1- A PRESIDENT UPDATE

As we approach our 22nd World Congress for Sexual Health, I reflect on the huge amount of work that has been undertaken by our global and local scientific and organizing committees. We have developed a wonderful and diverse Congress program that should meet the needs of most of our colleagues working in the specialty and it is not too late to make your booking to Singapore for this most wonderful city experience.

We have been fortunate in finding a professional congress organizer willing to financially underwrite this meeting fairly late into the planning stages and together we have been developing a mutual understanding about how best to support the development of our congresses in the future. The executive team supported by the AC and past presidents will consider the options carefully to
ensure our future meetings remain accessible to all those who want to attend. If you cannot attend, Sexual Health Visual will be recording the key lectures for you to peruse at a later date.

As I previously alluded to, we have now appointed Association House to act as our association managers. It will take some time as we collate all of the information about our huge and diverse membership and organization and I hope that everyone will be able to share some information of some kind to help us develop our databases of information. We hope to be able to provide a much more personalized service to our membership as we develop our tangible benefits for you over the forthcoming months. If you are coming to Singapore, please take the opportunity to meet Michaela at the WAS booth who is our association development manager.

The executive team continues to look at ways of widening our impact and connections with other key global players. In March, in conjunction with the International Society for Sexual Medicine, a joint meeting was held in Panama City. Aimed primarily at clinicians, this was the first global meeting between both organizations with the aim of helping clinicians from across professional backgrounds to be able to reflect and work in an integrated and collective way. Feedback was excellent and I hope that more meetings of shared interest can occur. Our next shared venture is in December and more details are available inside the newsletter. Take a look inside as our newsletter has lots of news from events over the last six months and into the future that I hope will be of interest to you. Earnestly, I thank our editorial team and all of our members for your continued support for the Association.

Warmest greetings

Kevan Wylie; President
WAS WORLD ASSOCIATION FOR SEXUAL HEALTH

2 NEWS FROM WAS COMMITTEES

SEXUALITY EDUCATION COMMITTEE (SEC)
A Statutory Committee

Chair Osmo Kontula (Finland)
Vice-Chair Lotta Löfgren-Mårtenson (Sweden).
Members
Roger Ingham (United Kingdom),
Bill Tavener (USA),
Esther Corona (Mexico),
Cristina Tania Fridman (Argentina),
Sharful (Bobby) Islam Khan (Bangladesh).

WAS PROMOTING GLOBAL SEXUAL HEALTH, SEXUAL RIGHTS & UNIVERSAL SEXUALITY EDUCATION
SEC Committee asks WAS members to submit any information of the barriers in 2014/2015 to implement sexuality education programs in different countries around the world.

The Sexuality Education Committee (SEC) is a statutory committee of the World Association for Sexual Health. The purpose of this committee is to provide information, advice, support and assessments in the area of sexuality education. This committee is also responsible for the Excellence in Education Awards.

The Sexuality Education Committee had decided to collect information and later also to survey sexuality education programs and practice around the world. Committee is especially interested in 2014/2015 of the barriers to implement sexuality education programs in different countries around the world. What are the forces which prevent or disturb national or local sexuality education in your country? SEC Committee asks WAS members to submit any information of these barriers to: Osmo.Kontula@vaestoliitto.fi. The summary of this information will be later published on the WAS website.

Chair: Osmo Kontula
Please contact (Osmo.Kontula@vaestoliitto.fi)

SUB-COMMITTEE OF THE WAS AWARD OF EXCELLENCE AND INNOVATION IN SEX EDUCATION
A Statutory Sub-Committee

The Sub-committee of the Sexuality Education Award has during springtime 2015 been working intensely with reviewing the applications for the WAS Award of Excellence and Innovation in Sex Education.

COMMITTEE MEMBERS
Lotta Löfgren-Mårtenson, Sweden
Chair of the Sub-Committee of the Sexuality Education Award
Osmo Kontula, Finland
Chair of the Sexuality Education Committee
Esther Corona, Mexico
Roger Ingham, United Kingdom
Cristina Tania Fridman, Argentina
Sharful (Bobby) Islam Khan, Bangladesh
Bill Taverner, USA
Felipe Hurtado-Murillo, Spain

The Chairs are responsible for the initiation and conduct of the Excellence in Sexuality Education awards. They promote the call for nominations through the WAS web site and other means. After evaluations of the applicants they make a recommendation to the AC regarding the awardees, one in each for each of the three categories. These categories are (A) Governmental Programs, (B) Academic Programs, and (C) Non-Governmental Organizations.

This year there were applicants to Category A and C, and none in Category B. The standard of the applicants was very high, and in Category A (NGO:s and Individuals) it was in strong completion with others. We now have the pleasure to announce two winners of 2015 WAS Award of Excellence and Innovation in Sex Education! Congratulations to RFSU, Sweden, and PRESSE, Portugal! The winners will be able to receive the award at the 22nd Conference of the World Association for Sexual Health in Singapore 25-28 July 2015.
Category A (NGO):
RFSU, The Swedish Association for Sexuality Education, Sweden, was founded in 1933 when the need of information on birth control and safe deliveries were urgent. Now it is Sweden’s leading organizing in the field of sexual and reproductive health and rights. RFSU is a democratic members’ organization with several local branches and a Congress as the highest decision making body. Today it includes RFSU Clinics, Information & Education, and Advocacy and International Work of a very high standard. The base is a perspective of freedom and human rights to sexuality, based on the freedom to be oneself, the freedom to choose and the freedom to enjoy and works as a fundamental and given part of the Swedish society.
http://www.rfsu.se/en/Engelska/

Category B: None

Category C
(Government-sponsored Program):

PRESSE, Portuguese Programa Regional de Educacao em Saude Escolar, Portugal, is a Regional Program on Sex Education in School Health. The program is sponsored by the Portuguese Government, introduced in the functional area of Health Promotion and Protection. Is was created 2008 by a regional multidisciplinary working group, which addresses the area of sexuality in terms of school health, contributing to the increase of protective factors in relation to sexuality and the promotion of sexual rights. Despite limited resources PRESSE has succeeded to spread their program to schools in the region in an excellent way.
The next call for nominations/applications will be in the beginning of 2017.
For more information on the evaluation criteria for the WAS Award of Excellence and Innovation in Sex Education.
http://www.worldsexology.org/membership/was-awards/apply-for-the-education-award
Chair : Lotta Löfgren-Mårtenson, Sweden

SEXUAL RIGHTS COMMITTEE
A Statutory Committee

June 2015 edition - Sexual Rights for All

Co-Chairs: Yuko Higashi (Japan) & Tommi Paalanen (Finland)
Tamara Adrian (Venezuela)
Mariela Castro (Cuba)
Eli Coleman (USA)
Faysal El-Kak (Lebanon)
Ingrid Geray (France)
Sharful Islam Khan (Bangladesh)
Ilia Lottes (USA)
Rafael Mazin (USA)
Xud Zubieta Méndez (Spain)
Emil Man-Lun Ng (Hong Kong)
Aminta Parra (Venezuela)
Maria Perez (Spain)
Marcia Rocha (Brazil)
Marlene Wasserman (South Africa)

On behalf of Sexual Rights Committee, The invitation is:
Share your thoughts about sexual rights advocacy!
The Sexual Rights Committee welcomes all sexual rights advocates and others interested in the matter to participate and share in a round table session.

What works and what doesn't in advocating sexual rights at grass-roots level? How the Declaration of Sexual Rights has helped the work, and how it can help in the future? What could WAS do to help advocates in different parts of the world?

RT-02 Open Roundtable Session: Advocating Sexual Rights in Different Countries and Cultures. Sharing Good Practices.
Monday, July 27, 3:30 pm
Co-Chairs Yuko Higashi and Tommi Paalanen

GOLD MEDAL COMMITTEE
An Ad hoc committee

Chair: Lillemor Rosenqvist (Sweden)
Members 2013-2015
Vice-Chair: Roy Levin (UK)
Reiko Ohkawa (Japan)
Simon Rosser (USA)
Leon Roberto Gindin (Argentina)
Lars-Gösta Dahlöf (Sweden)

The WAS Gold Medal Committee has been working very hard to select the Gold Medal Awards 2015 and will be very proud to present the winners in Singapore where they will give lectures on their lifelong achievements within the field of sexology and sexual health. The persons who have been elected to receive this most prestigious WAS Award 2015 are:

Doortje Braeken, Holland
Milton Diamond, Hawai, USA
Aminta Parra Colmenárez, Venezuela
Eusebio Rubio-Aurioles, México
Lillemor Rosenqvist, Chair of the WAS Gold Medal Committee

WAS SCIENTIFIC COMMITTEE
A Statutory Committee

MEMBERSHIP
Chair: Pedro Nobre (Portugal)
Vice-Chair: Maryanne Doherty-Poirier (Canada)

Field Leaders
Basic Sciences: Erick Janssen (USA)
Behavioral & Social Sciences: Osmo Kontula (Finland)
Clinical Sciences: Marita MacCabe (Australia)
Educational Sciences: Aleksandar Štulhofer (Croatia)
Medical Sciences: Andrea Salonia (Italy)
Public Health: Maryanne Doherty-Poirier (Canada)
Sexual Rights: Yuko Higashi (Japan)
MESSAGE FROM THE WAS SCIENTIFIC COMMITTEE

Pedro Nobre

WELCOME TO THE WAS CONGRESS IN SINGAPORE

The 22th Congress of the World Association for Sexual Health (WAS) to be held in Singapore between 25 and 28 of July is a moment to celebrate and share the diversity and richness of the science and practice of sexual health/sexual rights. In fact, diversity is probably the most significant feature of our field and definitely one of its strongest qualities. Diversity is expressed by the array of scientific areas that contribute for the understanding of sexuality which include historical and social sciences, behavioural sciences, clinical and medical sciences, as well as educational sciences to name a few. This was also the spirit of our pioneers more than one hundred years ago when Iwan Bloch (1906) coined the term Sexology as the multidisciplinary science of sexuality.

Another key distinctive feature of the WAS is the marriage between sexual health and sexual rights. One of the most important missions of the WAS is to “promote sexual health throughout the lifespan and through the world by developing, promoting and supporting sexology and sexual rights for all” (WAS strategic plan of action, 2007). The advance of scientifically-based sexuality research is a key issue in order to accomplish these goals. The promotion of sexual health through the world and the advocacy of sexual Rights should be strongly supported by evidence based knowledge.

Thus, the mission of the WAS Scientific Committee is to provide and disseminate evidence based knowledge on the different areas that contribute for the promotion of Sexual Health/Sexual Rights. The WAS World Congress is certainly the most important platform to share the state of the art of sexual science and its implications for Sexual Health/Sexual Rights with researchers and practitioners from all around the world.

Diversity is also found in the number of participants attending the WAS Congress from a variety of countries in the five continents. The WAS Congress is also a privileged place to share cultural multiplicity.

During the last year the WAS Scientific Committee together with the Local Scientific Committee and the WAS and Congress Presidents (Kevan Wylie and Ganesan Adaikan) have been strongly devoted to plan a scientific programme of excellent quality for the WAS Congress in Singapore.

For such the structure of the WAS SC played a key role being constituted by world experts in different fields of sex research who leaded the seven tracks chaired by Pedro Nobre.

Chair: Pedro Nobre (Portugal)
Vice-Chair: Maryanne Doherty (Canada)
Track Leaders

Basic Sciences: Erick Janssen (USA)
Behavioral & Social Sciences: Osmo Kontula (Finland)
Clinical Sciences: Marita MacCabe (Australia)
Educational Sciences: Aleksandar Stulhofer (Croatia)
Medical Sciences: Andrea Salonia (Italy)
Public Health: Maryanne Doherty (Canada)
Sexual Rights: Yuko Higashi (Japan)
The WAS SC together with the LSC were responsible for the selection of the speakers using the following criteria: 1) being a world expert in one of the main areas of sexual health/sexual rights, 2) have not been invited to the last WAS Congress, 3) not being a member of the WAS AC or Statutory Committees, 4) balanced representation of the main areas within sexology, 5) balanced regional representation, 6) balanced gender representation. The final list of invited speakers is composed by 16 world experts in sexology, covering the main areas of sexual health (Basic Sciences, Behavioral & Social Sciences, Clinical Sciences, Educational Sciences, Medical Sciences, Public Health, Sexual Rights). Moreover, the list of invited speakers also covers all world regions: North America, South America, Europe, Asia-Pacific, Africa, and Middle East.

Besides the role of the Track leaders an extensive list of more than 70 renowned international experts from all around the world constituted the International Scientific Committee (ISC). The members of the ISC played a key role being responsible for blind reviewing all abstracts submitted to the WAS congress and making recommendations for acceptance or rejection.

Moreover the WAS Congress in Singapore includes a Spanish/Portuguese Scientific Programme and Committee. The Scientific Committee was responsible for the evaluation and selection of the abstracts to be presented in Singapore using Spanish or Portuguese as main language (Spanish/Portuguese Programme). This is a very important step forward regarding the recognition of Spanish as a WAS official language. Spanish and Portuguese together are spoken as first or second language by more than 800 million people in five continents, and their inclusion in the WAS Congress is strategic to spread the influence of WAS worldwide.

The members of the Spanish/Portuguese Scientific Committee were all recognized leaders in the field from several countries in Latin America and Europe chaired by the past WAS president, Eusebio Rubio:

Chair: Eusebio Rubio-Aurioles (Mexico)

Members:
Aminta Parra (Venezuela)
António Palha (Portugal)
Carmita Abdo (Brazil)
Cristina Fridman (Argentina)
Esther Corona (Mexico)
Felipe Hurtado (Espanha)
Gabriela Moita (Portugal)
Jaqueline Brender (Brazil)
Luis Perelman (Mexico)
Rubén Hernández (Venezuela)

Another important strategic decision was the invitation made to all Global and WAS affiliated societies to organize symposia in several ground-breaking topics on the field. This is a very important opportunity to bring all global and WAS affiliated societies together and present/discuss some of the most central and current challenges in the field of sex research/sexual health/sexual rights. This challenged was positively accepted by a significant number of societies from all around the world who organized a total of 22 Symposia.

We welcome all members and affiliated societies to share your expertise and be part of this extraordinary event.
New developments in the WAS Database of Sexual Health

During the first phase of this project a group of five research students (with a grant from the Portuguese Scientific Foundation, FCT) under the supervision of Pedro Nobre conducted a thorough search of available online scientific papers on a variety of topics from sexual health during 2010 and 2011. During the first phase the total number references collected exceeded 11,000 (including 9063 full text papers + 2399 abstracts).

Last year the WAS reached an agreement with The University of Porto to store the World Database of Sexual Health. The Database will be accessible online and WAS members will have access to full texts upon request. The process of integrating the manuscripts on the online archive has started in September 2014 and is expected to be completed during 2016.

Additionally, three students from Porto University have volunteered to update the Database since 2011. This task was started in June and an impressive number of full text manuscripts were already added to the Database. We estimate that the total number of full papers available will reach 20,000 by the end of 2015.

A live demonstration of the online archive will be presented at the WAS Congress in Singapore.

WORLD SEXUAL HEALTH DAY COMMITTEE

And Ad-hoc Committee

Co-Chairs: Luis Perelman y Nadine Terrein-Roccatti de México

Members: Jaqueline Brendler (Brasil), Antón Castellanos-Usigli (México), Cristina Tania Fridman (Argentina), Yuko Higashi, (Japón), Sara Nasserzadeh (EE.UU.), Narayana Reddy (India), Marlene Wasserman (Sudáfrica), Felipe Hurtado (España)

Asesores Honorarios: Esther Corona (México), Rosemary Coates (Australia)

Enlace con EC: María Pérez-Conchillo (España) worldsexualhealthday@gmail.com

WORLD SEXUAL HEALTH DAY 2015

September 4th

"Sexual Health for a Fairer Society"

WORLD SEXUAL HEALTH DAY 2015 WILL FOCUS ON SEXUAL HEALTH AND JUSTICE, SEXUAL RIGHTS AND HUMAN RIGHTS

2015 celebration
On September 4th 2014 the World Association for Sexual Health (WAS) approved and published an updated sexual rights declaration in order to include human rights like Justice. We will look at how promotion of Sexual Health and Sexual Rights contribute to a fairer society for all persons, and will focus on justice related to sexual health and human rights for this year's celebration.

**WAS DECLARATION OF SEXUAL RIGHTS (2014)**

The right to equality and non-discrimination
The right to life, liberty, and security of the person
The right to autonomy and bodily integrity
The right to be free from torture and cruel, inhuman, or degrading treatment or punishment
The right to be free from all forms of violence and coercion
The right to privacy
The right to the highest attainable standard of health, including sexual health; with the possibility of having pleasurable, satisfying, and safe sexual experiences
The right to enjoy the benefits of scientific progress and its application
The right to information
The right to education and the right to comprehensive sexuality education
The right to enter, form, and dissolve marriage and other types of relationships based on equality and full and free consent.
The right to decide whether to have children, the number and spacing of children, and to have the information and the means to do so
The right to the freedom of thought, opinion, and expression
The right to freedom of association and peaceful assembly
The right to participation in public and political life
The right to access to justice, remedies, and redress

What can I do to celebrate World Sexual Health 2015?

As World Sexual Health Day is a global and volunteer celebration, the possibilities are limitless. You can use the theme of this year’s WSHD and take it to wherever you find suitable, and in the ways that are easier for you. If the language or translation of the slogan can be misleading or misinterpreted for cultural or linguistic reasons in your country or region please adapt it. You can organize social, cultural or political activities that involve everyone, or choose from the ones we are proposing.

**Suggested Activities:**

Discuss how the promotion of Sexual Health and Sexual Rights contribute for a fairer society as a whole, and how that can be attained in different countries, cultures, all socio economic levels. Sexuality is a fundamental part of who we are even before birth, and just for being alive we all have the possibility of integrating it better.
Compare the Declaration of Sexual Rights from Valencia (1997) with the 2014 Declaration of Sexual Rights. One of the aims of the 2014 Declaration was to align it to the Universal Declaration of Human Rights. Look at what has been added that basically has to do with “justice, remedies and redress” related to sexual health and explain why Justice related to sexual health is a Human Right.

What is Justice in sexuality?

What is Just in sexuality?

How does the 16th right related to the other 15 rights?

A. Ask people to do a vlog answering:

How does the promotion of sexual health and sexual rights contribute to a fairer society
Give a definition of the kinds of “justice related to sexual health”
What do you need for justice related to sexual health to happen in your bedroom/campus/ work environment /immediate community and other social media platforms).
Who do you talk to/where do you go if you observe an injustice related to sexual health? This way we raise awareness about services and supports that are available as well.
We can also address what are considered justice related to sexual health’s bare minimums (as essential human rights) and what are the misbeliefs out there (that sexual rights are privileges or just a matter of quality of life for some people not critical)

B. The vision of WSHD is to become a UN official day, so we have to build the way in our cities, states, countries as has been done for example in the state of Jalisco in the country of Mexico or as a communication in social media from the president's office, so don't overlook to approach your governmental institutions or politicians in order to make a statement, or to work to proclaim the celebration day.

C. Take some ideas from what others have done in past celebrations in our Facebook page, and be creative with your own celebration. Don't forget to share it with everybody.
Explain to the people who participate, that the most representative pictures/vlogs will be uploaded to the official WAS Global Facebook page of World Sexual Health Day (https://www.facebook.com/4sept).
Always remember: These are just alternatives... These activities are only proposals... Possibilities to celebrate WSHD are limitless!

The activities we suggest do not have to take place in public spaces necessarily. You can promote the idea in more private spaces, such as an office or a classroom.

Through social networks, WAS will encourage people to participate individually or as groups in the celebration, giving their ideas and their own evaluations, take pictures of themselves celebrating their own way, in order to put them as their profile picture in Facebook and to upload them to the Global Facebook page of WSHD.
The background of WSHD

In 2010, the World Association for Sexual Health (WAS) called on all their member organizations and all NGOs to celebrate, each September 4th, World Sexual Health Day in an effort to promote a greater social awareness of sexual health across the globe.

The first World Sexual Health Day was introduced with the slogan “Let’s talk about it!” to start breaking fears and taboos surrounding sexuality. The topic of WSHD 2010 was addressed in different forums, many of which were intergenerational discussions.

2011: World Sexual Health Day 2011 focused on youth “Youth’s sexual health: Shared rights and responsibilities”. The topic of WSHD was a consequence of the creation of the WAS Youth Initiative and in the context of the International Year of Youth proclaimed by United Nations. Within WAS, the different members of the Advisory Committee and the Youth Initiative Committee celebrated the day by organizing a wide range of activities in their home countries, from Round Table Discussions to Conferences and Art Exhibitions.

2012: The focus of World Sexual Health Day 2012 was diversity and minorities, “In a diverse world, sexual health for all!” Around the world, activities to commemorate WSHD 2012 made visible the realities of population groups such as: the elderly, transgender people, people living with disabilities, immigrants.

2013: The celebration WSHD 2013, was joyful, we collected lots of pictures from around the world with people taking conscience of their sexual rights “To achieve sexual health, picture yourself owning your sexual rights” aiming to remind us about the fundamental importance that sexual rights have in order to achieve sexual health.

In 2014, we went back to basics, with our slogan "Sexual Health: the wellbeing of sexuality" we aimed to focus on the WAS/WHO working definition of sexual health (2002): "Sexual health is a state of physical, emotional, mental and social wellbeing in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and
safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.”

**How many countries have been involved in WSHD?** World Sexual Health Day is a relatively new global celebration that functions on a volunteer basis. To date, we have reports that more than 35 countries have participated, including:

Argentina – Australia - Austria- Bahréin - Brazil – Chile- Colombia- Croatia - Cuba -Dominican Republic - El Salvador- Finland- India- Indonesia- Iran -Israel -Italy- Japan -Lebanon -Lithuania -Macedonia – México - Netherlands - Nicaragua - Pakistan- Panamá -Paraguay – Peru- Portugal- Puerto Rico-South Africa - Spain - Sweden -Tunisia –Turkey -Uruguay - USA - Venezuela

Country organizers have taken WSHD activities to schools, media, hospitals, libraries, universities, public squares, art halls, theatre groups, etc. WSHD aims to expand to many different social contexts throughout the imagination of its organizers! WAS wants to ensure that sexual health issues are widely discussed everywhere!

KISS (KEEP IT SMART AND SIMPLE)! Whatever you decide to do, it does not have to implicate big expenses, it can easily be arranged with a very small amount of money.


Access to the WAS Declaration of Sexual Rights to obtain the name and definitions of all sexual rights: [http://www.worldsexology.org/resources/declaration-of-sexual-rights/](http://www.worldsexology.org/resources/declaration-of-sexual-rights/)

Promote that people from ALL ages can get engaged in the activity you organize. Children, teenagers, adults, seniors, we want all of them participate and evaluate their own sexual health!

A good strategy of promotion is to try to involve celebrities, government officials and politicians in the activity that you organize.

Be sure to accurately translate WAS’ Declaration of Sexual Rights into your own native language or to use the documents from WAS web page

The core idea behind WSHD is that people have to understand and inform themselves about sexual health! If you carry out the suggested activity, you will see that by thinking about justice related to sexual health, people can realize what they need to do to attain it. Whatever you decide to do feel good about it!

You can use either one of our WSHD logos in your publicity, they are available in WAS’ website [www.worldsexualhealth.org](http://www.worldsexualhealth.org)

And… Don’t forget to LIKE and SHARE the official Global WSHD Facebook page: [www.facebook.com/4sept](http://www.facebook.com/4sept)

You can stay in touch with the WSHD committee through our

Email: worldsexualhealthday@gmail.com

Twitter:@SexualHealthday (in English)
@DiaSaludSexual (in Spanish)
Facebook: Upload all the pictures you take to our page!

All WAS member and non-member organizations and individuals are welcome to participate and organize an event to celebrate WSHD.

If you as an individual or your organization are interested in becoming a member of WAS, please contact
Dr. Narayana Reddy degrn@gmail.com.

Best regards,
World Sexual Health Day Committee
worldsexualhealthday@gmail.com

WORLD SEXUAL HEALTH DAY IN NORTH AMERICA

The World Sexual Health Day, 2015 celebration will be held in New York on September 2015 from 2-4 pm Eastern Time. United Nations Population's Fund (UNFPA) is our host this year. We have world renowned panel speakers who would contribute to our evolving discourse around sexual health and justice for all.

The event is by invitation only as the space is limited however, you can join us live from anywhere in the world or organize your own event and share the news with us. Please check out the website for more details and to gain ideas as how to get involved for the celebration in North America. http://www.worldsexualhealthday.com

Sara Nasserzadeh, PhD
Chair of the Organizing Committee for the World Sexual Health Day, North America

MIDDLE EAST SEXUAL HEALTH COMMITTEE

An Ad hoc Committee

2013-2015
Chair: Dr. Sara Nasserzadeh (Iran/USA)
Dr. Faysal El-Kak (Lebanon)- Vice Chair
Dr. Elham Atalla (Bahrain)
Mr. Qadeer Baig (Pakistan)

The Middle East Sexual Health Committee is moving forward with its mission to support individuals and organizations active within the field of sexual health and rights in the region. The region is getting ready to celebrate the world Sexual Health Day in September. Please contact your local group (you can find them on the website the membership list of WAS) to join forces for this upcoming celebration and receive professional support. We welcomed new members to WAS and to the MESHC who will be a part of this evolving committee. If you are interested please send us your information and we will be back in touch.

Dr. Sara Nasserzadeh (Iran/USA)
UPDATE FROM THE YOUTH INITIATIVE COMMITTEE

An Ad hoc Committee

The WAS Youth Initiative Committee (YIC) has been active in the preparations towards the World Congress for Sexual Health in Singapore. We will be present in the following activities:

-Masayoshi Yanagida, Stefano Eleuteri & Anton Castellanos Usigli will facilitate a workshop about sexual health and rights for young people on Saturday July 25th from 3:30 pm to 5:00 pm.

-Anton Castellanos Usigli, Chair of the WAS YIC, will participate in the Love Matters Symposium on Sunday July 26th from 1:30 pm to 3:00 pm. The Symposium is entitled: “Putting the sexy into sexual health education”. Anton will speak along with Doortje Braeken (IPPF), John Santelli (Columbia University) and Michelle Chakkalackal (Love Matters/RNW media). The discussion will focus on how to integrate sexual pleasure in sex education provided to young people.

-Stefano Eleuteri, Vice-Chair of the WAS YIC, will participate in a Symposium organized by the UNESCO Chair of Sexual Health and Human Rights and the WAS Sexual Rights Committee on Sunday July 26th from 3:30 to 5:00 pm. The symposium will focus on sex education challenges.

Anton Castellanos Usigli, Chair (México)

3- NEWS FROM THE REGIONS

The WAS Federations with their regional bi-annual congresses take place in the alternating years. Here are the dates for the Regional Congresses in 2015 at this first newsletter.

EFS
European Federation of Sexology 2015

EFS AT THE “17TH CONGRESS OF THE EUROPEAN SOCIETY FOR SEXUAL MEDICINE”: IMPROVING TOGETHER

From 5th to 7th February 2015 the “17th Congress of the European Society for Sexual Medicine” was held in Copenhagen, Denmark in the lovely scenery of Bella Center. Goals of congress were to both deliver optimal scientific and educational programs and to promote the field of Sexual Medicine. Contents covered topics regarding sexes and all sexual orientations; in addiction to that state-of-the-art, educational opportunities and the latest innovative research had been highlighted. Over 1.250 delegates representing 65 countries all over the world had taken part and, among them, also an important delegation representing our Federation attended the event. As a result of the well-established collaboration between these societies, a joint interactive symposium took place alternating exponents of both scientific societies in very interesting speeches. Main topic was to discuss and underline novel approaches to psychotherapy in sexual medicine. Chairs were Salvatore Caruso (president of our Scientific Committee) and Paraskevi-Sofia Kirana.
(psychotherapist, member of ESSM educational committee and editor of “The EFS and ESSM Syllabus of Clinical Sexology”). The symposium was opened by Francesca Tripodi (EFS/ESSM) who discussed the role of biopsychosocial model in modern clinical sexology, briefly retracing its history and clarifying next goals such as implementation of collaboration between different professionals and scientific societies. Then was the turn of Pedro J. Nobre, who discussed the role of "Cognitive Behavioral Theory (CBT)" in sexology practice. His speech was focalized on cognitive components influencing sexuality such as sexual beliefs, automatic thoughts and cognitive schemas. In line with this theory, Marieke Dewitte focused her debate on impact of mindfulness, treatment very widespread not only in sexual therapy but in overall health psychology. Specifically her intervention regarded treatment of disorders in arousal phase. The symposium was closed by the intervention of Kevan Wylie, who explored costs and benefits of technology applied to sexual health, the so-called e-health. This symposium is the proof of a partnership that is bearing fruits already: just think about “The EFS and ESSM Syllabus of Clinical Sexology”, certifications such as “EFS & ESSM Certified Psycho-Sexologist (ECPS)” and the “School of Sexual Medicine”. We hope that this fruits can be grown by the next generation of young clinicians of sexual health.

Filippo Maria Nimbi
Chiara Simonelli, President of EFS

FIRST ANNOUNCEMENT OF THE “13TH CONGRESS OF THE EUROPEAN FEDERATION OF SEXOLOGY”

Dear Colleagues and Friends,

On behalf of the European Federation of Sexology (EFS) and the Croatian Association for Sex Therapy (CAST) it is a great honor to present to you the “13th Congress of the European Federation of Sexology” from 25th to 28th of May, 2016 in the beautiful scenery of Dubrovnik (Croatia).

“Sexology: body, mind and culture” – The choice was not so hard: following the leading bio psychosocial model, sexology is a human experience that is truly influenced by our bodies, our mind and psychology, and also by our culture, values, religion, politics and attitudes. Therefore it is a truly multidisciplinary and multi-level area of research and clinical work.

Therefore, following the EFS tradition, we would like to invite all the professionals who work in the realm of sexology to give their scientific contribution: psychologists, psychiatrists, urologists, gynecologists, general practitioners, endocrinologists, educators, teachers, social workers, basic researchers, nurses and many, many others to be part of this endeavor.
We will try hard to make the Congress the place where new and innovative approaches to both research and clinical work, and also sexual education and sexual rights, can be presented, heard and promoted. Therefore, we invite all of you who have something to say in regard to Sexology, to come and share your work with the scientific sexologist’s community; and all of you who want to hear and learn, to come and enjoy. Our Scientific Committee is working on a rich and outstanding program that soon will be available for you.

The Congress will be held in Dubrovnik, town rich in history and beauty, clear blue sea and clear blue sky. The City is situated in the southern part of Croatia, the country with more than a thousand islands (1.185 islands and 4058 km of coastline, to be precise). So, you can enjoy not just the scientific and professional work at the Congress, but also relax from your everyday work in a beautiful natural and cultural context.

We would like to invite you and welcome you to actively become a member of the great family of EFS, and share with us the beauty of dealing with sexuality and helping people being more happy and satisfied with their sexual lives.

Don't miss the opportunity!

Please follow us on:

Websites: http://www.europeansexology.com/
http://web.aiimgroupinternational.com/2016/efs/
Facebook: https://www.facebook.com/pages/European-Federation-of-Sexology-EFS/351278201637772
Twitter: https://twitter.com/EFS_Sexology

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**FLASSES**

FEDERACIÓN LATINOAMERICANA DE SOCIEDADES DE SEXOLOGÍA Y EDUCACIÓN SEXUAL

REPORT OF FLASSES´ ACTIVITIES FOR WAS (SEPTEMBER 2014, JUNE 2015)
As we have previously informed, there is a new board of directors since September 2014. It is chaired by Leon Roberto Gindin M.D.

Informs:

1. Development of a new Webpage, which is continually updated (www.flasses.net)

2. Newsletters every 45 days. We have already made 5. These newsletters contain information about different societies, and scientific activities. Specific information about our mother society (WAS). We also publish scientific papers and works, magazine summaries, and sexological information.

3. Attendance of FLASSES board to international events.

Panama’s Congress. Sponsored by SLAMS, ISSM, and WAS.

WE participated with our scientific work (over 10 papers), and with a symposium held completely in Spanish.

Over 15 members of FLASSES attended.

Incredible feedback and experience with the members from WAS, ISSM and SLAMS.

4. Attendance to the celebration of the 50th anniversary of the foundation of S.U.S (Uruguayan Society of Sexuality). We were invited to this event and Leon Gindin M.D presented a paper titled: Experience based Sexology VS Evidence based Sexology. Representing WAS, Cristina Tania Fridman (BA) gave a lecture.

5. Affiliated Societies held their local congresses (Mexico, Brazil, Uruguay)

6. In the coming months we will attend SLAMS’ Congress in Montevideo, where we will held a FLASSES symposium on sexual education.

President: Leon Roberto Gindin (Argentina)
First Vice-president: Rafael Garcia Alvarez (Dominican Republic)
Second Vice-president: Jaqueline Brendler (Brasil)
Secretary: Luz Jaimes (Venezuela)
Treasurer: Felipe Hurtado Murillo (España)
First Chairperson: Hilda Dinorah Machín García (Uruguay)
Second Chairperson: María de los Ángeles Núñez (Ecuador)
Third Chairperson: Ligia Vega Gamboa (México)
Past President: Antonio Casaubón Alcaraz (España)

DATA OF FLASSES’ NEW PRESIDENT, TO BE RECORDED BY WAS
Dr. Leon Roberto Gindin
Email: leon.gindin@gmail.com
Dear friends of WAS

FLASSES IN SINGAPORE
On July 26th 2015 in Singapore, FLASSES´ symposium will be held, as part of the world congress held by WAS. This symposium will be carried out in Spanish. Spanish is one of WAS´ official languages and the official language of FLASSES.
We expect a good Latin-American presence, with the goal of improving the level of discussion in the course. In name of Felipe Hurtado Murillo, Maria Perez Conchillo, Aminta Parra Colmenares and myself : by this letter we extend our invitation to all our Latin-American colleagues.
Lots of Love
Jaqueline Brendler

PROGRAM
PERSISTENCE OF VARIOUS FORMS OF EXPRESSION OF VIOLENCE BASED ON GENDER, AGE AND FUNCTIONAL DIVERSITY: A WORRYING SOCIAL REALITY.

Chair: Jaqueline BRENDLER
- Gender violence in women: a global social reality. Felipe HURTADO-MURILLO.
- Child Sexual Abuse: a proposal for intervention. Maria PEREZ-CONCHILLO.
- Violence: An approach to prevention in handicapped persons. Aminta PARRA-COLMENARES.
- Women: Reflections on sexual violence. Jaqueline BRENDLER


FLASSES and WAS were part of the event and joined in the celebration.

Historical Background: Foundation
On April 9th 1965 The Uruguayan Society of Sexology was formally founded in Montevideo.
On October second of 1978 a convention was held, in this convention they approved the new statutes and they selected the board of directors. They also underwent the process of obtaining legal capacity, which they did. A good amount of qualified professionals decide to become members.

Among the active members, collaborators, supporters, and even the people that walked away from the field of sexology, over 2000 people went through the registries of the Uruguayan society of Sexology (SUS). People coming from different fields and professions, and sometimes with opposite ideas. They had the possibility of working together and coexist in a healthy clash of viewpoints. In the cases this was not possible; people could always refer to the statutes to solve different conflicts. The SUS has had children, as their partners and members founded NGOs, and Work groups in
sexology that have had or have great results. They did this while they kept their membership and commitment to SUS. Few people have left, some of them did it silently, and others did it with a great amount of pain.

50th year anniversary

On April 25th we celebrated our 50 years of history. We welcomed our foreign guests: Professor Leon Roberto Gindin M.D, president of FLASSES, and Cristina Tania Fridman representing WAS. Both of them gave great lectures.

Afterward the Professor Andres Flores Colombino M.D (Former president of SUS, and former president of FLASSES) reviewed SUS’ 50 years of history.

Our partner Nancy Chenlo received the certification from FLASSES, validating her work as a sexologist. Our foreign guests were named Proponent Members of our society, receiving the corresponding certificates.

Over 50 people were part of the event. The guests were conformed by members, boards and partner associations.

We also enjoyed the presence of important news and media broadcasting agencies. The current president is the Professor Santiago Cedres M.D.

WAS NEWSLETTER

The major AOFS activity is its biennial conference which allows the region to share professional expertise and to network for personal development. The next AOFS conference is being held in Busan, Korea 31 March to 3 April 2016. President of the conference, Professor Nam Cheol Park, has formed a significant consortium of Korean organizations involved in the sexual health arena to guide the building of this conference.

AOFS was incorporated in Hong Kong in 1991 with a Memorandum and Articles of Association. After 25 years the organization is looking to move from its Hong Kong home to a new location and to revamp its constitution. It is a good opportunity to revise details to meet modern administrative policies and facilities.

Warm Regards
Dr Margaret Redelman OAM
President AOFS

Please send contributions to the Newsletter to Margaret Redelman <aofsasia@gmail.com> Warm regards

DR MARGARET REDELMAN (AUSTRALIA) RECEIVED THE ORDER OF AUSTRALIA MEDAL (OAM)

In the 2015 Australia Day's Honor List. This was conferred on 30th April 2015 at Government House in Sydney by His Excellency General the Honorable David Hurley AC DSC the Governor of New South Wales. The Order of Australia was instituted as an Australian society of honor for the

WAS PROMOTING GLOBAL SEXUAL HEALTH, SEXUAL RIGHTS & UNIVERSAL SEXUALITY EDUCATION
purpose of according recognition to Australian citizens and other persons for achievement or
meritorious service. Dr. Redelman received her award for service to medicine, particularly in the
field of sexual health.

NAFSO - NORTH AMERICAN FEDERATION OF SEXUALITY ORGANIZATIONS

Has no news to report, as we are not yet fully reorganized and active.

Michael Reece; Ph.D., MPH; President
Professor & Associate Dean for Research and Graduate Studies -School of Public Health

AFSHR THE AFRICAN FEDERATION FOR SEXUAL HEALTH AND RIGHTS

MARLENE WASSERMAN – REPORT FOR WAS MEDIA COMMITTEE
THE AFRICAN FEDERATION FOR SEXUAL HEALTH AND RIGHTS WITH A SPECIFIC FOCUS ON SOUTH AFRICA

MEETINGS:

6th Africa Conference On Sexual Health And Rights (6ACSHR).
Theme: “Eliminating Women and Girls’ Sexual and Reproductive Health Vulnerabilities in Africa”.
The conference held in Yaoundé, Cameroon, February 3-7, 2014, and hosted by the Women in
Alternative Action (WAA), Cameroon.

7th Africa Conference on Sexual Health and Rights (7ACSHR)
THEME “Realizing Demographic Dividend in Africa: the Critical Importance of Adolescents and
Youth Sexual and Reproductive Health and Rights”
February 8 - 12, 2016 | Accra, Ghana
ASSM: (African Society for Sexual Medicine) Congress
Elangeni Hotel, Durban, Kwa-Zulu Natal, South Africa
27th -29th November 2015
Theme: Sexuality & Intimacy – The Missing links in Holistic Care

NEW INITIATIVES:

Africa Civil Society Coalition on Population and Development (ACCPD). The objectives of the ACCPD are as follows:

• Advocate and mobilize support for the full and comprehensive implementation of the ICPD Programme of Action beyond 2014, including the unfinished business and the emerging issues.

• Canvass for the inclusion of population and development issues, including sexual and reproductive health and rights, in the post 2015 Development Agenda.

• Campaign for and support the implementation of Universal Access to Sexual and Reproductive Health information and services for all.

The ACCPD will be a broad based Africa civil society organizations only focused coalition, that will be thematically organized with the core principles of human rights, non-discrimination, accountability, inclusive participation, gender equity and equality.

SASHA (South African Sexual Health Association) has been negotiating with local accrediting body SAQUA as well as with ESSM and is in the process of standardizing training of members by offering opportunity to enter ESSM training program. This is a very important step as there is no formal training for South African professionals interested in practicing sexual medicine and sex therapy.

SEXUAL HEALTH IN AFRICA, SPECIFICALLY SOUTH AFRICA

Homosexuality and transgender remains illegal, even punishable by law, in 38 African countries

South Africa, the only country with specific protections against discrimination aimed at LGBT citizens. South Africa is also the only nation in Africa with marriage equality.

Earlier this year, South Africa welcomed its first openly gay Member of Parliament, Zakhele Mbhele.

But even in South Africa, there are those who can't hide their homophobia. In fact, President Jacob Zuma said that allowing gay people to marry or adopt children would be "a disgrace" to South Africa and to God.

RATE OF HIV/AIDS – SOUTH AFRICA HAS THE HIGHEST RATES OF NEW INFECTIONS WORLDWIDE.

HIV and AIDS estimates (2013)
Number of people living with HIV =6,300,000 [6,000,000 - 6,500,000]
Adults aged 15 to 49 prevalence rate =19.1% [18.1% - 19.9%]
Adults aged 15 and up living with HIV =5,900,000 [5,700,000 - 6,200,000]
Women aged 15 and up living with HIV = 3,500,000 [3,300,000 - 3,700,000]
Children aged 0 to 14 living with HIV =360,000 [320,000 - 390,000]
Deaths due to AIDS =200,000 [170,000 - 220,000]
• Orphans due to AIDS aged 0 to 17 = 2,400,000 [810,000 - 2,600,000]
• High number of HIV+ people on ARV’s
• Availability of ARV’S unreliable.

RAPE /SEXUAL VIOLENCE
The Medical Research Council has estimated that only one in nine rapes are reported to the police. Thus the actual numbers of rapes in SA is much higher than numbers recorded by the police.

Culture of violence, extreme violence unique to South Africa

Intimate Partner Violence - in South Africa a woman is killed every six hours by an intimate partner, another record-setting statistic

Rape is a significant factor in the spread of HIV infection

Child rape/abuse has reached epidemic proportions

RESPONSE TO SITUATION:
The Departments of Health and Education recognize the sexual health problems in South Africa. They are floundering in an attempt to stop the hemorrhagic effect this is having on the public health system and the children of our country. Their initiatives range from a proposed campaign to hand out condoms to all learners from age 10 years and older, to prevent overwhelming teen pregnancies (which place these teens at high risk of HIV/AIDS) to criminalizing children under the age of 16 who are caught having penetration.

IMPACT ON ME AS PERSON & PROFESSIONAL:
Living in a country and continent which carries the stigma of having the highest burden of sexual health and rights violations, due to socio –political and economic factors, is like watching a wound permanently bleeding. There are many reasons to be a proud South African– our constitution remains the most progressive in the world – yet our Judicial and police system fails our women, men and children. Our health system is over burdened with limited resources and our education system attempting to catch up on basic literacy and numeracy. Yet we have a democracy and the right to march through the streets and protest. Sexual health and rights are recognizable rights. Yet many dark nights await vulnerable women and children as literally we enter an era of daily black out as our electricity system fails us, so placing people at higher risk of sexual violence and thus HIV/AIDS.

It takes a brave heart to practice and preach sexual health and rights in darkest Africa. And paradoxically this continues to motivate me and my colleagues who steadfastly work towards a sexually healthier country and continent.

Dr. Marlene Wasserman
GOOD NEWS FROM SOUTH AFRICA

After a few slumbering years, SASHA (The Southern African Sexual Health Association) has woken up full of energy! With a brand new image, new website and new executive committee, we are very excited to be providing continuous education and support to healthcare professionals with an interest in sexual health. Dr Elmari Mulder Craig was appointed as President, Dr Eugene Viljoen as Vice President with Executive Board members, Dr Elna Rudolph, Dr Prithy Ramlachan, Dr Anthony Smith, Deidre Pretorius, Delene Van Dyk, Jillian Butterworth and Dr Percival Moodley.

SASHA is looking forward to our symposium at the WAS Conference in Singapore – offering an African and multidisciplinary team perspective on unconsummated marriages because of sexual pain. We are proud of our association with WAS and looking forward to support WAS projects in the future. We are already planning events for World Sexual Health Day 2015!

WELCOME MESSAGE

Dear Friends,

It gives us immense pleasure to invite all of you from the Asia-Pacific region and world at large to join us in Singapore in July 2015 to celebrate the 22nd World Congress of Sexology. We are planning to have a well-balanced and comprehensive scientific program covering all aspects of sexual health through plenary lectures, symposia, instructional courses, open discussions, debates and posters and so on. We are also committed to having a colourful and joyous social program. Singapore is an attractive, safe and vibrant modern city with a range of activities that cater to any individual's needs. We are very confident that you will have a memorable time in Singapore, so
please mark it down in your calendar and we look forward to welcoming you all in Singapore in July 2015.

Prof P Ganesan Adaikan
WAS2015 Congress President
ON BEHALF OF LOCAL ORGANIZING COMMITTEE

CONGRESS VENUE
Suntec Singapore Convention & Exhibition Centre
1 Raffles Boulevard, Sunset City, Singapore 039593 - Phone +6563372888
E-mail: sales@suntecsingapore.com
Suntec Singapore, the world-renowned, international venue with the perfect location, the right space, a high level of flexibility and cutting-edge technology is situated in the Central Business District of Singapore and just minutes from the city’s entertainment and cultural attractions. Since opening in 1995, Suntec Singapore has acquired a strong reputation as one of Asia’s pioneering and most awarded international venues, hosting more than 18,000 events including some of the world’s largest exhibitions and conventions. Suntec Singapore Convention & Exhibition Centre was reopened after very big modernisation programme on June 3, 2013 and have a total meeting space over 42,000 m². Suntec Singapore is situated only 20 minutes from Changi International Airport.

22nd WORLD CONGRESS SECRETARIAT
GUARANT International
Na Pankráci 17, 140 21 Prague 4, Czech Republic
Phone: +420 284 001 444, Fax: +420 284 001 448
E-mail: was2015.secretariat@guarant.cz
Website: www.was2015.org

PLEASE VISIT THE CONGRESS WEBSITE:
WWW.WAS2015.ORG
FOR REGULAR UPDATES

SUPPORTING SOCIETIES Action for AIDS, Singapore; Asia-Oceania Federation of Sexology; Asia-Pacific Society for Sexual Medicine; Consortium of Thai Institutes for STDs & AIDS; Council of Sex Education and Parenthood International; Family Planning Association of Sri Lanka; Hong Kong Sex Education Association; Indian Association of Sex Educators, Counselors & Therapists; Indian Association for Sexology; Indonesian Society for Sexology; Japan Federation of Sexology; Japan Society for Andrology; Korean Andrological Society; Malaysian Society of Andrology & the Study of the Ageing Male; Obstetrical & Gynecological Society of Singapore; Singapore Planned Parenthood Association; Singapore Urological Association; Society for Men’s Health, Singapore; Society of Australian Sexologists.
FOR YOUR AGENDA- UPCOMING SEXUAL HEALTH RELATED MEETINGS.
SEXOLOGY / SEXUAL HEALTH MEETINGS

25 – 28 July 2015
22nd World Congress for Sexual Health
Singapore

2015

3rd International Conference for the Social Sciences and Humanities in HIV

http://www.was2015.org/

Meeting of the International Academy of Sex Research 2015 Toronto, Canada, August 9-12 of 2015.
www.iasr.org/CMS/node/21

Meeting Theme: Sexualities in the Social World –

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http://www.asanet.org/AM2015/program_information.cfm

7mo. Congreso Cubano de Educación, Orientación y Terapia Sexual, Septiembre 15-18 La Habana, Cuba 2015
http://www.sexologiacuba.com/


IV Congress of Medical Sexology WAMS- October 9-10 Miami- Florida- USA. 2015
www.medicalsexologycongress.com

www.sagig.org.ar

SASH Congress. November 28th Buenos Aires- Argentina 2015

2016

XVIII Congreso Latinoamericano de Sexualidad y Educación Sexual. CLASES. Caracas, Venezuela 2016
Welcome from the Media Committee:

“We are pleased to present the fourth WAS’s Newsletter (dated June 2015). The Media Committee has a team. Cristina Tania Fridman (Argentina) and Alain Giami (France) are the Co-Chairs. The Media Committee which also includes Rubén Hernandez Serrano (Venezuela) and Marlene Wasserman (South Africa) who are regular partners on this committee as well as Tommi Paalanen (Finland) who is responsible for the website of WAS. Kevan Wylie (President of WAS) is one of the principal collaborators of the Newsletter.

As it was mentioned in the three previous newsletters, we believe in the demonstrative power and exchange that provides this communication tool with, the impact of instant communication and globalization. We can learn from each other and seek a constant dialogue around sexuality.

The aim of this newsletter is to contribute to an active communication among members of the World Association for Sexual Health between all WAS Federations and WAS Committees (Statutory and ad hoc) and outside WAS with individuals and partner organizations. The Newsletter will publish news about activities (congresses, declarations, projects, etc…) but also our objective is to develop the WAS newsletter as a forum for discussion about ongoing projects in sexual rights and world press on sexology around the world.

To help us keep the WAS newsletter updated, we ask you to send us any news from your regions or associations to be reviewed for inclusion in the future Newsletters. WAS Newsletters are published bi-annually. The next newsletter will be published by December 2015. Final deadline for submission of the materials is November 10th. We look forward to hearing from you.

Alain Giami
Cristina Tania Fridman

Please connect with Cristina Tania Fridman: ctfridman@gmail.com or Alain Giami: alain.giami@inserm.fr. The specific area of the MC within WAS’ website will be automatically updated upon completion.

Best wishes to all
Cristina & Alain

WAS PROMOTING GLOBAL SEXUAL HEALTH, SEXUAL RIGHTS & UNIVERSAL SEXUALITY EDUCATION
7 - MISCELLANEOUS

CELEBRATING APRIL 9TH
SIXTH NATIONAL DAY OF SEXOLOGY IN URUGUAY
WAS & FLASSES JOIN THE CELEBRATION.

Dear Colleagues from the Uruguayan federation of sexology -FUSEX.

Sexual issues are increasingly becoming the center of political concerns. We humans are complex creatures, arbitrary and changing. A great majority of people believe that through sexuality we must find ourselves, and at the same time we must find our place in the world.

In our culture it is still a matter of great importance “who” is our sexual partner. Gender; the social condition of man and woman; and sexuality (our cultural way of experimenting pleasure and expressing bodily desires) are inextricably linked.

The ancients paid attention to issues of excess or abuse, activity and passivity in sexual relationships.

Topics such as: The boundaries of gender, sexual orientations, and the debates about normalcy or deviations on our sexual behavior, which traditionally had an obsessive characterization among society; are now undergoing a resistance crisis. Queer culture is clear-cut example of the impossibility of always belonging to a Pre-fixed category.

The new structures of parenthood and families, the discourses about erotism and pornography, the positively pretended right to sexual education being contrasted by the negative exercise of this education, power and sexually based violence.

Our Sexuality lends us with an identity and normatively conforms our sense of being. Sexuality configures our public and personal life and it’s a historical construction. It is a complex phenomenon, and this is exactly why it is not the most spontaneous and natural aspect of ourselves. Having considered this, it is main to ask: Is sex threatening and dangerous or a potential source towards our freedom?

Sex, captivates or terrorizes, these are mutually exclusive manifestations. Rarely sex is placed in an intermediate zone.

The meanings we attribute to sexuality are socially organized and held under a diverse number of claims. These claims pretend to express what sex is, what sex should be, and what sex could be. Through anthropology, sociology and sexual research (since Kinsey) we have an increased conscience of the variety of sexualities that exist among other cultures, and in our own. This change of conscience oblige us to wonder why things are still the way they are in our current society. Economics, ethnicity, gender, and morality are new fields of research that posit a new challenge to this area of sexuality.

WAS PROMOTING GLOBAL SEXUAL HEALTH, SEXUAL RIGHTS & UNIVERSAL SEXUALITY EDUCATION
It seems like the debate on “programmed nature” and the “selfish generosity” of sex, is not sufficient to answer all the questions that our sexuality asks. This means that concepts like “the pathway to orgasm”, “the permanent erection” and the “flaming Desire” are not completely satisfactory to thoroughly evaluate all the areas of sexuality. We all construct sexuality together as this is a social phenomenon.

In this Western society: How is sexuality (a mark of our identity) consolidated in a social organization that promotes an implicit contract claiming that we should never interrupt our sexual activity? Sexuality is a constant reflexive commitment, it encourages us to know ourselves and understand our identity.

As well, the medical field has set footing on the area of sexuality. It brought new aphrodisiacs, which created important normative effects. This caused the society to believe in a purely mechanical way of looking at the proper sexual functioning. This view or paradigm establishes quality standards for both genders, and also for the nature of sexual intercourse among ourselves and between other people. Sexual relationships are as complex as social relationships; this means that they are plural and changing through different societies and different ethnicities. This diversity represents a great challenge now and in the future.

The history of sexuality is the history of our concerns. We are always concerned about the topic of how we should live. Usually we are restrained in our thinking by questions of “with whom” and “how” we should live.

These questions are always looming silently in the background, representing the views of the society we are immersed in.

We can see that Sexuality represents our society, and this is why is important to study it through sexology and to dedicate a day for its celebration.

We join on this celebration with the desire of continuing our collaborations in the area of sexology. We congratulate the people of Uruguay on the celebration of this important event.

Our warmest regards from FLASSES AND WAS.

Sec. CRISTINA TANIA FRIDMAN –
CO-Chair Media Committee of WAS and Member of Education Committee. Member of Flasses’s Accreditation

SEXUAL RIGHTS ARE ONE OF THE CORE THEMES OF RNW MEDIA.

OUR LOVE MATTERS PROGRAMME provides information about sex and sexuality in countries where this is taboo or restricted. Various projects in our regions focus on issues around gender-based violence, discrimination and empowerment of women, girls and sexual minorities.

ANTÓN CASTELLANOS USIGLI is a regular blogger for Hablemos de sexo y amor – the Love Matters platform for Mexico and Venezuela. He’s also one of the young activists who took part in RNW Media’s Stand by Me Campaign during Amsterdam Gay Pride in 2014 and chair of the Youth
Initiative Committee for the World Association for Sexual Health (WAS). This is his take on the No Ceilings report on global gender equality, released earlier this year.

Chelsea Clinton, Vice Chair of the Clinton Foundation, was my professor at the Mailman School of Public Health in Columbia University. She demonstrated great generosity when she invited me to the release of the No Ceilings Full Participation Report in New York City. The report, a joint effort between the Clinton and the Gates Foundations, pulls together data about the global state of gender equality since 1995, when the World Conference on Women took place in Beijing.

At that Conference, Chelsea’s mother Hillary Clinton, famously said: “Women’s rights are human rights, and human rights are women’s rights”. Twenty years after Beijing there has been some progress, but we still live in a world where being a woman means less access to work opportunities, education, security, health and sexual and reproductive health and rights.

Maternal mortality: I interviewed Rachel Tulchin, Policy Advisor at the Clinton Foundation, about the report. She told me that the reduction of maternal mortality is one of the biggest accomplishments that the world has seen in terms of gender equality since 1995, but even so, “around 800 women still die every day due to complications related to pregnancy and childbirth”. Tulchin also said: “Modern contraceptive prevalence has doubled in Sub-Saharan Africa since 1995, which is a huge mark of success. However, millions of women still lack access to family planning”. This reminds me of an experience I had while giving a sexual health workshop to Mexican women living in NYC. I showed them how to put on a condom safely, and to my surprise, one of the women had never touched one! I later found out she had had several abortions because her partner refused to use protection.

“Women’s rights are human rights, and human rights are women’s rights” Sexuality Education

One of the best antidotes to the lack of sexual and reproductive health and rights for women is positive, scientific & rights-based sexuality education. However, this type of education is unavailable to the majority of women worldwide, due to factors such as conservative governments, poorly trained teachers, poverty, or the inability to enroll in education: “Girls are not enrolling or graduating from secondary schools at equal rates – compared to boys- and that’s a point for vulnerability. And it’s not only to get girls into schools, but to look at whether they are receiving quality education or if they are safe from gender-based violence”, said Tulchin, who added: “Violence against women remains a huge global epidemic. One in three women experience sexual or physical violence in their lives. Violence against women is a result of complex cultural and institutional factors. Female genital mutilation is a good example. Tradition is often cited as a justification but the World Health Organization states that FGM “reflects deep-rooted inequality between the sexes, and constitutes an extreme form of discrimination against women”

The connections between gender equality and sexual ignorance are evident: men who view women as sexual objects or solely as “carriers of babies”, or men who feel entitled to rape a woman because she was “seductive” or “asking for it”. Women, like the one I met in NYC, who are conditioned to do whatever a male sexual partner wants them to do (regardless of their own well-
being). This ignorance can only be tackled with on-going education about sexuality, education based on science and on sexual and reproductive rights.

"Sexual pleasure is often the hardest taboo to break". Positive approach is key.

Sex education must also include a positive approach towards sexuality. Unfortunately, it is too often focused solely on the risks – STIs, unwanted pregnancy, HIV – with abstinence being the recommended solution. Sexual pleasure is often the hardest taboo to break: In how many societies are men allowed to talk openly about sexual pleasure, while women are stigmatised or punished if they do the same? The whole objective of positive sexuality education is to empower and to learn that, when expressed responsibly and with respect for others, sexuality leads to joy, pleasure, fulfillment and personal development. This creates contexts that enable women and men to make better decisions on their sex lives, on condom/contraceptive use and on access to health services, rather than contexts where anxiety, shame and silence paralyses individuals and prevent them from making the right choices.

At the end of our interview, Tulchin highlighted that it is not only up to national governments or multilateral organizations (like the United Nations) to become more involved in the fight for greater gender equality, but for everyone at the grassroots levels. One of the priorities of the Full Participation Plan for gender equality in the 21st century, released by Hillary and Chelsea Clinton, is to ensure that women have universal access to sexual and reproductive health and rights. Society must incorporate these rights at all levels, particularly in the educational and health sectors. We have to educate on sexuality for equality.

Sexual & reproductive rights are women’s rights!

Sexual & reproductive rights are human rights!

Check more data from the No Ceilings Full Participation Report here: http://noceilings.org

RNW Media: a media organization for social change. In parts of the world where change is hard to achieve because freedom of speech is restricted, we use media to make lives better.

*Note: sent by Narayana Reddy

*INDIA GETS ITS 1ST TRANSGENDER COLLEGE PRINCIPAL

Priyanka Dasgupta- Kolkata- May 27 2015 : The Times of India (Chennai)
India, or probably the world, will get its first transgender college principal when Manabi Bandopadhyay takes charge of Krishnagar Women's College in West Bengal on June 9. Manabi is currently associate professor of Bengali at Vivekananda Satobar-shiki Mahavidyalaya.

"This decision was taken by the College Service Commission. I don't interfere in their decisions. They are aware of our open mind. I am happy with this decision," state education minister Partha Chatterjee said.

Technical education minister Ujjal Biswas, who is chairman of the college governing body, said: "We were in need of a principal with a strong personality to run the college smoothly."

Welcoming the decision, Rattan Lal Hangloo, vice-chancellor of Kalyani University to which Krishnagar Women's College is affiliated, said, "Manabi is a fine human being, a good academician and an able administrator. We are hopeful her appointment will empower other members of the transgender community."

On Tuesday morning, Manabi visited the college, sporting Ray-Ban glasses and curly hair done up in a careless coiffure. Accompanied by her adopted son Debasish Manabiputro and transgender friend Jyoti Samanta, she was untouched by the excitement around her. "It is not the post that I sought after. My 92-year-old father lives in Naihati. I took up this offer because it will help me stay close by and look after him. My new colleagues had seen me on television but I had only heard their voices. I wanted to meet them personally before joining," she said.

A beaming Debasish said: "Maa wanted to pay a surprise visit. So, we tagged along."

Colleagues and students are excited. "Manabi Bandopadhyay is a strong individual. She has faced many upheavals. We are optimistic about the development of the college during her tenure. She is a celebrity and her sexual orientation isn't an issue for us," said Jayasree Mondal, assistant professor, geography.

Bengali assistant professor Prakash Mondal said: "She is free-spirited. She has a good command over her subject. This college has not had any principal for long. We are happy to have her as our principal." Student Payal Mallickty considers her an inspiration. "She is a celebrity. It is good news that we are getting her as our principal," she said.

Manabi is flooded by calls and friend requests on social networking sites. Jyoti, who earns a living playing women in jatras, said, "Manabidi is an inspiration for us. Today, people have accepted my identity. I have even portrayed my fate in a play that dealt with the plight of transgenders. Manabidi's news is a boost for me. I am taking her help to undergo sex realignment.

Manabi realizes that problems are aplenty and a lot remains to be done.

"Even today parents think that this is a mental health issue. A few days back, a boy from Burdwan committed suicide when he couldn't stand the pressure from his parents, who wanted him to take psychiatric help because he was a transgender," she said.

While sex realignment surgery is a dream for many, very few can afford it. "I have come across boys who don't have support from their parents and cannot get operated upon without their consent. They resort to birth control pills, hoping that the high estrogen will help them feel like women. But they don't realize that these pills will cause more harm than good," Manabi said.
Before stepping down, Nigeria’s former president made sure his legacy boasted fighting for women’s rights and protections.

Goodluck Jonathan signed into law last month a ban on female genital mutilation, a practice that involves partial or total removal of the external female genitalia for non-medical reasons, the Guardian reported. However, activists say laws alone won’t put abolish the practice, and that a systemic cultural shift is required to make sure women and girls are no longer subjected to the harmful procedure.

"Global experience tells us that ultimately, it's through changing attitudes, not just laws, that we will end FGM," Tanya Barron, chief executive of children's charity Plan International, told Reuters. Though the U.N. banned FGM worldwide in 2012, and the practice was already outlawed in a number of Nigerian states, this is the first time that the entire country has committed to stopping FGM.

Across the globe, 125 million women and girls have undergone FGM, according to the World Health Organization, and Nigeria has the highest number of FGM cases. The country accounts for about a quarter of circumcised females worldwide, according to UNICEF. The health risks of the practice are numerous, and include heavy bleeding, developing sepsis, urinary tract infections, cysts and becoming infertile, according to WHO. Traditional beliefs hold that FGM will force girls to remain virgins until marriage, and remain faithful once they wed. Advocates hope the law, which also prohibits men from abandoning their wives or children without financial support, will inspire other countries, where FGM is still practiced, to take similar action.

"It is crucial that we scale up efforts to change traditional cultural views that underpin violence against women," Stella Mukasa, director of gender, violence and rights at the International Center for Research on Women, wrote in the Guardian. "Doing so involves laws and policies, as well as community level engagement and programs that work to empower girls directly."
FGM CAMPAIGNERS - NIGERIA BAN WELCOME, BUT WORK NOT OVER
BY JOSEPH D'URSO

LONDON (Thomson Reuters Foundation) - Activists on Friday welcomed Nigeria's new law banning female genital mutilation (FGM), but warned that legislation alone will not be enough to eradicate the practice.

According to 2014 U.N. data, a quarter of Nigerian women have undergone FGM -- the partial or total removal of external genitalia which can cause physical and psychological problems.

Although some of Nigeria's 36 states already prohibit the ritual, this week's new federal law brings in a nationwide ban.

It will encourage states without bans already in place to tackle the practice, and will embolden activists to help communities root it out, said Grace Uwiyeze of the campaign charity Equality Now.

"It's not going to immediately stop communities from practising FGM," she said, adding that it will be essential to back up the new law with strong enforcement.

Goodluck Jonathan was beaten in Nigeria's presidential election in March by Muhammadu Buhari, who was sworn into office on Friday. Jonathan signed the ban into law as one of his final acts as president, national media reported.

The law, which was passed by the Senate on May 5, also prohibits men from abandoning their wives or children without economic support, according to the Nigeria Stability and Reconciliation Programme, a Lagos-based thinktank.

FGM is practised by communities across a swathe of African countries as well as pockets of Asia and the Middle East, according to the World Health Organization (WHO).

Procedures are mostly carried out on young girls and occasionally on adult women. The ritual is seen by families as a gateway to marriage and a way of preserving a girl's purity, with uncut girls ostracised in many communities.

"Global experience tells us that ultimately, it's through changing attitudes, not just laws, that we will end FGM," Tanya Barron, chief executive of children's charity Plan International, said by email.

"Prosecution must be just one strand of our efforts to end FGM worldwide," she said. "What is encouraging is that we are talking more and more about FGM, in Africa, in Europe and across the world."

(Reporting By Joseph D'Urso; Editing by Ros Russell)
TORONTO SEX EDUCATION PROTESTS – ARE THESE TOPICS TOO EXTREME FOR KIDS?

In Toronto, Canada, more than 10,000 parents kept their kids home from school earlier this week to protest the province's new sex education curriculum. Those who oppose the new curriculum in Toronto are saying that the sex education program is far too explicit for their children. For most of them, the inclusion of information regarding anal sex, gender identification issues, and oral sex are the topics that have incited the most anger and attention in Toronto.

The new sex education curriculum in Toronto asks teachers – but does not require them – to include genitals in anatomical descriptions when teaching about the body to first graders in Toronto. Those requests include discussing such body parts as the penis, testicles, vagina, vulva, et. al. Proponents of the curriculum in Toronto say that teachers are not asked to teach how to use the genitals, but to merely name them so that children understand what they are. They say that no illustrations are used in the Toronto curriculum, but that teachers are asked to say something to the effect of, “Boys have penises and girls have vaginas.”

Sexual orientation and homosexuality is introduced to children in Toronto in the third grade with the intent of promoting tolerance and awareness. Parents who oppose the sex education program in Toronto state that this part of the program is promoting homosexuality.

Masturbation is not taught outright in Toronto, but if a student asks about it, teachers are instructed to answer children with a “prompt.”

“Things like wet dreams or vaginal lubrication are normal and happen as a result of physical changes with puberty. Exploring one’s body by touching or masturbating is something that many people do and find pleasurable. It is common and is not harmful and is one way of learning about your body.”

Anal and oral sex are mentioned in the Toronto sex education curriculum in seventh grade. It should be noted that these acts are not taught explicitly in Toronto, but that the children are made aware of them. Designers of the Toronto curriculum say that anal and oral intercourse are engaged in the program to teach children about the dangers of sexually transmitted disease that can accompany such sex acts because many children aren't aware that other types of intercourse can be as dangerous as vaginal.

Opponents of the Toronto sex education curriculum are keeping their children home from school this week. Many say that teaching “gender bending,” along with anal and oral sex is a way to push a political viewpoint in Toronto, rather than teach children about safe sex. Many in Toronto are also asking that this type of education not be taught to kids in Toronto until they are in high school.

Those who support the Toronto sex education curriculum say that they are merely teaching kids what they are already asking questions about. They say that by making kids in Toronto more aware of the world around them, they are making their children safer in the process.
What do you think? Does the Toronto sex education curriculum go too far, or is it doing a better job of preparing kids for the real world around them? Would you applaud or deride a sex education in your town like the one they’ve instated in Toronto? [Photo by John Moore/Getty Images]

Read more at http://www.inquisitr.com/2068992/toronto-sex-education-protests-are-these-topics-too-extreme-for-kids/#8GdDRKKiL1D11b6K.99

REWRITE NEW SEX-EDUCATION CURRICULUM

Guelph Mercury  by Georgine Willemsma May 06, 2015

On April 14, thousands of Ontario parents gathered in front of the provincial legislature to protest the new sex education curriculum. The group was made up of Canadians of numerous cultures and religions. A similar protest took place Monday. No doubt some of these people can be counted among the tens of thousands who have signed petitions against this new curriculum. Together, they are urging the government to repeal the new sex-education curriculum.

What exactly is the problem with the curriculum?

• First off, parents were not consulted in the writing of this curriculum, as promised by the Liberal government back in 2010 when the same curriculum was shelved after three days. A survey was sent out to the heads of parent councils of Ontario’s schools. These 4,000 parents, many caught unaware, were not shown the "new" curriculum but were asked general questions about whether their children felt safe at school or whether their children needed to know about puberty before it occurred. Parents did not know this would mean years before the majority of children reached adolescence.

The survey allowed a mere 30 characters of feedback per parent. That's about six words. In the Oct. 30, 2014 Toronto Star, Education Minister and Guelph MPP Liz Sandals was quoted as saying the results of the survey were unlikely to lead to any direct changes to the curriculum. Instead, the Liberal government spent taxpayers’ money on a survey that had no value to them and made a farce of the so-called consultation process.

• Secondly, many parents feel this curriculum is "sexualizing" our children. Some examples include Grade 1 students learning words like vulva and testicle, Grade 6 students learning about masturbation, and Grade 8s building sexual activity into their personal plan. From Grade 1 on, children are going to learn pieces of information about what giving consent means. By Grade 8, the proposed curriculum says intimate behaviours for students "can include holding hands, hugging, kissing, touching bodies and genitals and engaging in sexual intercourse." They are told it "takes practice" to communicate to their partners about "sexual health choices, consent and keeping safe."
No parent wants their child believing it is normal during the elementary years to engage in sexual relations with a partner and to be able to communicate what gives them sexual pleasure. And not just with one partner, but multiple partners.

In this curriculum "partner" replaces the words "husband" and "wife" in order to be more inclusive. What the writers may not know is that in an elementary school, the term "partner" is a relationship that might last 10 minutes at best.

The words "responsible," "love" and "marriage" are not found anywhere in relation to sexual expression in this curriculum. This will be quite challenging for Ontario bishops to put a Catholic spin on, since the teaching of the church is to abstain from sexual relations outside of marriage.

The addition of consent to the curriculum is supposed to be ahead of its time. Does consent make sex safer and more responsible for youth? The last I knew, the age of consent in Canada was raised to 16 from to protect children's rights.

Minors are not emotionally capable of giving consent, so even if they gave it, it would not hold up in a court of law.

There is no information in the curriculum about the age of the sexual partners these children are to have and the legal implications this may involve.

In my experience, teachers from junior kindergarten to Grade 8 tell students not to touch each other in private areas, even if a student asks another student to do so. That is how teachers try to protect children. Now the curriculum is saying the opposite.

To encourage consensual sex among the young is misguided and has potentially devastating consequences for young people and our society.

•Thirdly, parents are concerned about the gender theory being pushed into lower grades where children are too young and impressionable for such discussions.

In the Fully Alive curriculum in the Catholic schools, where the sexual health component is taught, this theme is called "Created Sexual: Male and Female." The theme opens with the Bible reference: "...male and female he created them." (Genesis 1:27)

The new curriculum includes four more genders, namely, "transgender, transsexual, two-spirited and intersex." Although the demographics of sexual orientation are difficult to determine, the National Post's 2012 Forum Research poll found that five per cent of Canadians identified themselves as lesbian, gay, bisexual or transgender. If we consider the six genders proposed in the new curriculum, 95 per cent of children will fall under the male and female genders with the remaining four genders applying to five per cent of the children.

The Fully Alive Grade 8 manual used currently in Catholic schools in Ontario states: "When young people are beginning to develop sexually they have all kinds of feelings, including temporary attractions to members of the same sex. In general, it is not until the later teen years that people have a clearer sense of their sexual orientation."

In September of this year, according to Premier Kathleen Wynne, our 12- to 13-year-olds will be considered sexually mature enough to not only give consent and carry condoms, but to assign themselves a new gender if they so choose.

If six genders must be considered, why not share them in the secondary curriculum, where one physical education credit is mandatory? There, adolescents (not children) can begin to make up their own minds about their sexuality and their practices.

This does not come from a position of being homophobic but of concern for all of these young students. Children in the elementary years simply do not have the moral capacity to make decisions about engaging in sexual activity, and it is irresponsible for anyone to suggest that they can choose...
a gender. Twelve- and 13-year-old children change their minds on a regular basis. If they are exploring their so-called gender while engaging in sexual activity, they will have a life time of psychological distress and suffering.

This radical curriculum has the potential for causing serious sexual confusion in our children. It is greatly offensive to parents of many faiths and cultures. It needs to be rewritten by professionals who truly understand and care about the welfare and dignity of our children. If we can withdraw Christmas carols from public schools because they are offensive to others, why can't we withdraw a curriculum that is so highly objectionable?

Georgine Willemsma is an elementary teacher with the Wellington Catholic District School Board. She has been teaching for 25 years in Brampton, Orangeville and Guelph. She is married and is the mother of four children.

9 -PUBLICATIONS AND COURSES

THE 3RD EDITION OF THE BOOK ABC FOR SEXUAL HEALTH, EDITED BY KEVAN WYLIE, MD HAS BEEN JUST RELEASED BY WILEY AS A PART OF BMJ BOOKS.

ABC of Sexual Health provides a comprehensive overview of everyday issues practitioners work with in their practices. The topics range from developmental aspects of sexuality, sexual functions/dysfunctions and history taking to ethnic and cultural considerations, forensic sexology and paraphilia. This edition is an accumulation of wisdom, scientific knowledge and practical tips that is brought to the readers by the world renown authors whom are considered as thought leaders in their respective area of work within the field. It also includes reading resources as well as information on professional societies, patient groups and online resources.

ABC of Sexual Health is edited as a practical guide for all general practitioners, family physicians, trainees and medical students wanting to improve communicating, examining and managing patients with sexual health problems.

Sara Nasserzadeh, MSc PhD DipPST
Accredited Psychosexual Therapist by the College of Sex and Relationship Therapists in England (COSRT)
Certified Sexuality Counselor by the American Association of Sexuality Educators, Counselors and Therapists (AASECT)
Chair, Middle East Sexual Health Committee at the World Association for Sexual Health (WAS)
Chair, Communication Committee at AASECT
SEX IS THE LEAST OF IT: SURROGATE PARTNERS DISCUSS LOVE LIFE AND INTIMACY.

KINDLE EDITION. TOVA FEDER (AUTHOR)

The concept of surrogate partners grew out of the work of Masters and Johnson in the mid-1960s. Their initial research centered on understanding and improving the sex lives of married couples. Eventually their work addressed the issue of helping un-partnered individuals treat their sexual dysfunction. As necessity is the mother of invention, they recruited an untrained group of women to aid these single individuals in resolving their sexual problems. Masters and Johnson created a mechanical approach to sexuality, devoid of emotional intimacy. This book seeks to present the human face of a profession that has been shrouded in myths, misconceptions, and negative judgments. Rather than hearing the words of sexual robots, the participants reflect competence, intelligence (please see paragraph below), compassion, and wisdom. It is a profession that requires the ability to think and feel; to analyze and participate; to become emotionally involved yet maintain professional boundaries.

Over the past four decades, surrogate partner therapy has grown to combine social therapeutic modalities in addition to sexual therapeutic techniques. This book utilizes, in part, the approach of interviewing 25 current and former surrogate partners to examine, compare, and contrast their experiences. It seeks to present the skills of surrogates as opposed to the sexual sensationalism which clouds objective evaluation of the subject. In addition to the interviews there are several relevant articles, being used with permission, exploring the work of other surrogates.

“The book contains 34 interviews with female and male surrogates and with therapists who work with surrogate treatment. The different ideas and opinions can be very helpful on discussing the various aspects of transference, treatment dilemmas indications, etc”. Dr.W.Gianotten

SUPPORTING DISABLED PEOPLE WITH THEIR SEXUAL LIVES’ a clear Guide for Health and Social Care Professionals by TUPPY OWENS with Claire de Than 2015 Jessica Kingsley Publishers
“Tuppy Owens has extremely much experience in her struggles for sexual support and dating opportunities for physically and socially disabled people. Probably nobody else in the World is more aware of their unmet sexual needs. Every sexuality professional will learn a lot from the straight talk and down to earth advice in this book written by the Florence Nightingale of Sexual Health.”

Dr. Woet Gianotten
Foundation ‘Sexuality in disability and disease’, ISSC International Society for Sexuality and Cancer, Centre for Physical Rehabilitation De Trappenberg


This comprehensive textbook, intended for graduate students in couple and family therapy programs as well as for clinicians of diverse orientations, offers descriptive discussions of sex therapy based on the Intersystem Approach, as developed by Gerald Weeks. The Intersystem Approach considers the biology, psychology, couple dyad, family-of-origin, and larger contextual factors of any sexual disorder or issue. It is grounded in systems theory and represents a new understanding of human sexuality and sexual problems. Appropriate for anyone who wants to progress to a more comprehensive and integrative understanding of sexual dysfunctions, this text will teach the reader how to treat the couple, rather than the individual. Now in a second edition, Systemic Sex Therapy presents 12 updated chapters and two new chapters, bringing the material up-to-date with the DSM-5. Each chapter examines the definition and description of a disorder, its etiology, assessment, treatment, research, and future directions. Experts in the field discuss issues ranging from pharmacology, sexual compulsivity, therapy with lesbian and gay couples, to chapters on male and female lack of desire. A standard text in the field, Systemic Sex Therapy integrates couple and sex therapy to inform the treatment of sexual problems, and to give beginning and experienced clinicians the abilities and confidence they need to produce viable change in their patients’ lives.

And watch for the completely revised and updated second edition of Clinician’s Guide to Systemic Sex Therapy forthcoming November 2015
COURSES, ACADEMIC ACTIVITIES, CONFERENCES

AASECT’s NEWS

AASECT’s 48th conference will be in June in Puerto Rico (9-12, June 2016). Colleagues are invited to submit their practical or research based work. For more information and upcoming updates please check: http://www.aasect.org

Colleagues are also invited to join us for the summer institute on Sexuality and Disability. It will be in St. Louis, Missouri from 3 to 6 August. Disability is a universal human experience that is sometimes permanent, sometimes transient. It is not something restricted to a small part of the population. Examining sexuality through the lens of people with physical, emotional, intellectual and developmental disabilities and chronic conditions will add a new dimension to your practice; expand your skill set, and open your eyes to new possibilities, making you an even better educator, counselor or therapist for all clients. http://aasect.org/education/summer-institute

Colleagues who are interested in getting certified as sexuality educators, counselors, therapist or providers of continuing education courses could apply for AASECT’s certification. This is to recognize individuals’ knowledge and skills within the field which is affirmed by peers.

WAMS 4TH CONGRESS 2015

The World Association for Medical Sexology (WAMS) Executive board proudly announces the celebration of the 4th Congress for Medical Sexology that will be taken place in Miami-Florida on October 9th and 10th of 2015. info@medicalsexologycongress.com
Hotel JW Marriot
1109 Brickell Ave, Miami, Fl 33131 USA

- Woman’s wellness: Estrogen replacement therapy vs topical alternatives and other agents
- Urinary Incontinence, Pelvic Floor descent and Sexual Function
- Medical and Surgical Management of Urinary Incontinence
- Management of male prostate disorders: “Sex Friendly Therapies”
- The good news for Peyronie’s Disease on 2015
- The role of pharmacotherapy the management of ED in 2015
- Live Surgery: Minimally Invasive Approaches to BPH focussed on Erection & Ejaculation
- Live Surgery: Minimally Invasive Surgical Treatment of ED
- Live Surgery: Minimally Invasive Surgical Treatment of Urinary Incontinence
- Types of Penile Implants and their best recipients
- Non-Surgical, Pill-less approaches to Erectile Dysfunction: How to incorporate them into your practice
- Penile Girth Enhancement: "A Safe Alternative in a Specialist's Hands"
- Hypoactive sexual desire in men: The role of Testosterone Replacement Therapy
- Prostate enlargement and Prostate Cancer: The role of pharmacotherapy and surgery in the management of concomitant sexual dysfunction
- Prostate Cancer, androgen deprivation therapy and sexual desire
- Male wellness beyond hormonal deprivation: how can we lessen or eliminate side e-effects
- Prostate Cancer at a Castrate State: The psychodynamics of survival expectation
- Psychological and Pharmacological role in controlling ejaculation
An integrative model for the management of premature or delayed ejaculation
The neurobiology science on behavior
Abuse, Dependency and Neglect: Psychodynamics of the event
Neurobiology and Treatment of Posttraumatic Stress Disorder
Getting couples to communicate better: the power or smile, sex and "pillow talk"
Female orgasm disorders: the science and how we evolve
Sexual pain disorders in women: Integrative approaches, Psychosexual aspects

NEXT ESSM SCHOOL OF SEXUAL MEDICINE 2015

The ESSM School of Sexual Medicine, will take place from 16 - 25 October 2015 in Budapest, Hungary

On behalf of our President, Dr David Ralph, the Executive Committee, and the Educational Committee of the ESSM we invite you to apply for the ESSM School of Sexual Medicine programme.

Background
The ESSM School of Sexual Medicine was established by the European Society for Sexual Medicine. The first “Oxford Course” was run in 2007; this year as in previous year, we will deliver a learning curriculum based upon the UEMS Joint Committee for Sexual Medicine syllabus and the EFS/ESSM Syllabus of Clinical Sexology. Our programme is intended for clinicians seeking to acquire the knowledge and skills essential for practice in Sexual Medicine and Clinical Sexology. Medically-qualified participants should find the programme helpful when preparing for the Fellowship of the European Committee of Sexual Medicine examination. Psychologists will find the program helpful as well for the preparation of the EFS & ESSM exam for qualification as Psycho-sexologist.

So far, over one hundred and fifty participants from Europe, Asia, Africa, Australia, Middle East and the Americas have taken part in the school programme; they include specialists in Andrology, Endocrinology, Family Medicine, Gynaecology, Internal medicine, psychiatry, urology, surgery, oncology and psychology. Participants will have the opportunity to learn the essentials of sexuality in both men and women that are necessary for effective clinical practice, even for those whose usual practice is exclusively with one gender.

Programme & Requirements
The Programme is intended for persons with post-graduate experience in any relevant clinical specialism. Interest in and enthusiasm for Sexual Medicine are the essential qualifications; whilst previous experience in the clinical practice of Sexual Medicine is an advantage, the programme is also suitable for those starting out in this fascinating and rapidly developing area of medicine. Special skills in surgery or psychotherapy are not a requirement for participation. Psychologists and therapists are welcome to join the programme as well.

Participants must enter the 2015 Programme at the 10 days residential course. This covers a wide range of Sexual Medicine and Clinical Sexology topics and provides the essential background learning from which clinical experience and research can be developed. All sessions during the
The academic programme will include:

- sexual development
- psychology and physiology of sexual desire, arousal and response
- impact of gender on sexuality
- ageing and sexuality
- sexual dysfunctions in men and women
- problematic sexual behaviour
- gender identity disorders
- impact of medical treatments and other health problems on sexuality
- clinical skills in Sexual Medicine
- clinical management of sexual disorders
- genital dermatology
- ethical and legal aspects of Sexual Medicine
- standards of care in Sexual Medicine

The course not only aims to add to your knowledge of Sexual Medicine, but also to enable you to change your clinical practice and attitude with the acquisition of new skills to apply to providing services for patients and to have more confidence in assessing and helping men and women with common sexual concerns.

Moreover, there will be an optional and very informal social programme run throughout the course. This is a friendly course and we hope that participants will make new friends, as well as learn about Sexual Medicine. Because the number of participants is strictly limited, there is plenty of opportunity to meet and talk informally with teaching faculty members; group members have the option of joining us for evenings together during and after dinner.

Although 10 days may seem a long time to be away from home at a course, feedback from previous groups suggests that loneliness and boredom are not a problem. The actual running cost of the complete Programme is more than €3,300.00 per person but it is partly-subsidised by generous support from the European Society for Sexual Medicine. Therefore, the registration fee for the complete programme is €1,950.00, inclusive of tuition fees, meals and accommodation for the 10 days course. Travel costs are not included.

ESSM members from low-income countries, or those who are experiencing financial hardship, may apply for special bursaries, which can cover part of the registration fee.

The number of participants in each year of the Sexual Medicine Programme is limited, so early application is advisable.

Application form will be available through the ESSM website.

For further information, please e-mail the Programme Directors:
Dr Cobi Reisman (essm.education@gmail.com)
Dr Francesca Tripodi (francitrip@hotmail.com)
JOURNAL ANNOUNCEMENT AND INVITATION FOR PAPER SUBMISSION

Dear All,

I would like to invite you to submit your papers pertaining the cultural and religious issues in our everyday practice of psychosexual therapy for the special issue of the Journal of Sex and Relationship Therapy (JSRT) which is the official journal of the College of Sex and Relationship Therapists in England (COSRT).

I have the pleasure to co-edit this issue with my esteemed colleague Dr. David Ribner. Please visit the website of the journal and submit your papers there. The deadline has been extended to September 2015: http://www.tandfonline.com/doi/abs/10.1080/14681994.2013.819220

Kind regards,

Sara Nasserzadeh, MSc PhD DipPST
Invited editor of special issue of the Journal of Sex and Relationship therapy

EUROPEAN SOCIETY FOR SEXUAL MEDICINE

18th CONGRESS OF THE EUROPEAN SOCIETY FOR SEXUAL MEDICINE
4 – 6 February 2016 | Madrid, Spain
www.essm.org

O DEADLINE Abstract Submission
Posters and Oral Presentations: 15 October 2015

TOPICS on Male Sexual Disorders (MSD)
1. Preclinical research
2. Psychosexual issues and management
3. ED epidemiology and risk factors
4. ED and lifestyle management
5. ED conservative / medical treatment
6. ED surgical treatment
7. Prostate cancer treatment and sexual rehabilitation
8. Peyronie’s disease
9. Penile congenital anomalies
10. Rare penile disorders (priapism, penile cancer, skin lesions)
11. Genital reconstructive surgery
12. Ejaculatory and orgasmic disorders
13. Prostate and male sexual health
14. Hormones and male sexual health
15. Homosexuality and gender identity disorders
16. Sexually Transmitted Diseases (STD)
17. Miscellaneous

TOPICS on Female Sexual Disorders (FSD)
1. Preclinical research
2. Epidemiology and risk factors
3. Urogenital surgery and women’s sexual health
4. Cultural and religious issues
5. Libido, arousal and orgasmic disorders
6. Pelvic / genital pain syndrome and FSD
7. Recurrent urogenital infections and sex
8. Hormones and women’s sexual health
9. Cancer (breast, uterus) and sex
10. MSD and women’s sexual health
11. Genital plastic surgery and women’s sexual health
12. Incontinence and sex life
13. Sexual life in the elderly woman
14. Drugs for FSD
15. Psychosexual interventions in FSD
16. Contraception, pregnancy and sex
17. STD manifestations in women
18. Commerce and female sexuality
19. Miscellaneous
The attachment shows monthly visitors by countries

Tommi Paalanen
For the first major rendez-vous in its tenth anniversary programme, the MAC VAL – Musée d’art contemporain du Val-de-Marne is holding a multi-disciplinary themed exhibition. What defines masculinity these days? And how can we come up with alternatives to the figure of the dominant male in patriarchal society? To answer these questions, the curator Frank Lamy is inviting more than a hundred male artists, offering as many avenues of reflection around cultural models of masculine representations… plenty to topple certain preconceived ideas, which are as tenacious as they are fragile. Self-acceptance and acceptance of others.

7 March — 30 August 2015

Philippe Ramette “man and his shadow”
EVENTS BUENOS AIRES

#NOTONELESS

SAY THEY WILL NAME-AND-SHAKE OFFICIALS ON SOCIAL MEDIA
THURSDAY, JUNE 4, 2015

Activists vow to hold politicians accountable

By Ximena Schinca
Herald Staff

The organizers of the #NiUnaMenos (#NotOneLess) demonstration against gender violence are determined to not be used by the politicians eager for photo-ops who expressed support for the rally yesterday that brought together about 200,000 people.

“Starting now, we’re going to demand meetings with politicians. We hope that all those who took a picture with the slogan understood that it’s necessary to take concrete action. We want zero femicides,” Fabiana Tuñez, executive director of the La Casa del Encuentro NGO and one of the organizers of the demonstration, told the Herald minutes after the rally in front of Congress.

Activists and organizers of yesterday demonstration acknowledged that the massive turnout surpassed all expectations, reinforcing their demands for a stronger commitment and giving them encouragement to work for lasting change.

Following the success of #NiUnaMenos, activists against sexist violence plan to spread their demands through social media, disclosing all meeting requests with politicians as well as every answer — be that positive or negative — they receive.

“This (demonstration) was just a single action aimed at deep cultural change, which is not possible to achieve from one day to the next. Now we need to work and implement concrete measures. And if politicians don’t know how, they can ask for help. We will be available if they need us,” Tuñez said half-jokingly, adding that several officials and provincial leaders lack the know-how to develop the right policies.

Most members behind the campaign agreed on the idea that there is a long way to go.

“This event was just a call for attention and to continue working, so as to put the topic of violence on the political and media agenda. This was not an action ‘against’ anyone, but a wake-up call for governments, officials, candidates and society as a whole,” sociologist María Pía López told the Herald.

Focusing on the fight against violence on women, members of the local feminist movement stressed that the proposal is wider than the five points included in the document stressing that in the future
officials must develop a much broader view aimed at eradicating gender violence — especially, when it comes to giving support to victims.

“The courts must take the custody of children away from men who kill women. The state must guarantee that victims of violence receive proper judicial guidance, receive compensation, have access to proper jobs. From now on, we will focus on these demands,” Tuñez stated.

The #NiUnaMenos campaign organizers — most of whom are women working in the local press — agree the mass media is key.

Starting today, activists believe, media coverage of femicides and sexist violence will never be quite the same.

“From now on, every time the press covers a sexist act of violence, journalists will be more careful,” López said.

@ximenaschinca

The slogan and its sentiment gathered more than 200,000 people outside the National Congress. Women were the dominant presence, but men were also in the crowd to condemn gender violence, amid a recent rise in the number of women killed.

#NIUNAMENOS: A DEAFENING CRY SWEEPS COUNTRY

#NOTONELESS SURPASSES EXPECTATIONS AS LAWMAKERS, CELEBRITIES, PUBLIC TURN OUT IN FORCE

“Not One Less” (Ni Una Menos) read the signs carried by thousands of demonstrators yesterday in Buenos Aires City.
The slogan and its sentiment gathered more than 200,000 people outside the National Congress. Women were the dominant presence, but men were also in the crowd to condemn gender violence, amid a recent rise in the number of women killed.

Protesters demanded that action be taken by the three branches of state as government officials, opposition leaders, judges and prosecutors also took to the streets in an attempt to make it clear they shared the concerns.

“Femicide is the most extreme form of violence that crosses every social class, beliefs or ideas. But femicide is also a political concept: it’s the word that reveals the way in which a society sees something as natural when it isn’t: sexist violence,” the organizers yesterday read on a stage located in the Dos Congresos square outside Congress.

The square was packed almost an hour before 5pm, when the demonstration was scheduled to begin. The journalists who made the issue go mainstream were on the stage that was set up to outline the final details.

The longtime feminist activists were wearing their purple T-shirts and waving banners as they have always done to demand action be taken to stop homicides against women.

“In 2008, a woman was killed every 40 hours. In 2014, every 30. Over the past seven years, the media reported 1,808 femicides. How many women have been killed so far this year?” actor Juan Minujín wondered as he read the statement drafted by the organizers of the massive protest. “We don’t know but we really know is that we have to say ‘stop,’” he added.

The protest was replicated in more than 80 cities around the country as protesters took to the streets after it was revealed that 14-year-old adolescent Chiara Páez — who was also pregnant — was murdered by her boyfriend and buried in his house in the city of Rufino, Santa Fe province.

Too many reasons

“Chiara’s case was heartbreaking but that was not the only reason why we are here,” 40-year-old Gladys Roldán yesterday told the Herald. “I brought my daughter because I want her to be aware of what is going on,” the woman who works as a domestic worker added while her 20-year-old daughter Romina looked on. Both of them live in Don Torcuato, Tigre, and both feared that a march would not be enough to stop violence.

Alicia Barrios was a few metres away from them. She was alone. “But I am also representing my daughter,” the pensioner said. “I am disabled now as a result of the violence I suffered at home,” the woman from Avellaneda in the south of Greater Buenos Aires told this newspaper. “If only we had reacted to violence earlier, I wouldn’t have gone through what I went through. If only...” she said as her voice trailed off.

A woman was holding another sign while she was waiting for the statement to be read. She only said: “I only want justice.” Two other friends from Río Negro province waited in front of the Gaumont
cinema while they were arguing about what had to be done. “More and more women die. I can expect another protest to be held sooner or later,” Fanny Santagni, an administrative worker in a private hospital, told the Herald. Her friend, Uria Mana, a neonatologist, recalled the latest case of gender violence she had to deal with. “It was a girl who had given birth to her baby four days earlier. She came for treatment and she had a terrible bruise on her face,” the doctor said. “I called the social worker but she did not want to file a report. She only said that she was also guilty. We lack the necessary tools to fight this kind of violence,” Mana complained.

“We need more honest politicians and judges,” Santagni added.

Gabriel Galeano is 31 and he is a judicial worker. “We need to put an end to femicides. We need to stop looking at women as objects not today but every day,” he said. For him, the state is part of the problem. “Violence is rooted in the culture,” he added. Along with her husband was Cristina Pflüger, a retired social worker from the Posadas Hospital who heads the human rights commission in that health centre in El Palomar. A militant in the 1970s, she had to escape to Europe to dodge persecution. “In the 1970s, gender violence was not among our main concerns but nowadays I think it is linked to what repressors did to our comrades. The sexual violence they suffered went unpunished and that left a scar in our society,” she added.

A political matter In 2009, Congress passed a law to prevent violence to women but that is not enough, the organizers yesterday said as they argued that a registry of all the femicides must be created. In 2012, femicide was incorporated to the Penal Code but that also proved to be insufficient as cases continue to soar. “With impunity, the Judiciary also adds another kind of violence to complainants: institutional violence,” they added. Judges and prosecutors also took part in the demonstration yesterday — as did politicians.

Ruling Victory Front (FpV) presidential hopeful Florencio Randazzo was at the protest. The Interior and Transport minister refused to comment while he was having photographs taken with activists. He was accompanied by the head of the FpV caucus in the Lower House, Juliana Di Tullio, one of the Kirchnerites who are in favour of legalizing abortion. “We have to give content to the slogan Not One Less,” the lawmaker said. Congresswoman Mayra Mendoza, one of the top members of the Kirchnerite youth organization La Cámpora, was standing next to her.

“The fact that we are talking about femicides shows that it is too late,” the lawmaker added. LB

NI UNA MENOS / NOTONELESS

STATISTICS

https://www.youtube.com/watch?v=YTylGge1IkQ#t=53
CADA 31 HORAS
UNA MUJER O NIÑA ES ASEÑINADA
POR CUESTIÓN DE GÉNERO

https://www.youtube.com/watch?feature=player_embedded&v=YTyLGge1lkQ
https://www.youtube.com/watch?v=ud12bvDw8sM&feature=youtu.be
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