

## The Hebrew University of Jerusalem

Syllabus

### Sexuality - 75310

Last update 19-10-2016

<u>HU Credits:</u> 1.5

Degree/Cycle: 1st degree (Bachelor)

<u>Responsible Department:</u> medicine - basic studies

<u>Academic year:</u> 0

<u>Semester:</u> 1st Semester

Teaching Languages: Hebrew

<u>Campus:</u> Ein Karem

Course/Module Coordinator: Dr. Mijal Luria, Dr. Anna Woloski-Wruble

Coordinator Email: annawruble@gmail.com

Coordinator Office Hours: Sunday, 9-10AM

Teaching Staff:

Dr. Mijal Luria Dr. Anna Woloski-Wruble Ms. Dr. Ohad Avny Ms. Sharon Peleg-Nesher Dr. Flescher Diana Mr. Dr. Ms. Dr. Sarah Katzenelson Ms. Dr. Mr. Elisha Azar Dr. Ms. Dr. Sahar Tali Ms. Dr.

Course/Module description:

This course will offer students the opportunity to learn about sexuality, sexual functioning, intimacy, and sexual relationships as influenced by the health illness continuum, from the level of the individual to society as a whole. Students will process relative sexuality issues in small groups and have the opportunity to learn to do a sexual health assessment, conduct a professional conversation concerning sexuality, and offer sexual health education.

#### Course/Module aims:

• The purpose of this course is to offer the students the opportunity to describe the sexuality of the health clients as an integral part of his/her health. The students will be able to identify the common sexual dysfunctions of men and women and describe the influence of chronic illnesses and disabilities on sexuality and intimacy.

The student will be able to evaluate sexual behavioral patterns as part of a model of prevention of sexuality transmitted diseases or unwanted pregnancies

# Learning outcomes - On successful completion of this module, students should be able to:

A. To describe in a non-judgmental way the wide range of human sexual

expression.

*B.* To describe the patient's sexuality as an integral component of health, and ask permission from the patient to engage him in conversation on the subject. If the patient agrees, to include questions about sexual function in the routine assessment of the patient.

C. Identify the appropriate clinical context of sexual history taking.

D. To explain the components of the bio - psychosocial and cultural aspects of sexuality and intimacy.

*E.* To discuss the role and unique contribution of the doctor from within the multi - disciplinary approach to sexual health.

*F.* To describe issues related to sexuality and intimacy for men and women along the continuum of life.

*G.* To describe common problems in sexual dysfunction for men and women. *H.* To describe the implications of chronic illness and disability on sexuality and intimacy, and to discuss with the patient about the difficulties and common sexual dysfunctions of the illness or secondary to the treatment received.

*I.* To analyze aspects of bio – psychosocial sexual health problems common in the LGBT community (Lesbian, Gay, Homosexual, and Transgender).

*J.* To identify the components from within the personal perceptions of the caretaker that can affect the ability to treat patients' sexuality.

*K.* To assess patterns of sexual behaviour in order to prevent sexually transmitted diseases or unwanted pregnancies.

L. To identify manipulative sexual contacts and sexual violence

<u>Attendance requirements(%):</u>

100

*Teaching arrangement and method of instruction: Lectures and small group exercises* 

### Course/Module Content:

*Bartlik, BD, Rosenfeld S, Beaton C, (2005). Assessment of sexual functioning: Sexual history taking for health care practitioners. Epilepsy & Behavior, 7, S15-S21.* 

*Basson, R. (2005). Women's sexual dysfunction: Revised and expanded definitions. CMAJ, 172, 1327-1333.* 

Dean L....Tierney. (2000). Lesbian, gay, bisexual, and transgender health: Findings and concerns. (2000). Journal of the Gay and Lesbian Medical Association, 4, 101-141.

*Kellogg ND. (2009). Clinical report: The evaluation of sexual behaviors in children. Pediatrics, 124, 992-998.*  *Kleinplatz pj, Menard AD, Paquet MP, Paradis N, Campbell M, Zuccarino D, & Mehak L. (2009). The components of optimal sexuality: A portrait of great sex. The Canadian Journal of Human Sexuality, 18, 1-13.* 

*Montorsi F...Wasserman M. (2010). Summary of the recommendations on sexual dysfunctions in men. Journal of Sexual Medicine, 7, 3572-3588.* 

### Required Reading:

Daniel, Hilary, and Renee Butkus. "Lesbian, gay, bisexual, and transgender health disparities: executive summary of a policy position paper from the American College of Physicians." Annals of internal medicine 163.2 (2015): 135-137. Greenwood, Nechama W., and Joanne Wilkinson. "Sexual and reproductive health care for women with intellectual disabilities: A primary care perspective." International journal of family medicine 2013 (2013). Kingsberg, Sheryl A., and Terri Woodard. "Female sexual dysfunction: focus on low desire." Obstetrics & Gynecology 125.2 (2015): 477-486. McCabe, M. P., Sharlip, I. D., Lewis, R., Atalla, E., Balon, R., Fisher, A. D., ... & Segraves, R. T. (2016). Risk Factors for Sexual Dysfunction Among Women and Men: A Consensus Statement From the Fourth International Consultation on Sexual Medicine 2015. The journal of sexual medicine, 13(2), 153-167. Dune, Tinashe Moira. "Sexuality and physical disability: Exploring the barriers and solutions in healthcare." Sexuality and Disability 30.2 (2012): 247-255. Montorsi, Francesco, et al. "Summary of the recommendations on sexual dysfunctions in men." The journal of sexual medicine 7.11 (2010): 3572-3588. Taylor, Bridget, and Sally Davis. "The extended PLISSIT model for addressing the sexual wellbeing of individuals with an acquired disability or chronic illness." Sexuality and Disability 25.3 (2007): 135-139.

<u>Additional Reading Material:</u> As needed

https://books.google.co.il/books?hl&eq;en&Ir&eq;&id&eq;9edFBQAAQBAJ&oi&eq;fnd &pg&eq;PA70&dq&eq;PLISSIT&ots&eq;iliRrYvY8h&sig&eq;Sjou1\_oP0lqk1OtDFSv96 mmhFNQ&redir\_esc&eq;y#v&eq;onepage&q&eq;PLISSIT&f&eq;false Atallah, Sandrine, et al. "Ethical and Sociocultural Aspects of Sexual Function and Dysfunction in Both Sexes." The journal of sexual medicine13.4 (2016): 591-606. Basson, Rosemary, and Willibrord Weijmar Schultz. "Sexual sequelae of general medical disorders." The Lancet 369.9559 (2007): 409-424.

*Bhugra, Dinesh, Dmitri Popelyuk, and Isabel McMullen. "Paraphilias across cultures: Contexts and controversies." Journal of sex research 47.2-3 (2010): 242-256. Brotto, Lori, et al. "Psychological and interpersonal dimensions of sexual function* 

and dysfunction." The journal of sexual medicine 13.4 (2016): 538-571. Kellogg, Nancy D. "Clinical report—the evaluation of sexual behaviors in children." Pediatrics 124.3 (2009): 992-998.

*Kleinplatz, Peggy J., et al. "The components of optimal sexuality: A portrait of" great sex"." The Canadian Journal of Human Sexuality 18.1/2 (2009): 1.* 

*McGuire, Brian E., and Austin A. Bayley.* "*Relationships, sexuality and decisionmaking capacity in people with an intellectual disability.*" *Current Opinion in Psychiatry 24.5 (2011): 398-402.* 

Reed-Maldonado, Amanda B., and Tom F. Lue. "A syndrome of erectile dysfunction in young men?." Translational andrology and urology 5.2 (2016): 228.

Rowen, Tami Serene, Sorah Stein, and Mitchell Tepper. "Sexual Health Care for People with Physical Disabilities." The journal of sexual medicine 12.3 (2015): 584-589.

*Shindel, Alan W., et al. "Sexual Health in Undergraduate Medical Education: Existing and Future Needs and Platforms." The Journal of Sexual Medicine13.7 (2016): 1013-1026.* 

*Tiefer, Leonore, Marny Hall, and Carol Tavris. "Beyond dysfunction: A new view of women's sexual problems." Journal of Sex & Marital Therapy 28.S1 (2002): 225-232.* 

<u>Course/Module evaluation:</u> End of year written/oral examination 0 % Presentation 50 % Participation in Tutorials 0 % Project work 0 % Assignments 0 % Reports 0 % Research project 0 % Quizzes 50 % Other 0 %

Additional information: