Ms Johanna Aapakallio yes Sopu-work/ Loisto setlementti Helsinki Finland

Abstract Title

Sexuality and Honor Related Violence

Abstract Body

The human perception of sexuality and pleasure is tied to our cultural and societal backgrounds. We learn our culture, behavioral rights and wrongs, norms, and potential role models from our family and the surrounding environment. This environment forms the fundamentals of our adulthood relationships and identities. Therefore, traumas of our family and the community affect us transgenerationally. People often carry traumas of their family’s past. In some families it may be secrets that are never dealt with openly, violence of the parents or significant others, sexual abuse, war experiences, or the loss of the family, property or home country. We transmit those experiences as traumas to the next generations and without the necessary professional treatment, these traumas will not heal and the chain will continue.

Above mentioned may cause shame and humility, which lead to affecting our sexuality. In order to help our clients in having better sexual experiences, therapists need to approach clients holistically.

During my presentation, I will be pointing out the honor related effects of collectivistic and patriarchal societies. Honor related expectations and regulations restrict people’s lives and further cause problems in their sexual lives and prevent experiencing pleasure from sex and their sexuality. Collectivistic and patriarchal culture is extremely heteronormative and require purity and virginity of females. Sexual and gender minorities are not accepted, LGBT* issues are seen as taboos. Forced marriage is one way of violence and it causes sexual problems.

My presentation is based on over 10 years of professional experience on dealing with honor related violence. I will tangle on sexuality, honor issues and importance of sex education amongst people from collectivistic and patriarchal societies. As an expert on honor related violence issues and sexual therapist, I meet individuals, couples and families with whom I deal honor issues related to sexuality.
Abstract Title

Perceived body image evaluation, gender differences and relations with sexual desire

Abstract Body

The relationship between body satisfaction variables and sexual desire was examined. It was expected that both men and women are dissatisfied with their current bodies and that women overestimate the slenderness desired by men, whereas men overestimate the level of muscularity desired by women. Body dissatisfaction was assumed to have a negative effect on sexual desire. The sample consisted of 200 participants who all completed a questionnaire where their body image and sexual desire were measured. Consistent with the hypotheses, both men and women were dissatisfied with their current body image. Men overestimated the level of muscularity desired by women, whereas women were accurate in their predictions about the level of thinness of body desired by men. Surprisingly, body satisfaction was unrelated to sexual desire.

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Abstract Title

Sexology and lifestyle medicine – a multidisciplinary approach

Abstract Body

Sexological therapy often deals with sexual dysfunction which is etiologically multifactorial and closely linked with sexual medicine. Lifestyle issues have a vast influence on these problems either directly or through a known medical pathology. Sleep disorders, obesity, poor diet, smoking, physical inactivity, social isolation, work related stress or even burnout and substance abuse are some of the most common risk factors and co-morbidities. A basic understanding of lifestyle issues and their influence on sexual dysfunction is necessary for all sexol-
ogists in order to properly work in a multidisciplinary manner consistent with the body of current scientific evidence and recommendations. This presentation will provide an umbrella review of these topics, the current evidence base complemented with the authors personal experience in working in this field.

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Abstract Title

Gender health and citizenship

Abstract Body

While Transsexuality (F64.0) has been regarded as a very rare diagnosis, new research shows that the numbers of individuals with gender incongruence (IGI) have increased dramatically. Clients consult health professionals either for exploring their gender identity, receive hormonal treatment, and/or to apply for different surgical treatments, including more than genital surgery. We observe both a reduction of pathologizing processes and a liberalization of civic status. Differences observed in the nature and timing of such changes are important and need to be understood in order to facilitate the well-being of IGIs.
The general objective of his project is to increase knowledge about health care for through a national survey on Gender, Health and Citizenship in Norway in order to identify the diversity of IGIs. We specifically aim to explore the collective trajectories of gender transitions, learn about IGIs access to appropriate health services, study the role of psychological and medical procedures, identify factors influencing the role of Sexual Reassignment Surgery, identify social factors affecting this group’s health, and describe sexual behavior, sexual difficulties, opinions and attitudes towards sexuality.

Potential respondents are contacted through health professionals and specific organizations where IGIs are members. The web-based survey is anonymous and approved by the Norwegian Regional committee for medical and health research ethics.

The project is part of an international cooperation held under the scientific responsibility of INSERM/CESP (France): “Trans health and citizenship, international comparisons”. The protocol and the survey instrument of research elaborated in the French protocol has been adapted and translated into Norwegian. It has earlier been translated into Italian, and Portuguese language. The project is under negotiation for development in Chile, and Portugal. International comparisons will enhance understanding of specificities in different countries and lay grounds for insights to present policies’ strengths and limitations. This can be basis for development of interventions to improve health and enhance citizenship of IGIs.

The first results from the survey in Norway will be presented.

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Co-creating change – Time to include sexual and reproductive health and rights in health and welfare education

Research and public health reports have shown the lack of sexual and reproductive health and rights (SRHR) in basic education of professionals in health and welfare. In addition research and society has shown the need for SRHR to be addressed to ensure quality of life, evidence-based, person-centered care as well as each individuals (often unmet) need to be met with respect regarding SRHR when meeting staff in health and welfare.

The educational gap between the unmet needs and the lack of competence of professionals in health and welfare can lead to several negative effects such as lead to feelings of depression, worsening of symptoms and lack of trust between individuals and staff. The awareness of the educational gap needs increased attention and include an understanding of how to increase education of SRHR in a way that ensures that the educational gap gets decreased together with increased competence in issues connected to SRHR.

To enable a sustainable change in basic education in health and welfare professions it is essential to involve all stakeholders as active co-creators, from the understanding of the educational gap, through the planning and performance of educational interventions and the evaluation of the changed curriculum.

There are examples of changes of curriculum to a more inclusive approach of SRHR, but often the educational interventions are only single seminars, even if there are a few examples of educational programs where SRHR is present throughout the educational program (in case descriptions, workshops, examinations etc), but there is still a lack of co-creation of the educational intervention and the interpretation of the results. Co-creation of increased education in SRHR for basic education for professionals in health and welfare, enables creation of a sustainable way of closing the educational gap in SRHR by focusing on the important question: What matters to you?
The Crisis of Masculinity in Contemporary Hong Kong Erotica Film

Wei Yangsheng, a scholar married to Tie Yuxiang the daughter of an influential man in town, has an insatiable lust for sex, leading him to seek pleasures with other women and eventually undergo a surgery to replace his penis with a horse’s penis. The film Sex and Zen (1991), which is set in 17th century Qing dynasty and adapted from an erotica novel titled Rouputuan written in 1657 is filled with stories of sado-masochism, debauchery, prostitution, rape, and revenge. Twenty years after Sex and Zen’s commercial success, producer Stephen Shiu once again made headlines by producing Hong Kong’s first 3D softcore pornography 3D Sex and Zen: Extreme Ecstasy (2011). Despite their popularity among Hong Kong’s audiences, these films have been ignored by Hong Kong’s critics due to their Category III rating (or for adult only films). I agree with leading film scholars Darrell Harris and Yeh Yueh-yu that these long neglected “other” Hong Kong films deserve to be critically analyzed and studied. The history of the development of the softcore film industry is a major gap in the historiography of Hong Kong cinema. While the commercial success of softcore porn films have been acknowledged to a certain extent in the popular press, what is left untapped is the cultural work that these films do. This presentation asks what is the function of erotica films in Hong Kong society, focusing on the intersection of power, pleasure, gender, and colonialism in contemporary exotica films in Hong Kong. Using the 1991 and 2011 installments of Sex and Zen as case studies, this paper examines the cultural politics of the trope of castration fear and argues that contemporary Hong Kong’s softcore pornography exposes the crisis of masculinity and the precariousness of gender dynamics in colonial and postcolonial Hong Kong on the other.
Who controls nudity? In the era of social media, are we turning into prudes? The rise, and fall, of nudity

Nudity is being restricted by American run social media platforms. This is something that warrants a big discussion in Europe where nudity used to be a normal socially acceptable thing in various settings. In Iceland, it was common for women to bathe topless and therefore we should not have needed #freethenipple but because of social media censoring women’s nipples, young people growing up with social media and smart phones and photo sharing every experience, they did not encounter nudity as the norm when bathing in the public swimming pools. This is also the case for bathing in a natural spring pool. Tourists visiting Iceland were often naked and so were locals but this is now a very rare thing. And sharing such photos to the world can mean a social media ban for a period of time for that person. But also, it matters who shares what photo and of whom. Who has the freedom of nudity and who does not have it? Here we see a clear gender imbalance and power play. Hiding naked bodies, sexualizing nudity and genitals, has had great problems for the queer community as well, especially the trans community. We need to discuss nudity in relations to the body and culture and the future. This is at the heart of sexual education and if not discussed might bring further sexual shame unto young people. This is a matter that affects everyone, and we need to take a stance and open the discussion to protect certain rights and freedoms.
Sexological advice as part of sex work

It is virtually impossible to work as a BDSM professional or a traditional sex worker/escort without facing the fact that many clients are in need of much more than just a sexual experience or relief. The many insecurities, painful marital problems, different causes of shame and general life situations of the clients are a big part of what makes sex work socially and emotionally challenging. Some professionals decide to avoid deeper conversations with clients for example by offering only very short sessions. Others find this side of the work meaningful and rewarding.

It is not rare for sex workers to educate themselves in sexology, to be able to meet their clients’ needs more broadly. While the combination of sexology & sex work is by no means unproblematic, the hands-on experience acquired from practical sex work can be a considerable advantage in sexological advising or counseling.

In this lecture I will present and analyse real life cases where sex work and sexology have met in a fruitful way. As the academic research on the subject is nearly nonexistent, the material is from encounters with my own clients and from interviews of some of my colleagues. I will further examine the questions of work ethics, safety and stigma. If possible, there is time for questions & answers more broadly on the theme after the lecture.

PT, Master of sexology, PhD fellow
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Odense DK
Physical Activity to Improve Erectile Function: A Systematic Review of Intervention Studies

**Abstract Body**

**Introduction:** The leading cause of erectile dysfunction (ED) is arterial dysfunction, with cardiovascular disease as the most common co-morbidity. ED is, therefore, typically linked to a web of closely interrelated cardiovascular risk factors such as physical inactivity, obesity, hypertension, and metabolic syndrome. Subsequently, physical activity (PA) has proven to be a protective factor against erectile problems, and it has been demonstrated to improve the erectile function for men affected by vascular ED. This systematic review aims to estimate the levels of physical activity needed to reduce ED for men with physical inactivity, obesity, hypertension, metabolic syndrome, and/or manifest cardiovascular diseases.

**Aim:** To provide recommendations of levels of physical activity needed to reduce ED for men with physical inactivity, obesity, hypertension, metabolic syndrome, and/or cardiovascular diseases.

**Methods:** Following the PRISMA guidelines, a systematic review was performed of research papers specifically investigating PA as a possible treatment of ED. The review included research on ED due to physical inactivity, obesity, hypertension, metabolic syndrome, and/or...
cardiovascular diseases. All available studies from 2006-2016 were checked for the predetermined inclusion and exclusion criteria in order to analyse the levels of physical activity needed to reduce ED.

**Results:** Ten articles met the inclusion criteria, all suggesting various levels of PA needed to reduce ED for men with relevant risk factors for ED. The results of the review provided sufficient research evidence for conclusions regarding the levels of physical activity necessary to reduce ED.

**Conclusion:** Recommendations of PA to reduce ED should include supervised training consisting of aerobic exercise of moderate to vigorous intensity, four times per week for 40 minutes. Overall weekly exercise of 160 minutes for six months contributes to reducing erectile problems among men with ED caused by physical inactivity, obesity, hypertension, metabolic syndrome, and/or cardiovascular diseases.


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**Abstract Title**

Beliefs and attitudes of Greek University Students towards LGBTQ+ individuals
Sexuality embraces a great range of human experience. Although most people prefer partners of the other sex, a number of individuals do not conform to heterosexual expectations. According to data from many countries as well as Greece LGBTQ+ individuals report more often being harassed, bullied and/or abused in the school settings. Such type of violence and marginalization have a negative impact in the well-being of sexual minorities, as many studies worldwide also show. Bullying is a social phenomenon; therefore, it is important to examine and understand beliefs and attitudes that obstruct or encourage it. Such understanding can inform educational interventions that promote respect and acceptance. In this work I discuss data from a study on homophobic beliefs and attitudes among university students in Greece. 256 undergraduate and postgraduate students from University of Crete replied to a structured, closed end questionnaire on the subject. According to data analysis, in general, students retain a positive attitude towards LGBTQ+ individuals, especially within the academic frame. However, when the situation is less academic, for instance in spaces where students freely socialize as the university cafeteria, answers indicate less interest and accepting. Students report that it is the role of the State to support the human rights agenda of LGBTQ+ individuals, however, such support is decreased to an important extend when those rights refer to same sex marriage and adoption. Finally, it seems to be a statistical relationship between certain beliefs and the level of students’ studies, as well as the sex of the students. Based on these data I also discuss educational interventions and educational policy decisions that encourage understanding of human sexual diversity and a more inclusive approach within the Greek educational system.
Abstract Title

Promoting sexual health in upper secondary schools

Abstract Body

Sexual health is defined as a state of physical, mental and social well-being in relation to sexuality. Sex education is an integral part of sexual health. Sex education is a lifelong process in which an individual acquires knowledge and creates views, attitudes and values about their own self-image and sexuality. Sexuality is a core part of every person and includes sexual behaviors, gender identity, gender roles, sexual orientation, and sexual pleasure. Sex education is therefore important for all students regardless of school level. Sex education has been criticized for focusing too much on the problematic and biological in relation to sexuality. Sex education that also focuses on the social forces that shape a person’s sexuality, such as ideas about masculinity and femininity, heteronormativity, sexual scripts and pornography, and mental aspects such as self-image and body image are better suited to promote students in their own sexuality and encourage them to enjoy the sexual behaviors they choose to partake in. It is important that students on the upper secondary level receive comprehensive and informative sex education that gives them the opportunity to ask questions and discuss sexuality on a peer basis and with a theoretical background.

For students on the upper secondary level to have comprehensive sex education the schools need to offer a whole course on sexual health. The purpose of this paper is to provide
theoretical arguments and a framework for a sex education course designed for students at the upper secondary level. The pedagogical approach to the subject is based on Paulo Freire’s critical pedagogy. Sexuality is personal and different from person to person and it’s therefore important to give students the opportunity to reflect on their own experiences within the social context. Finally then will sex ed work as it should.

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Abstract Title

Development and pilot testing of SEXIT - an evidence-informed tool kit for the identification of youth at risk of sexual ill health

Abstract Body

**Background:** Risk factors for negative experiences of sexuality such as STI, unplanned pregnancies and sexual violence among youth have been widely studied, and point out the need for healthcare staff to systematically identify sexually risk taking and exposed youth. However, this knowledge has not been translated into organizational development in terms of clinical applications, new routines or other supporting systems to be used in the "real world" of youth clinics.

**Aims:** To develop an evidence-informed tool kit for the identification of sexually risk-taking or sexually exposed youth and to test the tool kit at three youth clinics in Region Västra Götaland, Sweden.

**Methods:** A draft version of a brief screening tool informed by current evidence was developed. Questions from previously validated questionnaires were used when possible. The draft was assessed by a reference panel of healthcare professionals for content validation and pilot-tested by a strategic sample of three youth clinics in Region Västra Götaland. To prepare the clinics for the one-month pilot-testing, a specially designed one-day training was provided. Recommendations for follow-up questions and actions based on the screening results was worked out in cooperation with the clinical staff. The screening tool was filled in by visitors, aged 15-24 years, at the youth clinic after informed consent, and reviewed by the healthcare professional and the visitor together. The screening tool was later collected for analysis. Results from the screening tool were analysed descriptively and for differences between groups.

**Preliminary results:** A screening tool named Sexit was developed and successfully implemented. Analysis of responses from 78% of visitors (n=268), indicate that sexual risk-taking and negative experiences of sexuality are common in the youth clinic population, and that Sexit can help to differentiate especially vulnerable visitors. The respondents were positive to
the use of Sexit in youth clinics and rated the questions as important and not unpleasant or difficult to answer.

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**Abstract Title**

Together! Supporting LGBTIQ asylum seekers

**Abstract Body**

Heseta is a human rights organization that makes well being of people belong to sexual and gender minorities. The community work includes social and youth work, various training and consulting services and events. Heseta organize community activites such a open and close peers-groups and courses. Heseta special focus is on development of youth work and Together actions.

TOGETHER is a peer supportive group for lvgtiq people that are refugees or seeking an asylum in Finland, that start on2015. The aim is to support wellbeing, strengthen social networks and offer information about rights and services in Finland to lvgtiq-asylum seekers and people with refugee background.

The participants of our actions in TOGETHER also want to raise awareness about lvgtiq-issues to impact the immigration services, asylum process and society in general, as there are many issues that need to be developed for safety and equality of all people. We offer personnel meeting for advice or support for sexual or gender identity.
Abstract Title

"My body belongs to Me"

Abstract Body

"My body belongs to Me" is an animated documentary series providing children with basic information about their body, boundaries and sexual abuse. These 4 cartoons, "My body belongs to Me" (four minutes X 4), are also translated into English. We will show you the cartoons and talk about the process of making them.

The cartoons was awarded the “Gullruten 2018”, the most important and prestigious TV-award in Norway, and also nominated for other prestigious film prizes like the Prix Jeunesse International 2018. The cartoons premiered on Norways public broadcaster NRK in 2017 and are available for teaching purposes in schools and kindergartens.

The aim of this series is to give children the confidence to report if they experience sexual abuse, and for all children to learn about boundaries – both their own and other people’s. Save the Children Norway (Redd Barna) has compiled a guideline booklet for teachers and parents to accompany the series, containing advice for teachers and parents on how to talk to children about sexual abuse.

Professionally responsible for the cartoons were Marianne Müller (director and scriptwriter) and Trond Jacobsen (director and producer) from Bivrost Film, with Stine Kühle-Hansen (group leader and scriptwriter). Because sexual abuse is a complex subject to address, the scripts were assured by a diverse group of highly qualified professionals from the fields of education, sexuality and child sexual abuse.

This series is produced by Bivrost Film in collaboration with Save the Children Norway, NRK Super and LMSO (The national umbrella organization for support to victims of sexual abuse). Financed by Norways public broadcaster NRK, the Norwegian Directorate for Children, Youth and Family Affairs, the Norwegian ExtraFoundation, Viken Film Centre and The Norwegian Film Institute.
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Abstract Title

In the outskirts of the charmed circle - when incarcerated young people meet staff lacking basic SRHR education

Abstract Body

**Background:** The right to sexual health is universal. Still, young incarcerated people risk not getting their sexual rights respected. Young people in secure state care in Sweden are exposed and vulnerable in the field of sexual health, especially compared to their same aged peers.

**Aim:** To investigate and reflect upon the conditions for sexual health promotion at secure institutions for young people.

**Method:** Empirical data from four different studies on sexual health among young people in state care and from a study on sexual and reproductive health and rights (SRHR) in higher education in Sweden is examined using Rubin’s sex hierarchy.

**Results:** Young people in secure state care have experiences that deviate from a sexuality seen as conventional among young people in Sweden, experiences they themselves do not necessarily see as risks or problems. This puts them in the outskirts of Rubin’s charmed sexual circle. Staff at secure institutions are assumed to lack basic SRHR education, leaving them to act professionally based on their own experiences. As a result, clashes on various levels occur, between the subjectively desired (young people seeking pleasure from sex, alcohol or drugs), and the societally desired (sexual health, minimal alcohol use and no drug use among young people). In addition, clashes between young people who want to be like everyone else in their social context, and staff with a mission (i.e. job description) to readjust young people into a societally accepted (sexual) behavior are present.

**Conclusion:** It is crucial that staff at secure institutions handle young people’s sexual experiences and sexual health needs in a non-judgmental and youth-friendly fashion. Staff education in SRHR, and guidelines that apply for all secure care institutions are much needed.
Abstract Title

Findings from focus group interviews of a pilot online graduate level course on Sexual Health and Sexuality Education.

Abstract Body

Gerd Hilde Lunde* Ann-Karin Valle** and Stine Kühle-Hansen*

**Background:** Oslo Metropolitan University, supported by Norwegian University, developed an inter-professional online graduate level course on sexual health and sexuality education, with first student enrollment fall 2016. During the first pilot period 76 students enrolled in the course beginning early September 2016, 64 students carried through for most of the time period and 49 completed the course with examinations.

**AIM:** In depth knowledge about student learning experiences attending an online course on sexual health and sexuality education, using a variety of digital learning activities.

**Methods:** Evaluations were carried out using qualitative methodology, through focus groups, initially and after course finalization. Primary questions raised during first focus group were related to expectations based on personal motivation, first impressions of course descriptions of content and learning outcomes. Questions raised during last focus group primarily addressed experienced course satisfaction and experiences with learning activities such as Open EdX, Fronter, e-book, films, other visuals, texts, case, reflections, discussion boards and multiple choice tests and learning processes.

**Ethical considerations** are discussed throughout the process, ensuring anonymity and informed consent.
**Preliminary findings:** Preliminary findings from focus groups are mainly related to experienced need for graduate level online courses in sexual health and sexuality education and related to students experiences of quality and academic benefits from different learning activities through various topics in the course. Some areas for improvements were verbalized during focusgroup dialogues. Findings suggests a need for further studies to improve insights and in depth understanding of student perspectives both on the process of being an online student, and a user of online learning activities in this field.

**Conclusion:** Main experienced satisfaction were related to selected learning outcomes. In order to in addition better understand drop-out mechanisms and mechanisms to minimize drop-outs, including technical support for learning analytics are highly recommended.

* assistant professor, Oslo Metropolitan University, HF, Department of Behavioural Sciences.

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### Abstract Title

Teachers’ and school nurses’ collaboration concerning HPV vaccination and sex education

### Abstract Body

Since 2010, vaccination against human papilloma virus (HPV) has been offered free of charge for all girls in Sweden. The school nurse administer the vaccination when the girls are 10-12 years old. The transmission of HPV is primarily connected to an active sex life, something that normally not has started in this age. Therefore, it is interesting to investigate if, and how the introduction of HPV-vaccination has influenced sex education in school.

We have in a pilot study individually interviewed 5 primary teachers and 5 school nurses concerning information about the vaccination, sex education and their cooperation. The results demonstrate how the teachers see themselves mainly as distributor and collector of information and agreement documents
The school nurses described that they perform information about puberty, sexual life and HPV vaccination in groups of girls only, but also in the whole class. They experienced that there were limited cooperation between the teachers and themselves although they expressed that they wanted to collaborate. Most nurses felt that they were waiting for “an invitation” from the teachers to visit the classroom. One interviewee described how the principal of the school did not allow the school nurse and the teacher to share groups since the head master did not want to risk that the parents would not approve related to religion. The nurses did not have full insight concerning the teachers’ lectures but they had a feeling that the teachers focused on biology and the nurses handled practical things like menstruation and also discussed psychological issues with the pupils.

During the presentation we will present the results, but also some possible explanations to and implications of our results.

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Abstract Title

The quality and quantity of education in sexual medicine in Finland – A pilot study

Abstract Body

Introduction
Sexual health is important for quality of life. Therefore sexual health problems can be a reason for doctor’s appointment. However, the quality and the quantity of education in sexual medicine has not reached a satisfactory level.

A study has initiated in the University of Turku which objective is to improve the quality and quantity of sexual education. We aim to evaluate i) the level of knowledge and competence of the Finnish GPs to treat sexual problems, ii) the amount and content of sexual education in the Medical schools of Finland, iii) the differences in the quality and the quantity of sexual education between Finnish Medical schools and Finnish Midwifery schools.

Purpose and Methods

This pilot study aimed to evaluate the understandability and functionality of the developed questionnaire. The study was conducted among sixth year medical students in the University of Turku. The questionnaire was sent to 49 medical students of which 26 responded (52%). Seventy-seven percent of the respondents were women and 23% men.

Results

Of the respondents, 77% reported having met patients with sexual problems while working as a substitute doctor (e.g. summertime). Of these students, 52% found that they were able to help the patient while the rest of the responders i) experienced that their skills were not good enough to treat the patient (14%), ii) had consulted a senior (19%) or iii) had ignored the patient’s problem (5%). Sixty-nine percent felt having not had enough education on sexual medicine and majority of them considered that Sexual Medicine should be mandatory in the schedule in medical school.

Conclusion

Patients with sexual problems are frequent, almost three forth had met them during their medical student career. Almost half of the students felt that they could not help the patient. More data are needed to better improve the quality and quantity of education in sexual medicine.

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Abstract Title

Therapists attitudes to sexual desire and sexual intimacy in couple’s therapy

Abstract Body

The aim of the study was to describe and interpret therapist’s approach to sexual desire and intimacy and impact of these phenomena in intimate relations. The purpose also included how the therapists felt that their clients relied on these issues. In addition, the therapists were asked about different client cases to identify challenges and pitfalls how to succeed
The selection for the study was family advisors who often meet clients with questions about lust and intimacy. Sweden's Family counselling is a community initiative where municipalities are required to assist its residents in mediation and conversation about social issues. Six qualitative interviews were conducted; five with family counsellors and one with educators. The empirical material was analysed with qualitative content analysis. As a theoretical framework, Simon and Gagnon's sexual scripting theory was used.

The results were structured based on social, interpersonal and intrapsychic approaches. The results showed that both therapists and clients relate to happiness and intimacy as being important to love relationships. Through training, years of experience and training, the therapists have worked for a body-based safety. This incongruence ability helps them to accommodate clients’ different issues. In the interviews, the therapists also provided various practical tips for communicating with clients about lust and intimacy. Future research should concentrate on the therapist’s sound clinical experience and how this competence can be integrated into different therapies for therapists.

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Abstract Titles

Genital Practices around the World

Cultural Literacy in working with sexual issues

Abstract Bodies

Genital Practices around the World: This talk will take the audience around the globe. It will highlight the common as well as unique genital practices such as hymen dilemmas, genital surgeries, decorations, rituals and modifications. The data was collected between 2014 and 2017 from gray literature, anecdotes, personal observations across 37 countries and in qualitative research with NGO workers across various regions.
We live and practice in multicultural and multiethnic societies, which warrant a healthcare workforce that is open minded and informed about diverse practices that involve one’s genitalia. Most sexologists do not have the privileges that a medical professional has in examining a person’s genitalia. This makes it even more critical for a thorough understanding of what different groups practice and how to ensure our history taking would elicit such information. For example, sexual terminology of a patient from a different cultural or ethnic background, the way they address their private parts and the way they treat them might differ from the one of the practitioner or what they are familiar with. Awareness about these nuances would influence the direction and outcome of the consultation positively. This presentation will offer a diverse and overall report of genital practices with the hope to broaden the audience’s perspective and add to their tools for an informed history taking.

Cultural Literacy in working with sexual issues

*Cultural Literacy* (adapted from Hirsch in the realm of education) is amongst the strongest assets for counselors, educators and therapists. We all live in a multicultural context consistent of individuals of diverse origins, belief systems and ways of living. Understanding the context of peoples’ way of life is of critical impotence in shaping therapeutic alliance as well as client’s compliance with the process. Cultural literacy allows us to comprehend contextual clues that would go unrealized otherwise. It is achieved through a conscious process of: keeping an open mind with genuine interest, which fuels our informed questions. These will then allow us to have deep respect and practice with compassion for the responses our questions would elicit (IQRC). Over time IQRC will add to our *Cultural Proficiency*, which is the differentiating factor between a highly effective practitioner and a mediocre one. This workshop is partly experiential and elements of IQRC process will be elaborated on with tangible examples from real life clients.

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Abstract Title

The Emotional Stroop Task as a tool in forensic sexology. A pilot study on a Polish non-clinical sample and preliminary analysis.

Abstract Body

Objective

The Emotional Stroop Task is believed to be a valuable diagnostic tool to distinct between pedophilic and non-pedophilic persons, especially when an individual suffers from structural or functional dysfunctions of the prefrontal cortex. It has been shown that persons with pedophilia tend to name the font color of words associated with childhood slower than persons without pedophilia.

The aim of this study was to: identify the words that are most arousing for pedophilic and non-pedophilic persons (study I); estimate reaction time in various study conditions on a non-clinical sample (study II); compare Reaction Time in non-clinical sample with preliminary results in sex offenders sample.

Participants

The first study consisted of 5 judges who were experts in the area of human sexuality.

The second study consisted of 25 healthy individuals.

Methods

Study I

The participants were asked to rank words in 6 preference groups (pedophilic and general sexual words), each group containing 30 words, from the most arousing to least arousing to a representative of a given group.

Study II

The participants were randomly divided into two groups. Both groups were asked to name the font color of each word included in five different groups.

Results

Study I

Kendall's W ranges were rated from 0.368 to 0.693.

Study II

ANOVA test has been conducted.
Study II - first part

Statistically significant differences were observed (F=4.249, p=0.018). Post-hoc LSD analyses revealed that Reaction Time Bias was higher for “general sexual hard” than “pedophilic – boys” words (p<0.05), although there were no differences between “pedophilic – general” words and “neutral” words.

Study II - second part

No statistically significant differences were observed (p>0.05).

Conclusions

Due to low Kendall’s W ranges, 60% of the most arousing words (n=18) will be included in further research. As expected, pedophilic words did not cause prolonged reaction time in healthy individuals. This may serve as a starting point for further research conducted on a pedophilic group.

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Abstract Title

Ethics of Sex Work - Busting the Myth of Immorality

Abstract Body

Sex work has been an object of ethical debate for centuries. The debate intensified after the 60’s, when a vibrant feminist streak was introduced to the discourse, and secondly when sex workers themselves have gradually been involved and included. The discourse has always been rife with ethical fallacies, mostly in the form of using ethical language, when there are no genuine ethical questions present.

The aim of this presentation is to make a philosophical analysis of the ethically relevant aspects of sex work in its various environments. Key dimensions of the analysis are 1) defining ethical principles that are applicable to the matter, 2) identifying ethical problems involved, and 3) busting powerful fallacies that affect the discourse.

The theoretical background of the enquiry is in international human rights tradition, sexual
rights and liberal consequentialist sexual ethics. Also deontological ethics, professional ethics and virtue ethics are addressed. The analysis focuses on the complexities of sexual rights within social networks of sex workers, their clients and close ones of both. The enquiry aims at normative conclusions both regarding the ethical status of sex work and its relevant factors, and regarding some persistent myths and fallacies plaguing the discourse.

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Abstract Title

Disability and sexual assistance in Finland today

Abstract Body

In my statement I will briefly cover the subject of disability and sexuality and what sexual assistance is today here in Finland – what is done, why and how is it done?

Concretely: What kind of thoughts does sexual assistance bring up in those who need and use the assistance and in those who give it? What kind of problems and possibilities have I faced in my work as a specialist in sexological counselling?

Finally: a short summary and a discussion:

What are the next steps forward with sex with an assistance here in Finland, where can we take an example from:

- Point of views of a rehabilitation and increased sexual wellbeing
- Sexual assistance and personal assistance
- Other ways to make sex with an assistance possible, boundaries, professionalism and safety
- End discussion

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Abstract Title

BDSM as Pain Relief
Abstract Body

According to a preliminary enquiry within BDSM communities in Norway, Denmark and Finland, BDSM activities can be able to relieve chronic or frequent pain (e.g. headaches, joint pain). The purpose of this study is to gather qualitative information about using BDSM activities and extreme rituals as pain relief. The target group is people within BDSM and hook suspension communities in Norway, Denmark and Finland.

The questionnaire gathers information during 2018 about the participants' pain experiences, BDSM practices or extreme rituals, and pain experiences after engaging in BDSM. Pain levels are measured by self-reporting in the scale of 1-10 (1 being mild and fleeting uncomfortable experience and 10 being intolerable pain). The result are analyzed in comparison to the type and frequency of the BDSM activities or extreme rituals in question.

Preliminary findings were not yet available when this abstract was written, but they will be freshly presented in the NACS conference.

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Abstract Title

Breaking the taboos: Sexology in suicide prevention
Abstract Body

Suicide is a global phenomenon and it has a widespread effect on communities. According to WHO’s estimation approximately 800 000 people die from suicide annually. Several risk factors for suicide are related to sexological issues.

Communities can improve suicide prevention skills within their population by increasing awareness surrounding these issues. VIVAT is suggested by the Norwegian Directorate of Health as one of the action plans for preventing suicide. The program is developed by LivingWorks Education in Canada. Their workshops educate primarily health care professionals, school systems, volunteer workers and laity.

This presentation will focus on how important it is to break sexological taboos as a step on preventing suicides, and how LivingWorks’ programs contribute to it. The presentation will be based on literature findings, societal and cultural issues, and suggestions on preventive acts.

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Abstract Title

Emotion regulation and sexual desire in long-term couples: Attachment orientation and intimacy moderate the associations between perceived stress and sexual desire
Abstract Body

Adult attachment theory claims that securely attached individuals approach both solitary and partnered sexual activity with self-confidence and trust. Anxiously attached individuals, however, have a strong desire to feel loved and protected, and may use sex for securing proximity with their partner. They invoke hyperactivating strategies in stressful social contexts, such as marital conflicts and when intimacy with their partner is under threat. Avoidantly attached individuals, in contrast, feel overwhelmed when they become too close to others, including their romantic partners. They tend to use deactivating strategies, such as keeping emotional distance. Adult attachment is thus considered to serve an important emotion regulation purpose by lowering feelings of distress.

In this study we investigated the dynamic temporal association patterns between attachment orientation, perceived stress and emotional intimacy as determinants of the sexual desire of individuals in a long-term relationship. Sexual desire was predicted to vary as a function of perceived stress, level of anxious and avoidant attachment and perceived level of emotional intimacy. The following hypotheses were tested:

1. The association of perceived stress level and level of sexual desire was expected to be moderated by avoidant attachment.

2. The association of perceived stress level and level of sexual desire was expected to be moderated by the interaction of anxious attachment and perceived emotional intimacy.

In all associations, the role of gender was exploratively investigated.

We employed ecological momentary assessment methodology, assessing the constructs of interest at randomized, multiple times (N=10) during the day, and across multiple days (N=7). We analyzed data of 134 individuals (Nfemale = 87). Only one of the partners of a couple participated in the study.

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Abstract Title

To recognize and acknowledge sexual issues in psychiatric patients

Abstract Body

Background: In December 2017, the Government of Norway presented a national plan to improve sexual health among the people. One area is sexual health issues in health care.

Methods: The Community Mental Health Centre (CMHC), South Oslo, is a psychiatric centre with different sections for most psychiatric disorders, with in- and outpatient units. The CMHC, South Oslo gives health care to about 138 300 inhabitants. To improve knowledge about sexual health issues at the Mental Health Centre, we created a group consisting of a psychiatrist, a social worker and a social educator, the last two are in addition sexologists.

Results: The group used clinical cases to illustrate the need for more knowledge about sexual health related to psychiatric disorders. This was presented for the administration and the head of CMHC. They approved and since April this year the group is a formal part of the CMHC. We tried to find similar groups in the psychiatric health care elsewhere in Norway, which we did not find. It seems that the group so far is unique. Hopefully it will inspire new groups being established other places within the mental health care system.

Conclusions: Both according to the Governmental plan and from our clinical experience, there seems to be a need for improved knowledge about sexual health in psychiatric patients. Today it is individually how much each healthcare worker knows. The group would like to work for a way to implement important basic knowledge that is important for every health worker and to use existing competence that some workers already have. There are several ways of doing that, one important part can be the PLISSIT model.

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Abstract Title

Pandora’s Box? - Sexual and reproductive health and rights (SRHR) education with homeless people in Sweden

Abstract Body

This presentation describes the implementation of an educational intervention to strengthen sexual health among homeless people by including sexual and reproductive health and rights (SRHR) as a part of social work provision with this group. Adult service users in different forms of temporary accommodation were provided with the opportunity to participate in three group sessions. Seventeen sessions, six with women and eleven with men, took place at six different housing facilities in Gothenburg. The intervention implementation process (which involved preparation, creation, realisation and evaluation) will be presented, and factors of importance illuminated. Service users appreciated the opportunity to receive information and discuss sexual health, rights and norms. The success of the work may be related to the fact that the project was anchored both in social services and among service users, constantly adjusted, and delivered using a respectful approach. Social work organisations and professionals have an important role to play in acknowledging and promoting service users’ sexual health and rights, especially among disadvantaged and socially excluded groups including homeless people. A Pandora’s Box development feared by staff at the housing facilities, that service users would share and reflect on traumatic experiences, and that this would be harmful and cause them further psychological distress, did not occur. Rather, the box appears to have needed opening.

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Abstract Title

“Just imagine!” sexological joke like research tool for sexologists working on-line

Abstract Body

A sexological joke for women was created to attract visitors on sexological site and to facilitate on-line contact with sexologist for consultations.

A methodology for creating questionnaires was applied; its essence is that texts should consist of special semantic compositions. Besides cognitive content, they have emotional coloring, and help a respondent remember past or intuitively predict the future. That engages and makes respondent’s attitudes more overt and visible for a researcher.

In cognitive area, sexological ideas about four spheres in which any human behavior on the basis of sexuality fits were used. They are reproductive, platonic, erotic, and sexual.

Imagination, safety relationship and their association with pleasure were applied. Thereby, several paragraphs were obtained.

The task for female respondent was to consistently abandon imaginary partners with whom she is in reproductive, platonic, erotic, sexual relations. It takes several minutes. At the end sexologist creates a profile of 4 factors mentioned above.

The joke was run in a group on Internet site for doctors only. Written authorizations were received from colleagues to use profiles and comments in research.

In a totality of 116 women completely fulfilled the task similar profiles were identified. The first imaginary relationship that women refuse is reproductive one. Women didn’t want to give up sexual relations and they kept ones to the end of profile (86 cases). Nevertheless, in 21 cases, respondents refused from sexual relations but kept the erotic ones. In 9 cases other profiles’ variations were obtained. Comments are of particular interest because they reflect personal variations of opinions to joke.

Thus, the idea is good enough for communication and to study Internet population which sexologist creates around she/himself. So we made a web-page with age- and sex- markers and calculations. The tool is useful for consulting and training in researches for students and sexologists.
Abstract Title

Presenting a new service Et ole yksin (you are not alone- service)

Abstract Body

Inappropriate behavior and sexual abuse in sports has gained a lot of media attention. The topic has raised a lot of conversation in Finland and internationally. There is still there is very little research done about inappropriate behaviour and harassment in sports. Considering that over 60% of 9-15 year olds are involved in sports activities, it is likely that harassment exists in sports too. Every third girl and more than every tenth boy in 8th and 9th grades have experiences sexual harassment over the past year. In Finland sport activities was the third most common place where children and young people experience bullying. 2% of elementary school students had experienced sexual harassment in their hobby.

On April 2018 Väestöliitto has launched the first targeted support service for athletes who have experienced inappropriate behaviour, sexual abuse, harassment, or violence in sports. Support is offered in an easily accessible way via phone or chat, anonymously and free of charge. Accessibility is important in order to encourage people who have experienced or witnessed inappropriate behaviour or abuse to come forward with their experience. Also parents, coaches, guardians and former athletes are welcomed to contact the service. In this service we will gather more information about the phenomenon and we will get a better understanding of where to focus. Inappropriate behaviour becomes more easily recognised and easier to prevent.

In addition to offering support, the nationwide service is aiming to strengthen sexual self-determination amongst young people and to raise awareness amongst parents and coaches about bullying, sexual
harassment and violence prevention. This service is unique because it is designed and implemented in partnership with Finnish sports associations.

Et ole yksin-service aims to ensure that no victim of harassment, sexual abuse, violence or any inappropriate behaviour in sports is left alone.
Abstract Body

Directive 2011/92/EU of The European Parliament on combating sexual abuse and sexual exploitation of children requires EU member states to provide sexual abuse/violence prevention services to potential offenders. Convention on the Rights of the Child requires that the nations that have ratified the convention take action to protect the child from all forms of physical and mental violence, including sexual abuse and exploitation. Currently Finland does not meet these requirements. Prevention services or intervention programs are not provided for non-convicted potential sexual offenders. Additionally, social and health care professionals lack tools and skills to work with clients that are concerned about their sexual interests.

The Prevention Project SeriE focuses on providing free preventive and supportive services to high-risk potential offenders. The main target group is those individuals aged 15-25 that have a significant risk of committing a sexual offence. Supportive services are provided in Finnish, Swedish and English. Professional counselling and consultation to social and health care professionals are provided within the project. Brochures and other material are produced to provide information about child sexual abuse and pedophilia as a phenomenon. Providing accurate information will reduce stigma and encourage potential offenders to seek support.

The SeriE-network coordinates the services and knowledge of authorities, NGOs and other actors within the Helsinki Metropolitan area (Helsinki, Espoo, Vantaa, Kauniainen). The SeriE-network aims to clarify the paths of service both to the clients and the professionals working with potential/convicted sexual offenders. The SeriE-project is as a pilot project linked with “SERITA-project” and “Välitä! project”. The staff in SeriE project consists of two Sexuality Therapists and one Network Coordinator. The project is funded by STEA and will be implemented in 2018-2020.

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Abstract Title

“To navigate the minefield.”
Women’s experiences of abortion in a country with conscience clause – a qualitative study.

Abstract body
**Background:** Conscience clause within abortion care is common worldwide and has been shown to affect both staff and women's access to abortion. Women's experiences of abortion in a country with conscience clause is however an unexplored field. **Aim:** The aim of the study was to explore women's experiences of abortion in Croatia, a country with conscience clause. **Data and Methods:** Seven women with experience of abortion participated in semi-structured interviews, Data were qualitatively analysed with an inductive approach and results were discussed using the stigma concept. **Results:** One comprehensive main theme emerged; “To navigate the minefield - women's experiences of abortion in a country with conscience clause” and shows that conscience clause affects women's mental health, access to abortion care, treatment, and contributes to a mora lstic view of sexuality. Further, conscience clause as a result of religious objections has implications in public health as it affects the staff's views on abortion and thus information about abortion and contraception. The woman's sexuality and decisions about abortion becomes a public affair, and the women may become stigmatized. **Summary:** Despite legal abortion, conscience clause, legitimizes moralizing when opportunities are provided for staff to interpret the law based on their own moral positions. Conscience clause thereby affect a discourse that could lead to a pronounced stigmatization of the woman and her sexuality.

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### Abstract Title

Ask, tell, listen, respect and make sure - Consent animation to young people
Abstract Body

World is not the same after #metoo campaign. Now a conversation about sexual consent is brought to a social level. It’s part of a bigger picture where we don’t talk anymore only about sex. Now we talk about sexual power, sexual desire, personal space, communication and respect.

In School health survey (National Institute for Health and Welfare 2017) sexual violence and harassment was described as unwanted intimate touch, sexual coercion or pressure. According to this survey, over all Finnish youngsters experience unwanted sexual acts. High school students & vocational school youth girls 30% and 8% of boys have experienced sexual harassment. Sexual violence is described at the survey as pressured to sexual act and their private parts were touch without permission.

Young people want to learn how to react in different situations. An animation student from Turku University Of Applied Sciences wanted to make school assignment with us as a co-operative. Our consent animation shows in a simple way, how to make sure and reinforce sexual consent.

Consent can be given by words and/ or gestures. Consent is needed to ensure by asking, listening and making sure. Consent is an atmosphere where you don’t feel pressured to do anything you don’t want. And there is freedom to say yes, no or I don’t know. Consent is to hear these words, notice those gestures and live by it.

We wanted to make a short material that is suitable and easy to share in social media. We have shared the animation in Family Federation Facebook pages, Youtube channels, in our main pages, Instagram and Snapchat. It has been shared more than 100 times and it reached over 12 000 impressions. Animation has been translated to 10 different languages.

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**Abstract Title**

Project Jotta kukaan ei jäisi yksin - No-One Needs to Stay Alone (2017-2019)

**Abstract Body**

People with special needs (e.g. learning or intellectual disabilities, autism spectrum) face problems in fulfilling their sexual rights. Many of them suffer from loneliness, because it is often difficult to find new friends or dating partners because of social challenges. Their sexual rights and needs are often dismissed because of negative attitudes or ignorance within the public and help professions. This deepens the loneliness they experience.

The project Jotta kukaan ei jäisi yksin (No- One Needs to Stay Alone) by Sexpo Foundation aims at reducing loneliness among people with special needs (primary target group) by enabling informal social activities. Main means to achieve this is to promote relationships skills, to provide sex education, and to provide consulting for professionals and relatives.

The most important activity in the project is Villiklubi (Wild Club), which is an informal social club organised frequently in different cities (currently in Helsinki, Tampere, Seinäjoki and Turku). The clubs are in bars in central areas in order to improve social accessibility. Some events gathered almost 200 visitors in one night, which shows that they are desperately needed. During and between the clubs, the project provides support and education about sexuality and relationships to the target group and professionals working with them. The aim is to empower the target group in forming friendships and relationships.

The project is funded by the Ministry of Health and Social Affairs and implemented in 2017-2019 in cooperation with The Service Foundation for People with an Intellectual Disability and Autism Foundation. The project is nationwide and aims to work in 10 cities. The biggest challenge in the project is related to the negative attitudes the public and even professionals frequently show towards sexual needs of the people with special needs.