutic process is described.

Outcome: After twelve sessions of therapeutic process, she was aware of her vaginal cavity and her pelvic floor muscles sensations; she developed images of her vagina as a container and allowed three of her fingers into it. She anticipated intercourse. She became more confident seeing that she could feel and behave as any other woman.

Discussion and Recommendations: To assess sexual bodily and imaginative components allows the professional to express the hypothesis of the origin of vaginismus in terms of the vagina as sexual organ and so to come up with the therapeutic plan. This very successful approach of the Sexocorporal model to vaginismus suggests that a clearer body-mind understanding of the female pelvic anatomy and functions are crucial – for the patient and also for the sexologist.

References: 1. Chatton D, Desjardins JY, Desjardins L, et al. (2005) La sexologie clinique basée sur un modèle de santé sexuelle. *Psychothérapie*; 25:3-19.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1949

PLEASURE, DESIRE AND RESPONSIBLE CHOICES: REFRAMING SEXUALITY EDUCATION AND RESEARCH IN THE CONTEXT OF SEXUAL LITERACY

Vallin Lisa M (San Francisco State University), White Christopher (National Sexuality Resource Center At Sfsu), O'Donnell Joy (National Sexuality Resource Center At Sfsu)

This presentation will provide an overview of workshops designed to re-

frame current models of sexuality education and research using the ideologies of sexual literacy; we have facilitated this workshop at various national sexuality conferences in the United States. For decades, sexuality educators and researchers have used a medical model that focuses on disease and pregnancy prevention that concentrates on the genital and reproductive aspects of sexuality and is exclusionary, heterocentric, and potentially harmful. Workshops have used the concept of sexual literacy to reframe sexuality education and research to a model that focuses on sexual health and well-being, including happiness, pleasure, and desire, across the life-span for all individuals, relationships, and communities. Activities and discussions revolved around such issues as aging, disability, faith/spirituality, gender identity, sexual identity, and race/ethnicity and how these intersect with one another with respect to sexuality. In addition, participants identified intersections between these different sexualities in order to illustrate how the current model of sexuality tends to be exclusive and oppressive in nature. Participants engaged in interactive and experiential activities through which they examined and deconstructed the current model of sexuality education and research. They then collaborated to redefine and reframe sexuality within in the context of sexual literacy. At the conclusion of the workshop, all participants identified a number of concrete strategies they planned to utilize in their own work using the new model of sexual literacy. During this presentation, outcomes will be presented as definitions, strategies, and ideas generated from the workshop participants.

Conflict of Interest: None disclosed

Financial Support/Funding: Ford Foundation

PO-1951

MATHEMATICAL MODEL FOR THE MEASUREMENT OF ATTITUDES AND SEXUAL BEHAVIORS

Leon Rodriguez Manuel Antonio (Universidad Cristiana Latinoamericana De Quito), Pauta Fernandez Angel (Universidad Cristiana Latinoamericana De Quito)

Introduction: One of the problems of the scientific research in psychology arises when the Statistic is used in Methodology that was created to show units of a nonhuman population. It is not possible to generalize the results of the study of the attitudes and sexual behaviors, that are unique, that do not repeat in the same form even by the same individuals. The Statistic is not able to fill the requirement of the individuality, because it was created for the generalization, with the percentage application of the probable error and the justification of the defense of a hypothesis, that it is an assumption. For the effect one comes working in different Ecuadorian Universities with the Mathematical Model LEON VOLPI (I am the Author) of Analytical Geometry and a questionnaire standardized and validated in Psycho Sexology. **OBJECTIVES** To investigate the individuality of the Attitudes and Sexual Behaviors in the search of a trustworthy diagnosis, by means of the MATHEMATICAL MODEL LEON VOLPI. To measure: the distance, the tangent and the area (mathematical formula, between two or more variables) in the first quadrant of the Cartesian axis. Thus we found relations of

comparison and analysis between the variables of a holistic context of investigation of Attitudes and sexual behaviors. We present some examples. **Conclusion:** The Model is able to investigate the very subtle differences in a more precise diagnostic and an efficient and individualized Sexual Psychotherapy.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1958

SELECTED CHARACTERISTICS OF SEXUAL RELATIONSHIPS: RESULTS FROM THE ESTONIAN WOMEN'S HEALTH SURVEY

Haldre Kai (University Of Tartu, Department Of Obstetrics And Gynaecology, Tartu, Estonia), Part Kai (University Of Tartu, Department Of Obstetrics And Gynaecology, Tartu, Estonia), Laanpere Made (University Of Tartu, Department Of Obstetrics And Gynaecology, Tartu, Estonia), Karro Helle (University Of Tartu, Department Of Obstetrics And Gynaecology, Tartu, Estonia)

Introduction and objectives: Only few studies have investigated sexual habits, difficulties and satisfaction among women in Estonia. The objective of this study was to get information about satisfaction with sexual relationships, prevalence of sexual difficulties (desire, orgasm, pain), prevalence of parallel sexual relationships, experience of proposition to have sexual intercourse for money/other economic gain.

Method(s): A stratified random sample of female population was taken in the age groups 16?25, 26?35 and 36?44 years using the national population registry. 5190 questionnaires were posted in 2004?2005. Total response rate was 53.8%. Data from 2672 questionnaires were analysed.

Results: Current sexual relationship was regarded as very/fairly happy by 70.3% of women with steady relationship (n=2014); 28.8% of women reported lack of desire frequently/fairly frequently during last 12 months. Among women with experience of sexual intercourse (n=2385), 5.3% had never experienced orgasm. 21.0% of respondents experienced pain during/after intercourse around every second time, 2.8% always/almost always. Among respondents who were married/cohabiting (n=1634), 11.3% reported occasional, 5.9% permanent, 2.9% both occasional and permanent parallel sexual relationships. Out of 2672 respondents 20.6% of women had experienced proposition to have intercourse for money/economic gain and had refused; 2.4% had agreed once and 0.9% several times.

Conclusion: Experience of sexual difficulties corresponds with similar studies; noticeable amount of respondents have parallel relationships or had been proposed to have intercourse for money.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: The Estonian Women's Health Survey were financed by the Estonian Science Foundation (grant 5456), Finnish National Research and Development Centre for Welfare and Health (STAKES) (contract 03118 with the University of Tartu), the Estonian Ministry of Edu

PO-1959

INTEGRAL SEX THERAPY IN COUPLES INVOLVED WITH SEX VIOLENCE

Guzman Idhaly (Grupo Ambos Consultores)

Integral sex therapy for couples involved with sex violence requires a holistic approach that transpasses the intervention based on paradigms on behavioural modification and includes the reconstruction of psychosexual and sociosexual identity. The labour of the professional, sensitive to visualize the verbal sexual or physical abuse against the female partner as the main focus of the problem that operates in relationships affected by sexual dysfunctions, makes easy the warmth and quality of the attention. The exposure of a case will describe the clinical experience accomplished during the last ten years under the methodology of the cognitive-behavioural analysis applied: observational on design, multivariable of interaction, with interdisciplinary intervention supported on psychiatry and laws. The results show that, when integral assistance is provided, able to detect, attend and eradicate the sex violence as a vehicle of sexological and psychological symptomatology present in patients, it is achieved, first of all, the elimination of a major risk of relapses of violence with devastating consequences and, in second place, the rebirthing of sex life and affection, from a perception of damage of human rights. It is advisable that providers of health services must obligatorily experiment to increase the awareness and training that provides the own dropping of barriers that act unseen when the gender topic reaches the personal and professional door. This problem has always been a matter of all of us, due to sharing a sociocultural base that has conditioned us to understand the links from a conception that poorly recognizes equity.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1961

INCIDENCE OF PERSONOLOGICAL HOMOGAMY AND HETEROGAMY ON THE CHOICE OF PARTNERS AND THE QUALITY OF THE RELATIONSHIP OF THE COUPLE

Lampis Jessica (Department Of Psychology At The University Of Cagliari), Cacciarru Barbara (Department Of Psychology At The University Of Cagliari), Carta Stefano (Department Of Psychology At The University Of Cagliari)

This research analyzed in a sample of married couples, the prevalence of homogamic choice (similarity between the partners), or heterogamic choice (complementarity between the partners) and the effects of the degree of matching personological on marital satisfaction and conflict. The study involved 282 heterosexual couples. To both partners was given the Myers-Briggs Type Indicator test (Myers-Briggs, 1991), with a number of items designed to assess the level of satisfaction and marital conflict. The analysis revealed that the pairs of partners dealing with same or similar typological traits are significantly higher than those with less homogeneous

typological traits (chi square= 358,567, df= 79, p=.000), the partners are significantly more similar than different in relation to perception, judgments, ways to get in touch with the outside world. Such greater similarity cannot be interpreted in relation to the length of marriage (chi square= 25,682; gl= 20, p=.177). Finally, it was found that a greater similarity does not affect satisfaction, while significantly affects conflict: to a greater agreement in the dimensions extroversion-introversion, sensation-intuition and judgment-perception, are associated indexes of higher significantly conflict. The data collected seem to confirm that in seeking a partner to share a part of their life with, the prevailing tendency is to prefer similarities, and that this does not depend the time lived together, nor is an indicator of greater marital satisfaction, nor a protective factor from conflict.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1963

HOMOSEXUALITY AND OBJECT RELATIONS: A STUDY BY THE OBJECT RELATIONS TECHNIQUE (ORT)

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The Object Relations Technique (Phillipson, 1955) is a projective test that was established to assess the object relationships of the subject and his ability to establish and maintain relationships. The theoretical framework of the instrument is based on the English school of object relations, especially to the thought of Klein and Fairbairn. The tables that make up the ORT are related to different degrees of reality content and emotional context, through a different modulation of colour and vagueness of stimulus-silhouettes. The present study applies this technique to the study of homosexuals object relations, male and female, using the first Italian scoring grid for the evaluation of ORT stories (Lis et al., 2002), which meets the cluster of variables indicated by Phillipson (structure of the story, perception of the characters, types of relationships) and provides the normative data. In addition to the ORT, the MMPI-2 and the BSRI (Bem, 1971) was given to a sample consisting of 40 people and through a between subjects factorial design with equivalent control group (10 heterosexual men, 10 homosexual males, 10 heterosexual females and 10 homosexual females). The results about the significant differences in the different groups will be discussed, at: 1) a level of structure of the "internal world" (aspects of narrative, perceptual, relational, emotional and psychodynamic statistically depth by ANOVA and ACM) – with a particular emphasis on the imbalance of the anal defence mechanisms which emerged in the group of homosexual men – and 2) at a comparative psychometric level between the tools used.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1966

EDUCATIONAL STRATEGY FOR TRANSEXUALS INTEGRAL CARE IN CUBA

Castro Espin Mariela (National Centre For Sexual Education), Roque Guerra Alberto (National Centre For Sexual Education)

Introduction: The process and past history that lead to the design of the National Strategy for an Integral Care of Transsexual Individuals are explained. The proposed main goals are detailed focusing on the respect to the full dignity of transsexuals in the Cuban society.

Action: Strategy stages are explained: state of the art, strategy design, implementation, evaluation

Outcomes: The main outcomes are focused on political, legislative, public health, social communication and their insertion in the society fields. Political field: Strategy supported by the Cuban Communist Party which facilitated the negotiations with state, governmental and civil society organizations. Legislative field: Negotiations with the parliamentarians, members of permanent commissions at the National Assembly (Parliament), on the educational strategy and the modifications of the Family Code. Transsexual Law Decree to be passed at the Council of the State. Public Health field: A ministerial resolution that regulates all the procedures related to transsexual care and legitimizes the National Commission work as well as the creation of the Centre for Transsexual Care. Social Communication field: Design and implementation of social communication strategies in mass media to fight against transphobia. Insertion in the society: Health care promoters training programs for transgender persons and reflection and supportive groups for their relatives. Sensitivity workshops with police officers and lawyers, parliamentarians and Communist Party officials.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-1971

FIRST SCANDINAVIAN SEX HANDBOOK FOR WOMEN WHO HAVE SEX WITH WOMEN

Flodman Malinda

Introduction: Women who have sex with women have had very limited access to sex education in Swedish for many years. «The great sex book for women who have sex with women» by Flodman and Delilah, released in 2007 is the first sex handbook aimed at this group.

Action: Research for the book was conducted through sexology studies, interviews and workshops, in co-operation with the organisations RFSL and RFSU. Outcome The book has been a great success and has sold far more than expected. Workshops and lectures by the authors have had very high attendance.

Discussion and recommendations: The book is not only unique in that it is the first book of its kind in Scandinavia but it is also unusual in that it does not address sexual identity at all but only sexual behaviour and preferences. It is not a book for lesbians and bisexual women but a practical sex hand-

book för women who (wish to) have sex with other women.

References: Stora sexboken för tjejer som har sex med tjejer, Delilah, Helene & Flodman, Malinda, Normal föröag, 2007.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1973

CHANGING PERSPECTIVES ON SEXUAL MINORITIES

Cronström Beskow Xzenu

As 2008 turned into 2009, the Swedish "Socialstyrelsen" (National board of health and welfare) removed the official stigma on Transvestism, Sado-masochism and Fetischism by removing these minorities from the Swedish ICD-list of psychiatric diagnoses. While the diagnoses weren't being used, Socialstyrelsen concluded that their very existence encouraged prejudice. This change of policy is a part of a wider social change on two levels – Both a general gradual global change in the social and political position of the sexual minorities, and deeper discursive change in how sexuality itself is perceived. On the social level, sexual minorities are gaining ground. With homosexuality long since accepted by mainstream politics and mainstream psychology, the turn is coming to groups such as the ones recently accepted as normal by Socialstyrelsen. On the discursive level, our society is moving from a religiously based dichotomy between "normal" and "deviant" towards a human rights centered dichotomy between "consensual" and "abusive". Meanwhile, however, a neonormative discourse is forming where a false dichotomy of "heterosexuality" and "homosexuality" is pretended to be the entire spectrum of human sexuality. While loving healthy homosexual relationships has long been the proof of something being fundamentally wrong with the normative discourse, they are now instead being used as a excuse to uphold a slightly modified version of that same discourse. References Nordin (2005), "Queersverige" Wasniowski (2007), "Den korrekta avvikelser" Goffman (1963), "Stigma" Foucault (1976), "History of sexuality: The will to knowledge" Stoller (1991), "Pain & Passion"

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1974

YOUNG MEN'S UNDERSTANDING OF THEIR SEXUAL AROUSAL PROCESSES

Merriman Gareth (Curtin University), Coates Rosemary (Curtin University)

This presentation reports a study of 220 men between the ages of 18 – 25, interviewed in a semi-structured manner, using grounded theory methodology. The research aim was to ascertain their perceptions and beliefs about their sexual arousal processes. Consistent themes indicate that the majority of men in the study conceptualise their sexual arousal as a pattern that rep-

resents their morals and beliefs about themselves. The men believe that dissonance within actual and desired sexual arousal can create a splitting of sexual arousal from an ability to have intimate connection with a sexual partner. Whilst this disconnection in some situations is desired, the men believe that without constant review of their sexual arousal patterns that it is possible for them to become so disconnected from interactive intimacy that their own pleasure is all that matters - no matter how they get this. Core categories of their process of arousal as well as implications for working with men who have intimacy, empathy, disassociation difficulties and dysfunctional fixed patterns of sexual arousal will be presented, with recommendations for further research.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1977

CHINESE ATTITUDES TOWARDS TRANSGENDERISM AND TRANSGENDER CIVIL RIGHTS IN HONG KONG

King Mark

Introduction and objectives. This study describes the development of the Chinese Attitudes towards Transgenderism and Transgender Civil Rights Scale (CATTCRS). The objective was to investigate the multidimensional nature of Hong Kong Chinese people's attitudes toward Male-to-Female transgender and transsexual (TG/TS) people and attitudes toward their civil rights in order to inform the Hong Kong Special Administrative Region Government with regard to social and public policy.

Methods. In a 2006 random sampled telephone survey, we interviewed 856 Hong Kong Chinese men and women ranging in age from 15-64 years old.

Results. Factor analysis yielded a 38-item scale consisting of eight constructs which accounted for 57.8% of the variance in Chinese Attitudes: Awareness of Discrimination, Social Distance, Social Discrimination, Gender Essentialism, Transprejudice, Support for Equal Opportunities, Support for TS Civil Rights, and Support for Anti-Discrimination Legislation. Hong Kong Chinese people do not have very negative attitudes towards TG/TS people and are generally supportive of transgender civil rights. Gender was not significantly related to Chinese attitudes towards TG/TS people or their civil rights. However, age and level of education were significantly related to more positive attitudes and support for civil rights. This study also demonstrated relationships between attitudes towards TG/TS and essentialist beliefs about transgenderism, as well as contact with TG/TS people. **Conclusions.** The implications of Hong Kong Chinese people's attitudes toward TG/TS people and their civil rights are important factors for social and public policy, especially anti-discrimination legislation.

Conflict of Interest: None disclosed

Financial Support/Funding: self

PO-1979

OTHER-GENDER PARTNERS OF TRANSPeOPLE: BEYOND CONTEMPORARY CONCEPTUALIZATIONS OF SEXUAL ORIENTATION, SEXUAL IDENTITY, AND SEXUAL RIGHTS

King Mark

Introduction. The complexity of distinguishing between varied sexual identities is complicated further when social scientists and legal scholars explore the sexual identities, sexual orientations, and sexual rights of other-gender partners of transpeople. We argue that such an inquiry has become essential given the primacy of sexual subjectivity in the post-modern world, and further that a non-pathologizing analytic is brought to this inquiry. We incorporate the concept of therapeutic jurisprudence within the realm of other-gender partners' sexual rights, specifically with regard to marriage.

Method. Research data in the form of cases of male partners of transwomen are used to enable a close reading of issues of sexual rights, including conduct-based, identity-based, and relationship-based rights claims. We focused particularly on their claim to a new form of belonging, a 'sexual identity' that arises out of and reflects the remaking of the self and the multiplicity and diversity of possible identities that characterize the modern human sexual subject.

Findings and Discussion. The concept of sexual orientation identity and the heterosexual-homosexual-bisexual paradigm needs to be re-examined and explored in light of the sexual subjectivity of male partners of transwomen.

Recommendations. Claims to rights that center on sexual practice ought to be examined through the lens of therapeutic jurisprudence to contextualize these new demands and to deconstruct the old certainties of compulsive heteronormativity. The structural properties of 'man' and 'woman' need to be reassessed in the face of challenges to the sex-gender binary that is constructed and maintained by medicine, law and society.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1980

WOMEN'S DEFINITION OF SEXUAL PROBLEMS: A QUALITATIVE ANALYSIS OF 576 ON-LINE RESPONDENTS

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Introduction: Our objective is to confront women's own definitions of sexual problems/disorders with the classification proposed by the ICD-10 and DSM IV for sexual disorders.

Method(s): On an on-line survey, people filled in a General Questionnaire on sociodemographic data, general health questionnaire, sexual orientation, existence of sexual disorders. For the purpose of this qualitative study we analyzed 576 answers to two open questions regarding the definition of sexual satisfaction and of sexual disorders. We categorize and compare the an-

swers of women with and without sexual disorders using NVivo 7.

Findings and discussion: In the present study, women's definitions of sexual satisfaction contemplate mainly pleasure and relational related concepts. The definitions of sexual disorders focus mainly on sexual dissatisfaction, a concept that does relate to alteration on the sexual response cycle but is not a synonym of changes on sexual response cycle.

Recommendations: Evaluation and intervention in sexual disorders should always consider people's definition and expectations of sexual satisfaction and not only focus on the sexual response phases has defined by ICD-10 and DSM- IV manuals which seem to cover only part of women's perception of what a sexual problem is.

References: Tiefer, L. (2003). Female sexual dysfunction (FSD): Witnessing social construction in action. *Sexualities, Evolution & Gender*, 5, 33-36. Basson, R., Leiblum, L., Brotto, L., Derogatis, J., Fourcroy, J., Fugl-Meyer, K., et al., (2004b). Revised definitions of women's sexual dysfunction. *Journal of Sexual Medicine*, 1 (1), 40-48.

Conflict of Interest: None disclosed

Financial Support/Funding: Foundation For Science And Technology

PO-1991

SEXUAL EDUCATION IN A SUPPORT GROUP AS A PART OF A HOLISTIC TREATMENT FOR BREAST CANCER

Hernández-Rivera Ana J. (University Of Puerto Rico/Medical Campus), Santos-Ortiz María De Los A.

Breast cancer is the leading death cause for adult women in Puerto Rico. There are approximately 1800 women newly diagnosed with breast cancer yearly (P.R. Cancer Registry, 2000). Oncologists in Puerto Rico are successful on keeping more than 90% of their breast cancer patients on remission for the first 10 years survival period. Cancer and its treatment can have a dramatic effect on sexuality and relationships. Sex and sexuality are important parts of everyday life. Patients and doctors often do not talk about the effects of cancer treatment on their sex lives or how a person may feel as a sexual being through their treatment. As part of a holistic treatment sexuality and sexual health is very important component to consider in breast cancer treatment. The creation of a support group lead by breast cancer survivors could help cope with these issues. Pink Power coaching/navigator support group is to assist and empower all breast cancer patients that are in need of education, emotional support and a friend that can discuss the side effects they experience and their management. Participants of Pink Power coaching/navigator group have expressed the needs of Sexual Education as essential part of their treatment. Pink Power is designing a Sexual Health Education Curricula that will be presented to the physicians as an important part of the medical treatment in breast cancer patients. Schover, L.(1988). *Sexuality and cancer: For the Woman who has cancer and her partner.* American Cancer Society

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-1994

THE TASTE OF THE PILL: THE CONTROVERSIAL USE OF PUERTO RICO FOR THE DEVELOPMENT OF THE CONTRACEPTIVE PILL AND THE USE OF FEMALE STERILIZATION AS HISTORIC EXAMPLES OF HOW SOCIAL, POLITICAL, AND ECONOMICAL POWER SHAPES SEX

Estrada Jesús

By the middle of the 20th century late Governor Luis Muñoz Marín eagerly decided to turn the agrarian, almost-begging-for-food Island into an industrialized and developed country. This economic restructure was known as Operation Bootstrap. Accomplish this meant to lead Puerto Ricans toward new sexual patterns in order for the new agenda to be effective. Overpopulation was meant to cause Puerto Ricans' extreme poverty. So, female sexuality becomes a major target for government. Textile factories were about to come to the Island and Government thought it was a must to take women out of homes to do factory jobs. Since then, female duties, marital sex and conception should not be the same. If reproductive sex lessens, children lessen, women's spare time increases; eventually, they can play the role of that new workforce expected by government and the ready-to-come-to-the-Island factories. Coincidentally, the Pill gets to the Island (1956) to test its effectiveness in the first large scale trial. The Pill trials merged with alleged involuntary sterilization and eugenic principles enforced by law (Law 136-The Eugenic Law) turning out to be a controversial topic in the economic, political, and sex history of Puerto Rico. The issue of uninformed, no consent subjects for the Pill became of utmost importance as the issue of forced, coerced, and involuntary female sterilization. This oral presentation reviews the history of birth control, eugenics and the Pill in Puerto Rico as a historic example of how sex is also a matter of politic and economical power.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: No funding for this research

PO-1996

PARAGUAYAN SOCIETY OF HUMAN SEXUALITY STUDIES: WORKSHOPS ON SEXOLOGICAL AGREEMENTS

Gonzalez Galeano Ariel David, Tsutsumida Akita Isamu Javier

During 2008, the Paraguayan Society of Human Sexuality Studies - SPESH with the support of SIDUS Laboratories has developed internal workshops with the purpose of building consensus about key concepts on human sexuality. The diversity of professionals and sexological knowledge of SPESH was decisive to pursue this idea of concepts agreements. For each concept consensus, all SPESH members prepared individual concepts and definitions for certain terms and in plenary; everyone presented his own list and offered explanations based on his formation and professional experience. The diversity of SPESH's professionals includes: clinical and educational psychologists, social workers, general medical doctors, OBGYN, High School Teachers and Last year university students. So far, 4 workshops have been developed and there are more to come. Its interest of SPESH to cre-

ate consensus definition of sexological concepts in order to help at least for all professionals of the organization; in disseminate and understand the same speech. The glossary being created, pretend to be a tool not only for SPESH members, but for all persons interested in the sexological knowledge. Some concepts already agreed are: SEXUALITY, SEX, GENDER, GENDER IDENTITY AND EROTISM

Conflict of Interest: No conflicts of interest

Financial Support/Funding: SIDUS Laboratories

PO-1998

III PARAGUAYAN CONGRESS OF HUMAN SEXUALITY STUDIES

Gonzalez Galeano Ariel, Tsutsumida Akita Isamu Javier

The third Paraguayan Congress on Human Sexuality has been developed during November 2008. As the unique and main national paraguayana activity about sexology, it's a great experience to be share. The objectives of the congress is to offer, maintain and keep improving a scientific space for discussions about sexuality. The third congress theme was «Progress and Challenges on Sexology» and main conferences and symposiums were made surrounding this issue. Also a preconference course was developed and it was about Emergency Contraception: Clinical, Behavioral and Social Aspects». More than 20 persons participated of the preconference training and more than 70 persons attended the 2 days conference. Besides, the conference got the support from the Latin American and Caribbean Consortium of Emergency Contraception and the Latin American Federation of Sexology and Sexuality Education Societies. For this conference, the Chilean Dr Horacio Croxatto was the international expert that was invited to share his experiences and knowledges with Paraguayan professionals. Due to the success of this conference, during 2009 the fourth conference will be made and concrete dates, themes and location could be found at www.estudiosdesexualidad.org

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Bayer Schering Pharma

PO-1999

MEANINGS OF EROTICISM, SEXUAL DESIRE, AROUSAL AND ORGASM IN A COLLEGE STUDENTS

García- Hernández Ma. Graciela, Terrein- Roccatti Nadine

Introduction: With the WHO, WAS and PAHO consensus for defining the concepts related to sexual health, we have some operative definitions for clinical and researchwork. We propose to investigate the meanings accorded to eroticism concepts by people that doesn't study sexuality. The aim of this study is to analyze the meaning of the words «eroticism», «sexual desire», «arousal» and «orgasm».

Method(s): The semantic net methodology is used with Mexican college students in order to obtain the association they have with the words «eroticism», «sexual desire», «arousal» and «orgasm».

Findings and discussion: we discuss the meaning accorded to the words related to eroticism and if people that doesn't study sexuality understand the same way WAS, WHO and PAHO understands this concepts.

Recommendations: further investigation is recommended and actions to inform the persons about this consensual definitions.

References: World Health Organization (WHO) (2006). Defining sexual health. Report of a technical consultation on sexual health 28-31 January 2002. Geneva: WHO Pan-American Health Organization (PAHO); World Association for Sexology (WAS). (2000). Promoting sexual health. Recommendation for action. Antigua: PAHO

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None

PO-2008

WHAT SEXOLOGY FORGOT?

Hampson David (Isiss / Uk Nhs)

No-one questions that our sexuality, our sexual lives and activity, are key ingredients of our life experience. As the poet, asked at the end of a long and full life if he had any regrets, replied ... 'Not enough sex!'. Studying this key ingredient of life, sexology, seems to have been a long time coming. It has had to wear the white coat of medicine or the black gown of academia to dare to speak its name, at least in the modern world and western culture. The black and white of science has stayed mostly blind to the colours the poet and the lover sees, and to the forces earlier cultures perceived. Yet, when modern physics found uncertainty at the heart of its quest for certainty, ancient philosophy and wisdom was remembered. Sexology's texts and trainings are often sparse on the poetry and passion of the sexual experience, of the relational lubricants of desire and union. Emphasis can be on diagnostic formulation and techniques speaking of sensate focus, stop/start masturbation, etc., sometimes in a formulaic fashion as if, in themselves, they effect some 'cure'. Conversely, although written from medico-scientific perspective, sexology texts rarely address readily observable function such as non-ejaculatory orgasm in men, or female ejaculation. Scientific enquiry now is finding evidence that supports the experiences described millenia ago. Tantric and other wisdom is being remembered and may perhaps be beneficially offered anew by sexologists.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2012

IS THERE A LINK BETWEEN PEYRONIE'S DISEASE AND ALCOHOL CONSUMPTION?

Wylie Kevan R (Porterbrook Clinic), Lumb Joanna (Sheffield University)

Aim: To identify if there is a link between alcohol consumption and the development of Peyronie's Disease (PD), where drinking larger quantities of alcohol may lead to microtrauma of the penis during enthusiastic love-making,

which may be subsequently forgotten.

Methods: The Peyronie's Disease Patient Questionnaire was completed by 133 male patients who had been diagnosed with PD at the Urology Clinic of the Royal Hallamshire Hospital, Sheffield, between January 2005 and December 2007. The age at diagnosis was correlated with an estimate of their past and current weekly alcohol consumption, and compared to figures for UK males from the National Statistics survey in 2002. Alcohol consumption of patients who recalled sexual and non-sexual penile trauma was also compared.

Results: There was no link between age and current weekly alcohol consumption (correlation 0.06) or previous consumption (0.07). Most patients were between 45 and 64 years of age, and had the same weekly alcohol consumption levels as UK males in that age category. The 25 patients who could recall penile trauma had a significantly higher mean weekly alcohol consumption (19.2 units) than those who could not (16.8 units).

Conclusion: No link between alcohol consumption and Peyronie's Disease has been found. This theory cannot be proved or disproved by the available evidence.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2016

AN INTRODUCTION TO SEXUAL TRAINING IN ISLAM

Noroozi Ali (Zeinab(Blessings Of Allah Be Upon Her) Dar Al-Quran Institute), Mohammadi Mostafa (University Of Tehran)

There are some different approaches and theories toward sexual training. Also Most of religions emphasize the importance of sexual training in human life (e.g., Islam, Judaism, Catholicism and fundamentalist Protestantism). The aim of this study was an introduction to Islamic guidelines in sexual training. Also some of the important highlights of Islamic sexual training in prevention and therapy were presented. The Quran as the first and the most important book in Islam was the main reference. In general, from Islam perspective there should be an accurate and moderate view to sexual training in term of the attitude toward this issue. The real intent of Islam underlying all the rulings, restrictions, procedures, and commands about sexual training is achieving to a healthy and heavenly Object-Oriented development.

Conflict of Interest: None disclosed

Financial Support/Funding: no

PO-2017

THE RELATIONSHIP BETWEEN THE NUMBERS OF SEXUAL RELATIONS WITH MARITAL SATISFACTION; FROM FICTION TO SCIENTIFIC FACT

Mohammadi Mostafa (University Of Tehran), Noori Sana (University Of Tehran), Salimi Mohammad (University Of Tehran), Shamsavarani Amir Mohammad (Shahid Modares University), Jafari Mahdi (Azad University)

Is the numbers of sexual relations an important component of marital satisfaction? How important is it? To answer these questions the relationship between the numbers of sexual relations with the marital satisfaction and the importance of this relationship was examined. The samples were 53 Iranian married males with leukemia. They were asked about the numbers of sexual relations and the marital satisfaction before and after being patient. The mean age of participants was 41.79. The Kansas Marital Satisfaction Scale (KMS; Schumm et al., 1986) was used to evaluate marital satisfaction. Sexual functioning, substance abuse, education level, the duration of marriage and the duration of disease were investigated as control variables. The result showed no significant correlation between the numbers of Sexual relations and marital satisfaction. The relationship between the numbers of sexual relations in marital satisfaction from a fiction to a scientific fact was discussed. The need for further research was emphasized.

Conflict of Interest: None disclosed
Financial Support/Funding: no

PO-2025

GUIDED EXPOSURE IN THE TREATMENT OF LIFELONG VAGINISMUS: RESULTS OF AN RCT

Van Lankveld Jacques Jdm (Maastricht University The Netherlands), Ter Kuile Moniek M (Leiden University Medical Centre The Netherlands)

A randomized controlled trial of efficacy was conducted, comparing guided exposure behavioral treatment of women with lifelong vaginismus and waiting list. Participants were 70 heterosexual women between 18 and 50 years with a relationship of at least three months duration. The disorder had been present for more than ten years on average, and 95 percent had received one or more previous unsuccessful treatments. Treatment consisted of three sessions of maximum two hours within one week, and homework assignments. The partner was required to be present during the exposure sessions. Therapists were female behavior therapists, guiding the exposure process, and supporting the women. Assessment was performed at baseline, six weeks after treatment start, six and twelve weeks, and one year after treatment termination, and assessed successful or unsuccessful vaginal penetration with the partner's penis, other types of penetrative behavior, and several dimensions of sexual functioning. Of the women who were treated, 91 percent succeeded in having penile-vaginal intercourse, compared with 9 percent of waiting-list participants. More than 75 percent could have intercourse by the end of the treatment week. Other penetrative behaviors also increased, and fear of penetration was significantly diminished in the treated group. Treatment gains were maintained until follow-up at one year. Treatment did not influence other aspects of sexual functioning, although sexual satisfaction was increased.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: ESSM

PO-2026

TEACHING ORGASM FOR FEMALES WITH CHRONIC ANORGASMIA USING THE BETTY DODSON METHOD

Struck Pia (European Orgasm Academy), Ventegodt Soren (Research Clinic For Holistical Medicine)

The objective of this study was to test the Betty Dodson method of breaking the female orgasm barrier in chronic anorgasmic women. The aim was sexual and existential healing (salutogenesis) through direct confrontation and integration of both the repressed shame, guilt, and other negative feelings associated with body, genitals, and sexuality, and the repressed sexual pleasure and desire. We conducted a retrospective analysis of clinic data from holistic sexological manual therapeutic intervention, an intensive subtype of clinical holistic medicine (CHM). The patients received 3 × 5h of group therapy, integrating short-term psychodynamic psychotherapy (STPP) and complementary medicine (CAM) bodywork, manual sexology similar to the "sexological examination") The therapy used the advanced tools of re-parenting, genital acceptance, acceptance through selftouch, and direct sexual clitoral stimulation. A clitoral vibrator was used. Participants were 500 female patients between 18 and 88 years of age (mean of 35 years) with chronic anorgasmia (for 12 years on average) who were participating in the "orgasm course for anorgasmic women"; 25% of the patients had never experienced an orgasm. Our results show that 465 patients (93%) had an orgasm during therapy, witnessed by the therapist, and 35 patients (7%) did not. Postmenopausal women were as able to achieve orgasm as fertile women, as were women who never had an orgasm. No patients had detectable negative side effects or adverse effects. NNT:1.04 < NNT<1.12, NNH>500. Therapeutic value: TV=NNH/NNT>446. Our conclusions are, that holistic sexological manual therapy may be rational, safe, ethical, and efficient.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2028

HOMOPHOBIA AND INTERNALIZED HOMOPHOBIA AMONG MEN WHO HAVE SEX WITH MEN - A REVIEW OF INSTRUMENTS

Robinson Beatrice «Bean» E. (University Of Minnesota Medical School), Grey Jeremy (University Of Minnesota), Bocking Walter O (University Of Minnesota Medical School)

Introduction: Weinberg (1972) introduced the term homophobia to describe heterosexual persons' irrational fear and dread of being in close contact with lesbian, gay, and bisexual (LGB) persons and the term internalized homophobia to describe the internalization of negative messages about homosexuality by LGB people (Szymanski, et al., 2008a,b). We will present a summary of our review of instruments measuring homophobia and internalized homophobia among men who have sex with men (MSM), with a focus on helping researchers, clinicians, and educators select relevant instrument(s).

Methods: Using procedures developed by Robinson, et al.(1991), we: (1) conducted an electronic library search (1970–2008) using 13 key words (2) identified instruments using article reference lists, instrument compendia, and a citation tool that identified new articles (3) gathered copies of these instruments electronically, from bound journals, books, and authors (4) developed tables summarizing the instruments on development strategies, samples, subscales, response formats, reliability (internal consistency, test-retest, split-half) and validity (item and factor analysis, discriminant and convergent, content sampling).

Results: We found 17 instruments: 11 measured homophobia and 6 measured internalized homophobia among MSM. The majority were developed and validated on convenience samples of college students, with some newer scales using gay internet samples. Virtually all had internal-consistency reliability, some validity — few had normative data.

Conclusions: Negligible funding for development of instrumentation to measure these concepts is pervasive. Proper sampling of content and rapid political changes make keeping such instruments relevant a challenge if items focus too closely on current politics and policies.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Project funded by the U.S. National Institutes of Health, National Institute of Child Health and Human Development (NICHD)

PO-2029

INVESTIGATING SEXUAL ABUSE AND ITS EFFECTS ON CHILDREN DEVELOPMENTAL COURSES (COGNITIVE, EMOTIONAL, SOCIAL) BASICS/CLINICAL

Bayan Memar Ahmad, Khanifar Hossein (University Of Tehran), , Faghihi Alinaghi (University Of Qom), Memar Farid Bayan (University Of Danesh-pajoohan)

Abstract: Goal: The goal of this study is to investigate the sexual abuse and its effects on different aspects of children developmental courses. It is also intended to find out protective factors since all children around the world are the most valuable kind of human capital. Therefore it is very important to protect them from sexual abuse which leads to sever psychological disorders.

Method: In this study data was collected and analyzed from different researches in this field and also used information received from different organizations.

Result: The shocking data related to sexual abuse in different countries showed that most children involved in sexual abuse suffered from some kind of psychological disorders which affected their developmental courses. Such as lower academic performance, low self-esteem in appropriate sexual behavior; like excessive masturbation or compulsive sexual play.

Conclusion: This study reveals that there are special obstacles for the protection of sexual abuse such as hiding the consequences of sexual abuse and not reporting to related organizations and lack of sexual training programs for families, schools and children.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2031

CROSS-CULTURAL STUDY ON WOMEN VIOLENCE: PHENOMENON CHARACTERISTICS ON INTIMATE CASUAL DATING AND COMPARATIVE ANALYSIS OF THE VIOLENCE REPRESENTATION.

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Introduction and objectives: We intend to explore the existence of domination, coercion and violent behaviours in a sample of young persons who had sporadic intimate relation. This study complements some previously ones. In a cross-cultural study (sample of 570 college) from Spain and Portugal (Del Campo & Neto, 2007), on the prevalence of the gender violence in university population and its possible variable predictors, we found 29 % of the women who have been victims of conducts of domination and violence by their partners (21 % insults; 18 % treated with inferiority; 8 % threatened and 6 % physical violence). The self-esteem seems to play a very important role in relation to these problems. It is also an extension of the first research about casual dating in Portugal (Fávero et al., 2005, 2007), in a sample of 105 adolescents and 210 college students, which found that in the casual relationship 12% of the subjects was forced.

Method(s): The sample will be constituted by adult young persons of Portugal and Spain and we are preparing specific instruments of evaluation, based on the results of the qualitative studies, and another used in previous investigations.

Results and Conclusion: As this investigation is the continuation of two previous studies, their data justifies our interest in the extension of this investigation on coercion or another form of violence in casual dating since we will be expected to find more details about gender violence in casual relationships, key aspect for the prevention of this risk, from earlier.

Conflict of Interest: None disclosed

Financial Support/Funding: CINEICC -ISMAI

PO-2033

SEXUAL CRITERIA IN THE SHORT AND LONG TERM PARTNER SELECTION

Ferreira Fátima Abreu (Cneicc - Ismai), Favero Marisalva Fernandes (Cneicc - Ismai)

Introduction and objectives: This study aims to analyze human criteria upon selection of short and long term sexual partners, in an attempt to identify the differences between genders. Based on a former study (Ferreira, 2005; Fávero & Ferreira, 2007) of the feminine sexual criteria, we concluded that the criteria that determine the choice of a sexual partner has

been undergoing an evolution and theories that previously explained this choice proved to be overcome. Therefore, we want to make a reassessment of the theories that explain sexual partner selection and examine the progression of those choices. Considering the social evolution Portugal has been suffering since the 1974 revolution, we also intend to evaluate if these differences happened in two different generations; more specifically between those whose attitudes were shaped by Salazar's dictatorship era and those whose attitudes were defined by a more liberal, emancipated and feminist social environment.

Method(s): C-SEX (Ferreira & Fávero, 2005), a self-reported questionnaire with 100 items, which evaluates the elected features in a short and long term sexual partner was applied to a sample of 250 women and 250 men (between 15 - 65 years of age), in the Northern area of Portugal.

Results and Conclusion: In a previous study we found criteria differences in the feminine choice of short and long term partners in all dimensions evaluated. Whereas we are still in the process of statistical treatment of data collected, we cannot, at this point, make an analysis and discussion of final results.

Conflict of Interest: None disclosed

Financial Support/Funding: CNEICC - ISMAI

PO-2036

HOMOSEXUALITY AND DISCRIMINATION

Favero Marisalva Fernandes (Ismai - Cneicc), Favero Marisalva Fernandes (Ismai - Cneicc)

Introduction and objectives: The way families and society have reacted to homosexuality hasn't enabled homosexuals to express free and positively their sexuality. With this study, we want to verify whether the homosexuals in Portugal (excluding the Azores and the Madeira) feel any kind of prejudice in their family, professional or social context, on account of their sexual orientation and which facts they consider to promote that prejudice.

Method(s): The info was obtained by the application of a questionnaire to 69 homosexuals (males and females), who were members of the Homosexual and Lesbian Associations in Portugal.

Results: Only 9% of the sample became aware of their sexual orientation in a positive way, as the majority of the sample expressed negative feelings, such as fear and anguish. The big majority of the people refer they were born that way and undervalue any attempt to explain their homosexuality. When questioned about the importance of publically claiming their homosexuality, we noticed a symmetrical and equitable distribution. The personal experience of moments of prejudice was described by 75.4% of the sample, being noticeable by looks, threats, comments, gestures, different treatment and physical violence. Against all the percentages, 33.3% refer to have felt harmed for being homosexual. The majority consider discrimination and prejudice responsible for their families not truly knowing them and for showing off behaviours which they do not identify themselves with.

Conclusions: This study reveals that discrimination against homosexuals is a reality and that it regulates individuals' lives.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2038

CHILD SEXUAL ABUSE: NURSE ATTITUDES

Fávero Marisalva Fernandes (Ismai - Cneicc), Fávero Marisalva Fernandes (Ismai - Cneicc)

The main purpose of this study was to understand if there false ideas and misconcepts concerning child sexual abuse amongst nurses. The sample, based not on probability but on convenience, referred to 180 nurses working in five Hospitals in the district of Porto. As a method, we adopted a quantitative research, by self-reported questionnaires. By reviewing the bibliography, we developed a new methodological structure, from which derived our conclusions. The results showed that indeed nurses present few myths and misbelieves related to child sexual abuse, except for when related to its consequences. Moreover, we concluded that factors related to age, years of professional experience in paediatrics and specific training in this area influence myths and misbelieves amongst nurses. Therefore, younger nurses, those who have less experience in this area and specific training present fewer myths and misbelieve. Another aspect to enhance is that nurses lack arguing abilities in order to act adequately whenever they suspect or detect sexual abuse in children. Finally, there were identified some situations which will be dealt accordingly in professional training. The formative contents should focus mainly on the consequences of sexual abuse in children, the role of nurses, along with the appropriate training of abilities and its social backup resources. Nevertheless, as Almeida (2003) states, efforts should be dedicated to the development of those competences, as only training will enable nurses to acquire a higher ability in identifying a suspect, providing a diagnosis and treatment to sexual abuse in children.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2039

ASSESSMENT OF ATTITUDES AND KNOWLEDGE REGARDING SEXUALITY IN THE AGED: A SURVEY ON A PORTUGUESE SAMPLE

Favero Marisalva Fernandes (Cneicc - Ismai), Gomes Jacinto (Ismai - Cneicc), Maia Carla (Ismai - Cneicc)

Introduction and objectives: Assuming that, despite the studies show the interest of the elderly by sexual activity, there is a denial of sexuality in old age, we have developed studies to identify the knowledge and attitudes of the population in general, relatives of the elderly and the professionals involved with the elderly population to sexuality in old age. The pilot study investigates professionals in centers for the elderly, relatives of elderly people and health professional's attitudes and knowledge regarding sexuality in the aged.

Method(s): A total of 172 participants (45 professionals in centers for the

elderly; 45 relatives of elderly people and 82 health workers) completed ASKAS - Scale for the Assessment of Knowledge and Attitudes Regarding Sexuality in the Aged «(White, 1982), a Likert scale with 25 items.

Results: A previous analyses of the Portuguese version of the ASKAS have demonstrated a good internal consistency ($\alpha = .92$ for the Scale for the Assessment of Attitudes; and 0.78 Scale for the Assessment of Knowledge). We found more positive attitudes in professionals than on the relatives of the elderly.

Conclusion: Our previous results have demonstrated more positive attitudes about sexuality in the aged than we have expected, besides some results were similar to that of explicit academics theories. This investigation is a broader study and is not yet completed.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2042

EFFECT OF L-CARNITINE SUPPLEMENT ON SEMEN PARAMETERS IN IDIOPATHIC INFERTILE MEN

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Introduction and objectives: The benefit effect of L-carnitine is proposed for treatment of various dysfunctions of sperm in infertile men. So, in the present study, effect of L-carnitine supplement on sperm parameters in men with idiopathic infertility is evaluated.

Methods: Thirty infertile men, ages 20 to 40 years, with the following baseline sperm selection criteria (sperm count $< 66.6 \times 10^6$, motility $< 30\%$, viability $< 60\%$, normal morphology $< 35\%$) completed this study. Patients underwent L-carnitine therapy 3 g/day; the study design was 3 and 6 months of therapy. Semen analysis was performed according to World Health Organization guidelines. Sperm parameters included liquefaction, pH, volume, sperm count, motility, viability and normal morphology.

Results: The results showed that L-carnitine supplementation increased sperm count, motility, viability and normal morphology and pregnancy rate after 3 months ($p < 0.01$) and 6 months ($p < 0.001$), significantly. Also, L-carnitine supplementation increased sperm motility and viability in idiopathic infertile men after 3 and 6 months ($p < 0.001$). On the other hand, 5 couples became pregnant during the study.

Conclusion: The present study indicated that L-carnitine supplementation is an appropriate drug for treatment men with idiopathic infertility.

Conflict of Interest: clinical andrology

Financial Support/Funding: this study is supported by deputy research of my university

PO-2043

CORRELATION BETWEEN SEMINAL PLASMA GLUTATHIONE PEROXIDASE ENZYME ACTIVITY AND SEMEN PARAMETERS

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Introduction and objectives: Sperm cell membranes are susceptible to peroxidative damage by an excess of reactive oxygen species (ROS). Antioxidative defence systems consisting of glutathione peroxidase (GSH-Px), superoxide dismutase (SOD) and catalase (CAT) physiologically control the balance between ROS production and neutralization. In the present study, correlations between seminal plasma glutathione peroxidase enzyme activity and semen parameters are evaluated in 240 males.

Methods: Semen analysis was performed according to World Health Organization guidelines. The 240 males were subdivided into 5 groups as normospermia, oligospermia, asthenospermia, azospermia and varicocele according to their spermograms. Seminal plasma glutathione peroxidase enzyme activity was determined by Kit (Randox, Germany).

Results: The result showed that glutathione peroxidase enzyme activity is higher in normospermic than oligospermia, asthenospermia, azospermia and varicocele groups. Also, there are significant and negative correlations between glutathione peroxidase enzyme activity and seminal plasma fructose concentration, white blood cell, tail defects of sperm, coiled tail sperms and short tail sperms. On the other hand, the present data showed that significant and positive correlations between vitality, sperm count, motility and normal morphology.

Conclusion: The present study showed that measurement of glutathione peroxidase enzyme activity could be a good marker for evaluation of male infertility.

Conflict of Interest: clinical andrology

Financial Support/Funding: This study supported by deputy research of my university

PO-2048

PREVALENCE OF SEXUAL DYSFUNCTION ASSOCIATED WITH ANTIDEPRESSANTS: A CROSS-SECTIONAL OBSERVATIONAL MULTI-CENTER SURVEY USING ARIZONA SEXUAL EXPERIENCE SCALE-CHINESE VERSION (ASEX-CV) IN TAIWAN

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Introduction and objectives: This study were aimed to assess the preva-

lence of sexual dysfunction(SD) in patients with major depressive disorder(MDD) or dysthymic disorder(DD)by DSM-IV criteria in Taiwan.

Methods: Psychiatric outpatients were recruited from 4 hospitals(06/2004-10/2005) throughout Taiwan.A written questionnaire were completed regarding their demographic characteristics, antidepressant use, and sexual activities using ASEX-CV. The prevalence of SD were defined by ASEX-CV scoring criteria and the correlation study were performed with the logistic regression analyses.

Results: Total participants:604, Male:Female=167(27.6%):437(72.4%), mean age=42.4(SD 12.5), 64% married, 77.5% MDD, 22.5% DD. Overall prevalence of SD was 65.2%. Females experienced a greater prevalence (72.1%) than males (47.3%, $p<0.001$). Females reported significantly greater severity of SD than males in terms of lack of sex drive ($p<0.001$), difficult in arousal ($p<0.001$), sexual excitement ($p<0.001$), ability to reach orgasm ($p<0.001$), except satisfaction from orgasm ($p<0.001$). More female patients reported that the quality of sex life is not important ($p<0.001$) and intimacy with partner was unsatisfactory ($p<0.001$), except for satisfaction of sexual life ($p<0.001$).

Conclusions: This is the first study on prevalence of SD associated with antidepressants using ASEX-CV scale in Taiwan. The high prevalence found deserves greater attention by psychiatrists and physicians in general. The issues of cultural and gender difference also need to be addressed.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: GSK Glaxo-Smith-Kline Pharmaceutical company Tsyr-Huey Mental Hospital

PO-2051

SEXUAL REMEDY FOR THE PURPOSE OF PROFESSIONAL TREATMENT

Koldsø Helle

Sexual remedy for the purpose of professional treatment I would like to discuss some of the essential conditions there might have influence on the counselling about sexual remedy. How these conditions need to be differentiated in order to increase the quality of the individual treatment. Many sexologists found themselves not well equipped for counselling the patient/client on a serious and qualified level. There seems to be a need for a common framework, where necessary information can be searched for and compared with. At this occasion I would like to tell about my work inventing a catalog equal to the one the practitioner already use in selecting between different medical treatments – for now I call it The Catalog of Sexual Remedy

Conflict of Interest: None disclosed

Financial Support/Funding:

PO-2053

SEXUAL BEHAVIOR IN GERMAN-SPEAKING SWITZERLAND

Schiftan Dania (Zismed)

Introduction and objectives: The objectives of this study was to acquire and describe the facets of the sexual behavior of German-speaking Swiss by means of an online questionnaire. Until now, no comparable study of this type had been carried out. Questions included, focused on sexual well-being and problems, sexual orientation, sexual behavior of couples and singles, risk behavior and motivation for protection, as well as episodes of sexual assault and coercion.

Method: This study was carried out using an online questionnaire based on a German research project by Gunther Schmidt (1996, 2000). Descriptive analysis included frequencies and between group comparison. Also included are inferential statistics including χ^2 test.

Results and Conclusion: 6393 Swiss filled out the questionnaire completely. Some significant findings revealed the majority participants were satisfied with their partnerships, their sexual lives and with their mental and physical health. Women appeared more flexible in their sexual orientation, men were clearly polarized as to hetero- or homosexuality. Women more often wished for loyalty. Almost all persons masturbated, women in long-term relationships the least. Almost 17% of the participants used no preventive measures in their first sexual encounters. Approximately 25% of the women and more than 6% of the men had been forced to engage in sexual acts. The results of this online survey are mostly as expected. Due to the similarity to Schmidt et al. (2000) and other large European studies, a representativeness can be assumed.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2058

KNOWLEDGE AND PRACTICE OF LESBIANISM AMONG NIGERIA UNIVERSITY ATHLETES: IMPLICATIONS FOR MITIGATING THE HIV/AIDS SCOURGE

Iro Paul C.E. (Faculty Of Education, University Of Port Harcourt, Choba, Rivers State, Nigeria.)

Threads of evidence point to the practice of homosexuality by some Nigerians. There are widespread speculations that since sport is a microcosm of society, this practice should permeate sport in that country. In this study, the knowledge and practice of lesbianism among female athletes in Nigerian universities, the incidence, recruitment variables, and the associated behaviours which constitute vehicles for HIV/AIDS transmission were investigated. One hundred female athletes who attended the 2004 All Nigeria University Games (NUGA) constituted the sample and questionnaire was the data-gathering instrument. Results of the study failed to show that the female athletes practiced lesbian sex. However, 96% of the respondents knew the risky behaviours associated with lesbian relationships which serve as media for HIV/AIDS transmission. Majority of the athletes indicated

that some of their colleagues were thought to be homosexuals because of their masculine physique and use of dress codes which are considered male domain, and dreadlocks. Athletes who shared these characteristics were wrongly classified as lesbians based on prevailing indicators of lesbianism. There was no significant difference between first-time and non-first-time competitors in NUGA in their perception of the indices of lesbianism. Generally, university sports meets attract numerous people of diverse cultures and professional competences. Communication-based activities aimed at educating the youths on body adaptations to physical activities and HIV/AIDS should thus be mainstreamed into the programmes of university sports meets in order to correct the erroneous impressions about the sexuality of female athletes and alleviate the AIDS burden in that country

Conflict of Interest: No conflicts of interest
Financial Support/Funding: Self sponsored

PO-2061
TO HELP MY COMMUNITY

Aziniw Suh Fred

DEAR/SIR/MADAM MY COMMUNITY I DIEYING SO I WILL LIKE TO ATTEND THIS CONFERENCE TO COME BACK AND HELP MY PEOPLE THANKS BEST REGARD DR FRED

Conflict of Interest: I WILL LIKE TO ATTEND THIS CONFERENCE AND COME BACK TO MY COUNTRY AND HELP MY COMMUNITY.
Financial Support/Funding: THE HOSPITAL WILL TAKE CARE FOR THAT.

PO-2067
FREQUENCY OF CHLAMYDIA TRACHOMATIS' INFECTION IN ASYMPTOMATIC MALES BASED ON PCR IN TEHRAN, IRAN

Meidani Mohsen, Chamani Tabriz Leila, , Zeraati Hosein, Razin Bahram, Jamali Bahareh, Gachcar Latif

Introduction: Chlamydia trachomatis is a common curable, bacterial sexually transmitted disease. The world health organization (WHO) estimated that 90million cases occur annually on global basis. The epidemic of Chlamydia trachomatis (CT) has been well documented in adolescent females, but information is limited regarding its prevalence among a healthy population of sexually active adolescent males. The main purpose of this study is to determine the prevalence of urogenital infection with Chlamydia trachomatis in asymptomatic men attending reference laboratory of Tehran Bu-Ali hospital from Dec 2005 to may 2006. Although This has been done frequently in many parts of the world, but We are going to do it for The first Time in Iran.

Material and Methods: This is a cross-sectional study done on 140 asymptomatic 15-49 years old men attending to reference laboratory of Bu-Ali hospital to be tested for employment or marriage. Method of sampling was random and the samples were taken F.C.U (Participants had not voided for

the least 2 hours). Meanwhile, Participants completed a questionnaire containing personal identifications such as age, marriage status, education, job and etc. Demographic data and PCR results were analyzed by SPSS software ver: 13.

Results: Only one out of 140 samples (0.7%) was positive for Chlamydia trachomatis by PCR (%95 CI: %0-%2.07). Based on prior multiple and valid studies, screening only for women populations with 3.1– 10 % Chlamydia trachomatis prevalence or screening of women and men in populations with at least 6% prevalence is cost effective.

Conclusion: This study can say that screening for Chlamydia

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2068
CURING DIFFERENT DEGREES OF ERECTILE DYSFUNCTION BY A 3-MONTH COURSE OF «CAVIGEN»

Kotb Heba

A lot of male patients present with the famous complaint; erectile dysfunction, after excluding the physical causes by several investigations especially «penile doppler», a 3-month course of «cavigen» was given to 100 patients with the same complaint, age range 25 to 62 years, dose is designed to be 1 tablet 3 times daily. The outcome of the research was found to be fruitful in general; results was satisfactory in 92% of patients, 5% mentioned they noticed a little difference in the sexual performance, 3% mentioned they noticed no difference at all in their desire and/or performance. From the overall results we found the research very valuable in proving the positive effect of taking a course of «cavigen» in patients complaining of non-physical erectile dysfunction.

Conflict of Interest: Liptis pharmaceuticals
Financial Support/Funding: None disclosed

PO-2069
PUBLIC QUESTIONS ABOUT SEX WORLDWIDE AND HOW SEXUALITY EXPERTS ANSWER

Kuriansky Judy (Columbia University Teachers College, Usa), Nasserzadeh Sara (England), , Spencer Joy (Sierra Leone, Africa), Tong Chualiang (China, Shanghai Institute For Family Planning Technical Instruction)

Men and women of all ages in the public all over the world have questions about sexuality and intimate relationships. But how different or similar are these? It is of great interest for sexuality experts to the answer to that question. This symposium of experts address that issue: what questions people in the public want to know, and how sexuality experts and educators from different cultures handle these questions. The presenters addresses the differences but also the similarities of those questions and responses. Presenters have vast experiences with concerns from the public, and have all been involved in projects that involve media as well as school-based and com-

munity-based programs to deal with public's concerns. The presentations represent a variety of countries, including diverse areas of the world, e.g. Africa, Iran, China and America. Presenters will review research and data compiling the types and frequencies of questions from those particular countries and describe the methods used to answer those questions, including reviewing unique programs from various formats: radio, internet, clinic-based, hotlines, community- and school-based. Research projects about these samples will also be presented, as well as comparative frequency data, and discussion about the relative approaches in the different cultures. Guidelines will also be presented for answering different questions in the different media, which participants can apply to their own context.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2072

THE MOST IMPORTANT FINDINGS FROM THREE SURVEYS OVER THREE DECADES ON NORWEGIAN'S ATTITUDES TOWARD THEIR SEXUAL PRACTICES

Almås Elsa M (University Of Agder), Benestad Esben Esther P (University Of Agder), Aars Haakon (Aker University Hospital), Schaller Sissel (Institute For Clinical Sexology And Therapy), Svendsen Kjell Olav B (Private Practice)

A survey on attitudes towards sexual activities has been done at three different times, in 1987, 1997 and 2007/08. The same questionnaire was used in all three surveys. All studies were administered by MMI/Synovate. A representative sample was asked to answer the questionnaire (1120 in 1987, 1093 in 1997, and 1022 in 2007/8). The response rates were 59% in 1987, 64% in 1997 and 38% in 2007/08. Some of the most important findings from these three surveys will be presented, like: - There are more elderly respondents in the latest survey, and more men than women among the oldest respondents in the latest survey. There are more female than men respondents in the later surveys. - There are more single women in the latest study. - Love and intimacy as motives for sex are stable and high. Procreation is the least important motive for sex - The most important sexual activities are body contact with the partner, contact between sex organs, and foreplay. The importance of masturbation and the use of vibrators has increased. - There are minor changes in satisfaction with sex. - Sexual problems have decreased, particularly in men. There are 5% who are in need of professional help for sexual problems. The most important problems are ED in men, and pain problems and problems with sexual desire in women. Still, there are problems that are not accounted for, as both women and men have "other problems" that they need professional help for.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Norwegian newspapers: Dagbladet and VG

PO-2073

THE IMPORTANCE OF DIFFERENT ACTIVITIES IN ORDER TO BE SATISFIED WITH DAILY LIVING. CHANGES AND STABILITIES IN THE NORWEGIAN POPULATION OVER THREE DECADES.

Benestad Esben Esther P (University Of Agder, Norway), Almaas Elsa Mari (University Of Agder, Norway), Svendsen Kjell Olav Borén (Private Practice), Schaller Sissel (Institute For Clinical Sexology And Therapy, Oslo, Norway), Aars Haakon (Aker University Hospital, Oslo, Norway)

Attitudes concerning sexuality were surveyed in 1987, 1997 and 2007. Identical questionnaires were used, but for added questions in 2007. All was administered by MMI/Synovate and funded by Norwegian newspapers, the questionnaire developed by the presenters. A representative sample of Norwegians was asked to fill out the questionnaire. Response rates were 59% in 1987, 64% in 1997 and 38% in 2007/08. As a rule, differences in the total sample must be larger than 4-5% to be regarded as valid, and in the subgroups differences should be larger than 8-9%. This presentation focuses on the relation between activities and satisfaction with daily living. The activities are as follows: Washing/tidying, prepare food, go for walks, exercise, watch TV, have sex, read, go to the movies/theatre/concert, be with family/friends, sleep/get sufficient sleep, surf on the internet. Likewise the population's general satisfaction with their sexual life was questioned, and compared to marital status and frequency of intercourse. Cultural attitudes towards different activities and sexual life may have changed. Still the Norwegian population is stable as to what they value lower and higher. As for the activity of sex, there is a difference between the gender majorities worth attention. This difference is stable. Women and men rate the activity of having sex with the same preferences over the three decades. This difference can be interpreted both from cultural and biological perspectives, and it opens up for a focus on how small differences may grow into major problems.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2074

ROLE OF RASAYAN HERBS ON REPRODUCTIVE PARAMETERS OF MALE RATS

Chauhan Nagendra Singh (1. Department Of Pharmaceutical Sciences Dr. H.S. Gour University, Sagar (M.P.) India.), Dixit Vinod Kumar (1. Department Of Pharmaceutical Sciences Dr. H.S. Gour University, Sagar (M.P.) India.)

Rasayan drugs act inside the human body by modulating the neuro-endocrino-immune systems and have been found to be a rich source of possible therapeutic measure has become a subject of active scientific investigations. Vajikaran is one of the eight branches that deal with improving male sexual potency and thereby ensuring a suprajya, or better progeny. The main aim of Vajikaran besides achieving successful copulation for

healthy reproduction, with sexual pleasure is an additional benefit. The plant *Curculigo orchioides*, *Astercantha longifolia*, *Mucuna pruriens* are well known vajikaran rasayan herbs. The study was therefore performed to effect of these plants on reproductive parameters. Following parameters were evaluated the effect of extract on body and organ weights, change in histoarchitecture of testis, fructose level in seminal vesicles and hormonal level was studied. Administration of ethanolic extract had pronounced anabolic and spermatogenic effect in treated animals as evidenced by weight gains in the body and reproductive organs. Increase in spermatogenesis was shown in all treated group. The level of follicular stimulating hormone, leutinizing hormone and testosterone level is significantly increased in extract treated group and fructose content in seminal vesicles was significantly increases in treated groups. Thus it was concluded that drug was justifying the use in the traditional system of medicine as a vajikaran rasayana.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Thanks AICTE New Delhi India por providing fellowship

PO-2076

ATTITUDE OF ADOLESCENT GIRLS TOWARDS FAMILY LIFE EDUCATION: A COMPARISON OF RURAL AND URBAN AREAS OF INDIA.

Sharma Neeru (University Of Jammu), Mahajan Payal (University Of Jammu)

In a developing country like India, where conditions of poverty and ignorance are rampant the concept of Family Life Education(FLE) assumes different ramifications. In this context the present study was designed to assess the knowledge and attitude of adolescent girls(in school and out of school) regarding the issues in FLE-like health, nutrition, growth and development, HIV/AIDS, gender sensitization etc. The sample of 400 in school girls, 200 urban and 200 rural, was selected in a phased manner, from the urban and rural areas of Jammu District of the Jammu and Kashmir State of India. 50 out of school(drop outs) girls each from rural and urban areas under study were selected too. Tools used were questionnaire, Parent Child Relationship Scale and Family Planning and Birth Control Attitude Scale. Statistical analysis was done along with content analysis. Adolescents knowledge regarding areas of growth and development issues like puberty, menstruation and reproduction was poor, even when the school curriculum includes most of these topics. Further probing showed that teachers avoid topics such as 'Human Reproduction', 'Puberty' and 'Menarche', and these are usually left for self study. However urban school goers had more knowledge than rural school goers. Drop outs had more knowledge in certain areas than schoolgoers due to their interactions with the elders in their communities. A friendly approach (Saheli Approach) was developed and used in the intervention.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None disclosed

PO-2077

SEXUAL HARASSMENT

Kyambadde Geofrey Senyonjo (Youth Crime Watch Uganda), Senoga Francis (Youth Crime Watch Uganda), , Kaliisa Agram Bukenya (Youth Crime Watch Uganda)

Sexual harassment Abstract. Every person has a right to stay free from any kind of sexual harassment in our daily lives, in communities, home and work places. Sexual harassment is an act of sexual intimidation, threats against one's will, physically or mentally to either the girl, women and men. It is a form of discrimination and is unconstitutional. It involves physical, visual, verbal or non-verbal conduct of a sexual nature that is unwanted, intimidating, offensive and not reciprocated. If behavior is unwelcome, it can amount to sexual harassment even if the harasser is "innocent." Thus the criterion for 'unwelcome' is based on the perception of the victim and not that of the harasser. Both men and women can be sexually harassed. Sexual harassment can occur between equals, but most often occurs in situations when one person has power over another. Examples of Sexual Harassment include, but are not limited to: - Unwanted physical contact of intimate body parts, e.g., patting buttocks or stroking breasts, massaging any part of the body or scratching the palm of the hand; - Unwanted verbal communication, e.g. dirty jokes, derogatory sexual remarks, leering, persistent social invitations or threats that failure to oblige to sexual advances might lead to unfair treatment; - Exposure to sexually suggestive visual displays such as insinuating graphics, photographs, pictures, posters, calendars or other materials; - Sexual assault. Sexual harassment pollutes the working environment and can have a devastating effect upon the health, confidence, morale and performance of those affected by it.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2078

ITALIAN FEMALE SEXUAL FANTASIES: DO THEY REALLY DIFFER FROM MEN'S AND HAVE THEY CHANGED IN TIME?

Bianchi Tania (A.I.S.P.A. - Associazione Italiana Di Sessuologia E Psicologia Applicata, Milan, Italy),

Introduction: Sexual fantasies play an important role in boosting desire, managing anxiety and resolving traumatic experiences. Objectives: The aim of this ongoing research is to assess if erotic imagery, themes and scenarios, plus other variables such as frequency, really differ according to gender and if they have altered in recent years under the conditioning and pressure of a more permissive, modern lifestyle, in Italy. A further aim is to examine how, and if, they still relate to socio-cultural and socio-biological theories of female sexual tendencies.

Methods: More than 200 volunteers (aged 19-72) have contributed, so far, via guided and open-ended anonymous questionnaires, recorded audio-and-video interviews, telephone calls, focus groups, Internet forums, a dedicated Website and a P.O. Box.

Results: While some male and female fantasy stereotypes of the past seem to hold true still today, a cross-gender picture is arising. Most women are showing an increasingly open, unrestricted and varied approach to their sexual desires, free of guilt. Themes of role reversal, dominance and submission are present in both sexes, even though similar content can trigger different responses and have their origin in or be associated with emotional reasons and expectations of diverse nature.

Conclusion: Sexual fantasy scenarios are adopting images and ideas from the current culture and models portrayed in the media. Greater openness about sex is modifying the perception of what once could have been considered unusual or even “deviant” sex-scripts and, up to now, mostly hidden, denied or even repressed. A new evolving panorama is surfacing.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2079

LOVE EROTIC AND SEXUAL EDUCATION OF KOMAJA IN MACEDONIA

Sazdanovska Biljana (Komaja Macedonia), Colakov Rosano (Komaja Macedonia)

The study presents the main concepts of the program for Love-Erotic and Sexual Education of Komaja, which was promoted in the educational system in a patriarchal and traditional country such as Macedonia, where sexuality is still taboo. In this paper with narrative description is explained the curriculum which is designed to promote sexual education through comprehensive and creative programs that include lectures, workshops, theatre, and using media appearances as a tool. In Macedonian society where there is no formal sexual education at all, Komaja’s initiative and public campaign is among the first attempts for introduction of sexual education. The research also analyzes the goals of the program (consisted of lectures from biology, psychology, sociology, philosophy, spirituality) among which is that student will get to know, and adopt crucial, systematized and scientifically asserted knowledge from the field of sexuality, psychosocial health and the love-erotic aspect of a human being’s life and they will be encouraged for an active and responsible participation in the implementing of positive values in the sexual and love-erotic culture and in whole public life. Also, summarized here are the results from a survey in which the opinions of the high school students were polled about sexuality and the need for sexual education, realized in seven high schools where introductory lectures were held. The curriculum and the summed up results of the survey are handed over to the Ministry of Education and Science with the purpose of further review by an expert committee.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: The research is partially financed by Komaja Society for the Development of the Art of Living – Macedonia and Komaja Foundation - Switzerland

PO-2082

THE FEMALE SEXUAL RESPONSE CYCLE: DO MALAYSIAN WOMEN CONFORM TO THE CIRCULAR MODEL?

Hatta Sidi Hatta Sidi Hatta Sidi (Universiti Kebangsaan Malaysia), Nik Jaafar Nik Ruzyanei Nik Jaafar Nik Ruzyan (Universiti Kebangsaan Malaysia), , Lin Laing Lin Naing Lin Naing (Universiti Brunei Darussalam)

Introduction: The concept of a sexual response cycle (SRC) for women has gained interest lately with the re-introduction of terms with new definitions and a new model for the sexual response, especially the Basson’s circular model. AIM: To determine the correlations among the sexual response cycle’s phases (i.e. sexual desire, sexual arousal, orgasm, sexual satisfaction and sexual pain) in Malaysian women in order to validate the circular model of women’s SRC.

Main outcome measure: To measure the correlation between female sexual response cycle’s domain.

Methods: Principal component analysis (PCA), a factor analysis technique with varimax rotation method was used to explore the correlation structure of items in female respondents who scored on the Malay version of FSFI (Female Sexual Function Index). Number of factors or components to obtain was decided using Kaiser’s criteria.

Results: A total of 230 married women aged 18 – 70 years old participated in this study. Factor loadings using PCA with varimax rotation divided sexual domains into three components based on Kaiser’s criteria with eigenvalues of 6.11, 5.59 and 3.50 respectively. Sexual desire, sexual arousal and lubrication were highly correlated and therefore, they fall in one component, reflecting one construct, whereas orgasm and sexual satisfaction fall in another component. The third component is formed by the pain items.

Conclusion: The strong correlation between sexual desire/arousal/lubrication means that they were the same and may support the contemporary theory of circular model of SRC in women.

Conflict of Interest: None disclosed

Financial Support/Funding: Self-fundings

PO-2083

THE FIRST EVER SEXOLOGY OFFICE IN IRAN.

Hagh Del Mohammad (Private Medical Practice)

Among medical specialties sexology is unheard of in Iran. Hereby I present diagnostics and treatments and some sociocultural peculiarities in my practice in a random sample of 40 couples who have consulted in the period of July 1st 2008 to March 1st 2009. After the revolution of 1979 for ten years the young republic denied family planning programs declaring them immoral. The accentuated economical problems and the rampant poverty made the authorities to think twice over their rigid morals [1]. The prevalence of HIV infection has tripled in the period of 1997 to 2004 [2] and the new infections are no more the intravenous drug abusers in prisons but of married couples. In nowadays Iran the need for sexual education is prominent in the poorest suburbs and among the least favored provinces [3]. The

Iranian youth braves the limits and search for a transparent sexual education [4].

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Conflict of Interest: No conflicts of interest

Financial Support/Funding: Personal private practice and funding. No sponsors.

PO-2086

ROLE OF AYURVEDIC RASAYANA HERBS IN IMPROVEMENT OF REPRODUCTIVE FUNCTION

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Rasayana is not a drug therapy, but is a specialized procedure practiced in the form of rejuvenation recipes, dietary regimen and special health promoting right conduct and the modulation of immune response by using medicinal plant as a 'Rasayana' enhances the functions of the whole body system. Rasayana' drugs act inside the human body by modulating the neuro-endocrino-immune systems and have been found to be a rich source of possible therapeutic measure has become a subject of active scientific investigations. Vajikarna Rasayana are ayurvedic aphrodisiacs. The main aim of Vajikaran Rasayana besides achieving successful copulation for healthy reproduction, with sexual pleasure is an additional benefit. In general Vajikarna are used for the production and purification of shukra (this term is used for vital fluid and also for sperm and spermatid fluids). The vital fluid is considered the essence of all functions of the body, which results in fame, beauty, strength and power. It is the result of the metabolic activities of the human body. This paper will reviews the herbs that are reported in ayurveda for improvement of male reproductive function.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Thanks AICTE For Providing fellowship

PO-2088

YOUNG WOMEN'S SEXUAL HEALTH AND THEIR VIEWS ON DIALOGUE WITH HEALTH PROFESSIONALS

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ences, Halmstad University), Westerståhl Anna K (Department Of Public Health And Community Medicine, Göteborg University), Baigi Amir (Research And Development Unit, General Practice And Public Health), Marklund Bertil R G (Research And Development Unit, General Practice And Public Health)

Introduction and objective: Sexuality can both foster and impede the development of personal identity, well being and health. Many women who experience sexual problems or who have been subject to sexual abuse do not seek help and often health professionals avoid raising such issues. To describe young women's sexual health and their views on a dialogue about aspects of sexuality in connection with a gynecologic examination.

Method: Cross sectional study. Women, 23, 26 and 29 years of age, called for gynecologic screening between March and July 2006 (n = 488, response rate 75 %). Descriptive statistics, multiple logistic regression and bivariate analysis were used.

Results: The majority (95 %) had a positive attitude towards sexuality although many women reported sexual problems and one fifth (22 %) were dissatisfied with their sex life. Women considered it appropriate to be asked about sexuality in general (92 %), while a majority (72 %) found questions about sexual abuse appropriate. However, depending on the area, the majority (76 - 99 %) had never been asked such questions. Demographic variables, aspects of life, sexuality and sexual abuse were irrelevant for whether women considered it appropriate to be asked questions about aspects of sexuality, by a midwife/doctor in connection with a gynecologic examination.

Conclusion: The result can activate health professionals to initiate a dialogue about sexual issues among young women. In this way, many women who experience sexual problems or have been subject to sexual abuse, may provide an opportunity to improve their sexual health.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Research funding from Halland County Council

PO-2089

COGNITIVE SCHEMAS AND SEXUAL DYSFUNCTION: INTERPRETATION OF NEGATIVE SEXUAL EVENTS PREDICTS SEXUAL PROBLEMS IN MEN AND WOMEN

Nobre Pedro J. (Departamento De Educação E Psicologia, Utad, Portugal), Pinto-Gouveia José (Faculdade De Psicologia E Ciências Da Educação Da Universidade De Coimbra)

Introduction: Few studies have explored the role of cognitive schemas on sexual functioning. In fact, despite constituting a central component of the cognitive theory, the application of the schema concept to sexual dysfunctions has only recently begun to be noted (Andersen & Cyranowski, 1994; Kuffel & Heiman, 2006). The aim of the present study was to investigate the differences between individuals (men and women) with and without sexual dysfunction on the cognitive schemas activated during sexual activity.

Methods: A total of 376 participants (96 with a DSM-IV diagnosis of sexual dysfunction and 280 controls) answered the Questionnaire of Cognitive

Schema Activation in Sexual Context (Nobre & Pinto-Gouveia, 2007), the International Index of Erectile Function (Rosen et al., 1997), or the Female Sexual Function Index (Rosen et al., 2000).

Results: Results showed that participants with sexual dysfunction activated significantly more negative schemas when exposed to negative sexual events, compared to sexually healthy individuals (after controlling for the frequency of negative sexual events experienced by the clinical and control groups). Most men and women with sexual difficulties interpreted negative sexual events according to an incompetence self-schema (I'm incompetent, I'm a failure). Moreover, men and women did not show significant differences in the frequency in which they activate specific negative cognitive schemas when exposed to similar negative sexual events.

Conclusions: Findings seem to be congruent with recent research indicating the tendency shown by individuals with sexual dysfunction to present attributions of an internal, stable, and global nature to negative sexual events (Weisberg, et

Conflict of Interest: Portuguese Scientific Foundation (FCT)

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PO-2092

LOVE EROTIC AND SEXUAL EDUCATION OF KOMAJA IN MACEDONIA

Sazdanovska Biljana (Komaja - Society For Development Of The Art Of Living - Macedonia), Colakov Rosano (Komaja - Society For Development Of The Art Of Living - Macedonia)

The study presents the main concepts of the program for Love-Erotic and Sexual Education of Komaja, which was promoted in the educational system in a patriarchal and traditional country such as Macedonia, where sexuality is still taboo. In this paper with narrative description is explained the curriculum which is designed to promote sexual education through comprehensive and creative programs that include lectures, workshops, theatre, and using media appearances as a tool. In Macedonian society where there is no formal sexual education at all, Komaja's initiative and public campaign is among the first attempts for introduction of sexual education. The research also analyzes the goals of the program (consisted of lectures from biology, psychology, sociology, philosophy, spirituality) among which is that student will get to know, and adopt crucial, systematized and scientifically asserted knowledge from the field of sexuality, psychosocial health and the love-erotic aspect of a human being's life and they will be encouraged for an active and responsible participation in the implementing of positive values in the sexual and love-erotic culture and in whole public life. Also, summarized here are the results from a survey in which the opinions of the high school students were polled about sexuality and the need for sexual education, realized in seven high schools where introductory lectures were held. The curriculum and the summed up results of the survey are handed over to the Ministry of Education and Science with the purpose of further review by an expert committee.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: The research is partially financed by Komaja Society for the Development of the Art of Living – Macedonia and Komaja Foundation - Switzerland

PO-2094

ABSTINENCE AND SEXUAL CONFUSIONS IN THE APPROACH OF THE CHILDBIRTH AT THE PRIMIGRAVIDA WOMEN.

Mohamed Laid Alimi (University Of Tunis), Tarek Bellaaj Tarek (University Of Tunis), , Riadh Ben Rejeb

Abstract: This study in projective clinic psychology proposes to evaluate the Lived sexual near 70 pregnant women divided into 2 groups of 35: in 1st and 2nd pregnancy). Both groups are forward of their pregnancy and in the approach of the childbirth. In the light of an interview tested in Tunisia (2005). The method of interview allowed us to feel fluctuations in the image of the body and the representation of one which go of the self-respect to the depreciation of one, to primigravida From there, the stomach is represented as fragile part of the body. This part is represented by the primigravida women, as erogenous zone and source of dreaded libidinal impulses. This reveals a state of anxiety and under respect centred particularly on a symbolic and very valued part of the body, for every woman; it is the organ of reproduction, maternity and sexuality. The fear of mutilation, destruction, explosion and loss of object (foetus) implies a narcissistic and objectal disinvestment in the approach of the childbirth. The sexuality is reduced to the fault and to the shame to primigravida. Others take refuge with the abstinence, to protect the foetus which is conceived as judge implying a decline of the sexual pleasure, the interruption of the sexual relations ending in the abstinence. Multigravida women show a double constraint: foetus and elder child seem to disrupt more the progress of the sexual activity. However, by remembering itself of

Conflict of Interest: Thesis of PH D

Financial Support/Funding: None disclosed

PO-2097

WHAT ARE THEY LEARNING: LESSONS ABOUT HIV IN IN- DONESIAN PRIMARY AND SECONDARY SCHOOL TEXTBOOKS

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After struggling to incorporate comprehensive reproductive health-sexual-

ity education in the Indonesian national school curricula, the Indonesian Government has added information on anatomical and normative aspects of reproduction and STDs/HIV/AIDS to the curricula of selected subjects. This paper assesses the content of primary and secondary school text books that reflect the new curriculum. More than 150 books were reviewed using a Reproductive Health Analysis Module developed by the authors to evaluate the depth of information given in Biology, Science, Sport and Health Education, Social Sciences and Islamic Religion text books. The assessment covered the type of information given, anatomical accuracy, gender depictions, and the social and religious values applied to issues of HIV/AIDS, reproductive health and sexual. The most comprehensive book that provide detailed and progressive information on HIV/AIDS can be identified based on the scores provided by the authors. The study also considers the grade at which the information is provided and its appropriateness to children's development stages. Though the content of HIV/AIDS information varied between books, both in primary and secondary schools HIV/AIDS information is comprehensively described and included in Sport and Health Education textbooks as well as in some Social Sciences books. Nevertheless in explaining various ways to avoid transmission, many books reflect narrow conservative assumptions about behaviour and fail to mention safe sex strategies or the efficacy of condom use. Interestingly the gender depictions on HIV/AIDS information was minimal as compared with information on sexual harassment where women and girls were mostly described as causing such problem.

Conflict of Interest: None disclosed

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PO-2099

SOCI-CULTURAL IMPLICATIONS OF SEXUALITY PATTERNS ON SEXUAL LITERACY AMONG HAUSAM IBO AND YORUBA YOUTHS OF NIGERIA,

Onwuama Mercy A.C (University Of Lagos), Onwuama Mercy A.C (University Of Lagos)

Introduction: Study determined variations in youths sexual behaviors based on socio-cultural processes, perceptions of sexuality before and after exposure to sexuality education.

Methods: Expost facto research design was adopted to examine indigenous sexuality education, content of in-school sexuality education, implementation methods and evaluation. 600 participants selected through purposive sampling. Data collection with questionnaire. Descriptive statistics of frequency counts, percentages determined characteristics of target groups. Correlation analysis measured relationship between youth's knowledge and sexual behavior. Findings and discussions: Indigenous sexuality education taught by parents 435 (71%), issued as warnings 515 (86%) by peers 144 (24%). Structured sexuality education available at Junior Secondary school 360 (60%) while sexuality awareness campaign were organized for students 420 (70%). Appropriateness of content was 252 (42%)

taught by Health care providers 320 (53%) or School health officers. Socio-cultural activities 520 (87%) and ethnicity 320 (53%) influenced disposition and significantly related to sexual patterns, Sex role play by boys and girls 530(88%), Flirting by girls 480 (80%) and early marriages 411(69%). Revealed that Nigerian youths face several challenges: Diverse and contradictory values and messages, little access to formal channels of sexuality education and reproductive health practices. Observed are missing gaps between indigenous sexual literacy and structured sexuality education and suggested changes and modalities by which sexuality education can improve sexual behavior of youths.

Recommendations: There is need for clear ideas about different challenges or changes desired and obstacles. Revisit health and educational Policies and examine determinants of negative youth influences.

Conflict of Interest: None disclosed

Financial Support/Funding: PRIVATE- RESEARCHERS FUNDED STUDY

PO-2100

THE POWER DISPLAY AND MEANING IN PREMARITAL SEXUAL INTERACTION OF ADOLESCENT GIRLS

Sung Su-Ching (Department Of Nursing, Chang Gung Institute Of Technology), Yang Hsing-Chen (Graduate School Of Human Sexuality, Shu-Te University)

This study explores how nursing female students treat premarital sex, sexual relations in the power of interactive display and conferred by the practice of sexual practices. Through depth interviews on seven nursing female students, the results found that they showed ambivalent attitudes and thoughts to premarital sex because of conflict of the traditional values and personal expectations, such as virgin's complex and peer and public pressure. Moreover, during the initial stage of sex negotiations, their attitudes were mostly passive, and their sexual desires were unclear and constraining. But through the transformation of experiences, they can then give a hint to express their sexual desires. Finally, about the meanings of sexual practices, they would link sex with marriage, and thought that sex is the beginning of establishing and stabilizing the long-term relationship. They are gradually able to reflect their sexual desires and meanings of their bodies after those sexual practices. Also, this reminded them the course of their losing the control of their virginity. Their power expression of the sexual relationship was still limited by the stereotype of femininity under the social norm. This study suggests that sexuality educators should consider helping young female students explore sexual intimacy in the sexuality education and gender education courses, learn how to positively look at their own bodies and sexual desires, and understand the hidden sex power relationship during desire expression and practice in order to overcome the stereotype of traditional sex relationship.

Conflict of Interest: None disclosed

Financial Support/Funding: NO

PO-2101

UNFPA INITIATIVE IN PROMOTING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS IN BANGLADESH

Ara Zaman (Unfpa), Bogren Malin (Unfpa)

Sexual and Reproductive health (SRH) is crucial for the achievement of the MDGs. Access to family planning services; safe motherhood; prevention as well as treatment of sexual transmitted infections, including HIV/AIDS; and the elimination of gender violence would improve the lives of the poor and spur socio-economic development. UNFPA assists Bangladesh to improve SRH and Family Planning services and to formulate population policies in support of efforts towards sustainable development. The Goal of UNFPA in Bangladesh is to contribute for improving the Reproductive Health status of the population and the priority areas are Safe Motherhood, Family Planning, SRH information and services for adolescents and youth, STI/HIV/AIDS, promoting gender equality and equity. SRH services are being strengthened and expanded through continued support to improve capacity of service providers at different levels through partnerships with MOH&FW and other ministries, NGOs, development partners, UN agencies, private sectors and other stakeholders. Women and girls are supported and empowered to make decisions about their Sexual & Reproductive Health and Rights. Special efforts are being undertaken in some pockets where concentration of poverty and destitution is heavy. Positive behavioral change and community mobilization are being fostered to enhance the Reproductive Health & Rights of women and adolescent girls through life skills training and peer-group approach for their personal development and awareness building on STI/HIV/AIDS. Despite various efforts taken by the government and other agencies, there remained major challenges in achieving the goal of ensuring universal access to reproductive health services.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2104

BEAUTY MANAGEMENT OF SEXUAL VARIANT ADOLESCENCES: THE CASE STUDY OF TRANSEXUAL AND TRANSVESTITE MALE ADOLESCENCES IN A SCHOOL

Onpanna Prawit - (Phd Student (Public Health)), Daosodsai Paiboond - (Assistant Professor, Khonkhane University, Thailand)

This article aims to study about boy sexual variance adolescence; transsexuals and transvestites with beauty management in qualified of method, expectation, satisfaction, enforcement, and other concern behaviors. Because of strength sexual appearance from general male and female, so they attempt to investigate the self-appropriated methods for body and mind matching and demonstrate with their individual pattern. For descriptive and qualitative research by case series with an in-depth interview technique for data collecting. One school in one province in Thailand was selected by purposive sampling and finally we got the 31 cases of transsexuals and transvestites case series who is sexual variance self-acceptation and self-

opening. There was 17 boys with transsexual only (54.8%) and 14 boys with both transsexual and transvestite (45.2%). We found 12 beauty management methods which were arranged by popular providing consisted of; 1.Face foaming/soaping (90.0%), 2. Cream/lotion using (90.0%), 3. Female ornament using (54.8%), 4. Face make-up (45.2%), 5. Face powdering/lip gross (48.4%), 6. Estrogenic cross-sex hormone (26.7%), 7. face massage and masking (26.7%), 8. longing nail (16.1%), 9. beauty salon or beauty shop (16.1%), 10. Anti-acne product (13.4%), 11.Vitamin supplement or health product (6.4%), 12.Teeth arrangement (6.4%), respectively. The 3 most beauty expectations are 1. Beauty skin: soft-tender, non-wrinkle and white (70.0%), 2. a great personality (40.0%), 3. non-acne and non-oily face (36.7%), respectively. Most of them had beauty satisfaction in the range of medium to high except for part of hair. Beauty management

Conflict of Interest: faculty of Pharmaceutical science, Khonkhane University, Thailand

Financial Support/Funding: None disclosed

PO-2105

FIVE PRINCIPLES OF HAPPY LIFE

Das Singh Siva (Cochin Mental Health Center)

Food, sleep, exercise, enjoyments/fun, relaxation are the five key components of this presentation . Each individual, what ever may be the the caste , creed or this community or nation is advised to balance the five components for a happy life ,especially in the married life and sex.Since the proposition is broad each individual has to develop his /her own system of life respecting the five components. This will help to maintain the biological rythum and natuural flow of life. The imbalance can lead to many pathololigal state of mind and body which can lead to conditions from unpleasantness to serious mental and physical illness. For building intimacy between the partners and and there by having a deep emotional relation can be the basic of emotional and physical relation especially sexuality. The five components are brought out with examples and statistics

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None disclosed

PO-2106

STOP, TALK, LISTEN - A NEW WAY TO DISCUSS SAFER SEX!

Larsdotter Suzann (Rfsl Förbundet)

Stop Talk Listen – A New Way to Discuss Safer Sex! In our effort to find new ways to address HIV and STI prevention, RFSL has produced Stop Talk Listen—a party game that offers exciting possibilities to reflect on sexuality and share experiences in an approving and non-moralizing manner. Stop Talk Listen is a new and efficient way to work with HIV prevention within a group. Research has shown that group-level interventions are particularly effective, especially when combined as multi-component interventions containing cognitive elements. Sexual norms are shaped, main-

tained and changed through social interaction between people. The intention of this game is reach the players on different levels; in fantasy, thinking, dreams, identity and the experience of being your sexual self—how you live with your sexuality. Methods that move you to reflect, influence and deeply involve you to make an active choice are particularly effective. Stop Talk Listen combines knowledge transfer with more reflective questions about sexuality. The game itself is lead by a play-coach who is «one of the gang». Several researchers emphasize that peer-education is a key factor in successful HIV prevention. A Swedish study about men who have sex with men (MSM) showed a need of education regarding HIV and STI's. In developing the game, a priority question was, «How to communicate about your own and sex partners' HIV status?» RFSL wanted to take the needs of talking sex in the MSM group and adapt them to effective HIV prevention.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2108

A STUDY OF SEXUAL EXPERIENCE AND CONTRACEPTIVE FACTORS AMONG ADOLESCENTS IN TAIWAN

Lou Jiunn-Horng

Introduction and objectives: The purpose of this study was to understand the sexual experience and contraception-related factors among adolescents in Taiwan.

Methods: A description analysis, a cross-sectional design, and a structured questionnaire were used to collect data from a nursing college in central Taiwan. A total of 850 questionnaires were issued, with 721 valid copies replied, yielding a response rate of 84.8%.

Results: The findings showed the embarrassment at purchasing contraceptive devices and the factor affecting sexual pleasure could affect the contraceptive use of adolescents. Adolescents were found less willing to use contraceptive devices. Besides, the contraceptive devices were often not in readiness for sexual intercourse. The willingness of using contraceptive devices was affected by their sexual partners' attitudes toward contraceptive use. Furthermore, adolescents with sexual experiences had higher correct contraceptive knowledge and positive contraceptive attitudes than those without any sexual experiences.

Conclusion: In conclusion, the data provided in the article indicated that the contraceptive use of adolescents could be affected by the contraceptive attitudes of their sexual partners. In addition, adolescents with sexual experiences had much correct cognition and positive attitudes on contraceptive knowledge and contraceptive attitudes. The results of this study may serve as a reference for the promotion of sexual health education for adolescents.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None disclosed

PO-2109

SEXUAL HEALTH ON EQUAL TERMS

Birgerson Cecilia (Sjukvårdsrådgivningen Svr Ab), Alsing Sofia (Sjukvårdsrådgivningen Svr Ab)

In July 2007, the Ministry of Integration and Gender Equality decided to fund the development of a website on the issues of sexuality, health and relationships for young people in Sweden. The website, UMO.se, was launched in November 2008 by Sjukvårdsrådgivningen SVR AB, a company owned by the community councils and municipalities which provide healthcare services to Swedish citizens. UMO contains texts, illustrations, films and interactive material that have the purpose of increasing knowledge and opportunities of self-reflection through which young people may influence their own life. UMO is dedicated to increase and improve the opportunities of empowerment and of equality in young people's lives. An important service on UMO.se is the possibility to pose anonymous questions to a professional and receive a personal answer. The target group, young people 13-25, has been actively involved in developing UMO, through a reference group with different backgrounds, sexes, sexual orientation, ethnicities and interests. The core values throughout the project have been empowerment and anti-oppressive learning in the intersection of race, gender, religion, and sexuality. The group working to realize UMO consists of people from several different fields; journalism, IT, web accessibility, experts in gender equality, medicine, midwifery etcetera. The guiding principle for our work is to create a website for all young people in Sweden, regardless of socio-economic status, gender, sexuality, race, religion, physical capability etcetera. All material published on UMO.se is reviewed according to UMO: s quality principles.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2111

INNER AND OUTER SEXUAL DESIRE AMONG MUSLIM WOMEN IN CAIRO

Malmström Maria F (Social Anthropology, School Of Global Studies)

In this paper I discuss experiences of sexual desire in relation to discourses of sexuality in the context of 'circumcised' Muslim women. The fieldwork was carried out in lower class neighbourhoods of Cairo from August 2002 until July 2003. The politics of female 'circumcision' in relation to women's lived experiences and social meanings of the practice was studied. A qualitative and ethically sensitive methodology of participant observation guided the research. A pervasive cultural notion among my interlocutors is that women are born with two kinds of sexual desire, one inner and one outer. The outer is seen as superfluous and can be removed without destroying the inner sexuality. In the female genital mutilation discourse, 'female circumcision' is presented as mutilation of healthy parts of the body and the underlying purpose is presumed to be patriarchal control of women's bodies and sexuality. Among the Cairo women, however, the social control of sexual lust among adolescents is seen as something positive and desirable. Sexual pleas-

ure within marriage is encouraged and female circumcision is not perceived to be an obstacle for experiencing sexual enjoyment. If we analyse female circumcision and sexuality from a local perspective, a more complex picture emerges that differs from that of patriarchal control over female sexuality. This paper provides new ethnographic data on a sexual ideology which contrasts with sexual ideologies of the West.

Conflict of Interest: SAREC

Financial Support/Funding: None disclosed

PO-2112

SEXUALITY AND SEXUAL FUNCTIONING IN PERSONS WITH SPINA BIFIDA

Grimsrud Karen (Trs, Sunnaas Sykehus), Wallace Mette (Sykehuset Ostfold Hf), , Mathiassen Tove Byrmo (Ryggmargsbrokk- Og Hydrocephalusforeningen)

Young people with Spina Bifida (SB) find their sexual identity, fall in love, experience arousal and seek physical companionship, as their peers do. Many enter into relationships and are sexually active. Some enter into partnerships and become parents. This can provide some extra challenges, because SB is a complex condition affecting physical, cognitive and adaptive functioning. SB is a birth defect caused by incomplete neural tube development. The lower body and legs can be without sensibility, there can be urinary and intestinal problems and changes in development of the brain can give cognitive difficulties. There has been little research into how Spina Bifida affects sexuality. In the brochure Seksualitet og Ryggmargsbrokk (Sexuality and Spina Bifida), we have gathered most of the factual material there is in this area. The information has been asked for from those who have the diagnosis, their partners, their relatives and health personal. Some of the content is based on conversations with persons with SB. The brochure is a joint effort by sexology counsellor Mette Wallace, Ostfold Hospital trust, Section for Child Rehabilitation; Tove Byrmo Mathiassen from the Spina Bifida and Hydrocephalus Association; and specialist nurse Karen Grimsrud, TRS National Centre for Rare Disorders, Sunnaas Rehabilitation Hospital. The brochure has received support from Norwegian Directorate of Health. We hope to inspire others in order to obtain more knowledge on sexuality amongst disabled persons.

Conflict of Interest: None disclosed

Financial Support/Funding: Helsedirektoratet, Norway

PO-2114

ROLE OF PRANAYAMAS IN CHRONIC DISEASES AND ERECTILE DYSFUNCTION

Karajaonkar Giridhar Madanrao (Karajaonkar Hospital)

Abstract: The stress – disease – stress is vicious circle and is to be broken. Modern science has certain remedies on these problems in the form of medicines. But it has side effects and limitation. Unfortunately some of the dis-

eases like hypertension, diabetes are not curable but can be controlled only with the help of modern Science. There is no medicine, which controls the mind, which causes disturbance in psychology. The ancient Rushies has formulated the infrastructure of lifestyle through which a good quality of life with disease free body and mind can be lived. The Pranayama means pran shakti,(energy or vital force) which is required for each and every action. This energy is expanded or generated. The generation and expansion of energy is ayama. Patanjali defined pranayama as tasmimsati shwas -prashwas-yogartiviccheda: pranayama meaning to control the normal rate of respiration i.e. inspiration and expiration. In pranayama more oxygen is available to the body for cellular metabolism, which in turn will create more energy. Increase in oxygen levels in blood, Increase in flow of blood by vasodilatation, Increase in circulation by increase of venous return and cardiac out put. The present study enrolled n=400 patients of diabetes, hypertension, obesity, and depression. The parameters studied were, Blood pressure, FBSL, PPBSL, Serum Cholesterol, body weight and body mass respectively. The Patients were subjected to the various Pranayamas for a period of 1 month. All the previous medicines were stopped, no other procedures were allowed. Results indicate that the pranayama reduces

Conflict of Interest: None disclosed

Financial Support/Funding: no

PO-2119

SEXUAL EMPOWERMENT OF ADOLESCENT GIRLS, AND MEASURING IT

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Objectives: The purpose of this study is to evaluate the effects of Girls' Talk, a gender specific, culturally sensitive group counselling programme for adolescent girls in the Netherlands. The program is build up in eight 1,5-hour sessions and aims at sexual empowerment and improvement of sexual health.

Methods: Effects were evaluated in a quasi-experimental design with experimental (n = 56) and control group (n = 38). Quantitative data on sexual self-image, sexual knowledge, sexual conservatism and self-efficacy were assessed pre-test and at a four months follow-up by means of a self-administered questionnaire. Qualitative data were collected by interviewing post-test all counsellors, by a logbook, and by open-ended questions in post-test questionnaires for participants.

Results: Both participants and counsellors evaluate the programme highly positive. Counsellors assert that the girls communicated more openly about sexuality and were more self-confident and positive about their sexual rights. Quantitative data analysis revealed improvement in terms of sexual self-esteem, lack of control in sexual situations, sexual anxiety, self-efficacy, sexual knowledge and sexual conservatism. However, the control group improved on most parameters as well.

Conclusion: The programme clearly fills the needs of both professionals and adolescent girls to address issues of sexuality and intimacy. However,

effects on self-reported outcome measures are not impressive, probably because of methodological problems such as contamination, response shift, pre-test effects and a by definition limited standardisation in tailored interventions. The overall appropriateness of a pre-post design in measuring effectiveness of interventions among adolescent girls is discussed.

Conflict of Interest: None disclosed

Financial Support/Funding: ZonMw, Dutch Ministry of Health

PO-2120

KNOWLEDGE OF THE HUMAN PAPILLOMAVIRUS AND THE CERVICAL CANCER IN KOREAN NURSES

Kim Haewon (Kwandong University), Ji Sowoon (Gangreung Asan Hospital)

Introduction & objectives: HPV has been known as a most common STDs and some of HPV types have been known as a significant causing factors of cervical cancer. Therefore, cervical cancer prevention should be done combined with prevention of HPV infection. However, until today, HPV awareness has not been clearly understood in the general populations as well as the nurses. Nurses as a sexuality educators, they should be knowledgeable in recent updated HPV information which is more rapidly increasing. This study is to aim to identify the level of knowledge in relation to HPV with cervical cancer in Korean nurses.

Methods : Survey was done with self administered questionnaire including HPV and cervical cancer knowledge. 224 nurses were conveniently selected from one hospital of more than 600 beds. Data were analyzed quantitatively using SPSS/PC win.

Results : The level of knowledge of HPV and cervical cancer was low. Subjects answered the many questions as don't know the range of 32.6% to 64.3%.

Conclusions : Nurses in this study were not significantly different with general person or students. This implies the urgent sexuality education in relation to HPV linked with cervical cancer is needed for the general person as well as the nurses.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: This work was supported by the Kore Research Foundation grant funded by the Korean Government(MORHRD)(KRF-2008-531-E00089)

PO-2123

SOCIO-ECONOMIC-CULTURAL REALITIES AND HIV/AIDS VULNERABILITY: A STUDY ON STREET BASED SEX-WORKERS OF RAJSHAHI CITY OF BANGLADESH

Panday Pradip Kumar (University Of Sheffield)

Introduction: Although the infection rate among the sex-workers has crossed over 1% in Bangladesh however, due to different socio-economic and cultural the street based sex-workers (SBSWs) are vulnerable to HIV/AIDS. The main

objective of this paper is to find out the socio-economic-cultural issues that make the SBSWs vulnerable to HIV/AIDS infection.

Methods: For conducting the study SBSWs of Rajshahi City Corporation has been selected as the case. One hundred SBSWs (25 from each thana) were interviewed purposively from April 2008 to June 2008.

Findings and Discussions: SBSWs are really risky for the transmission of HIV as they seldom use condoms as to protect themselves from the disease. Almost half of the SBSWs are married and less than 40% have been using condoms with customers during the last month of the interview although the customer turnover rate is more than 4 per SBSW. Moreover, less than 30% of the respondents use to have their HIV test in the last year although it is free in some clinics and hospitals. Almost 50% of the sex-workers are found who do not want them to be exposed to general mass. The result shows that SBSWs are really vulnerable in the rapid expansion of the disease and suddenly the prevalence rate can cross over the epidemic level which might be disastrous for the poor country.

Recommendations: Awareness building, employment generation through micro-credit programmes and empowerment of the SBSWs are necessary to control this disease effectively.

Conflict of Interest: The feedback would help me to write up my dissertation.

Financial Support/Funding: Doctoral Research under Overseas Research Scholarship Scheme

PO-2125

ERECTILE DYSFUNCTION AND SEXUAL PHOBIA: CASE REPORT

Cedres Santiago, Ibarra Dario

Background: A person with a sexual aversion disorder has an intense aversion to sexual contact or related experiences. It is an extreme form of disorder in sexual arousal. Some people experience intense anxiety - even panic - at the thought of any sexual interaction. Others feel fear, terror, or disgust about a specific kind of activity, such as sexual intercourse or contact with genitals. Erectile dysfunction is a frequent symptom in male patient suffering from sexual phobia.

Introduction: We present a 38 years old male patient, virgin, suffering from erectile dysfunction, with permanent fear of being gay. This was an obsessive thought since he was 20.

Objectives: To find the correct treatment strategy that let him share his sexuality with a gay partner he had just met.

Methods: It was a 4 month treatment with psychologist and medical sexologist. It included Psychological treatment trying to influence the thoughts and feelings about sexual contact, sex therapy, and oral Fluvoxamine 100mg daily.

Results: The patient could enjoy a healthy gay sexual relationship with his partner after 4 month of treatment.

Conclusion: The sex therapy must works with the patient in an individualized manner, beginning with a discussion of his or her personal and sex-

ual history. Medication like anti-depressants can support the treatment. It is important that clinicians be aware of this aspect of social phobia and initiate open discussions of sexual problems with patients

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2127

IMPACT OF THE METABOLIC SYNDROME ON THE MANAGEMENT OF ERECTILE DYSFUNCTION

Anis Tarek

Metabolic syndrome (MS) refers to the clustering of several cardio-metabolic risk factors, including abdominal obesity, hyperglycemia, dyslipidaemia, and elevated blood pressure. The experts of the National Cholesterol Education Program Adult Treatment Panel III created one of the widely accepted definitions of MS in 2001. In this definition, abdominal obesity, high blood pressure, and high fasting blood glucose (FBG), high triglyceride (TG), and low high-density lipoprotein (HDL) cholesterol levels have been suggested as risk factors for MS. The presence of any three of the five factors has been defined as MS. Recent studies support the notion that these metabolic abnormalities do indeed cluster beyond the effect of chance, and that a single factor may underlie the association. That insulin resistance and abdominal obesity, key components of this cluster, are also associated with perturbations in plasma adipokine levels, altered fatty acid metabolism, endothelial dysfunction, pro-coagulant state and systemic inflammation underscores the breadth and complexity of the patho-physiology of this clustering, which is still poorly understood. In addition to cardiovascular disease and diabetes, insulin resistance is also associated with a wide spectrum of clinical disorders, including polycystic ovary syndrome, non-alcoholic fatty liver disease, sleep-disordered breathing, hypogonadism, chronic kidney disease and certain cancers. The National Health and Nutrition Examination Survey 1999–2002 estimated the age-adjusted prevalence of MS in US adults aged 20 years and over to be 39.1%. Similar to erectile dysfunction, MS is more prevalent with increasing age, affecting half of adults aged 60 years and over. The prevalence of MS is increasing in

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2128

THE ROLE OF COMMUNITY BASED SKILLED BIRTH ATTENDANTS IN ENSURING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Bogren Malin Kristin (Unfp), Ara Zaman (Unfp)

Introduction: This paper describes the importance of the Community Based Skilled Birth Attendants (CSBAS) role in ensuring Sexual and Reproductive Health and Rights in the rural area of Bangladesh. In the existing patriarchal society in Bangladesh women are attributed to low social

status and minimal social roles. More often they are recognized primarily for their childbearing capacity. This “devaluation” of women often leads to a denial of basic rights – such as the rights to access to information and neglected in education.

Action: The Government of Bangladesh has taken a tremendous effort to improve the maternal health situation by providing training to the Family Welfare Assistant (FWA) and Female Health Assistant (FeHA) as CSBAs in a step to contribute to obtain the MDG 4&5, and further to guarantee Reproductive and Sexual health and Rights particular for the poor and vulnerable women in the country.

Outcome: By training these multipurpose community workers with specific midwifery competence from six months up to 18 months, has created a demand for better services to pregnant women in the community. These community workers are not only conducting safe home deliveries but are also empowering and developing awareness in sexual and reproductive health and rights.

Discussion and Recommendations: Rights to sexual and reproductive health services are the key for a healthier and an equitable society. Further attention is needed on discussions on sexuality education for young people on policy level.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2135

NORWEGIAN HABILITATION SERVICES' NETWORK ON DISABILITY AND SEXUALITY

Wallace Mette

Abstract: The network “Habilitation Services in Norway: Disability and Sexuality” was started in 1998. The target group is professionals working in habilitation and rehabilitation services in Norway, and with an interest in issues concerning disability and sexuality. The objective of the network is to communicate knowledge relating to disability and sexuality. The network aims to contribute to increase competence in this field. Our governing board applies for government funds to sustain its own work as well as supporting its annual conference. The annual network meeting is held in connection with our annual network conference once a year. The network board consist of five members, each representing one of the five health regions in Norway. Habilitation centers work with children, youths and adults with congenital or early-acquired disabilities. Some of the questions we address are the need for knowledge about sexuality, including masturbation, use of sex aids, sexual victimization, contraception, clients' thoughts about parenthood, and advice for parents on their children's puberty and sexuality. Our network still enjoys solid economic support from government agencies and will carry on with our important work!

Conflict of Interest: None disclosed

Financial Support/Funding: The Network receives funds from the government

PO-2139

SEXUAL AWARENESS AND BEHAVIOUR AMONG YOUTHS IN NIGERIA

Sangosanya Babajide O

Introduction: Sex is a taboo word in Nigeria and thus knowledge of sexuality is usually obtained from questionable sources resulting in sexual behavior and expression being suppressed or disguised, causing a misconception about the real situation of the sexuality of the average Nigerian. However the HIV/AIDS pandemic has revealed that something must be done to save the nation from being overwhelmed. The issue of sex education and sexuality is therefore increasingly relevant. This study focused on the youths was conducted to know the average youths attitude to sex and also to understand the influences on sexual behavior.

Methodology: A survey was carried out among 400 youths using a confidential interview approach in which various questions regarding their sexuality was asked. These questions covered such areas as age of sexual debut, condom use, abortion, sexual abuse, prostitution, same sex relations, sex education, HIV/AIDS, rape, incest, pornography and other related issues.

Findings and discussions: The survey showed that the issue of sexuality needs to be urgently addressed. A lot of youths are confused on issues of sex. There are no adequate sex education outlets and where available are best superficial and influenced by the beliefs and inclinations of the instructor.

Recommendations: Government policies need to be reviewed particularly concerning sexual education and rights. Sex education should be introduced in schools with a view to promoting healthy and socially responsible sexuality among the youths.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2140

SCREENING FOR SYPHILIS DURING PREGNANCY IN IRAN

Amiryan Malihe (Hormozgan University Of Medical Science), Atighpor Farzane, Alavi Azin, Ragaie Mino

Routine serologic screening for syphilis is recommended for all pregnant women in IRAN. To determine the seroprevalence rate of syphilis among pregnant women attending the antenatal clinics of Bandar Abbas in order to ascertain whether maternal screening should be incorporated into routine antenatal care of our pregnant women.

Methods: A screening for syphilis for 4667 pregnant women aged 6-18 weeks of pregnancy was carried out using the qualitative rapid plasma regain (RPR) test. All reactive sera were then subjected to titre the quantitative RPR test to estimate the titre of each sample. The Treponema Pallidum Haemagglutination Antibody (TPHA) test was used as confirmatory test of all positive RPR sera.

Results: A total of 4667 pregnant women 2 were positive for RPR and none of them were positive for TPHA positive.

Conclusion: The prevalence of syphilis is extremely low in the antenatal

care population at Bandar Abbas. This calls for a national survey to assess the need for continuation of antenatal syphilis screening with regards to its potential benefits and cost effectiveness in the IRAN.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2141

INITIATIVES TO ENSURE BETTER ACCESS FOR SERVICE FOR VIOLENTED WOMEN

Begum Roushon Ara (Unfpa), Begum Roushon Ara (Unfpa)

Introduction: Violence against women is a major problem where 50% of women reported experienced violence by the husband. It has up to date become a national issue in Bangladesh. This paper describes the importance of access of services from One Stop Crisis Centers for effected women, abused of their sexual and reproductive rights. Domestic violence is a significant cause of dowry demands, early age of marriage and income earning by women specific in the rural area. By giving attention and emphasis on violence towards women is an issue in the combat of poverty as well as on sexual and reproductive rights.

Action: Government of Bangladesh in collaboration with development partners has taken an effort to improve the approach of accessibility by providing services from One Stop Crisis Centers in selected areas of Bangladesh.

Outcome: By focusing on training of medical professionals to provide quality services for women as the victims of domestic violence. These trained service providers are now in the position to empower admitted victims, provide treatment, give advice, rehabilitate as well as refer these women for further legal support.

Discussion and Recommendations: Providing appropriate services to support victims of domestic violence is an absolute necessity. Violence against women reflects and reinforces gender-based inequalities. Attention is needed at all service levels to establish national policies and procedures to ask female clients about abuse. Attention is also needed to develop national guidelines and protocols that clearly indicate appropriate care and referral for affected women.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2145

RELATIONSHIP OF SEXUAL DESIRE?SEXUAL SATISFACTION AND QUALITY OF LIFE OF THE OLD ADULT IN SOUTHERN TAIWAN

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Hong (Department Of Pathology And Laboratory Medicine, Yung Kang Veterans Hospital, Taiwan)

Objectives: 1. Whether elderly adult's sexual desire influences their sexual life satisfaction. 2. Whether elderly adult's sexual life satisfaction influences their quality of the life. 3. Whether elderly adult's sexual desire influences their quality of life.

Methods: A questionnaire including elderly adult's sexual desire, sexual satisfaction, quality of life and sexual behaviors had been used to 283 individuals over the age of 45, recruited from communities in the Southern Taiwan. The data was analyzed by using statistical package SPSS 14.0. The study methods included descriptive analysis, Kolmogorov-Smirnov test, Mann-Whitney U test, Kruskal-Wallis test and linear structure relation model.

Results: This research shows that elderly adult's sexual desire and sexual satisfaction will be reduced with the growth of age, and nearly 40% of the interviewees still had sexual activity once or more times every month. And this research shows that smoking does not influence sexual desire, sexual satisfaction and quality of life of the old adult. Drinking does not influence sexual desire and sexual satisfaction, but it influences quality of life. BMI value does not influence sexual desire and sexual satisfaction, but different BMI value will influence quality of life. The result also shows sexual desire will not directly influence quality of life, but will have direct effect to sexual satisfaction. The sexual desire will connect and influence quality of life in membership by sexual satisfaction.

Conclusions: Sexual desire directly influences sexual satisfaction and sexual satisfaction directly influences quality of life.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2149

PUBLIC PRIVATE PARTNERSHIP (PPP) WORKING FOR RURAL WOMEN'S REPRODUCTIVE HEALTH IN PAKISTAN

Khan Saman Y. (Chps/Sg)

Introduction and objectives: In 2006 a study investigated the Public Private Partnership model for provision of quality health care, especially Reproductive Health, to rural women in Pakistan.

Methods: 15 interviews & 8 Focus Group Discussions were conducted in rural districts of Lahore city. Interviewed were PPP managers from the Dept. of Health and the Punjab Rural Support Programme (PRSP) i.e. the private party. Also Medical Officers, Female Medical Officers and Lady Health Visitors were interviewed. FGDs were conducted with women consumers both inside and outside the health facility including adolescent girls, young males and paramedics including Lady Health Workers.

Results: The PPP model ensured availability of PHC to the rural poor and the indigent, predominately rural women. Its success was based on the strategies adopted by the PPP model and applied at the rural health facility (RHF). This included 1) easy access 2) availability of quality medicines

and personnel 3) affordable services with mutually agreed objectives and methodologies 4) jointly acceptable monitoring and evaluation system 4) creating a pro-poor environment which facilitated easy utilization by poor rural woman. Its weakest points were 1) limited provision of Reproductive health services for the women, however this was more the fault of the public health system rather than the partnership per se and 2) poor links with traditional medical services.

Conclusion: In conclusion it was clear that the PPP promoted Pakistani rural women's capacity to access PHC and is a model that can be studied for other low-income countries.

Conflict of Interest: None disclosed

Financial Support/Funding: Society for International Development, Rome.

PO-2153

POST-TURP ERECTILE DYSFUNCTION: ARE THERE OTHER RISK FACTORS?

El-Bahnasawy Magdy S, Abol-Ghar Mohamed, Dawood Ahmed

Introduction&objectives: The aim of this study was to evaluate the hemodynamic and endocrinal abnormalities which may explain post-TURP ED in our patients.

Methods: 50 patients who were subjected to TURP and reported new onset of ED were included. All patients were evaluated by history taking regarding their erectile, ejaculatory and voiding function. Total testosterone and prolactin serum levels were assessed. ICI test using 20 µgm PGE1 was performed for all patients followed by Penile duplex ultrasonography.

Results: Mean age of our patients was 59.8±6.7 years with mean post-TURP follow up of 3.96±4.1 years. 38 (76%), 6(12%), 6(12%) patients had retrograde, scanty or painful ejaculation respectively. Four patients had significant hyperprolactinemia(8%) while 9 (18%) had low testosterone. Penile duplex findings showed that 4 cases(8%) had arteriogenic ED, 23(46%) were venogenic while 23(46%) showed excellent rigidity suggesting neurogenic insult during TURP. When patients were subdivided according to the presence of associated medical risk factors, there was no significant correlation between both subgroups and any penile duplex indices. Patients with associated risk factors had significantly lower testosterone (P=0.005).

Conclusions: Significant percentage of post-TURP patients with ED had associated low testosterone particularly in the presence of comorbid medical risk factors. Arteriogenic ED is very low among post-TURP ED. The high incidence of ejaculatory dysfunction might be a contributing factor and should be considered with care on evaluating ED in this category of patients.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: none

PO-2154

ERECTILE DYSFUNCTION COMPLICATING PELVIC FRACTURE-INDUCED URETHRAL RUPTURE AND/OR URETHROPLASTY PROCEDURES: HEMODYNAMIC EVALUATION

El-Bahnasawy Magdy S (Urology&Nephrology Center), Abol-Ghar Mohamed (Urology & Nephrology Center), Dawood Ahmed (Urology & Nephrology Center), Mohsen Tarek (Urology & Nephrology Center)

Introduction & Objective: We studied the hemodynamics underlying ED complicating posterior urethral disruption.

Methods: Forty two patients with ED after pelvic fracture with various forms of urethroplasty were included in this study. All patients were subjected to thorough history taking and clinical examination. Pharmacodynamic penile duplex ultrasonography was performed in 41 patients. Patients with severe arterial insufficiency were further evaluated by selective pudendal angiography and pelvic MRA.

Results: Most of our patients were young (mean±SD 34.3±11.2 years). Mean postoperative followup duration 74.2±77. 8 months. Complete arteriogenic ED was diagnosed in 5 cases(12.2%) while veno-occlusive dysfunction was diagnosed in 19 cases(46.3%). On the other hand 26 patients showed excellent rigidity after PGE1 injection with resistive index >0.8 although 7 cases(17.1%) of them has low PSV in one of their cavernous arteries and 9 of them had high EDV. This indicates that their main underlying pathology is neurogenic injury and that inspite of low PSV on one side the intact other side can compensate for good blood flow. Selective pudendal angiography showed absent or attenuated internal pudendal arteries in 6 cases(3 right,2 left and one bilateral) while MRA failed to show the same findings.

Conclusion: Nearly one third of our patients had post-traumatic arterial insult but this was only compromising EF in bilateral cases. Most of post-pelvic fractures associated urethral trauma complicated by ED were of neurogenic origin. MRA failed to reproduce selective pudendal angiographic findings.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None disclosed

PO-2155

HEMOSPERMIA: DO WE HAVE TO EXTENSIVELY INVESTIGATE?

El-Bahnasawy Magdy S (Mansoura Urology &Nephrology Center), Abol-Ghar Mohamed (Mansoura Urology &Nephrology Center), , Mohsen Tarek (Mansoura Urology &Nephrology Center), Elsayy Esam (Mansoura Urology &Nephrology Center)

Introduction and Objective: Hemospermia is considered to be idiopathic in the majority of cases but may underline rare or serious etiopathology. Whether or not extensive investigations are needed is the aim of this prospective study.

Methods: Over 3 years all cases presenting with hemospermia (30) were evaluated extensively by thorough history, clinical examination, urinalysis,

CBC, coagulogram, semen culture, Zeihl Neelson staining and PCR for acid-fast bacilli in both urine and semen, TRUS and MRI. PSA± TRUS guided prostatic biopsy and/or urethra-cystoscopy were carried out when indicated.

Results: History of anti-tuberculous treatment was reported by 2 patients. Associating symptoms included LUTS (7), hematuria(6), Cystitis manifestations (3), other ejaculatory symptoms(4) and ED(4). PCR test was positive for TB in 6 cases(20%) while semen culture was positive for infection in 5 cases(16.7%). TRUS showed evidence of BPH(7), isoechoic nodule(1), prostatic calculi (2), prostatic cyst(1), seminal vesicular calculi and cyst(2), dilated seminal vesicles(3) and ejaculatory duct obstruction (1). MRI confirmed the previous findings in addition to accurate characterization of the stage of seminal vesicular hemorrhage in 6 cases . Urethrocystoscopy failed to demonstrate any gross lesions except for severely congested prostatic urethra in 4 cases.

Conclusion: PCR test for detection of TB is essential in endemic areas and/or recurrent cases. TRUS is important in the elderly and suspicious cases. MRI did not add much for the diagnosis while urethrocystoscopy is to be reserved for cases of associated hematuria.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None disclosed

PO-2156

MALE INFERTILITY AFTER KIDNEY TRANSPLANTATION

El-Bahnasawy Magdy S (Mansoura Urology & Nephrology Center), El-sawy Esam (Mansoura Urology &Nephrology Center), , Abol-Ghar Mohamed (Mansoura Urology &Nephrology Center), Gheith Osama (Mansoura Urology &Nephrology Center), Hassan Nabil (Mansoura Urology &Nephrology Center)

Introduction & Objective: To investigate the impact of risk factors which impaired fertility in our infertile male transplant recipients.

Methods: The study included 43 kidney transplant recipients with infertility. Patients were investigated after history taking and clinical examination by semen analysis, hormonal profile(FSH,LH,prolactin and total testosterone) and scrotal duplex ultrasonography. TRUS ± endorectal MRI were requested in low semen volume patients.

Results: Poor semen parameters were seen in this cohort of patients. Azoospermia was detected in 17 patients(39.5%) while severe oligoasthenospermia was seen in other 10 patients(23.3%). More than one year transplant duration was found necessary to significantly improve FSH and prolactin abnormalities . Graft function was significantly correlated with infertility duration, FSH and LH but not with prolactin, testicular size or sperm concentration. FSH was shown to significantly correlate with testicular size and sperm concentration . There was also good correlation between testosterone level and sperm concentration. Cyclosporin-based immunosuppressive protocols were associated with significantly better sperm concentration than other protocols(p=0.02). In 16 cases there were positive TRUS findings mainly prostatic cysts ; 8 of them were further con-

firmed by endorectal MRI. Moreover varicocele was detected in 17 cases (6 unilateral and 9 bilateral).

Conclusions: Infertile male kidney transplant recipients have mostly very poor semen parameters. Cyclosporin based immunosuppression had less deleterious effect on sperm density. Graft function is fairly correlated with FSH and LH levels and with infertility duration. Varicocele and/or prostatic cysts are present in a significant number of these patients.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-2157

DOES RISK ASSESSMENT WORK WHEN TESTING FOR INFECTIONS?

Ellks Rachael K (Mid Cheshire Hospital)

As clinicians we pride ourselves on history taking and risk assessment to guide which investigations are appropriate for individual patients. UK sexual health clinics routinely test blood for HIV and syphilis only. Testing for Hepatitis B and C depends upon the risk assessment. Our clinic operated an opt out policy of routine testing for HIV, syphilis and hepatitis B and C for everyone independent of assessed risk in 2008. We found 15 new diagnoses of HIV, 12 syphilis, 1 hepatitis B and 8 hepatitis C. Since HIV and syphilis would have been routinely tested in all UK sexual health clinics we highlight only the hepatitis findings. The hepatitis B was identified in a man who has sex with other men (MSM). For hepatitis C only 1 male had a previous history of intravenous drug use with 2 other males having snorted only recreational drugs socially. One male had HIV and hepatitis C presumed from heterosexual exposure. There were 2 males born outside UK. A male and 1 female had no identified risk. These results show that history taking and risk assessment is not an accurate way of identifying patient specific hepatitis C testing and we recommend routine hepatitis C testing for all.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2158

CHINESE SEX CULTURE AND SEXUALITY RESEARCH IN TODAY

Deng Mingyu (Institute For Oriental-Western Human Sexuality, Usa)

In long time, Chinese sexuality field was unknown in world. In today of 21st century of sex culture opening, Chinese sexuality research field have not been whole understand by people. I, a professional did sexuality research and sexual education to continue 24 years since Oct 1984. I have experienced Chinese sexuality opening and development in our age. This paper according to develop in sexology and sex culture on Chinese-mainland so main key, and combine sexology research in Hong Kong, Taiwan and Chinese community in USA. This Chinese sexology age have been partition at five phases: germinating phase (1949 – 1977), opening phase

(1978– 1985), pioneer phase (1986-1994), development phase (1994-2004), rising phase (2005- 2008). 1, Germinating phase (1949 – 1977). In this phase, China-mainland was two periods. First period was from 1949 to 1965. In 17 years, Prof. YE Gongshao and her colleagues at Peking Medical College did investigate and research for sexual education in adolescence, and did counseling to sexual health in newspapers and magazines. Sexual information had been attended in physical health textbook in middle school. At one time, some fine movies to describe love had been produced. Second period was from 1966 to 1976. In 10 years, ‘Culture Revolution’ killed all matters about sex. In this phase, sexology research was also vacant in Hong Kong, Taiwan and other overseas Chinese community. 2, Opening phase (1978 – 1985). In 1978, sex’s breakthrough was first love movie. Whereafter, some professionals of insight did sexology research in medicine, psychology and sociology. They were

Conflict of Interest: World Association of Chinese Sexologists
Financial Support/Funding: None disclosed

PO-2159

MIND / BODY MODEL FOR UNDERSTANDING SEXUAL DIFFICULTIES

Elias Anita M (Monash Medical Centre & Royal Women’S Hospital, Melbourne, Australia)

Introduction: By the time a patient reaches a specific clinic which deals with sexual difficulties, they have often seen a number of practitioners, and been given conflicting advice. Patients are often confused about the nature or origin of their sexual symptoms, asking “Is it real or in my head?”, “Is it physical or psychological?” This is especially true for vaginismus or erectile dysfunction, where physical and psychological factors both play an important role and are interlinked.

Action: This model was developed as an educational tool for medical practitioners and psychotherapists, to explain the Mind / Body connection to their patients with sexual difficulties. The model is used after taking a history. It is adapted to each individual or couple in a way that is relevant to their presenting symptoms and context, past history and the dynamics operating in the relationship.

Outcome: Using this model, has the advantages of: • Showing that the clinician has understood them. • Explaining the Mind / Body connection, in relation to their symptoms. • Identifying the repetitive “vicious” cycles that contribute to and exacerbate their difficulties. • Highlighting the factors, which need to be addressed in order to treat the sexual problems.

Discussion and Recommendation: Patients presenting with physical symptoms may be reluctant to consider psychological approaches to their problems. This model clarifies that when dealing with sexual difficulties, it is unrealistic to separate the mind from the body. The model has practical application for assessment and therapeutic intervention.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2162

MANAGEMENT OF A COMPLAINT OF A SMALL PENIS IN PHYSICALLY NORMAL MEN

Ghanem Hussein M (Department Of Andrology, Sexology & Stds, Cairo University)

Introduction and objectives: Penile augmentation surgery has become increasingly common though there is no consensus about the management strategy for men with a complaint of small penis. We review the various management strategies and introduce and evaluate the outcome of a structured management and counseling protocol for patients with a complaint of a small-sized penis.

Methods: We review the literature and grade the evidence regarding what is the normal penile size and various treatment options. We highlight a structured protocol for consultation and management of (physically normal) patients with a complaint of a small penis through a descriptive study comprised of a series of 250 patients.

Findings and discussion: With education and counseling most patients chose not to undergo penile augmentation surgery. We propose a practical approach for evaluating and counseling patients complaining of a small sized penis.

Recommendations: Educational and counseling are the main methods for managing physically normal patients with a complaint of a small penis. Based on the current status of science, surgery is still considered experimental and should only be limited to special circumstances within research or university institutions with supervising ethics committees.

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Conflict of Interest: No conflicts of interest

Financial Support/Funding: Cairo University

PO-2163

AN ANALYSIS OF SEXUAL AND REPRODUCTIVE HEALTH BEHAVIOUR OF UNIVERSITY STUDENTS IN NIGERIA: THE NEED FOR A STRATEGIC RESPONSE

Banji Fadokun James (National Institute for Educational Planning And Administration)

In sub-saharan Africa, heterosexual transmission remains the main modes of spread of HIV/AIDS virus and various studies have shown that young people engage in unprotected sex and have multiple partners. There is also evidence of increased sexual activity and high-risk behaviour among students in tertiary institutions in Nigeria. The Study therefore aims at providing a clearer understanding of the characteristics of tertiary institutions students in relation to sexual behaviour with a view to creating a strategic response from management of tertiary institutions. This study sought to examine factors in-

fluencing the sexual behaviour of tertiary institutions in Nigeria. It also examined aspect of their sexual life that are likely to increase their vulnerability to contract HIV/AIDS and identified the most relevant components of a Behaviour Change framework important for designing communication messages. The qualitative and quantitative research methods. Three higher Institution were randomly selected in then south west Nigeria. The paper discussed the analysis of respondents and articulates for a strategic response at the institutional level. The study revealed that HIV/AIDS is well discussed in these campuses. There was however evidences of inconsistency in condom usage among students. The study also revealed that there was evidence of high level of stigma and discrimination also Recommendations to managements of tertiary institutions are outlined.

Conflict of Interest: self financing

Financial Support/Funding: None disclosed

PO-2168

PREVALENCE OF ORAL LESIONS ASSOCIATED WITH SEXUALLY TRANSMITTED INFECTIONS IN PATIENTS ATTENDING A SEXUAL HEALTH CENTRE IN CHILE

Povea-Pacci Heraldo S (Centro Salud Sexual Valparaiso Chile), Esguep Alfredo (Universidad Andres Bello, Chile), Martinez Rene (Universidad Andres Bello Chile), Niklander Sven (Universidad Andres Bello Chile)

Introduction and objectives: Oral lesions associated to sexually transmitted infections (STIs) are not normally investigated in patients consulting a Sexual Health Centre. Oral transmission is a confirmed route for spread. The published literature reporting on oral conditions in STIs is scarce and mainly focused on HIV infections. This study was set up to investigate the prevalence of oral lesions in patients consulting for STIs and to examine some variables related to their epidemiology and clinical description.

Methodology: A sample of patients had their oral cavity examined by dental graduates after their normal medical assessment by a STIs medical specialist. The examination followed a standard format, including a clinical description of the oral cavity and registration of data concerning sexual practices and risk factors potentially affecting oral health. The study was ethically approved.

Results: 16% of the patients examined showed one or more oral lesions associated with a STI. The most frequent infection was *Candida Albicans* followed by lesions associated to Epstein Barr virus infection and Human Papilloma Virus. Analysis of demographic and risk factors showed lack of association of oral lesions with specific risk factors. The practice of oral sex was not directly associated with oral lesions.

Conclusion: This initial study showed the relevance of oral lesions in STI patients and the need for the examination of the oral cavity to be included as part of the routine assessment. However, it appears important to extend these studies for better understanding and for discussing proper management.

Conflict of Interest: No conflicts of interest
 Financial Support/Funding: Personal funding

PO-2171

REPEAT SEXUALLY TRANSMITTED INFECTIONS IN JUVENILES IN DETENTION – A MARKER OF A POTENTIAL TRAJECTORY TO ILL HEALTH AND PREMATURE MORTALITY.

Hart Bret (North Metropolitan Public Health Unit), Hoed Veronica (North Metropolitan Public Health Unit)

Introduction and objectives Repeated chlamydia and gonorrhoea infections increase the risk of reproductive sequelae and contribute to ongoing transmission in the population. The objective of this study was to determine what proportion of total chlamydia and gonorrhoea notifications from juveniles in detention are repeat notifications, what are the characteristics of persons suffering from repeat notifications and to explore options to prevent the problem.

Methods All chlamydia and gonorrhoea notifications from juveniles in detention in the Perth Metropolitan Region were extracted from the W.A. notifiable disease database for the period 01/01/05-31/12/07. The data was classified by single notifications, repeat notifications and co-infections and matched with personal information. The data was analysed by descriptive statistics.

Results Almost 18% (30.7% of notifications) of juveniles in detention with a diagnosed sexually transmitted infection (STI) had a previous STI diagnosed in detention on a previous admission. The majority of first infections were appropriately treated, indicating reinfection. 80% of juveniles with a repeat STI were Aboriginal.

Conclusion Whilst screening and treatment of STIs is important for this high risk group, the association with other risk behaviours and the correlation with the “broken window index” suggest that repeat STIs in this cohort is a symptom of underlying psychosocial morbidity. Unless interventions to address re-infection risk are incorporated into a comprehensive Ottawa Charter approach, the benefits of a juvenile screening program may be limited.

Conflict of Interest: No conflicts of interest
 Financial Support/Funding: None - core business of Public Health Unit

PO-2172

SENSE: A NEW WALK-IN CLINIC FOR YOUNGSTERS IN THE NETHERLANDS

Van Den Hoek Katy (Ggd Rotterdam-Rijnmond), Van Der Veen Evert A (Ggd Rotterdam-Rijnmond)

Introduction According to research young people have problems and questions regarding sexual health. The Dutch Ministry of Welfare, Culture and Sport has decided to address this problem and finances walk-in clinics for youngsters since January 2008

Action Eight Municipal Health Service, responsible for organising STI-prevention and control in their region, have been assigned to organise Sense walk-in clinics.

Outcome Since March 2009 walk-in clinics, easily accessible and free of charge are available all over the Netherlands. Youngsters up to 25 years of age can visit a clinic and pose a question or come forward with a problem having to do with sexual health. One or two consultations of 20 minutes are available to the youngster visiting. The clinics are run by specialised nurses. A partly tailored website is available to find information, make an appointment or find out where the nearest Sense clinic is. www.sense.info

Discussion and recommendations * The Sense walk-in clinics are new and not well known yet. Will Sense survive this lead-time? * Young people use the internet a lot; is there still a want for face to face consultation? * What can Sense learn from the sexual health consultation in youth centres in Sweden?

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Conflict of Interest: No conflicts of interest
 Financial Support/Funding: Ministry of Health, Netherlands

PO-2173

DR. FAROOQ MODEL OF SEX THERAPY WITH PHARMACOTHERAPY FOR SEXUAL DYSFUNCTION TREATMENT ESPECIALLY IN NON CONSUMATED MARRIAGE IS MORE SUITABLE THEN BANCROFT MODEL OF SEX THERAPY AND OTHER MODESL USING SEX THERAPY ONLY.

Nasim Muhammad Amir Farooq Nasim Farooq (Nasim Fertility Centre)

Introduction: In conservative Muslim societies like Pakistan where sex education and sex is a taboo sexual dysfunction is considered noncureable and early recovery from sexual dysfunction is desired “Dr. Farooq Model of Sex Therapy with Pharmacotherapy” is most suitable in that respect.

Objectives: Objective is to introduce a new treatment model “Dr. Farooq’s Model of Sex Therapy with Pharmacotherapy” for sexual dysfunction treatment that is short, best accepted by patient and time saving as compare to Bancroft’s Model of Sex Therapy and other models of treatment by sex therapy only, without pharmacotherapy.

Material & Method: 1450 patients of nonconsumated marriage were treated at Nasim Fertility Center Lahore / Islamabad – Pakistan during 1999 TO 2008. 100% males had difficulty in attaining or maintaining erection for vaginal penetration .74% female had primary or secondary vaginismus and dysparunia. In my new model of treatment sexual intercourse was sure in 10 - 15 days after three sessions of sex therapy and administration of pharmacological agents to balance authonomic nervous system necessary for normal sexual response cycle in males and females treatment continued for 8 to 10 weeks for complete recovery.

Results: 100% success was achieved with restoration of normal sexual activity for long time. The advantage of the model is early recovery of sexual dysfunction short spam of

Conflict of Interest: No conflicts of interest
 Financial Support/Funding: None disclosed

PO-2179

HEALTH ECONOMICS AND HUMAN RIGHTS: CONFLICT ON THE TRANSEXUAL REALIGNMENT PATHWAY

Devine Bernadette Celine (Uk Nhs)

Evidence of rationing is not new. What's new is the need to understand such rationing in the light of new opportunity costs in relation to transgendered clients seeking sexual realignment therapy and breast enhancement surgery. Current health economic calculations are clumsy attempts at apportioning costs per head. Sexual realignment is a case in point. Often, service users have to «put their case». This presentation seeks to explore the consideration of the prevalence of transsexualism in the general population and, therefore, the number of likely patients in the Primary Care Trusts's (budget holders) population and, within that cohort, the number who are like to need breast augmentation surgery. Evidence suggests that at least 60% of transsexuals require breast augmentation to achieve the appearance they desire or at least find acceptable. It follows then that a costs analysis must consider the costs of funding 60% of the transsexual population in the PCT's area for this treatment over a relevant period of time. This presentation would seek to present the above figures, pose some topical questions for consideration, and raise awareness of the challenges of rationing for those on gender re-alignment pathways that must come up against other cost pressures such as cancer drugs. The emotions at play need to be explored, rationing is far from ration and prejudice abounds. This is now a case for Judicial Review in the UK, useful learning for other colleagues and a topical, ethical medical anthropological challenge.

Conflict of Interest: Dprof Middx University (Health Economics) self-funding

Financial Support/Funding: None disclosed

PO-2180

RESEEKING THE ORIGINAL WOUND FOR REDEMPTION. SEXUAL ABUSE AND UNCONSCIOUS RE-ABUSE

Devine Bernadette Celine (Middlesex University)

The early ego-interrupt of sexual abuse has been explored by the author in the lives of clients who underwent such abuse in institutions provided by the Irish State as means to address poverty. The work provides the background the an MA from Middlesex University and traces the journey's of such children, many now middle aged, looking at how they set about righting the wrongs of their early life, only to be re-abused by the medical profession and the legal profession as in the case of «The Drogheda Scandal» which saw women undergoing caesarean hysterectomies at rates that then caused a National Inquiry.. The author suggests that this re-enactment of the original wound is an attempt at atonement, which whilst unconscious, allows the seeker to be re-abused. The author saw high rates of Drogheda women as having been in the original Industrial schools and convents. The journey of the soul, as set in a psychosynthetic psychotherapeutic tradition, is a valu-

able honouring of spirit, sexuality and repression. The conjunction of spiritual (religious life) and the repression of sexuality produced a heady mix of abuse that has affected generations of Irish men and women. The research looks at qualitative recounts of experience, against quantitative figures and looks to embrace the shadow aspects of abuse in the light of sexuality and spirituality.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: Self-funding

PO-2181

«JERKING OFF»: A PRELIMINARY EXPLORATION OF MASTURBATION AS A SEXUAL DOUBLE STANDARD

Oattes Melanie K (Carleton University), Austin Carol Anne (Carleton University), Northcott Melissa (Carleton University), Kristiansen Connie (Carleton University)

Masturbation tends to be regarded as a safe sexual practice that has been recommended as a method for people to familiarize themselves with their bodies and sexual responses (Gerresu, et.al., 2008). However, men report substantially higher rates of masturbation than women, perhaps due to the negative stigma that seems attached to female sexuality (Hyde, 2004). The purpose of this study was to explore whether there are different social standards regarding masturbation by men than by women, and where these messages stem from. Interviews were conducted with six young adults from Ontario, Canada, who were asked their subjective understanding of social standards regarding masturbation for men and women, and the sources of their understanding of these messages. Thematic analysis was used in the collection and analysis of the data. In the findings, masturbation is socially portrayed as a normal and simple practice for males but private and complex in females, suggesting that a sexual double standard exists. Learning of these messages appears to stem primarily from peer interactions, with most participants noting a lack of formal education on the subject. However, those who do receive some form of education regarding both male and female masturbation tend to deem such practices as a normal sexual behavior for both genders. This suggests that perhaps formal education acts as a moderator, and further research should utilize theoretical sampling to determine such a relationship. If this is the case, it is recommended that educational opportunities regarding male and female masturbation be provided to young adults.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: None disclosed

PO-2182

THE DEVELOPMENT OF ALCOHOL DEPENDENT PATIENT'S SEXUAL DISORDERS AS A FUNCTION OF ABSTINENCE, MEDICAL AND PSYCHOTHERAPEUTICAL TREATMENT

Kerekes Medárd Ferenc (National Institute Of Addictology), Indries Krisztián (National Institute Of Addictology)

During a six-month period: July-December 2008, 97 new admitted alcohol-dependent ambulant patients have been treated as follows: 79 males (M) and 18 females (F), aged 23-48 years. 72 patients (60 M, 12 F) with different sharp and disturbing sexual disorders: decrease of libido (13 M, 3 F), libido loss (6 M, 4 F), anorgasmia (2 F), frigidity (3 F), impotence (10 M), lack of sexual hunger with maintained potency (17 M), ejaculatio praecox (5 M), ejaculatio retardata (9M). In order to attain and consolidate abstinence, we used Disulfiram as basic medicine (Antaethyl by Sanofi-Aventis). By our alcoholic patients with sexual disorders, the additional administration of other medicines was necessary. The patients were examined with the Hamilton's tests for depression (HRSD) and anxiety (HARS). We have found that 42 alcohol-dependent patients from 72 with sexual disturbances (35 M, 7 F) suffered of a moderate or middle-size depression, and 30 patients (25 M, 5 F) suffered of anxiety and disquiet. In depressive complaints we prescribe Sertraline (Zoloft by Pfizer), in anxiety and disquiet we ordered Clobazam (Frisium by Sanofi-Aventis). The psychotherapeutic training been performed systematically, every week. The sexual complaints and disorders diminished substantially or even disappeared in 55 patients (47 M, 8 F). In 11 patients the favourable effect occurred after 5-6 weeks of treatment, in the other 32 patients already after 3-4 weeks. The abstinence of alcohol was maintained by all this 55 patients.

Conflict of Interest: We disclose any potential conflicts of interest.
Financial Support/Funding: NO sources of any funding for this research.

PO-2185
SWEDISH SEX OFFENDER TREATMENT PROGRAMME ROS
Hasselrot Bengt (Prison And Probation Service), Hasselrot Bengt (Prison And Probation Service)

ROS is a Swedish sex offender treatment programme accredited and now used in 7 prisons for sex offenders in Sweden. The programme is inspired from a Canadian SOTP but modified for Swedish circumstances and completed with themes of shame and guilt. It is a cognitive programme completed with psychodynamic theory and explanation models. It is made in a group format but from 2008 we have an one-to-one format accredited for those who are not able to work in the group format of different reasons. The therapy is done in special prisons for sex offenders but also on probation and in society. The programme is ran by psychologists /psychotherapists and together with service providers who have a social worker background after a special training of the treatment programme. The goal is to minimize the risk to reoffend. Evaluation results will hopefully be presented later this spring and in that case added in this presentation. The presentation will also include some implementation strategies for SOTP in the prison and probation service.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2186
QUALITY OF LIFE IN HYPERANDROGENIC WOMEN TREATED WITH 30 µg ETHINYLESTRADIOL AND 2 MG CHLORMADINONE ACETATE ORAL CONTRACEPTIVE

Caruso Salvatore (Research Group For Sexology, Dept Of Microbiological And Gynecological Science, University Of Catania), Agnello Carmela (Research Group For Sexology, Dept Of Microbiological And Gynecological Science, University Of Catania), Romano Mattea (Research Group For Sexology, Dept Of Microbiological And Gynecological Science, University Of Catania), Cianci Antonio (Research Group For Sexology, Dept Of Microbiological And Gynecological Science, University Of Catania)

Introduction and objectives: The aim of study was to determine the changes of the sexual behaviour of hyperandrogenic women using an oral contraceptive containing 30 µg ethinylestradiol and 2 mg chlormadinone acetate (EE/CMA).

Methods: Seventy-two volunteer women (age range, 18-32 years), with moderate to severe hirsutism and acne participated in this prospective study. The women were treated with EE/CMA for 9 cycles. To assess hirsutism, the Ferriman-Gallwey (F-G) scoring system was used. Serum FSH, LH, estradiol, total and free testosterone, DHEAS, androstenedione, and SHBG levels were measured at baseline and at the 9th cycle of pill intake. The Short Personal Experience Questionnaire (SPEQ), the Short Form-36 (SF-36), and a visual analog scales questionnaires were used to assess the QoL, at baseline and after 3, 6 and 9 cycles of pill use.

Results: A reduction of 65% and 81% in the total mean F-G score was observed after the 6th cycle and the 9th cycle, respectively. The serum Androstenedione, and total and free testosterone levels decreased, and SHBG levels increased after the 9th cycle (p<.05). The SF-36 score was higher after 6 (p<0.05) 9 cycles (p<0.001) with respect to baseline. Frequency of sexual intercourse and of orgasm by intercourse increased, and the frequency of masturbation decreased during the 6th (p<0.05) and the 9th cycle (p<0.001). Finally, sexual and social self esteem.

Conclusions: The EE/CMA pill has anti-androgenic properties reducing the anti-aesthetic effect of hyperandrogenism and improving female sexual and social self-esteem

Conflict of Interest: None disclosed
Financial Support/Funding: We have not any funding for this research

PO-2191
CLOTHES SIZE AND THE SEXUAL SELF-CONCEPT IN A GROUP OF 84 PORTUGUESE WOMEN

Xavier-Vieira Rui M. (Faculty Of Medicine, University Of Lisbon), Alves-pacheco Adilia M. (Núcleo De Estudos Sexologia Clínica-Fml), Bahia Sara (Faculty Of Psychology, University Of Lisbon)

Women are particularly prone to thin beauty images, socially accepted and suggested by media, which tend to induce negative feelings of inadequacy, diminish self-esteem and guide to a permanent dissatisfaction with their

body image, leading to compensatory or disruptive behaviours. Clothes size is consequence of body dimensions such as weight, height and body forms. In this study we intended to understand the relation between clothes size, sexual self-concept an involvement in affective and sexual relationships. Our sample consisted of 84 women, mean age: 32, range between 18 and 45 years. All the women were measured in order to calculate BMI, hip/waist ratio and breast size. Participants filled one questionnaire composed by socio-demographic data and parameters related with clothing purchase and dressing and items about sex behaviours, and another one questionnaire the MSSCQ- Multidimensional Sexual Self-Concept Questionnaire (Snell, 1995), a psychometric instrument developed to measure aspects of sexual self-concept. Statistical analysis included significance tests, qui-square tests; mean differences tests and parametric tests (ANOVA). No relationship was found between clothes size and sexual self-concept, but a tendency related to being satisfied with ones clothing sizes and higher scores of sexual self-concept were obtained. However, positive and significant correlation ($p < .05$) was found relating to easiness while dressing and shopping for clothes, with sexual self-efficacy, sexual satisfaction and internal sex control. An extension of this series is warranted to better define the association found in this study between easiness while dressing and shopping for clothes and sexual satisfaction.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None disclosed

PO-2197

TELL ME WHY? MARRIED MEN WHO HAVE SEX WITH MEN (MMSM) -THE M2M STUDY

Hudson Jeff H (University Of Sydney), Prestage Garrett (University Of New South Wales), Weerakoon Patricia (University Of Sydney), Lee Gary (University Of Sydney)

The M2M study explores the social, sexual and demographic aspects of MMSM to enable a better understanding of this group. Surveys and interviews were used to explore contexts of sexual encounters, practices, pleasure, attitudes, and values of men older than 18 years who are currently in or ever have been in a heterosexual marriage or de-facto relationship, and who were having or have had sexual relations with men during this relationship. Results were compared between currently and previously married MMSM. 240 completed questionnaires were included in this analysis. 64.6% were currently married while 35.4% reported being previously married. Overall, 69.6% commenced sexual activities with men because they could not resist the attraction to men; 45% started because of a lack of sex from female partner. Additionally, 52.1% were currently having sex with men at least once weekly. Currently married MMSM identified heterosexually or bisexually while previously married MMSM identified as gay or homosexual. There were very few sexual activities of MMSM that indicated a significant difference between the samples. Interview data offered a range of reasons as to why MMSM had sex with men. Reasons why MMSM will have sex with men range from pure hedonistic physical relief

with or without erotic connection to lifestyle and formation of sexual identity. MMSM need to be better understood and accepted as part of ordinary human experience to allow the individual to safely explore his desire, identity and integration of what is often opposing facets of sexual orientation identity.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2198

THE PRACTICE OF SEMEN PLAY (BUKKAKE) AMONG MARRIED MEN WHO HAVE SEX WITH MEN (MMSM)

Hudson Jeff H (University Of Sydney), Prestage Garrett (University Of New South Wales)

The sexual behaviours and desires of some MMSM, such as group sex and semen play, play a key role in some men's understandings of their own sexuality and sexuality in general. The term 'bukkkake' as a sex practice, the prevalence and reasons why people partake in this activity remain undocumented. A multi-method approach was used to shed light on the topic of bukkkake. The Three or More Study (TOMS) recruited 587 eligible homosexually active men (including MMSM) who engage in group sex. TOMS subjects were asked about 'cum play' and whether any of the other men at the last group sex event had ejaculated in, or on, their body or face. The majority (58.8%) reported receiving semen on their bodies, and about one in five received semen on their face (15.7%), in their mouth (19.3%), over their anus (12.8%) and a few in their anus (6.3%). Similar findings were noted when men were also asked about semen on other men's bodies. Interview narratives from the TOMS provided a diversity of experiences among MMSM who participate in semen play as a preferred sexual activity. Semen is used as part of most men's sexual repertoire when having group sex and was common between partners. A casual understanding of a particular sexual behaviour such as bukkkake may allow further appreciation of what this sexual behaviour means for the individual. Sex is far more complex than being merely genital and pleasure is maximised by certain behaviour.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2199

SEXUAL FUNCTION AND GENDER VIOLENCE

Arcos Estela G (Universidad Austral De Chile), Molina Irma V (Universidad Austral De Chile), Oelrich Paulina O (Rahue Health Center, Osorno Chile)

Introduction and Objective: Sexuality is recognized as an integrative force of identity, which helps to strengthen and / or produce integral link, which when free of conflict and anguish promotes personal and social development. In Chile, it has been reported female sexual dysfunction in about

50% of middle aged women. This motivated the need to study sexual function in women of reproductive age in Rahue Health Center, Osorno-Chile. **Method:** A study of exploratory descriptive cross 105 women with informed consent. The questionnaire was applied Female Sexual Function (WSF), which assesses the dimensions desire, arousal, lubrication, orgasm, anticipatory anxiety and problems with vaginal penetration in the last month.

Results: 47.2% of 89 women, who answered all questions, recognize a normal sexual function. 52.8% had sexual dysfunction mainly determined by inhibition of sexual desire (42.8%). The results on relational aspects of sexual activity showed that 50% of women take the initiative and 29.2% rarely or never told your partner what you like or dislike in their sexual encounters. The multiple correspondence analyses with sociodemographic variables and sexual function are shown as their characteristic behaviors. It suggests a typology according to marital status and age at sexual function.

Conclusion: In the discussion of results is the subordination of women as a determinant of female sexual behavior, and as an expression of violence against women. To improve sexual function is critical sex education and empowerment of gender differences in understanding of sexual behavior.

Conflict of Interest: None disclosed

Financial Support/Funding: Universidad Austral de Chile

PO-2200

SEXUALITY EDUCATION FOR YOUNG PEOPLE THROUGH E RADIO IN SRI LANKA

RAJAPAKSHA MILINDA (NATIONAL YOUTH COALITION ON SRR)

-Internet usage is very popular among young people and most of the time they get wrong information. ICT has been not used widely in Sri Lanka to disseminate information on SRH Young people don't have much opportunities to share their views on SRH with their peers through ICT, Understanding that youth committee of FPA SL decided to launch a E radio. Started an E radio for youth by youth. 18 youth selected from various organizations and trained on basic radio journalism and web based information dissemination. then allowed them to select topics relate to SRH and developed programmes contents. Held two technical sessions to feed programme contexts. Launched a new website for the project and uploading programmes every single week. Also upload a written description about the content. First time in Sri Lanka young people got a opportunity to make radio programmes on HIV and broadcast it . So many young people asked for opportunity to make new programmes and website is becoming very popular day by day. website gave t

Conflict of Interest: None disclosed

Financial Support/Funding: The Family Planing association of Sri Lanka

PO-2201

PSYCHOTHERAPY OF THE INCESTUOUS FAMILY

Lippi José Raimundo (Abtos / Ufmg /Usp), Cohen Cláudio (Abtos / Usp)

Introduction: The incest, it characterizes an aggravation to the sexual violence, not allowing a psico-social adjustment of the individual. It must be boarded from the inter-relation of several aspects: legal, social, medical and psychological.

Action: The service given by the Justice and Health must take place in the articulated form, They absolutely are necessary and separately insufficient. The CEARAS/USP attends families denounced and sent by the justice. Outcomes: Relation father / daughter (32,73 %); stepfather / stepdaughter (18,18 %); biological Father (38,53 %); Relatives / blood relations (53,14 %); lecherous Acts (70,64 %); Victims masculine Sex (16,36 %); Women «offenders» (2,73 %); Denunciation for third (20,22 %); distant Relatives (4,49 %); Denunciations / mother (48,31 %); Denunciation / child / adolescent when it went too far (23,60 %); Denunciation / father (3,37).

Discussion and Recommendations: The familiar therapy is priority, to return the capacity of affectionate emotional paralysed development shears lack of structure of the familiarity of the offender with the gone too far and the family. Here they all are victims and they must receive joint attention. The work lasts at most one year and a half, returning family ' the best structured and happier justice.

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Conflict of Interest: No conflicts of interest

Financial Support/Funding: No Funding. Particular resources

PO-2203

DEVELOPING A NATIONAL ASSESSMENT TOOL FOR SEXUAL HEALTH AMONG CANADIAN YOUTH

Doherty Maryanne (University Of Alberta, Canada), Doherty Maryanne (University Of Alberta, Canada), Folz Kelly (Public Health Agency Of Canada), Gahagan Jacqueline (Dalhousie University, Canada), Otis Joanne (Universite Du Montreal A Quebec, Canada), Smith Gregory (Options For Sexual Health Bc, Canada), Smylie Lisa (Public Health Agency Of Canada)

Introduction and objectives: Canada currently collects national data on rates of positive tests of the three sexually transmitted infections - chlamydia, gonorrhoea and infectious syphilis - and rates of pregnancy. The Public Health Agency of Canada is leading a team of researchers in developing and pilot-testing a comprehensive set of indicators of sexual health for Canadian youth aged 16 to 24 years, which may be used to collect national level data on sexual health, longitudinally. This presentation will highlight the methods used to develop the indicators and an overview of the indicators.

Method: Based on a review of international literature on sexual health indicators, nine components of sexual health were identified. These were the basis for the focus groups conducted with 79 key informants in 7 Canadian provinces in 2007. Key informants were public health professionals, clinical sexologists academics and sex educators. Discussions with these key informants informed the content of the final sexual health assessment tool.

Results: The final tool guided by an ecological framework, measures socio-demographic characteristics; sexuality; sexual identity; sexual satisfaction; sexual functioning; relationship functioning and satisfaction; protective behaviours; sexual experiences; sexual victimization; attitudes; peer and family influences; community and media influences; and access to sexual health education and services.

Conclusion: This is the first attempt in Canada to create a comprehensive set of indicators of sexual health with which to collect data for informing decisions related to enhancing policies and sexual health promotion programs.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2204

THE CARAVAN “MY BODY, MY EMOTIONS...MY RIGHTS”

Barrios Martha E. (Center Of Studies From Development Itzam Ná A.C.), Quino Josue A. (Theater And Aids), , Garcia Anabel G (Ccenter Of Studies From Development Itzam Ná A.C.), Delgado Benjamin N (Teather And Aids)

Introduction: ITZAM NÁ NGO and Theater & AIDS NGO have been working for HIV/AIDS/STD prevention for more than 18 years creating different information, sensitizing and educating projects. We realize Informative Caravans for different populations in the Mexican Territory.

Description The Caravan “My Body, my emotions...my rights” was of about 8 workshops for training promoters such as teenagers, teachers, and parents, the presentation of 5 Loteria! Theatre-conference about how to prevent premature pregnancy and HIV/AIDS/STD as well as the use of the condoms, 8 informative stands from different NGO’s, a magic kiosk with info and games for teens and children that teach them the use of condom and lubricants. We trained and formed a WEB integrated with 314 promoters such as teenagers, teachers, parents, health personnel, and housewives all from the Coyoacán City. We sensitized and informed 2800 people of all ages with the theatre/conference and with the Magic Kiosk we sensitized 600 people from all ages too.

Lesson Learnt Our Caravans let people from all ages and social classes to get in touch with info The CARAVANS allow to persons of all the ages and social classes to approach the information. FACE-TO-FACE information besides educational entertaining games, in the workshops that cause the reflection, participation, and commitment, or with the THEATRE - CONFERENCE, ideal way to sensitize and to inform many persons of different ages at the same time.

Recommendations The governments and the sponsors should support more

this type of initiatives where there interfere different organizations and playful activities

Conflict of Interest: None disclosed

Financial Support/Funding: ITZAM NA A.C., THEATER AND AIDS and GOVERNMENT OF THE FEDERAL DISTRICT

PO-2207

TRANSEXUALISM IN SEXOLOGY CONSULTATION

Santos Graça (Coimbra University Hospital), Teixeira João (Coimbra University Hospital), Fonseca Ligia (Coimbra University Hospital), Abrantes Paulo (Coimbra University Hospital)

Over the last years «transgender» reality has been acquiring a progressive social and cultural relevance. One sign of it is that «transsexualism» has increased in sexology consultation as an important clinical entity despite the fact that this substantial increase of solicitations is not the whole question of «transgenderism». In the present work the authors analyse several cases within that pathology followed during the last two years in Coimbra University Hospital Sexology Consultation and underline particular features of this sample. The clinical approach of this population of transsexuals is based upon an assessment protocol revealed in this poster focused and considering the physical changes of these persons namely «gender reassignment surgery».

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2208

ROLE OF ISLAMIC SCHOLARS TO ADDRESS HIV, REPRODUCTIVE HEALTH, SEXUAL HEALTH.

Ul Mehdi Hameed (Hopes), Raza Dr. Muhammad (Hopes)

Introduction: Islam is a ground-breaking worldview that has strong say on all aspects of human life. Muslim leaders are engaging in dialogue on interpretation of Qu’ran, religious teachings, creating logical reasons to address issues. Islamic scholars can play tremendous role in family planning, reproductive and sexual health. They can be heard in local communities in Muslim world.

Method: Qualitative methods were utilized to explore role of Islamic scholars to HIV, reproductive, sexual health. 1000 students from educational institutions were interviewed. Different types of qualitative methods were implemented including individual interviews, focus groups, teachers’ brain storming, class room activity, Islamic scholars lectures.

Lessons learned: Participants reported that the aspects of spirituality/religion and scholars can facilitate them in addressing these issues on purely Islamic ways that include: 1. The values associated with Islam regarding sexuality, sex before marriage, prohibition of extramarital affairs. 2. Influence of Islamic scholars to convey Islamic values on HIV, sexual health and reproductive health. 3. Youth are made aware of a variety of reproduc-

tive health issues through Islamic teachings. 4. The concept of Jihad Nafs. 5. Islamic scholars can bring positive behavioral change in local communities.

Recommendations: HIV, reproductive, sexual health programs for students should include role of religion to facilitate for awareness. Mosque, Islamic scholars are important actors for Islamic approach. All stakeholders in Muslim world should promote life skills such as personal skills of knowing, living with others, decision-making can be affirmative. When life skills are used with Islamic teachings for reproductive, sexual health, this is an Islamic approach. It can reduce social stigma, discrimination and promote social positive change.

Conflict of Interest: it is a social sensitive issue in Muslim world
Financial Support/Funding: NO

PO-2209

FIRST SEXUAL INTERCOURSE: A RESEARCH WORK CARRIED OUT WITH YOUNG PEOPLE FROM 13 TO 17 YEARS OLD, BELONGING TO POPULAR SECTOR AND MIDDLE CLASS, BUENOS AIRES, ARGENTINA

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Beatriz Goldstein* beagoldstein@yahoo.com Biologist. Sexuality educator. Profesor and Researcher at Education Department, Faculty of Philosophy and Letters, University of Buenos Aires, Argentina. Member of Argentine Society of Human Sexuality.

Introduction and objectives: This work deals is a research/intervention one and it consists in searching and getting to know the age, perceptions, representations, attitudes and information level of two different social actors regarding their first sexual intercourse: (i) people that work informally classifying and recollecting urban "garbage" ("cartoneros"), and (ii) middle class students attending school.

Method: We used an oral interview-survey with closed and open questions which allowed a qualitative and a quantitative analysis. We asked ourselves: ¿did young people had their first sexual intercourse at the age they wanted to? ¿If not, why did they did it? ¿At what ages do girls and boys belonging to two different social sectors start sexual intercourse? ¿Did some of them were forced? ¿Did they were pushed to it without their will? ¿Did it involve power relationships with the other person? ¿Which age had the other person during that first intercourse? ¿Did he/she had any parenthood? ¿Did they protect themselves in their first sexual intercourses? If they say they do, ¿which contraceptive methods did they use? ¿Do they use them regularly?

Results: We present the obtained data.

Conclusions: This work offers information related to sexual education young people should get regarding sexual intercourse and

Conflict of Interest: UBACYT
Financial Support/Funding: None disclosed

PO-2213

PENILE ERECTION IS A HYDRAULIC PHENOMENON OF THE CORPORA CAVERNOSA: HEMODYNAMIC STUDY ON HUMAN CADAVERS

Chen Kuo-Liang (China Medical University Hospital), Hsu Geng-Long (China Medical University Hospital), , Hsieh Cheng-Hsing (Buddhist Tzu Chi General Hospital), Chang Chao-Hsiang (China Medical University Hospital), Wu His-Chin (China Medical University Hospital)

Introduction and objectives: Penile erection is agreed to be complex and penile erection angle may be attributable to muscular activity in some physicians. We sought to conduct a hemodynamic study on human cadavers in order to elucidate what extent a hydraulic phenomenon of the corpora cavernosa acts in penile erection, and to elucidate that pressure escalation, but not muscular contraction as an important contributor to produce erection angle.

Methods: Six human cadavers whose penises were intact were included in this hemodynamic study after express defrost before February 2009. Infusion cavernosometry was carried out with an infusion rate of 150 ml/min normal saline or 35ml/min colloid respectively. The intracavernosal pressure (ICP) was set at 150 mmHg which served as the check point for negative feed back control. The erection angle was measured and recorded while the ICP exceeded 135 mmHg.

Results: The rigid erection was unexceptionally attained after infusion for 3-8 minutes, while the erection angle was reached 90-145 degrees. The infusion rate is 35 ml/min which is sufficient to attain erection if colloid is used.

Conclusion: We feel that the corpora cavernosa acts like a hydraulic chamber and erection angle is a result of intracavernous pressure escalation, which is free of muscle contraction since there is no muscle activity in a cadaver.

Conflict of Interest: None disclosed
Financial Support/Funding: Institution of China Medical University Hospital

PO-2214

AN OVERVIEW OF SALVAGING PENILE VENOUS SURGERY

Hsu Geng-Long (China Medical University), Chen Heng-Shuen (National Taiwan University), , Hsieh Cheng-Hsing (Buddhist Tzu Chi General Hospital), Chen Kuo-Liang (China Medical University), Chang Chao-Hsiang (China Medical University), Wu His-Chin (China Medical University)

Introduction and objectives. Disappointing outcomes and penile deformity are concerns of penile venous surgery. Consequently it has been abandoned among many physicians. To explore whether those concerns are improvable and correctable, we report salvage surgery to patients who underwent previous surgery somewhere recently.

Methods. From 1986 to 2008, totally 16 consecutive patients consulted us because of poor outcomes after the previous venous surgery in other institutes. The abridged five-item version of the International Index of Erectile Function (IIEF-5) was used to score the patients when available. Accord-

ingly, 3 and 13 patients were categorized into the non-IIEF and IIEF groups respectively. A median longitudinal pubic incision and a semi-circumcision were made to access the deep dorsal veins which are stripped thoroughly and ligated with 6-0 nylon sutures. The cavernosal veins were likewise managed. The para-arterial veins were ligated only segmentally. Finally the wound was approximated layer by layer while an assistant stretched the penile shaft.

Results. The operation time is from 5.2 to 8.5 hours. The follow-up period ranged from 0.6-22.0 years. Overall 93.8% (15/16) patients reported an acceptable penile shape, on erectile function in the IIEF group there was statistically significant ($P < 0.001$; 8.5 ± 3.5 versus 16.1 ± 4.8) preoperatively and postoperatively, whereas in the non-IIEF group 66.7% (2/3) patients reported natural erections.

Conclusions. This refined method appears helpful in rectifying penile deformity and restoring erectile function in some patients who underwent venous surgery previously in other institutes.

Conflict of Interest: Hospitals

Financial Support/Funding: None disclosed

PO-2216

ACUPUNCTURE-AIDED PURE LOCAL ANESTHESIA IN UROLOGICAL SURGERIES

Hsu Geng-Long, Chen Kuo-Liang (China Medical University Hospital), , Chang Chao-Hsiang (China Medical University Hospital)

Objectives: Although local anesthesia for urological surgeries has been widely reported, its reliability may not be sustainable since some patients require intravenous anesthetic. We report on acupuncture-aided local anesthesia for a variety of surgeries.

Methods: From 2002 March to March 2007, a total of 423 men, ages 19 to 68, received a variety of urological surgeries. Among them 165, 103, 65, 45, 32 and 13 patients underwent penile venous stripping surgery, high ligation of internal spermatic vein, Nesbit type penile curvature correction, penile venous patches surgery, penile implantation, and microscopic vasovasostomy respectively, under an acupuncture-aided pure local anesthesia on ambulatory basis. They were categorized into the venectomy, varicoelectomy, Nesbit, patching, implantation and vasovasostomy group respectively. Specific topical injection as required, proximal dorsal nerve blockage and peripenile infiltration were sufficient local anesthesia for patients other than implant group in which a method of crural blockade was additionally required. The acupoints of: Hegu, Shou San Li, Quchi, Neiguan and Shen Men are routinely used. The anesthetic effect was assessed with a 100mm visual analog scale (VAS)

Results: Overall there were statistical differences in scoring between the six groups in which the implant group stood out ($P < 0.002$) although all patients tolerated their method of pure local anesthesia and resumed daily activity once the surgery was completed.

Conclusions: This method appears to be simple, reproducible and reliable. They offer the advantages of less morbidity, protection of privacy, reduced

effects of anesthesia, and a more-rapid return to activity which modern society trends demand.

Conflict of Interest: Hospital fund

Financial Support/Funding: None disclosed

PO-2217

A CAVERNOSOGRAPHIC STUDY ON PENILE MORPHOLOGY: IS CONGENITAL PENILE DEVIATION UNCOMMON?

Hsu Geng-Long (China Medical University Hospital), Chen Kuo-Liang (China Medical University Hospital), , Chang Chao-Hsiang (China Medical University Hospital)

Objectives: Congenital penile deviation (CPD) is commonly believed to be rare in medical literatures. In our daily practice we find that it is, however, not uncommon. We conducted a retrospectively analysis of our patient population.

Methods: From 1985 December to 2008 November, a total of 1223 sets of cavernosographic films were assessed for penile morphology. Patients those centrally positioned films taken during erection were included while patients with Peyronie's diseases or with prior penile surgery except circumcision were excluded. Films were taken in lateral-oblique angle for assessing dorsal or ventral deviation or anterior-posterior view for left or right curvature. The penile shape was assessed and patients were stratified into groups at 15 degrees increment.

Results: Overall, there are 132 (10.8%) men who had a deviation for 15° or greater. Only 48 men (3.9 %) could be considered to be perfectly straight. The respective prevalence of CPD were 85.1%, 6.1%, 2.2%, 1.9%, 0.7% and 0.1% in subdivision of patients with deviation of no greater than 15°, 30°, 45°, 60°, 75°, and 90° respectively.

Conclusions: It seems that a penile deviation may be more prevalent than commonly thought. With the penile curvature assessed only in 2 angles, the prevalence may be underestimated. Prospective Studies applying more stringent methods in more systematic manners are needed to derive more reliable figures.

Conflict of Interest: Hospital fund

Financial Support/Funding: None disclosed

PO-2218

THE RELATIONSHIP BETWEEN THE PSYCHOLOGICAL CHARACTERISTICS OF THE KOREAN MARRIED WOMEN AND SEXUAL DYSFUNCTION .

Chae Paul K. (Sungshin Women'S University In Korea), Lee Haejin (Sungshin Women'S University)

This study examined the relationship between Korean married women's psychological characteristics and their sexual dysfunction. The subjects for this research were recruited from Seoul Metropolitan areas aged between 20's and 60's. Four hundred nineteen women participated in this study. Fe-

male Sexual Function Inventory (FSFI) was used to assess the female sexual dysfunction. T Test, multiple and regression analysis were conducted. The results were as follows: 1) The younger subjects of the age of 20-30 and in active menstruation showed more open sexual attitudes than those of women in the age of 40-50. This result indicates Korean women are going through change from conservative society. 2) The subjects with more communication difficulty, more negative sexual attitudes and less intimate relationship with their spouses were suffering from more sexual dissatisfaction and sexual dysfunction than those who did not have much communication problems and so on. This result conformed that in case of women, interpersonal relationship is very important factors for sexual satisfaction. 3) There were strong correlation between sexual responses, orgasm, and sexual pain and negative communication styles. The communication between couples were very important factors for sexual satisfaction among the Korean married women. More discussion and suggestion for the further studies were suggested. Key words: Korean women's sexual dysfunction,

Conflict of Interest: None disclosed

Financial Support/Funding: own personal fund

PO-2220

PREMARITAL SEX AND HEALTHY SEXUAL RELATIONSHIP AMONG THE STUDENTS OF UNIVERSITY OF ADO

Osakinle Eunice Olufunilay (University Of Ado-Ekiti)

Abstract: The study investigated premarital sex and healthy sexual relationship among students of University of Ado-Ekiti, Nigeria. The sample consisted of 360 male and female students. Multistage and simple random sampling was used to select the sample from six faculties in the university. The data collected were analyzed using frequency counts, percentage scores and t-test inferential statistics. Three general questions were raised and two hypotheses were tested at 0.05 level of significance. The instrument for the study was titled: Premarital sex and healthy sexual relationship among students. It had a reliability coefficient of 0.68 and its validity was found to be 0.71. The study revealed that students had premarital sex and that majority of them used contraceptives. It was thus recommended that those who encouraged to do so as to free themselves from life long problems.

Conflict of Interest: No conflicts of interest

Financial Support/Funding: personal

PO-2221

SEROPREVALENCE RATE OF STI VIRUSES IN PREGNANT WOMEN: A RETROSPECTIVE STUDY IN 2007-2008 AT MALEKAN CITY, IRAN

Montazam Seyed Hassan (Islamic Azad University, Bonab Branch, Iran), Jelverhgari Mitra (Faculty Of Pharmacy, Tabriz University Of Medicalsciences, Iran)

Introduction and objectives: STI like HCV, HBV, and HIV infection are common, especially during recent decades. Co-infection between these three different diseases shows similar ways of transmission. High rates of hepatitis C virus (HCV), Hepatitis B virus (HBV) and HIV infections among people have been reported worldwide. However, less information on HCV (HBV) and HIV infections and risk factors among pregnant women in Iran is available.

Methods: A total of 640 blood samples of pregnant women in first trimester were collected from April 2007 to March 2008. Blood samples were estimated for HBsAg, HCVAb, and HIVAb by EIA. Data were analyzed by SPSS software version 14.

Results: Seroprevalence rate of HBsAg was 1.1%, HCV Ab 0.5 %, .Anti-HIV1, 0%. Co -infection for HBsAg and HCVAb were seen in one people (0.14%).

Conclusion: Recommended that all people should be tested regarding STI factors before marriage and pregnancy time for prevention of infections in the future. Also, educational programs are necessary. Because co-infection with HCV or HBV and other STI factors are a growing public health problem.

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

PO-2227

FEMALE GENITAL SURGERY: A COMPARIATIVE ANALYSIS OF PRACTICES IN AFRICA AND THE WEST

Ikpe Eno Blankson (University Of Lagos)

Introduction: The WHO outlawed any form of cutting and piercing of the female genital which is perjoratively referred to as genital mutilation. While this outlawing and international campaign is carried out against female circumcision in Africa, women in the West are carrying out female genital mutilation with fancy names and this is not condemned.

Approach: Using library sources, internet sources, and qualitative method to gather information, this study of female genital surgeries in Africa and the West (America and Europe) tries to determine what differences exist in this practice in the two world regions and why FGS is banned in Africa and not in the West.

Findings and Discussions: FGS have been carried out both in Africa and the West for various reasons for centuries. Cutting, piercing and tightening of parts of the genitalia is involved both in Africa and the West. Women in both areas hope to enhance their sexuality or empower themselves to control their sexuality. While in the West this is done in hospitals in Africa it is carried out by traditional experts. In Africa it is sometimes culturally demanded while in the West it is most times an individual decision. Female genital surgery in Africa has been condemned internationally and banned by who leading to its official ban by some African governments. Yet FGS is carried out undisturbed in the West. FGS in the West since it involves cutting, piercing and tightening should also be labelled FGM condemned and banned.

Conflict of Interest: Personal
Financial Support/Funding: None disclosed

PO-2228

PERSISTENT GENITAL AROUSAL DISORDER, TO LIVE A LIFE OF SHAME IN THE SHADOW OF SHAMELESSNESS

Lainio Irene R (Centre Of Andrology And Sexual Medicin, Karolinska University Hospital)

Introduction/methodology: Persistent genital arousal disorder, PGAD can be described as an ever-persistent sexual arousal where physiological peripheral genital arousal occur despite the absence of sexual stimulation, thoughts and situations and without sexual stimuli. PGAD is often accompanied by psychiatric co-morbidity and had a high frequency of exposure to sexual abuse (1). The purpose with this study is to describe the manifestation of PGAD, from a psychoanalytical view by describing background and suffering in 3 women, diagnosed for PGAD, attending psychotherapy. Further to describe elements of their treatment that are postulated to be of significance for outcome.

Findings and discussion: A major focus was how the symptoms were strongly associated with shame and experience from parental exposure for isolation, humiliation, lack of emotional contact. All three described shameless sexual dreams, disturbed sleep and periods of depression suicidal thoughts and self-mutilation.

Recommendations: The body is for these women an arena for mental pain. What cannot be accepted in the mental sphere is converted into bodily symptoms. Somatically expressed distress lead to a few available symbolic conflicts. Via a dialog, intonation and a language of emotional conflict enables to establish contact with affects, emotions. To care, confirm and allowing the woman to discover herself and further what she never had. A relational psychoanalytic perspective affectfocused, where mentalisation is an element is of importens.

References: 1. Leiblum. S. (2007) Psychological, Medical, and Pharmacological correlates of PGAD, *Internat Soc for Med* 2007; 4:1358-66 2. McDougall. J. (1997) The many faces of eros, *Scandbook* pp 153-69

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-2229

THE META-ANALYSIS OF SEX

Ng Emil Man-Lun (University Of Hong Kong)

Abstract Much of our contemporary psychosocial theory including the sexual is derived from the synthesis and analysis of clinical/non-clinical observations or data. An example par excellence is the psychoanalytic theory and its derivatives which can be conceptualized basically as a traditional meta-analysis of sex and its correlates. Many other psychosocial theories have since flourished; breaking new grounds, but have methodologically stayed largely within the traditional meta-analytic framework.

With advances in scientific thinking and the growing application of statistical and mathematical modules in research, modern meta-analysis has for more than a decade taken on a radically new shape, rigorously identifying the loopholes of traditional meta-analysis and overcoming them. It has now become one of the important yardsticks for assessing theories and treatments in evidence-based medicine with heuristic results. Yet little of it has been applied in sexology. With examples of some the few most updated sexological meta-analyses that have been performed, including those by my colleagues and me, it can be seen how modern sexological meta-analysis can make promising contributions to psychosocial psychiatry but on the other hand has particular serious problems awaiting solutions.

Conflict of Interest: None disclosed
Financial Support/Funding: Nil

PO-2230

THE WORKING ALLIANCE IN INTERNET ADMINISTRED CBT-TREATMENT OF ERECTILE DYSFUNCTION: DESCRIPTION AND ANALYSIS

Hallberg Jonas (Centre For Andrology And Sexual Medicine, Karolinska University Hospital), Walén Christian (Department Of Psychiatry, Outpatient, Solna)

Introduction and objectives: The aim of the present writing was to examine the change of the working alliance and its correlation with the treatment outcome in an Internet administered cognitive behavioural treatment programme for erectile dysfunction.

Methods: The study the writing was based on had 79 participants divided in two subgroups. One in which the participants received the treatment during seven week and one active waiting list group.

Results: The results gave at hand that no significant change of the working alliance or any correlation with the outcome could be found. One significant correlation could be found, that between the estimated working alliance and the treatment compliance.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None

PO-2231

ADAM – A RANDOMISED, CONTROLLED TRIAL OF INTERNET-ADMINISTRED COGNITIVE-BEHAVIORAL THERAPY FOR ERECTILE DYSFUNCTION.

Hallberg Jonas (Centre For Andrology And Sexualmedicine, Karolinska University Hospital), Hallberg Jonas (Centre For Andrology And Sexualmedicine, Karolinska University Hospital)

Aim: The aim of the study was to evaluate whether an Internet-administered treatment package, based in techniques adapted from cognitive-behavioural therapy, combined with e-mail based support could be effective in treating erectile dysfunction.

Methods: 79 men participated in a randomized trial which utilized an active control contingency.

Results: Data from participants that completed the treatment was analyzed and the result points to that the treatment was efficacious to an extent and should be subject to further investigation and research.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: None disclosed

PO-2235

SEXUAL DYSFUNCTION IN MENTAL ILLNESS - PSYCHIATRIST ATTITUDE

Singh Ashok Kumar (Porterbrook Clinic, Sheffield, Uk), Wylie Kevan R (Porterbrook Clinic, Sheffield, Uk)

Introduction - This study is based on small random sample of delegate answer to the questionnaire during the workshop on 'Sexuality and Mental Health' in Florence, World Psychiatric Association, International Congress, 2009.

Method - The questions related to sexual history was the central theme of the questionnaire. Three questions were asked about frequency of sexual intercourse, arousability and ability to enjoy sexual pleasure. Psychiatrist attending the workshop were asked to rate their response on Likert scale.

Finding and Discussion - Majority agreed that that the questions were related to sexual desire, motivation or arousal. However 40% strongly disagree that it is indicator of mental illness. 30% strongly agree that it could be side effect of psychotropic medication and should be asked during psychiatric consultation. Only 10% strongly agreed feeling comfortable while asking these questions during their psychiatric consultation. Sexual dysfunction is common in people with mental illness and is a common side effect of psychotropic medication. Earlier studies have suggested omission of sexual history during psychiatric assessment. Psychiatrists have been suggested to be guilty of 'ageism'. This study indicates the difference in the knowledge and believes and actual practice of clinicians from across the world.

Recommendation - We propose a larger multi-centric study to investigate the reason for this discrepancy in believe and practice of clinicians. There is a need for further research and training regarding the sexual dysfunction in case of people with mental illness.

References - Bouman et al 2001., Singh et al 1997., Fakhoury et al 2001., Romanus et al 2008.

Conflict of Interest: No conflicts of interest
Financial Support/Funding: none

PO-2237

VIOLENCE IN THE CLASSROOM FOR NOT COMPREHENSION OF THE SEXUAL ORIENTATION AND THE GENDER IDENTITY

Guerrero Figueroa Olivia (Asociación Mexicana Para La Salud Sexual A. C.),

Introduction: The violence expressed to in cutting phrases, attitudes of exclusion, hits, etc. executed by the fact that a boy or girl demonstrates behaviors opposite to the socially established for the role and the gender identity; it is generated by the incomprehension of the sexual orientation and the gender identity. The school area is a part of our society, where the rules established in out, reproduce inside, and this homophobia internalize reproduces with great facility inside the institutions, from pre-school level up to post-degrees.

Action: The violence demonstrated in the classrooms, product of the discrimination for homophobia is a social problem. The action is in resting on the fundamental element of the Education. The implementation of measures of sensitization between professor, student, mothers and parents who include the fundamental principles established in the human rights and the sexual rights.

Outcome: Decrease of events of violence towards the pupils and therefore diminish the psychological consequences towards the mistreatment pupils. To integrate self-sufficiency and security in the pupils who break with the traditional procedure that dictate what must be a man or a woman.

Discussion and recommendations: To be alert of the sexual orientation and the gender identity is a part of the work that we have to do as educators responsible and compromised with the labor. Good like that, it is important to stop the discriminatory conditions in the classrooms and take the opportune measurements for the well-being of the pupils.

Referencies: PAHO (2000), Promotion of Sexual Health; Guatemala.

Conflict of Interest: None disclosed
Financial Support/Funding: None disclosed

PO-2238

THE EFFECT OF TIBOLONE ON SEXUAL FUNCTION IN HEALTHY POSTMENOPAUSAL WOMEN.

Moghasemi Sedigheh, Ziaei Saeedeh

Background & Aim: sexual function is an important aspect of quality of life. The aim of this study is the comparison of the effects of Tibolone and placebo on sexual function and sex hormones and SHBG in healthy menopausal women.

Design: This study was a randomized, single-blind prospective clinical study. A total of 96 women with no absolute contraindication for hormone replacement therapy (HRT) were divided into two groups: 52 women in Tibolone group received Tibolone 2.5mg/day + Ca-D (500 mg +200 IU) and 44 women in placebo group received only Ca-D (500 mg +200 IU) for six months. Blood was collected at baseline and after 6 months of treatment for hormone determinations of estradiol, testosterone, SHBG and calculated free testosterone index and free estradiol index also Sexual function was assessed by Female Sexual Function Index (FSFI) in six domains: desire, arousal, lubrication, orgasm, satisfaction and pain. Data was analyzed by Spss.15. Paired and independent t-test, K2 and Mann-Whitney were used.

Result: 41 women in Tibolone group and 40 women in placebo completed the study. Compare to baseline values and placebo, the Tibolone group sig-

nificantly improved on all of six FSFI domains include desire, arousal, lubrication, dyspareunia, satisfaction, orgasm and total score of sexual function ($P<0.05$). Testosterone, FTI and FEI increased and SHBG decreased about 57% in Tibolone group ($P<0.05$).

Conclusion: In Post menopausal women Tibolone significantly improve all aspects of sexual function and increase their quality of life by desirable changes in level of sex hormones and SHBG.

Conflict of Interest: None disclosed

Financial Support/Funding: tarbiat modares university cipla

PO-2243

HOW MUCH LONGER ARE GENDER CLASSIFICATIONS RELEVANT?

Sahlée Annika

Transsexual patients and patients with issues around sexual roles, gender identification and gender expectations are making up a growing number of many sexologist's work. Are we witnessing a Gender-liberation Movement, in accordance with the Gay Movement some decades ago? More and more Transsexuals and/or Transgenders refuse to adhere to temporary Gender Roles. They rebel against the Requirements in the «Standards of Care» which set the agenda of the therapeutic and diagnostic prerequisites for taking hormones and having operations that will aligne their inner gender identification with their outer. Many patients begin to rebel against the requirements of having to «fit in» to main stream ideas of what is feminine and what is masculine enough to «pass» for the Standards of care. Their problems of finding a place within a dualistic gender-society are beginning to resemble a revolution which also includes many sub-groups who render themselves names like; Queer, Gender-Queen, Drag-Queen, Drag-Man, Metro-Sexuell and so forth. The general Population take part in this sociological change, which has it's roots in minority groups, but which effect the majority population, especially in Metropolitan areas. We will look at some pictures of people where it is with a growing uncertainty that we may decide their Gender. After having seen these pictures one may ask oneself if it is at all relevant any more to even know! Are Gender-Classifications then about to be outdated? And isn't the DSM-IV and upcoming DSM-V definitely outdated? What solutions can we expect?

Conflict of Interest: None disclosed

Financial Support/Funding: None disclosed

SPEAKERS INDEX

Aavik Toivo	PO-1328	Azevedo Jacinto	OP1.9-7	Br?Hová Ludmila	PO-1643
Abel Gilian	S2.8-1	Aziniw Suh Fred	PO-2061	Brak-Lamy Guadalupe	PO-1519
Abelsson Jonna	PO-1730	Bagnol Brigitte	S3.3-4	Brendler Jaqueline	PO-1434
Aberese Ako Matilda	OP3.6-4		OP2.3-4		PO-1435
Abubakar Attahir	S3.5-1	Bahgat Hossam	P2.2-1	Brennan Holly	OP3.8-1
	PO-1125	Bahuguna Pallavi	S2.4-1		PO-1140
	PO-1123	Baig Qadeer	S3.6-3	Brosch Ilana	OP3.6-2
Adaikan Ganesan P.	S1.6-1	Bakare Idowu	PO-1832	Brunton Cheryl	S2.8-3
	OP1.8-11	Banik Biswajit	PO-1766	Buchbinder David	P1.2-1
Adebisi Akindele	PO-1747	Bankins Kieva	PO-1404	Bush Ginger	S1.3-3
Adejayan Adewole	PO-1430	Barratt Barnaby	S3.7-3	Butkova Tatiana	PO-1718
Adhikari Ramesh	MP9-6	Barrientos Delgado Jaime	PO-1491	Cacciarru Barbara	PO-1926
Agudelo Marcela	PO-1386	Barrios Martha Elena	PO-2204		PO-1963
Ahlborg Tone	PO-1059	Bartels Andreas	P2.1-1	Cáceres Carlos	P4.1-1
Ahsan Ullah Akm	OP4.1-2	Bass Michelle	S2.8-7		S1.8-2
	PO-1250	Bavinton Tim	S3.8-2	Calabrò Rocco Salvatore	PO-1215
	PO-1252	Bay-Cheng Laina	PO-1678	Camara Abibou Diagne	S3.1-3
Akanle Florence Foluso	PO-1053	Bazarra-Fernandez Antonio	PO-1392	Campanelli Nadia	MP7-11
Akinwale Akeem	OP2.4-1		PO-1391	Caron Sandra	MP8-11
	PO-1321	Becker Alvear María Andrea	PO-1802	Caruso Salvatore	PO-2186
	PO-1322	Beisert Maria	OP2.2-3	Carvalho Joana	PO-1836
Akram Owasim	MP6-6	Bello Tititlola	PO-1928	Carvalho Joana	PO-1838
Alanko Katarina	MP10-1	Bendiksby Olav H	PO-1937	Casas Lidia	P2.2-2
Alekseyev Boris	PO-1254	Benestad Esben Esther P.	PO-2073	Castellanos Usigli Antón	OP3.4-4
Alemayehu Awraris	PO-1502	Benoit Cecilia	S2.8-6	Castillo Anabel	PO-1812
Aliana Wilfredo	PO-1737	Berg Rigmor	OP4.4-4	Castillo Elizabeth	MP4-14
Almås Elsa	OP4.4-6	Bergeron Sophie	P1.1-1	Castro Espín Mariela	PO-1966
	PO-2072	Bhandari Jhabindra	PO-1702	Cedres Santiago	MP2-8,
Alvarez-Gayou Juan Luis	PO-1805	Bhandari Lekh Nath	MP7-5	MP9-1, PO-1563, PO-1565, PO-1567,	
Amado Liz Ercevik	S2.6-3		PO-1088	PO-2125	
Amiryan Malihe	PO-2140		PO-1089	Chacha Babere	PO-1839
Angello Michele	PO-1154	Bianchi Tania	PO-2078	Chae Paul	PO-2218
Anis Tarek	S1.1-2	Biancó Fernando	S2.7-2	Chanda Sanchoy Kumar	PO-1113
	PO-2127		S2.11	Chang Shiow-Ru	PO-1524
Ara Zaman	PO-2101	Birgerson Cecilia	PO-2109	Chao Jian-Kang	PO-1340
Arcos Estela	PO-2199	Bischof Karoline	OP1.6-6		PO-2145
Arndt Bettina	MP5-6	Bizic Marta	OP1.8-2	Chauhan Nagendra	PO-2074
Arvidsson Hans	OP4.3-4		PO-1223		PO-2086
Ashraf Muhammad	OP4.1-5		PO-1224	Chen Chieh-Ju	PO-1443
Ashraf Saima	PO-1852		PO-1332	Chijioke Okonkwo	MP10-9
Assalian Pierre	S1.7-3	Blanchard Ray	P4.2-1		PO-1120
	OP1.9-12	Blitzer Johannes	S1.7-5		PO-1624
	PO-1235	Boásdottir Solveig	S1.10-2		PO-1876
Asscheman Henk	OP1.7-3	Boaz Otieno Samwel	PO-1268	Chmaj-Wierzchowska Karolina	PO-1169
Atalla Elham	PO-1444	Bogren Malin	PO-2128	Chu Lau Lang	S1.6-2
Axelzon Fredrik	PO-1835		PO-2141	Chu Yuan-Hsiang	PO-1437

Abstract Book

Chung Dau-Chuan	MP6-12	Durueke Florita	PO-1108	Gang Fang	PO-1081
Claes Tom	OP2.4-4		PO-1109	Garba Aminu	OP3.10-4
Claire Whitfield	MP1-15	Duveskog Marcus	OP3.5-6	García- Hernández Ma. Graciela	PO-1999
	PO-1679	Dziachko Siarhei	PO-1686	Garzón Alicia	PO-1468
Clayton Anita	S2.3-3	Eardley Ian	MP2-2	Ghanem Hussein	S1.1-3
	MP5-4	Ebrahimi Tavani Masoumeh	S3.6-4		PO-2162
Coca Vasile	PO-1494	Edewor Dennis	S3.3-1	Ghatrifi Davood	OP1.10-17
Coleman Eli	S2.11		MP4-13	Ghatrifi Rouhollah	OP1.10-16
	S3.10-1	Edwige Fleur Kpomako	PO-1355		MP9-14
Collumbien Martine	PO-1909	Effa-Heap Gladys	PO-1425	Giami Alain	S1.8-1
Cooper Spring	OP1.5-3	Eftekhar Ardebili Mehrdad	PO-1867		OP1.9-1
Corona Esther	S3.10-2	Eidi Akram	OP1.8-13	Gianotten Woet, Md	S2.3-1
Cosmi Valentina	MP1-6	El Kissi Yousri	MP5-14	Gieles Frans	PO-1719
Courtois Frédérique	S1.8-5		PO-1504		PO-1720
	OP1.9-8	El-Bahnasawy Magdy	PO-2153,		PO-1723
Crane Betsy	MP3-8	PO-2154, PO-2155, PO-2156		Giguère Karen	OP2.1-6
Crespi Chiara	OP1.7-2	Eleuteri Stefano	OP1.10-5	Gimenez-Ramirez Gerardo	MP8-8
Cui Qi	OP4.1-3	Elias Anita	PO-2159	Gindin Leon Roberto	PO-1389
Currie Heather	SS1.-5	Eliasson Ann-Charlotte	PO-1736	Giraldi Annamaria	S2.3
Dabees Khaled	S1.7-6	El-Kak Faysal	S2.6-2		OP1.9-6
Daneback Kristian	S2.2-1	Ellks Rachael	PO-2157	Giron Vilela Jessica Maziel	MP3-6
Danesi Jafar Abdukadir	PO-1331	El-Meliegy Amr Ismail	S1.1-1		PO-1689
De La Torre Lourdes	PO-1327		S1.7-1	Godwin Chinemerem	PO-1921
De Villers Linda	S1.3-2	Elmerstig Eva	OP1.3-5	Goldberg Greta	MP2-12
	PO-1409	Esiet Nike	P3.2-1	Goldfischer Evan	OP1.1-2
De Wilde Karen	OP3.5-7	Estrada Jesús	MP1-2	Goldstein Beatriz	PO-1405
Dellenborg Lisen	OP4.4-2		MP10-11		PO-2209
Delmonico David	MP8-5		PO-1994	Goldstein Irwin	GM2-1
Deng Mingyu	PO-2158	Evers Clifton	MP3-9		S2.3-2
Deshpande Sandip	OP4.4-1	Farley Gillispie Joanie	OP3.5-1	Goldstein Jerome	OP4.4-3
Dessi Antonio	PO-1801	Favero Marisalva	MP8-9	Goldstein Sue	S2.3-4
Devine Bernadette	PO-2179	MP10-4, MP10-5, MP10-6, PO-2031,		Golshani Maryam	OP1.8-1
	PO-2180	PO-2033, PO-2036, PO-2038, PO-2039		Gonsalkorala Lalith	PO-1330
Dhejne Cecilia	OP1.7-6	Fedorova Anna	OP1.3-1	Gonzalez Galeano Ariel	PO-1996
Diarsvitri Wienta	OP4.2-2	Ferguson David	OP1.1-1		PO-1998
Dias Sónia	MP3-1	Ferreira Pedro	MP7-4	Graham Judy	S3.8-1
Díaz Rafael	PO-1603	Fezeu Temma Faustin	MP9-9		OP3.8-2
Din Alla-Ud-	OP3.7-4		PO-1487	Graugaard Christian	S4.1-1
Dodds Jeff	P4.1-2	Finn Bridget	OP1.4-1	Green Charles	OP1.7-7
Dodillet Susanne	S2.8-4	Fitzgerald Lisa	S2.8-5	Greer Gill	P3.1-1
Doherty Maryanne	PO-2203		MP4-6	Grimsrud Karen	PO-2112
Domoratsky Vladimir	PO-1706	Fjeld Wenche	S3.8-3	Grover Sonia	OP1.1-7
	PO-1739	Flodman Malinda	PO-1971	Gubler Christa	OP1.6-4
Donatucci Craig	S1.7-2	Folorunsho Moshood	PO-1080	Guerrero Figueroa Olivia	PO-2237
Dramusic V	S1.6-3	Foluso Akanle F.	PO-2220	Gurung Gagan	PO-1100
Du Plessis Rory	PO-1304	Forleo Romano	S2.11	Guy Alain Seogoroye	PO-1943
Dubois-Arber F.	S3.9-4	Forsberg Margareta	MP1-3		PO-1351
Duchêne A	S3.9-4	Forsberg Margareta	MP7-1	Guzman Idhaly	PO-1959
Duquet Francine	OP3.8-5	Ganem Marc	S2.11	Haerberle Erwin	MH1
Durojaye Ebenezer	PO-1135		S3.9-1	Hagh Del Mohammad	PO-2083

Abstract Book

Hald Gert Martin	PO-1317	Ismail Gulalai	OP3.7-2	Kirby Douglas	P3.2-2
Haldre Kai	PO-1958	Ivarsson Irene	PO-1591	Kiriakopoulos Nikos	MP2-4
Halford Stuart	S2.9-5	Jacobsson Elin	OP3.9-4		PO-1411
Hallam-Jones Ruth	PO-1903	Jagodic Klemen	PO-1277		PO-1413
	PO-1910	Jakobson Pye	PO-1935	Kisitu Godfrey	OP3.9-8
Hallberg Jonas	PO-2230	James Fadokun	PO-2163	Kismodi Eszter	S2.9-1
	PO-2231	Jang Su-Yeon	PO-1818	Kiwalabye Frank	PO-2077
Hamer Dean	P4.2-2		PO-1829	Kjellberg Göran	PO-1075
Hampson David	PO-2008	Järholm Stina	OP1.2-7	Komura Hiroko	MP2-7
Hanifah Laily	PO-1704	Jemtå Lena	OP1.9-5	Konecna Hana	S2.4-3
Hansson Bocangel Marta	MP5-9	Johansen Elise	S3.1-1		OP1.6-1
Hart Bret	PO-2171	Johnsdotter Sara	S3.2-1		PO-1716
Hatta Sidi	PO-2082	Johnson Thomas Wayne	OP1.8-7	Kontula Osmo	S4.1-4
Hawkes Sarah	P4.1-3	Jones Daniel	S1.8-4		OP1.6-3
Hayashi Itoko	PO-1165	Jonsson Mikael	S3.4-2	Kordon Suzanne	OP2.3-6
He Shanshan	MP9-15		MP7-13	Kotb Heba	OP1.9-10
Heasley Robert	MP1-7	Joshi Nemu	PO-1570	Kouta Christiana	OP2.3-5
Heater Heather	MP6-14	Joshi Venkata Narayana	MP2-5	Krasniqi Zana	MP1-14
Helström Lotti	PO-1732	Kaadan Abdul Nasser	OP1.10-15	Kume Isoh Jerome	S3.3-2
Hermstad Knut	S1.10-1	Kamal S. M. Mostafa	OP4.3-1	S3.5-2, OP1.4-2, OP2.3-1, OP2.3-3, MP5-12,	
Hernandez-Rivera Ana	PO-1991		MP9-8	MP8-10, MP9-7, PO-1152, PO-1179,	
Hernandez-Serrano Ruben	S2.7-4	Kamalifard Mozghan	PO-1160	PO-1180, PO-1199, PO1205, PO-1218,	
	S2.7-5	Kambona Caroline	OP3.10-3	PO-1222, PO-1318, PO-1320, PO-1381	
	S2.11-1		PO-1607	Kupferman Sarit	PO-1197
Hetherington Kristina	MP4-11		PO-1703	Kuriansky Judy	S3.4-5
Higashi Yuko	OP1.4-6	Kambona Ouma Oscar	MP3-15		PO-2069
	MP9-4	Kaonga Kennedy	PO-1445	Kuzibaeva Gulnara	MP1-9
Higgins Daryl	P3.1-3	Karajgaonkar Giridhar	PO-2114	Kwarnmark Elisabeth	PO-2185
Holmström Charlotta	OP2.1-1	Kato Ryukichi	PO-1516	Kyomukama Flavia	PO-1401
Howard Marion	OP3.5-5		PO-1588	Laan Ellen	P1.1-3
Hsing Yuan Liu	OP1.2-5	Katuta Chilambe	OP4.1-6	Lainio Iréne	PO-2228
	OP1.10-13	Kaynak Evre	S2.6-1	Laja Pedro	PO-1822
Hsu Geng-Long	PO-2213,	Kelsey Katherine	OP1.10-3	Lameiras Fernandez Maria	PO-1858
PO-2214, PO-2216, PO-2217		Kerekes Medárd Ferenc	PO-2182		PO-1861
Hsu Geng-Long		Kettemalet Anthony Fabrice	PO-1196		PO-1862
Hu Peicheng	PO-1301	Khalaj Abadi Farahani Farideh	PO-1408		PO-1863
Huda Sigma	P1.1-2	Khan Muhammad	MP3-16	Lampis Jessica	PO-1961
Hudson Jeff	PO-2197		PO-1159	Lamsal Shyam	PO-1526
	PO-2198		PO-1234	Langa Artur	PO-1713
Hygie-Enwerem Grace	PO-1535	Khan Sharful Islam	P1.2-2	Langanke Harriet	OP3.4-6
	PO-1536	Khanna Renu	P2.2-3	Lange Gisela	S3.9-3
Iantaffi Alessandra	PO-1407	Khizanishvili Gvantsa	S2.10-1	Langfeldt Thore	GM5
Igirana Grace	OP2.2-5	Khodabakhshi Koolae Anahita	S3.2-2		PO-1687
Ikpe Eno	MP3-13	Kibrik Nikolai	PO-1722	Lara Carolina	PO-1673
	PO-2227	Kim Haewon	PO-2120	Larsdotter Suzann	OP4.1-4
Ilkcaracan Pinar	P3.1-2	Kim Won-Whe	PO-1657		PO-2106
Inyang Mfrekemfon	PO-1379		PO-1658	Lee Bum-Suk	OP1.9-4
Iro Paul C.E.	PO-2058	King Mark	PO-1977	Lee Jian Tao	MP7-7
Isfors Ellinor	MP10-7		PO-1979		PO-1660
Ishimaru Keiichiro	MP5-15	King Nicole	PO-1326	Lehmann Victoria	SS1.-1

Abstract Book

Leon Rodriguez Manuel Antonio	PO-1951	Meryn Siegfried	SS3.-1	Nivon Bolan María Del Rosario	PO-1947
Leveau Linda	OP3.4-5	Meyer-Bahlburg Heino	P4.2-3	Nobre Pedro	OP1.8-10
Lewin Bo	S4.1-2	Michielsen Kristien	OP4.4-5		PO-2089
Liinamo Arja	MP7-15	Miclutia Ioana Valentina	OP1.10-6	Norlund Marcus	P2.1-2
Lin Dennis	S3.4-1	Miletski Hani	WS6	Nudelman Anita	OP3.10-2
Lin Yen-Chin	PO-1436		S1.3-1		PO-1598
Lin Yi-Li	MP4-10		OP2.2-1	Nwadiogu Chikezie	S3.6-1
Lindskog Anders	WS9	Milstein Susan	S3.7-4	Oattes Melanie Kristel	PO-2181
Lineo Luis	OP3.8-3	Miyahara Harumi	PO-1708	Obi Helen	OP4.2-1
Lippi José Raimundo	PO-2201	Mkumbo Kitila	MP7-8	Odikamnor Oliver	MP7-12
Ljunggren Christina	PO-1130	Moberg Kerstin	MP2-9	Odor King	MP4-12
Löfgren Cecilia	S2.2-5	Moghasemi Sedighe	PO-2238	Ogden Gina	S1.2-2
Löfgren-Mårtenson Lotta	S3.8-5	Mohamed Laid Alimi	PO-2094		OP1.10-14
	OP3.4-7	Mohammadi Mostafa	MP5-13		PO-1271
Londero Ambrogio Pietro	OP1.3-2		PO-2016	Ogunfowokan Adesola	OP1.3-3
López Olmos Jorge	MP2-10		PO-2017	Ohkawa Reiko	PO-1469
Lottes Ilsa	MP3-5	Mokhtari Iman	PO-1132	Okolie Ugochukwu C	S2.4-2
Lou Jiunn-Horng	PO-1661	Möller Nina	MP9-3		OP3.7-1
	PO-2108		OP4.3-2		PO-1227
Lukkerz Jack	MP10-14	Morehouse Ruth	WS2	Okoye Obiora	OP1.4-3
Macrea Rodica	OP3.9-2	Moreira Carlos	OP1.8-6	Olaolorun Funmilola	OP1.6-2
Mahmood Kazmi Azhar Syed	PO-1131		PO-1650	Olawale Awoyemi	S2.10-3
Maina Geoffrey	PO-1151	Moshtagh Bidokhti Nahaleh	PO-1888		PO-1174
Malmström Maria	PO-2111	Mota Marcia	MP2-13	Oliveira Cátia	OP1.1-3
Maluleke Xavela Thelma	MP4-8	Muchoki Samuel	OP2.3-2	Olsson Hans	P3.2-3
Mariela Espín	S2.7-1	Mukisa Johnan	MP10-2		OP3.6-3
Markovic Desa	OP1.1-5	Muldner-Nieckowski Lukasz	PO-1847	Onpanna Prawit	PO-2104
Martins Maria Fátima	OP1.2-1	Murillo Olga Margarita	S3.5-3	Onwuama Mercy	PO-2099
Mashhadian Mina	PO-1941		PO-1264	Onwuhafua Polite	PO-1668
Mat Saat Geshina	OP4.3-6		PO-1263	Ortigue Stephanie	MP8-1
	MP5-8, PO-1454, PO-1455, PO-1457	Mwangi Julius	OP3.10-1	Öster Mia	PO-1515
Matarazzo Maria Helen	GM3	Nadège Kpaina Fiossem	PO-1350	Otieno Hezron	MP4-15
Maticka-Tyndale Eleanor	OP1.5-6	Naeem Muhammad	PO-1185		PO-1274
	MP4-7	Nakawoza Maria Goreti	PO-1291	Oukvong Vathiny	PO-1843
	MP7-9	Nakazawa Chie	OP3.4-3	Owoyemi Julius	PO-1671
Matsui Santana Osmar	MP9-10	Nakkazi Musoke Irene	PO-1290	Oyedemi Opeyemi	MP9-12
Mawaheb El-Mouelhy	S3.1-2	Nampeera Viola	PO-1313	Oyedokun Amos	PO-1114
Mayberry Lorel	OP3.4-2	Nansubuga Resty	PO-1232	Oyelakin Oladayo Taiwo	S2.10-4
Mazin Rafael	S3.10-3	Nappi Rossella	SS1.-3	Özkorumak Evrim	MP5-1
Mbodji Aminata Ndianor	S3.1-4	Nasim Muhammad Amir Farooq	PO-	Ozowara Nneka	S3.3-3
Mccaffree Konstance	S3.7-2		2173	Özy?Ld?R?M Ilker	PO-1746
Mcdonnell Kelly	OP1.5-2	Nasir Muhammad	MP10-13		PO-1753
Meglioli Alejandra	S2.9-3	Nasir Muhammad	PO-1204	Paalanen Tommi	S1.10-3
Mehdi Hameed Ul	PO-2208	Nasserzadeh Sara	S1.5-1	Packiisamy Ranuga Devy	PO-1236
Menang Joshua Ngwang	PO-1102	Nathan Vytialingam	PO-1241	Palha António	S1.9-2
Meng Jinmei	OP2.1-2	Nayiga Joy	PO-1846	Panday Pradip Kumar	OP3.10-7
	OP2.1-3	Ndubuisi Onyinye Belinda	OP3.7-6	Pandey Sanjay	PO-1763
	OP2.1-4	Nerima Rebecca	PO-1091		PO-1771
Merriman Gareth	OP3.9-5	Ng Emil Man-Lun	PO-2229	Paramastri Ira	OP3.5-3
	PO-1974	Nguyen Hoa Thi Hong	MP3-17		PO-1905

Abstract Book

Parmhed Sule	PO-1420	Robinson Beatrice «Bean»	PO-2028	Shekarau Hauwa	PO-1902
Pascoal Patrícia	MP10-3	Rodrigue Bongopassi	PO-1662	Shokat Muhammad	PO-1507
	PO-1980	Rodriguez-Diaz Carlos	S3.7-1	Shuttleworth Russell	MP1-13
Pastor Zlatko	PO-1641	Rodtzevich Olga	PO-1642		MP6-11
Pauleta Joana	OP1.2-3	Rosen Ray	P1.2-3		PO-1655
Perelman Michael A.	S1.4-1	Rosenberg Matt	OP1.8-9	Silva Hesley	OP1.2-2
Pérez Lena	MP6-7	Ross Michael	S2.2-4	Silva Lara Lucia	MP8-2
Persson Asha	OP4.2-4	Rostina Julie	S3.2-4	Simbeye Edgar	OP2.4-5
Petersen Christina Damsted	OP1.3-6	Rubio-Auriolles Eusebio	S2.7-3		OP3.6-1
Petkar Dr.Sudhakar	PO-1744		S2.11	Simonelli Chiara	S1.9-1
Philpott Anne	OP3.7-5	Rudolfsson Lisa	PO-1373	Sinelnikov Kirill I.	OP1.7-4
	PO-1924	Russo Jane A.	S1.8-3	Singh Ashok	PO-2235
	OP4.2-3		S3.9-5	Singh Veer Bahadur	MP2-11
Pinyaphong Jakkrite	OP4.2-3	Ryan Travis	MP6-16	Smith Knutsson Eva	OP1.5-5
Poiana Catalina	PO-1773	Ryding Elsa Lena	PO-1622	Smith Marika	PO-1840
Pontvik Ingela	PO-1743	Sahlée Annika	PO-2243	Södersten Wiktor	PO-1710
Pop Tiberiu	PO-1194	Salla Nzie Annie Michele	PO-1158	Soebady Doddy	S1.7-4
Pop Tiberiu	PO-1195	Sand Michael	PO-1666	Spencer Brenda	S3.9-4
Popoola Abiodun	PO-1663	Sandoval Clara	PO-1945	Stayton William	WS7
Popoola Bayode	OP4.3-3	Sangowawa Adesola	PO-1714		S1.5-2
Popoola Bayode	PO-1106	Sanni Rekiya	S3.6-2	Stenqvist Karin	MP7-3
Portillo Melendez Carlos Rene	OP4.3-5	Santos Graça	PO-2207	Stepan Matevosyan	PO-1778
Porto Robert	S1.9-3	Santos Iglesias Pablo	MP8-14,	Stiles Beverly	OP4.2-5
Potter Jennifer	OP1.5-4	MP8-15, PO-1758, PO-1933, PO-1936	OP3.6-5	Sulistyowati Endah	MP1-12
Povea-Pacci Heraldo	PO-2168	Santos- Ortiz Maria Del C.	PO-1344	Sultana Samina	PO-1311
Pranata Mulyadi Tedja	PO-1073	Saotome Tomoko	OP1.8-8	Sung Su-Ching	MP8-13
Quattrini Fabrizio	MP4-5	Sapena Oscar	MP6-13		PO-1890
	PO-1827		PO-1400	Sutory Martin	PO-2100
Quinta Gomes Ana Luísa	OP1.8-12	Sasaki Shoko	OP3.4-1	Svanholm Howatson Emma	MP2-3
	MP5-10	Satou Toshiaki	PO-2079		PO-1531
Radloff Kati	MP4-2	Sazdanovska Biljana	PO-2092	Sveningsson Malin	PO-1882
Ragab Ahmed	OP3.7-3		PO-2053	Syed Khurram Azmat	S2.2-2
Rajakpaksha Milinda	PO-2200	Schiftan Dania	PO-1727	Tadele Getnet	PO-1438
Ramanathan Vijayasarithi	MP3-11	Schindele Anna Chuchu	PO-1887		OP2.2-2
Rambaree Komalsingh	OP2.4-3	Schmiedt Streck Valburga	MP10-10	Taisheva Liliya	MP3-2
	PO-1637	Schnarch David	WS2	Takahashi Masahito	OP3.5-8
Ramlachan Padaruth	OP1.8-4	Seeletso Mmabaledi	PO-1287	Tampelli Anna	PO-1705
Rees Madeleine	S2.9-2		PO-1298		MP8-4
Regmi Krishna	OP1.10-18	Seikowski Kurt	PO-1168	Terrein-Roccatti Nadine	PO-1353
Regmi Pramod	MP6-2	Seilhanov Ilyas	PO-1297	Thomsen Sarah	MP8-6
Reinar Liv	MP2-14		PO-1410	Thomson Yvonne	MP9-11
Reinders Jo	OP3.9-7	Setterlund Marc	MP3-18	Tidefors Inga	OP1.5-1
Reis Sheila	OP1.2-6	Sevcikova Anna	S2.2-3	Tihan Aysu K?Vrak	OP3.8-4
	PO-1914		MP8-7	Tikkanen Ronny Heikki	PO-1859
	PO-1919	Sevelius Jae	OP4.1-1	Tinuola Femi	PO-1422
Resnick Anderson Kimberly	OP1.8-3	Shabsigh Ridwan	SS3-2	Tizzano Germaine Boswell	MP4-1
Revell Arlynn	PO-1360	Shaikh Mohsin	PO-1061	Træen Bente	S3.5-4
Ribner David S.	S1.5-3	Sharma Neeru	PO-2076	Træen Bente	PO-1245
Riley Elizabeth	MP6-1	Shaver Frances M.	S2.8-2	Tremblay Gilles	S4.1-3
Ritamo Maija	MP3-7				MP6-9
Rivard Sylvie	PO-1492				

Abstract Book

Troussier Thierry	S3.9-2	Yankah Ekuu	OP3.6-7
Tsai Ching-Hong	PO-1461	Yau Matthew	MP6-8
Tsutsumi Angela	PO-1357		PO-1656
Tuckwell Susie	OP1.10-1	Youn Gahyun	PO-1712
Uchiyama Ayako	PO-1844	Yusran Sartiah	PO-1119
Ullah Ahmed	OP3.10-5		PO-1136
Utomo Iwu Dwisetyani	PO-2097	Zachariassen Peter	S3.8-4
Valkama Sirpa	PO-1826	Zalazar Maria Virginia	MP10-15
Vallejo Medina Pablo	PO-1784		PO-1449
	PO-1786	Zamir Jameel	OP2.4-2
	PO-1787	Zampachova Marketa	MP1-8
Vallin Lisa Michaela	PO-1476	Zaytsev Oleksandr	PO-1181
	PO-1949	Zewolde Solomon Amare	MP7-6
Van Belle Sara	PO-1238		PO-1868
Van Den Hoek Katy	PO-2172	Zharkov Yuriy	OP1.4-5
Vanden Berghe Wim	OP4.2-6		PO-1789
Vanwesenbeeck Ine	PO-2119		PO-1794
Velez Vega Carmen Milagros	OP1.9-9	Ziaei Tayebe	OP1.6-5
Vera Ligia	PO-1305		MP4-9
Verulashvili Iatamze	PO-1133		
Vilarinho Sandra	OP1.1-6		
	MP5-3		
	MP5-11		
Vvedenskaya Elena	MP9-13		
Wabreck Alan	S2.11		
Wallace Mette	PO-2135		
Wallen Kim	P2.1-3		
Wardhani Lynda	S2.4-4		
	MP1-1		
	MP1-4		
Warenius Linnéa	MP7-14		
Wassersug Richard	PO-1759		
Weerakoon Patricia	OP1.10-2		
	OP3.9-1		
	MP7-2		
Wen Jung Kwang	PO-2048		
Wendt Eva	PO-2088		
Whipple Beverly	S1.2-1		
Williams Elizabeth	S3.2-3		
Wind Christina	OP1.10-7		
Winter Sam	OP1.7-5		
	PO-1842		
Wotton Rachel	S3.4-3		
	MP2-15		
	PO-1877		
	PO-1880		
Wrobel Beata	PO-1583		
Wylie Kevan	S1.9-4		
	PO-2012		
Xavier-Vieira Rui	PO-2191		