Helping People with Sexual Problems

Jane R. Howard
IP Communications, East Hawthorn, 2010
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‘Helping People with Sexual Problems’ is a complete book looking at the issues of dealing with sexual problems in clinical practice. It is comprehensive in its topic choice, and is clearly aimed at those who are practicing in the area of sexual dysfunction, or those who are studying in this area. It is a welcome Australian addition to what is a relatively new and growing area of clinical practice in this country.

Jane has brought together a holistic approach involving medical, psychological and relationship issues in dealing with sexual problems. As such, this approach represents her own medical background, and I think it is therefore of particular interest to other medical practitioners as it integrates a medical approach with these other areas. Allied health practitioners will equally find this book valuable as it fits the psychological and relationship aspects in neatly beside the medical aspects, without dismissing or ignoring any of these domains. This bypasses one of the biggest weaknesses in clinical practice where sexual problems which are multifactorial in nature are often treated one dimensionally.

The first chapter of the book sets the scene for working as a sex therapist. Jane has been meticulous in providing definitions and categories for sexual dysfunctions. Whilst this is probably necessary, it does provide a dry introduction to the nature of the book. Luckily this is rescued by the regular use of case studies throughout the book that draw on a variety of presenting cases and provide a good insight to the complexity of sexual dysfunction issues.

The second chapter looks at the aetiology of sexual problems. This is a broad based chapter which provides a good and balanced overview, but which suffers from giving a small amount of information about a large range of subjects. However, the last half of the book targets specific areas of clinical practice, so those looking for more detailed information will find this on further reading. Jane has researched widely, and there are 20 pages at the end of the book with references.

The third chapter discusses the ‘art and science’ of sex therapy. Here Jane reveals her own broad experiential background. She avoids one model of therapy, so she does not make the complexity of sexual dysfunction problems simplistic. Her message is to stay client-focused, and she provides a good list of tips for therapists to help achieve a good therapeutic alliance. This includes advice on creating a positive physical and emotional environment, through to advice on the areas most commonly addressed in therapy.

The subsequent nine chapters of this book become more detailed in approach. Jane looks at men’s sexual problems and women’s sexual problems in separate chapters. She also looks at the areas of dealing with people with a history of sexual abuse, sexual orientation issues, relationship aspects, and sexual problems associated with medical conditions in individual chapters. It is in these chapters that the medical and holistic background of Jane’s many years of experience becomes evident. She does not pretend that sex therapy is always successful, and in her case studies she gives a number of examples where the outcome is either unknown or problematic. This is reassuring for those in practice, as it reflects the fact that there is no one solution that works in all situations.

The final chapter of the book is devoted to how to ensure therapy is as effective as possible. This includes ways of looking after the therapist so that their performance is kept optimal.

This book is a good overview of looking at the complexity of issues involved when working in sexual dysfunction. It is of particular appeal to other medical practitioners as it integrates the medical perspective into the psychological and relationship issues. It would also be useful for allied health practitioners for this same reason. This book would also make a comprehensive addition to any student who is studying in the area of sexual dysfunction and sex therapy. In summary, Jane has achieved a good book looking at the contemporary issues in the clinical practice of sex therapy as it is in Australia today.

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Sin, Sex and Stigma: a Pacific Response to HIV/AIDS

Lawrence James Hammar
Sean Kingston Publishing, UK, 2010
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I must begin this review with declaring a conflict of interest. I am a public health adviser working for the Burnet Institute and for the past 3 years have been involved in the implementation of the Tingim Laip project. The author’s discussion of the response to HIV in Papua New Guinea (PNG) focusses on this project and its predecessor the National HIV/AIDS Support Project on which many of my friends and colleagues worked.
That being said, this book does contain some very interesting historical accounts of the response to HIV in PNG, and cultural insights which will be of great interest to those who work in PNG or will do so in the future. As with all historical accounts, the author’s viewpoint is intertwined within the analysis. As such, this book details one perspective on the evolution of responses to HIV in PNG. While my personal experience leads me to a different analysis of some of the turn of events, I do agree with many of his conclusions. Specifically, the author’s discussion of sexual risk within marriages is of utmost significance, as is his discussion for the need of a greater understanding of the urban/rural prevalence of HIV in PNG, and more generally improving the collection and use of data (quantitative and qualitative) in developing the response. His outline of the limitations of the HIV/AIDS Management and Prevention Act serve to remind us all of the importance of ensuring laws are properly enacted and do not become mere ‘milestones’.

Of particular interest was the review of condom promotional materials outlined in Chapter 5 and mention throughout the book of the influence of churches in condom promotion or acting as barriers to condom promotion. Another key discussion is male sexuality as it applies in PNG, an area correctly reported as not being well understood in PNG and critical to the development of effective HIV prevention programming.

An understanding of culture and the role of culture in HIV programs is well highlighted by Lawrence Hammar, although the depth of analysis and discussion can leave the reader overwhelmed. Arguments are often structured around the words, actions or experience of an individual rather than the discussion of broader systems, structures and policies.

The classification of high-risk groups, such as female sex workers and men who have sex with men, and the applicability of using such categories in PNG, is a recurring theme in the book and one that, although acknowledged by many including myself, remains problematic. I must correct the author when he states that these most-at-risk groups are the focus of the High-Risk Settings Strategy employed by Tingim Laip. Over the past 4 years, Tingim Laip has been operating in 36 different settings across PNG, focussing on locations where various types of high-risk behaviour are taking place. Some risk is linked to transactional sex and sex between men. However, the majority of the program focuses on a broader definition of sexual risk, working across communities and on the drivers of risk such as gender inequality and the use of alcohol and other drugs.

The author’s focus on the applicability of the High-Risk Setting Strategy ignores other components of PNG’s response to HIV, which are addressing several of his identified gaps and warrant discussion in this book.

Overall, the book is an interesting read for those working on the response to HIV in PNG, providing a valuable insight into the evolution of the response and components of PNG culture. However, readers should be aware that several of the ‘lessons learnt’ or failures outlined are recognised by many players and past limitations are now the focus of key documents such as the National HIV and AIDS Strategy 2011–2015.

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