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# CONTINUUM Complete International ENCYCLOPEDIA OF SEXUALITY

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# CONTINUUM Complete International ENCYCLOPEDIA OF SEXUALITY

Updated, with More Countries



2004

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(CIA 2002)

# Ukraine (*Ukrayina*)

Tamara V. Hovorun, Ph.D., and Borys M. Vornyk, Ph.D. (Medicine) *Rewritten and updated in 2003 by T. V. Hovorun and B. M. Vornyk* 

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#### Demographics and a Brief Historical Perspective

#### **A. Demographics**

ROBERT T. FRANCOEUR

Located in southeastern Europe, Ukraine is bordered on the north by Belarusia, by the Russian Federation on the northeast and east, by Moldova and Romania on the southwest, and by Hungary, Poland, and the Slovak Republic on the west. It shares a Black Sea border with Turkey. Ukraine's territory is 233,090 square miles (603,700 km<sup>2</sup>), slightly smaller than Texas, or as large as France and Denmark combined.

According to the last all-Ukrainian census (2001), Ukraine had an estimated population of 48.457 million, 53.7% females and 46.3% males. (Unless otherwise indicated by *AUC* (all-Ukrainian census), all data are from *The World Factbook 2002* (CIA 2002).)

Age Distribution and Sex Ratios: 0-14 years: 16.8% with 1.04 male(s) per female (sex ratio); AUC (1999): 0-16 years: 19.4%; 15-64 years: 68.7% with 0.91 male(s) per female; AUC (1999): Working age: 57.2%; 65 years and over: 14.5% with 0.5 male(s) per female; AUC (1999): Above working age: 23.4%; Total population sex ratio: 0.86 male(s) to 1 female; AUC (2000) Total: 67.9 years; male: 62.4 years; female: 73.6 years

Life Expectancy at Birth: *Total Population*: 66.33 years; *male*: 60.86 years; *female*: 72.06 years

Urban/Rural Distribution: 67.2% to 32.8%

**Ethnic Distribution**: Ukrainian: 73%; Russian: 22%; Jewish: 0.2%; other: 4%

**Religious Distribution**: Ukrainian Orthodox–Moscow Patriarchate, Ukrainian Orthodox–Kiev Patriarchate, Ukrainian Autocephalous Orthodox, Ukrainian Catholic (Uniate), Protestant, Jewish

**Birth Rate**: 9.59 births per 1,000 population; *AUC* (2001): 7.7 births per 1,000 population

**Death Rate**: 16.4 per 1,000 population; *AUC* (2001): 15.2 per 1,000 population

**Infant Mortality Rate**: 21.14 deaths per 1,000 live births; *AUC*: 10.57 during 9 months in 2002

**Net Migration Rate**: -0.42 migrant(s) per 1,000 population

**Total Fertility Rate**: 1.32 children born per woman **Population Growth Rate**: -0.72%; *AUC* (2001): -0.75%

HIV/AIDS (1999 est.): *Adult prevalence*: 0.96%; *Persons living with HIV/AIDS*: 240,000; *Deaths*: 4,000. (For additional details from www.UNAIDS.org, see end of Section 10B.)

**Literacy Rate** (*defined as those age 15 and over who can read and write*): 98% (*male*: 100%, *female*: 97%) (1989 est.); education is free and compulsory from age 7 to 15

**Per Capita Gross Domestic Product** (*purchasing power parity*): \$4,200 (2001 est.); *Inflation*: 12%; *Unemployment*: 3.6% officially registered, with large numbers

<sup>\*</sup>*Communications*: Prof. Tamara Hovorun, Drahomanov National Pedagogical University, Vul. Pirohova, 9, Kyiv, 01601 Ukraine; dhovorun@imbg.org.ua. Prof. Borys Vornyk, P.O. Box 274, Kyiv, 01034 Ukraine; vornik@ukr.net *or* vornik@un.kiev.ua.

of unregistered and underemployed workers (November 2001); *Living below the poverty line*: 29%

#### **B. A Brief Historical Perspective**

TAMARA HOVORUN and BORYS VORNYK For most people, Ukraine was unknown as a country until recent times, although it has a very ancient and rich history and a highly developed national identity and culture. Its relative obscurity is because of the fact that Ukraine has been an independent free nation for only eight years in this century. Although the Ukrainians gave the world the first example of a democratic constitution and republic under the Cossacks in the 1500s and 1600s, and never waged war against any other country, they continually had to resist numerous invasions by neighboring nations. For almost 300 years prior to 1917, part or all of Ukraine was a colonial part of Czarist Russia. At the turn of the last century, Austria-Hungary controlled part of Ukraine within its empire. Ukraine was an independent nation for three years from the end of World War I in 1918 until it was taken over by the Russian Communists in 1921. Seventy years as part of the Soviet Union under Moscow followed, with independence and freedom regained with the collapse of the Soviet Union in 1991. The national flag of Ukraine has the most-peaceful colors: the upper half blue as a symbol of a cloudless sky or birth-giving water and the lower half yellow as a symbol of ripe wheat or the sun. Its modern state insignia, the Triad (Tryzub) can be traced back to Kyiv Rus. The interpretation of its meaning is multisemantic. Some suggest that it symbolizes the triangular unity of creation, the universe, spirit, wisdom, and will as the source of individual and national development. (For additional historical and ethnic perspectives, see Section 2A, Religious, Ethnic, and Gender Factors Affecting Sexuality, Character of Ethnic Values, below.)

#### 1. Basic Sexological Premises

#### A. The Character of Gender Roles

In order to draw connections between contemporary problems and historical setting attention must be paid to the main feature in gender relationships that distinguishes Ukraine from Russia and from the other former Soviet states. This is the high status of Ukrainian women as mother, sister, and wife. Throughout history, Ukraine had not been characterized by the traditional patriarchal family structure that existed, for example, in Russia; gender roles in Ukraine contrast sharply with female dependency and submissiveness. There was no male-domination marriage relationships, and Ukrainian women held high positions in both family and community settings. This was in part because of sociocultural circumstances. Throughout the several different periods of sexual culture development in Ukraine, sex and gender behavior grew from beliefs in ancient pagan cultures that valued the feelings, sensations, desires, and pleasures of sexual intercourse. Intimacy was considered to be harmonious with nature and male-female relationships.

The origin of Ukraine, the Kyiv Rus, was governed by a highly educated woman, Queen Olga (reign 946-966), who began the country's conversion to Christianity. There are also many historical witnesses of the gender-equality norms in later times, particularly during the rule of the grand dukes of Kyiv in the 11th century. The marital agreement, for example, was based on mutual desires of both the male and the female to establish a family. Mutual respect for male and female was the norm, as well as respect for responsibilities in housekeeping and childrearing. In Ukrainian customs, tradition, mythology, and folklore, it is hard to find accounts of either physical or mental abuse of women, or inequalities in family relationships between husband and wife.

In many Ukrainian regions, the woman selected her spouse and often initiated the marriage relationship. Later, especially during the period of the Cossack Republic during the 16th and 17th centuries, the women educated the children, organized the communities, and maintained their own organizations of social activity while men were away on military service. According to the numerous historical evidences, there was no wide gap between the observed behavior patterns of men and women. The roles of Ukrainian women and men in the family and the social continuum were mutually inclusive.

Traditional Ukrainian culture reflects no rigid stereotypical perceptions of gender roles. Though labor activities were gender-specific, neither male nor female tasks were considered superior. Similarly, the concepts of masculinity and femininity were not characterized by rigid boundaries and were mutually permeable. The self was seen as individualized and not tied to a particular gender scheme. Ukrainian folklore reflects the notion that an individual is shaped more by situational influences than by certain gender-specific predispositions. Thus, a strong woman and a sensitive man were not seen as deviant, but rather as products of specific life circumstances. Such democratic receptions on gender roles are remarkable, given the dominance of patriarchal models in many other cultural systems.

Leopold von Sacher-Masoch (1999), who got to know Galician Ukrainians in terms of identity, wrote the following:

The Polish woman wants to give orders, while the Ukrainian one wants to be free. While the Polish woman rules over her husband, the Russian one wants to submit to him, just like the German one, and the Ukrainian woman demands equality with him. At any opportunity her unrestrainable Cossack spirit goes ablaze, recognizing no master and no servant. Between the Don and the Carpathians live the natural born democrats; neither Byzantine emperor, nor the Vikings, nor any Polish king or Russian tzar have broken their spirit, have suppressed their consciousness. They are always ready to trade the flow for a spear, they live in small republican communities as equal among equals; for the Eastern Slavs, they are the sprouts of the future, the sprouts of freedom.

Sadly, 300 years of Russian oppression, and especially 70 years of Soviet governance, have greatly affected family and gender development in Ukraine.

Ukraine scores on the Gender Development Index (GDI, Ukraine Human Development Report 2002), which measures the degree of disparities between the status of men and women, reflects an equality in the workplace that is greater than in many countries. In fact, in 1997 and 1998, the Ukrainian GDI scores were especially equal to the human development index, indicating a high level of gender equality. However, further progress in the area of gender equality is needed.

The development of gender issues in the Soviet period was characterized by a lot of contradictory tendencies. On the one hand, all women and men received equal access to education and professional activity. And this has had notable effects on the formation of gender dimensions. Thus, at the beginning of the 1940s, women held 39% of the jobs in the workplace and 53% in 1990, in comparison to 32% in Western Europe. In the public sector, women still continue to be the main labor in heavy and dangerous jobs that jeopardize their reproductive health. Women perform 45% of trade and care-providing services, constitute 82% of employed workers in public nourishment, in healthcare 81%, in public education 75%, and in culture 73%.

The ratio of women and men graduating from the university is 45% to 35%. The prevalence of women shows up in the total number of specialists with college and university degrees. Thus, women constitute 58% of engineers, 67% of physicians, 87% of economists, 89% of bookkeepers, 91% of librarians, 45% of agrarians, and 45% of scientists. Despite unprecedented rates of educational levels, the status of women in the government and politics is very low, only about 6%. There is no woman minister in contemporary Ukrainian Government. Even in those spheres of the economy, where women hold 80% to 90% of the jobs as in manufacturing, the share of women at the level of state power is about 5.1%. There are no women among the heads of regional (*oblast*) administrations and there is usually only a handful among the heads of district administrators.

The number of women in decision-making positions is very small—the Ukrainian Parliament has been traditionally dominated by men. Though women make up more than a half of Ukraine's population, they account for only 7% of the Verkhovna Rada's deputies. In Soviet times, there were institutionalized quotas at all the levels of positions—not less than 30% of administrative seats were reserved for women. Now, the inclusion of women in state power, in politics, defense, finances, and entrepreneurship affairs is not adequate to the gender ratio.

Although the Constitution of Ukraine proclaims the rights of men and women are equal, a lot of things still need to be done in order to alter the mass consciousness.

In many ways, the Ukrainian society has remained sexist because gender differences were emphasized in many spheres. It imposed separateness between women and men in traditional responsibilities for child and family care. Even in the secondary school curriculum, a course in "home servicing" is only for girls and assumed different experiences for boys and girls with wide-ranging consequences. It supported women's attachment to the family and their concern with cooking, caring, and nurturing, while autonomy and public involvement were expected of men.

Women remained socially dependent because society maintains a lot of prejudice against women occupying high positions, especially in the social structure. Only a small number of the 27% of women holding doctorates, and the 11% of women with doctorates in the sciences, have received academic grants, prestigious positions, or social recognition as politicians. Instead of the state developing support industries to lighten the burden in housekeeping, men and women engaged in an endless and fruitless discussion of which gender is/was the stronger.

Social, economic, and political inefficiency-we are still discussing whether Ukrainian society should recognize private property—has left almost no opportunities for effective problem solving, training in management skills, persistence, and competitiveness. Lack of autonomy, self-sufficiency, pursuit of self-interest, and competence have contributed very much to the demasculinization of the male population in Ukraine. Males are at greater risk healthwise than women. The mortality rate is an example, especially for those aged 35 to 39, which is more than three times higher for men than for women. Men are more likely to experience premature death. Tuberculosis and HIV infections, which are considered in Ukraine as epidemics, are mainly found estimated among men. The male suicide rate is 50% higher than that of women. Men have the highest smoking rates as well as drug and alcohol use involving criminal activity. Also contributing to men's mortality are job-transition-related stress and unhealthy lifestyles. Examples of sexism are quite obvious in the male population, when women retain custody of children and do not support men's involvement in family life.

Finally, in the society where there was a lack of responsibility and respect for personality, both genders were losing such human characteristics as being cooperative, warm, sympathetic, loving, creative, and altruistic in relationships, sensitive to others, and intelligent in communications.

Although the Constitution of Ukraine proclaims equal rights for both sexes, a lot of things still need to be done in order to overcome gender differences in social and family status for men and women. A broad media campaign is still going in order to ensure that the best things for her are still to be found in children-church-kitchen and for him to be masculine in earning money, drinking alcohol, and so on. The slogan of gender equality, which became very popular in recent years among some NGO democratic organizations, does not correspond to the social processes in the country. Ukrainian society is not yet ready to accept a woman as a parliamentarian and men as care-providers. The gender problem is not the provision of equal access for men and women to education, health protection, or economic resources, but in raising the mass consciousness on equalitarian ideas. On one hand, Ukraine needs to take measures that will give women greater equality with men in terms of political power. On the other hand, women will not be elected unless they start to conduct election campaigns for themselves.

#### B. General Concepts and Constructions of Sexuality and Love

The sexuality of Ukrainians is strongly influenced by gender factors such as the high authority of women in family settings. Boys and girls in adolescence were given a great freedom in heterosexual communication, in interactions during dating nights (*vetchornytsi*), but without engaging in premarital intercourse. Even though Ukraine was a colony of Russia, there was *not* a landowner's serfdom right for the first conjugal night (*jus primae nocte*).

The Ukrainian ethnosexology has been described in marriage customs and traditions, as well as in the contents of erotic folklore—love songs, proverbs, proverbial phrases, or riddles. So-called obscene songs are widely represented in ethnology studies conducted by Ivan Franco, Pavlo Chubinsky, Phedir Vovk, Mychailo Maksymovych, and others. Ethnologic studies have uncovered in Ukrainian folklore considerable information on sexual techniques, interactions, and building the sexual relationship. They also emphasize the representation of sexuality as a harmonious part of human existence, equally esteemed by both sexes. Sexual desire is seen as a harmonic part of human life and is often paralleled to various natural phenomena.

Historical research shows that the emotional side, love and communication of the partners, plays a major part in the sexual expression of Ukrainians. Sexual behavior is considered to be natural for lovers, which in turn is based on a loving attachment and a mutual agreement as an important part of the relationship's development. In central Ukraine, the roles that males and females play in sexual relations is more equal or blessed by woman's initiative than in western parts of the country, which is more characterized by Puritanic values. Traditional Ukrainian culture is characterized by self-disclosure in intimate communication, which contributes to dating, going steady, and getting engaged.

The general trend in erotic folklore is expressed in jokes about partners making love, keeping sex alive, mutual desire in order to avoid rejection, equal roles of husband and wife interested in sex, a vulnerability of engaging in extramarital sex, men and women receiving intimate satisfaction, and keeping a sexual appetite, not only in young age, but in the older years. Ukrainian folklore emphasizes the essential role of sexuality for maintaining physical and psychological well-being. Notably, sexuality is presented as equally important to both men and women and is often portrayed as an object of preoccupation for both sexes; women's natural clothing, emphasizing and at times revealing their physique, testifies to the value placed on sexual attraction.

During the Soviet period in Ukraine, human sexuality was a taboo subject as far as the mass media, scientific investigation, and education were concerned. After the 1920s, the only legitimate function of sexuality was reproduction. The emphasis on sex education for adults was exclusively focused on information about the reproductive systems and on social and moral control of sexual behavior. The information that was communicated in sex education focused on physiology and commitment, while avoiding discussion of values, trust, intimacy, self-awareness, and concern for others.

Society is always a kind of external support for personal development and self-conception providing values and orientation for sexual behavior. The image of sexual behavior was always negative. Sex was considered a "bad" part of one's personality that was in disharmony with the "good" part that involved strict conscious control and abstinence. This viewpoint grew out of the prevailing negative attitude toward personal freedom and intimacy, self-respect, and personal responsibility. It is apparent that the totalitarian Soviet society could not help children understand the changes of their bodies and emotions, or teach them responsible decision making. Even in the mid-1980s, when schools recognized the necessity of sex education and faced the task of informing teenagers about love and intimacy, the compulsory course in ethics and psychology of the family did not include any information about sexual activity. It was a sexless course about sexless behavior. The same situation exists in contemporary Ukrainian society in general.

Although Ukrainian society has become more permissive sexually in recent years, it still does not provide adequate values for human sexuality. With the breakdown of the Soviet regime, sexuality became one of the most important symbols of social and cultural liberation. Widespread public silence and ignorance about sex in former years has been replaced by everyday representations in commerce and movies. Television programs and filmmakers exploit sex, but still present it as a part of personality that is hardly related to the self-ideal and is quite dissonant with accepted family gender roles. Public display of the bodies of young women as available sexual objects for men, and sexual intercourse as something far from personal relationships in advertising and the mass media perpetuate the distances between men and women as social beings and between sex and the family.

Ethnicity, culture, national customs, and traditions help create models of gender behavior, develop respect for values, and develop some interpersonal skills. Sexual competence involves many personality qualities and activities that should be taught to children as they develop. Family-oriented customs and traditions that help gender-socialization processes, such as marriage, housekeeping, and parenthood, have almost been destroyed in most regions of Ukraine because of the Soviet ideal of creating a new society without ethnicity and religion. The incidence of divorce and child abuse and neglect documented in the Ukraine reflects this influence. The incidence of divorce and abuse is two-and-a-half times higher in the eastern part of the Ukraine, where traditional values were more quickly lost, than in the western regions that retained many of their traditions after they were joined to the Ukraine during the 1940s. In the west, teenage girls and boys are quite knowledgeable about housekeeping, bringing up children, and the proper treatment of relatives, because they are involved in sophisticated and living traditions that are maintained by their families.

For three generations, the Ukrainians have grown up in a system which neglected personal dignity and expressions of respect. The social system as well as family communications were mostly oriented to punishment rather than to the encouragement of self-worth. Another evidence of this distortion can be found in the language people use to address each other in public places. In the Ukraine, there are proper words for addressing a person as a sexual human being, as there are in America or other countries, such as miss, missus, lady, sir, mister, gentlemen, and so on. As a result of the Soviet imposition of the word "comrade," referring to persons who share political ideas in common, the salutations panni and pan, "respectful woman or man," were almost totally eliminated from usage. Today, Ukrainians address a person mostly by their gender identity "woman" or "girl" for fe-males, and "man," "young man," or "guy" for males. So, the social and sexual identity of the individual oppose each other. Such greetings are mutual and cause no offense or embarrassment to anyone. The fact that most Ukrainians consider these sexual definitions of the self as a normal social greeting does not mean that it is unimportant to the sexual culture. Those Ukrainians who allow themselves to be defined by belonging to a particular sex are those who were raised with a lack of respect for individual personality.

#### 2. Religious, Ethnic, and Gender Factors Affecting Sexuality

#### A. Character of Ethnic Values

Ukrainians have developed as an ethnic group over a period of at least three to four thousand years. Scientists distinguish several periods in the development of Ukrainian religious values. At the beginning of the 20th century, scientists found the first archeological evidence of an ancient settlement and culture on the territory of Ukraine. These have been dated back to 4500 to 2000 before the Common Era and the birth of Christ. The culture was named Trypil'ska, after the name of the village Trypillja near Kyiv (Kiev) where the first signs of this ancient culture were discovered. Similarities in gender roles and behaviors between this ancient culture and elements of the modern Ukrainian culture make this discovery particularly significant. The people of the Trypil'ska culture were agricultural, living in small and large families in separate two-story buildings usually situated in circles near rivers. The largest of these ancient towns discovered recently in Dnipro region is five times larger than the well-known Babylon. The most wonderful of the remains of this civilization unearthed were ceramic figures of different women and the special places or shrines in houses where these were placed. All of the figures showed obvious evidence of a connection with religious beliefs, specifically a Mother cult and worship to the female. These figures have pronounced sexual signs and even such details as fatness and hairdos. The principal role of a woman in Trypil'ska culture was connected with a highly developed agricultural cult in which the female symbolized fertility and the Goddess Earth. It all gave a woman the right to be a priestess and a head of the family.

From the 7th to the 3rd centuries B.C.E., Indo-European Scythian tribes controlled the Ukrainian steppes.

The period from 500 to 900 C.E. is the time of the Slavic tribes and Slavic community development as a separate ethnic population. Slavic tribes began migrating from the northwest into what is now Russia in the 5th century. The division of the ancient Slavs into various tribes began in the 2nd to 4th centuries when the Goth and Huns forced them to split. In the south, they eventually formed the tribes of the Polianians, Siverianians, Derelianians, and so on. Some of these tribes

were united in Kyivan Rus by the spread of Christianity from Byzantium (Constantinople) in the 10th and 11th centuries; Volodymyr the Saint was converted in 988.

Western historians give greater importance than do Ukranian historians to the role of Scandinavian chieftains, Norsemen or Vikings, in the 9th century. A common western view claims that the Viking Rurik founded the first Russian dynasty in 862 in Novgorod—hence the distinction between Novgorod and Kyivan Rus, and the possible origin of the term *Russian*. Ukranian scholars trace the origin of the term *Rus* to the common root of many Ukrainian rivers, Ros', Rosavitsa, Rosava, and so on, where Slavic tribes settled. Hence, the Slavs were called Rusychi or Rusyny, and Rus is the synonym of Ukraine but not Russia. Ukrainian historians note that Rus existed long before the arrival of the Norsemen and that the word Russia referring to a nation does not occur until Peter the Great.

The Moguls overran the country in the 13th century, destroying Kyiv in 1240. Kyiv was freed from Mogul conquest after 80 years in 1320, when the Lithuanian Duke Gedimin (ca. 1275-ca. 1340) together with Rus dukes and their military troops fought the Moguls in three battles, the last and largest held by the river Irpin' near Kyiv. After that victory, the Lithuanians ruled the country with the help of Rus Dukes. In 1386, when the Lithuanian Kingdom united with Poland, Rus, according to the convention, received a separate government, which was called Het'man. As time passed, Poland extended its power over Ukraine. In addition, while the 11th-century grand dukes of Kyian Rus held such centralized power as existed, most of the sons of the Kyivan Rurikovechi Dynasty ruled in Novgorod.

From the 13th to the 16th centuries, Kyiv was under the influence of Poland and Western Europe, with the 1500s and 1600s being the time of the Cossack Republic. In 1547, Ivan the Terrible formally proclaimed himself the first czar of the Rus, and Russia the true successor of the fallen Roman and Byzantine Empires. In 1654, Ukraine asked the czar of Muscovy for protection against Poland and signed the treaty of Pereyasav, which recognized the suzerainty of Moscow. The Cossacks under Chemelnytsky may have wanted a full defensive partnership such as now exists between Canada and the United States. Moscow, however, interpreted the treaty as an invitation to take over Kyiv. Peter the Great (1682-1725) extended Moscow's domain, and in 1721, founded the Russian Empire, which included Ukraine.

As described by Veles (Rehbinder 1993), the Slavic culture was pagan, based on the worship of the numerous gods of the Great Mother Nature. The unity of female and male substances was considered a kind of magical activity for enriching the fertility of the Earth. Even today, the Ukrainians sing some seasonal songs (*koljadky*, *tsedrivky*), which are a kind of communication and dialogue of the individual with nature—animals, plants, sun, moon, and wind. A summer holiday of love, Kupala, has persisted from ancient times down to the present. In this ancient context, sexual intercourse was viewed as a relationship, the attachment feeling to the partner.

Nestor the Chronicler (ca. 1056-1114) supplemented and continued the primary Rus chronicles in *Povist Vremennykh Lit (A Tale of Bygone Years* 1990). A monk in the Kyivan Cave Monastery and the most educated man of his time, Nestor described the differences in sex and gender behavior between the tribes: "Polyany—Slavs who lived in the central regions of what is now modern Ukraine—maintain their parents' traditions, peaceful and obedient, and their marriage customs." The neighboring Derevljany "lived like animals, killed each other . . . and there was no marriage customs other than kidnapping the young women." Nestor the Chronicler

also condemned another neighboring culture, where the people "had vulgar, disgraceful words and used them in the presence of parents and women. And they did not know about marriage, but cavorted between villages. The men traveled around, playing, dancing, and singing all kinds of devil songs, stealing wives for themselves—women they found agreeable—and having two or three wives." His view was ceratinly colored by his perspective as a Kyivan monk. The Derevljany had killed Ihor, the husband of Queen Olga (ca. 890-969), who in turn wiped out several of their towns.

The prominent feature of the ancient Slavic psychology was love-living, life-loving, and a tenderness and joyful mood. When Nestor the Chronicler wrote about Ihor's campaign, he described the feelings of attachment and emotional evolvement of the ancient Slavs. Later on, when Kyivan (Kievan) Rus reached its heyday in the reign of Grand Prince Jaroslav the Wise (1019-1054), the Church, which represented Christianity, could not eliminate this sensitive character of pagan culture. Christianity, with its cult of emotionless asceticism and abstinence, could not overcome the cheerful character of folk traditions, and either tried to adopt and incorporate some of them into religious holidays or to prohibit them altogether. Thus the Christian tradition began its long coexistence with ancient ethnic values. (See Section 1 in the chapter on Russia for further elaboration on this coexistence.)

#### **B.** Sources and Character of Religious Values

Three quarters of the Ukrainian people are Eastern Orthodox, 13.5% Ukrainian Catholic or Uniate, 2.3% Jewish, and 8.2% Baptist, Mennonite, Protestant, and Muslim.

From the 8th century, Ukraine was also known as Rus. In 988, the rulers and people of Kyiv adopted Christianity. During the reign of Prince Oleg, Kyiv was referred to as the "mother of Rus cities," which explains the particular importance given to the development of Christianity in this region. As a result of a jurisdictional division between church and secular power, matrimonial and family cases fell within the Church's competence and domain. Legislation of the norms of matrimonial law dates from the second half of the 11th century. As recorded in the legislative code of Prince Jaroslav the Wise, and later in other books, the new legal code incorporated the centuries-old experience of eastern Slavic social life.

The Church assumed an exclusive right to register marriages and insisted on rooting out pagan traditions. For example, marriage without a religious ceremony was considered to be void. In its views of marriage and family life, the Church was guided by the norms of Christian morality. The Church sought to incorporate into the mass consciousness ideas of the sanctity and inviolability of marriage and conjugal fidelity.

Men and women who were related up to the sixth generation were forbidden to marry. In addition, children from one family could not marry the brothers or sisters in another unrelated family. These restrictions were obviously adopted from Byzantine law, but were less strictly enforced. In Kyivan Rus, men married when they were 15 years old, while women married between ages 13 and 14. The Church forbade marriage of Christians with non-Christians. Engagement usually involved mutual consent and was followed by a festive dinner. Cheese was an obligatory dish shared by the bride and groom; the ritual of cutting cheese and bread meant that agreement had been reached. A lack of virginity in either partner was not an obstacle to marriage. There was a law that proclaimed the woman-slave free if she was tempted into intercourse and gave birth to a child. In case an unmarried woman gave birth to a child, she had to

live in some church facility and was socially culpable. It was forbidden to have two spouses. Divorce was allowed only in exceptional cases and only after a court trial. A wife's adultery could be a serious reason for divorce; not so with a husband's adultery. After divorce, a husband had to pay his former wife a large financial compensation.

The Church in Kyivan Rus controlled norms of sexual behavior. First of all, it was forbidden to have any sexual relations between relatives and even relatives-in-law. Any intercourse outside the marital union was considered sinful, even when totally secret. Considerable attention was paid to any sexually deviant behavior. Thus, punishment for zoophilia was recorded in the statutes of Kyivan Rus. Childbearing was protected, and the Church took care of pregnant women and helped them. Anyone associated with an abortion or attempted abortion was guilty of a serious crime.

Within a marriage, and in society in general, there was a moral responsibility to respect all persons, regardless of gender, in Kyivan Rus. Thus, in the *Edification to Children* by Volodymyr Monomach (1052-1125), one finds a great appreciation of the individual: "Protect widows, do not let the powerful ruin anyone... Let your eyes look down but your soul aspire to height... Love your wife, but don't let her control you" (1991).

The ancient and cheerful ethnic culture, coupled with moral Christian demands, helped to produce gender behavior patterns based on mutual respect of men and women, feelings of connection and attachment to each other, and the capacity to appreciate the romantic love as well as erotic sensations (Chubyns'kyj 1994). For the Ukrainian couple, intimacy was characterized by affection, consent, and long-lasting commitment. The psychology of love is widely described in Ukrainian songs, which are considered the best in the world and expressive of the national character (Shlemkevych 1992). The respect for women was so appreciated among the Ukrainians that Mirza-Avakjants wrote in 1920 that "the modern woman of every country could envy the position of Ukrainian woman in the sixteenth and seventeenth." More than a century and a half of Cossack Republic strengthened the independent women's position in family life and made this a national characteristic.

#### 3. Knowledge and Education about Sexuality

The sexual health of young Ukrainians is a real problem. There is a considerable gap between young people's sexual activity and their level of sociopsychological and moral responsibility. The main problem in Ukraine is a lack of information for adolescents about sexuality, family planning, safer sex, and so on. Although several National Programs for Family Planning have been developed during the period of independence, there is still no compulsory sex education. Sexuality and related issues continue to be regarded by teachers and parents as prohibited. Only in recent years have some efforts been undertaken in order to develop sex education in a curriculum of the discipline "Healthy Education" (technically referred to as *valeology*).

The main idea is to supply all children from preschool to college with a compulsory sex education program that provides adequate knowledge of the emotional, psychological, and physical aspects of gender and sexual behavior. In addition, this program includes discussions of self-understanding, intimacy, family life, values, attitudes, orientations, and skills concerning the behavior and relationships of both genders.

Teachers, psychologists, and sexologists are collaborating in developing a program to provide information about human sexuality, including discussions of human reproduction, pregnancy, childbirth, sexual responses, contraception, abortion, and sexually transmitted diseases. They are conscious that the most important value for children of postcommunist society is to develop the ability to understand and respect the individual. That is the reason the context of valeology leads children to question, "Where did I come from?" "What do I want to be?" and "Who am I?" The development of self-reflecting capacity with regard to gender and sexual behavior is emphasized at every age level.

To a large degree, sex and gender behavior begins in the home. At various stages, children should receive knowledge about sex and reproduction from their parents. Thus, the new program initiated efforts to encourage familybased sexuality education. A substantial gap, however, exists between the knowledge provided by the family and the average child's curiosity needs. This gap makes clear the need for child- and parent-oriented knowledge that revives national family customs and traditions.

The society is interested in exploring the social influences, especially television, which create the sexual environments in which children are growing up. Ukrainian mass media, however, are preoccupied with non-family-oriented commerce and movies. Still, many scientists have begun to collaborate with the mass media, especially television, to prepare sexually oriented programs for adolescents, teenagers, and their parents.

Sex education has been an important part of some national programs, in particular, the National Family Planning Program 1995-2000, the National Program "Reproductive Health 2001-2005," and both the National AIDS Prevention Program 2003-2008—now in preparation. Some international agencies, such as UNFPA, UNAIDS, UNICEF, DTID, and others are major donors of developing educational programs on safe sexual behavior among children and youth. (See section 5A, Interpersonal Heterosexual Behaviors, Children, for more details on the sexual knowledge of children and their sources of such information.)

#### 4. Autoerotic Behaviors and Patterns

Ukrainian folk beliefs, proverbs, parables, and humorous refrains condemn autoerotic behavior and ridicule it as unnatural and abusive for the potential marital partner. This widespread opinion contributes very much to the contemporary Ukrainian negative attitude towards autoerotic behaviors.

#### A. Children and Adolescents

There is a lot of misunderstanding and fear among adults concerning children's autoeroticism. As the young child starts to explore his or her genitals, a strong punishment usually follows when adults detect this natural curiosity. Thus, from early childhood, the deliberate manipulation of genitals is mostly prohibited by the family and social environment. Most children do not receive any information about their genitals as the source of pleasure and good feelings. Parents usually worry about the occurrence of masturbation, that this initial sexual experience is immediately suppressed whenever discovered.

Normally, the second period of interest in exploration of one's own body appears at puberty. The practice of masturbation considerably increases during these years and occurs alone or with other children in pairs or small groups. There are a lot of myths among the people about the harmful results of masturbation. Some boys believe it will impair or make intercourse impossible in the future, or result in mental retardation. Similarly, many physicians commonly consider adolescent masturbation to be harmful when it becomes a dominant concern, the focus for leisure activity, or a source of strong feelings of guilt. There is, however, some shift among healthcare professionals to accept adolescent masturbation as a normal activity. Still, most parents try to restrict teenager masturbation. In comparison to the Western experience in sex education, autosexuality during childhood is considered by most Ukrainians not as a pleasurable kind of sexual expression, but as a hindrance to sexual pleasure. This may be partly connected with the former imposition of ideas about sex as shameful, and not a useful human activity for the socialist society.

For children who are being raised in orphanages outside a family, the opening of the sexual sensations generated in the genital areas usually becomes a habit. Thus, masturbation provides an easy way for self-soothing, reducing tension, and calming down for many boys and girls. Children raised in an emotionally deprived environment frequently seek consolation in their own bodies.

#### **B.** Adults

Autoerotic satisfaction among adults is widespread. It often occurs as a part of intercourse for sexual stimulation. Adults who are not in some sexual relationships are very often engaged in self-stimulation. Masturbation is also engaged in, despite moral and social prohibitions, as a way for releasing sexual excitement and tension.

Modern sexological clinics and sex shops sell devices for genital massage to stimulate an orgasm. The most usable by women, and rather popular for sexual self-pleasuring, are vibrators and dildoes for clitoral and vaginal stimulation. Among men, the most enjoyable are active devices that substitute for intercourse.

#### 5. Interpersonal Heterosexual Behaviors

The complexity of interactions between the former ideological system and indigenous Ukrainian traditions has resulted in many areas of tension and confusion in sexual behavior and gender identity.

#### A. Children

#### Sexual Knowledge and Attitudes

Juvenile sexual behavior is a kind of a mirror of the social problems and their influence on the development of gender consciousness.

Findings indicate that more than 70% of children ages 6 to 8 could not identify the right words for the sexual parts of the body for either the same or opposite sex. Those who could give some kind of explanation used many crude words and felt embarrassed and shy. More than 75% of the children did not understand the meaning of "birth control". Less than 20% of those that age knew from where a baby comes, and only 30% of those who did know received this knowledge from parents or another adult relative. Only 15% of the children could explain the intimate behavior in connection with human feelings of love, friendship, and the desire to have a baby.

Children's awareness of their own body was extremely narrow. About half of the children considered the sexual parts of the body as places of the most bad feelings and experienced shame in being naked or seeing an adult naked. The shame of body exposure is even greater in children from small towns and villages. The rather prudish approach to nudity and bodily functions has greatly affected the sexual behavior of children. In observing some paintings with nude bodies, most elementary school children express their confusion by laughing, chattering, and showing some kind of ignorance.

#### Gender Images

There is a lot of confusion about gender roles among our youth. Children understand that the roles of male and female in family and social life are becoming more interchangeable, although the mass media follow the traditional divisions and propagate gender stereotypes; even school textbooks are mostly oriented on gender division of household functions. That's why children assume a contradictory model of gender behavior and interaction within the family and society. Though boys and girls seek an equally high social position within the society, that achievement requires a wide spectrum of habits, skills, and knowledge. But even today, the family orients the children to fulfill the traditional roles. The husband-father fulfills instrumental roles and deals with problems of the outside environment, and the wife-mother handles the relational and upbringing nurture functions and deals with problems of emotions and attitudes. Both of these roles are becoming very important for gender socialization and gender identification despite one's sexual identity.

#### **B.** Adolescents

#### Attitudes Toward Nudity and Body Functions

The ambivalence toward nudity, bodily functions, personal hygiene, and patterns of sexual behavior, combined with the lack of proper sexual education, increases during adolescence and has an impact on sexual and gender selfperception. We asked 12- to 13-year-old boys and girls questions concerning their knowledge of the main physiological changes in bodily functions during adolescence. More than 70% of the boys demonstrated poor understanding of the indicators of growing up as a man or a woman. Although many adolescents have seen many movies with sexual themes, only a third of them had ever discussed sexual topics with a relative or teacher. Most boys were extremely shy when explaining the function of a condom or the origin of a baby. More than 60% used the pronoun "it" rather than the terms penis, vagina, breast, and uterus. (See Igor Kon's comments on similar issues in Section 1B, Basic Sexological Premises, Sociolegal Status of Males and Females, in the chapter on Russia.)

In comparison to boys, 70% of the girls interviewed had discussed the topic of male and female body maturation at puberty with their mothers, grandmothers, or elder sisters. The topic of bodily functions, however, remained uncomfortable for girls to discuss. More than 60% of the girls replied to the questions, "Are you glad to be growing up as a woman?" and "What feelings do you experience during your period?" that it would be better without the menstruation cycle, pubic hair, or breast development, that it made them feel dirty, sick, or bad.

Their reaction might be more positive if they did not have difficulties and anxiety connected with school toilet facilities. Is it partly connected with pain or feeling unwell? The interviews revealed that menstrual periods make them more serious (heavy) because of hygiene problems and the embarrassment before classmates, boys, and teachers of physical education. Many Ukrainians continue to experience emotional problems as they get older, because of the social taboos surrounding menstruation and the social embarrassment of talking about the subject.

Ukrainian adolescent boys experienced the same discomfort answering the questions "What do you know about menstruation?" and "What do you know about erections and pollution?"

Was the sexual knowledge expanded substantially throughout the adolescent years? Most of the children obtained good information about the reproductive system from school lessons on biology. But, most adolescents of both sexes still showed a poor understanding of the questions concerning sexual behavior and sexual feelings. Such questions as "What is AIDS?" "How does one protect him/herself from contracting AIDS?" "Can a condom prevent pregnancy or transmitted diseases?" "Is masturbation harmful to ones health?" "Can a child in adolescent age become a father or a mother?" and "What do you know about using birth control?" embarrassed the adolescents. In talking about sexual subjects, most adolescents could not find appropriate words for the sexual organs.

These findings suggested that children viewed these topics regarding body functions, intercourse, and relationships to be shameful aspects of their personality. The adolescent sex vocabulary of most boys and girls was full of vulgar ("dirty") words. Most Ukrainian adolescents consider clothing as an important expression of masculine or feminine behavior, and regard it as an important factor in their personality and physical beauty.

When assessing the problems of gender self-consciousness in teenagers in Ukraine, we see a growing gap between the lack of sexual knowledge and sexual experience, the practice of gender behavior, and moral/psychological maturity.

#### Satisfaction with Parental Lifestyles

Observing the wealth of the West, combined with the poverty of their native country, has had an impact on gender self-consciousness and sex orientations of youth. Ukraine is rearing a third generation of children who are strongly dissatisfied with their parents' family and social life. Fathers and especially mothers with double duties are rarely viewed as role models.

#### Sexarche and Teenage Pregnancy

There is a growing tendency for Ukrainian youth to become involved in sexual intercourse at an earlier age. According to studies conducted in large industrial cities among the students at professional high schools, more than 50% of the women and 80% of the men have engaged in sexual activity before age 17.5. In 1980, the average age of first sexual experience was 19 years for men and 20 for women. According to survey data, more than 50% of teenagers are sexually active with at least three partners before the age of 20. For most of teenagers, sex exists as a curiosity that may involve a kind of commitment, but not love and passionate feelings. Most sexually active teenagers do not protect themselves from an unwanted pregnancy, because sexual knowledge, including information about contraceptives, remains low and comes mainly through interaction with peers. (For more information, see Section 9, Contraception, Abortion, and Population Planning.)

Ukrainian teenagers usually plan their nearest future with the creation of their own families, as the median age for marriage is now 19 to 21 years for females and 21 to 23 for males. Ukrainian teenagers usually do not consider economic and psychological maturity as necessary conditions for getting married. More than 80% of teenagers who get married consider themselves very dependent on their parents and family for financial support, for help with housing, and assistance in taking care of their children. A lack of privacy and opportunity for experiencing premarital sexual relationships lead teenagers to consider their sexual (physical) maturity sufficient basis for marriage. That is why about 45% of young couples are divorced within the first year of their marriage.

As evidence of the separateness between the sexual sphere and personality itself in mass consciousness, we

might consider the content of the sex vocabulary of Ukrainians. The Ukrainian youth have adopted a lot of abusive words from the Russian sexual vocabulary that express bondage of women, rape, and humiliation of the people engaging in sexual intercourse. This is partly a result of the authoritarian society that encouraged cruel attitudes toward women and a misconception of male behavior.

#### C. Adults

#### Premarital Sexual Relationships, Dating, and Courtship

In the late 1960s, premarital sex in men's consciousness was a taboo for both the fiancé and fiancée, as the bride should be a virgin until marriage. The ethic of premarital virginity during dating was a major theme in sex education and mass media. To abstain from sex meant to escape from being betrayed by the groom or from potential pregnancy. The statistics of those years reveal the increasing quantity of unmarried mothers and forced weddings. In recent decades, the situation has changed considerably. Today, most teenagers and adults consider sex before marriage rather acceptable, and thus, premarital sex relations are widespread.

The initial selection of a potential mate usually occurs among a reference group—college mates, colleagues at work, or a common-interest community that brings together people with similar values, educational, or cultural levels. The length of courtship for young couples is usually about 12 to 18 months between meeting and marriage, with dating two to three times a week. In various strata of people, dating activity takes different forms. Dating is mostly oriented toward dancing, visiting friends, parties, cinemas, bars, and cafeterias.

The discovery of one other person in a romantic relationship is followed by the wedding arrangements initiated mostly by the man. The choice of a mate is determined by the young people themselves as it was in ancient Ukraine, although the parents usually have to confirm the engagement. The final ceremony of marriage depends on religious, ethnic, and cultural level, and social group.

In Soviet times, a lot of Communist symbols were included in the wedding process—a ritual of laying flowers at the local Lenin monument, special greetings, and promises. Wedding ceremonies in a church were prohibited and couples who had religious weddings were often prosecuted by the authorities. Nowadays, the wedding ceremony has become more relaxed, but it is still formalized. In the countryside, people keep traditions of a large wedding celebration with almost all villagers invited as guests. A lot of fun, music, singing of celebration songs, dancing, treating, and role playing characterize such family holiday. Usually, any large wedding celebration is very expensive for parents, who have to carry the burden of wedding debts sometimes after the young have divorced.

A few years ago, some registry offices started to propose that couples use a relationship contract to define some problems of their future family life. These contracts usually do not include any legal documentation and are used as a moral obligation that helps the bride to clear up some unexpected areas of marital interaction.

#### Sexual Behavior and Relationships of Single Adults

The number of single Ukrainians is increasing significantly, especially among highly educated people—teachers, physicians, engineers, and business owners. Psychologists trace this phenomenon to increasing levels of personal aspirations and expectations of potential partners of the opposite sex. The single trend is occurring in every age group and for both sexes. It is difficult to tell with any accuracy how many persons remain single because of unrealistic expectations of a significant other, immaturity in emotional responses and communications, or egocentrism. Singles include adults who have never been married and divorced women with children. Most of them are lonely and have many problems in maintaining a relationship with a person of the opposite sex. Most places of entertainment cater to teenagers for meetings with mates. Because of the lack of privacy in their own flat or available rooms in hotels, it becomes embarrassing and hard for a single person to get together and be intimate with a partner.

During the last two decades, some marriage bureaus, consultation family centers, and radio programs have started providing matrimonial services, advertising in order to introduce the partners and help with dating. There are obvious proposals in some newspapers for dating that serve sexual purposes.

#### Marriage and Family

Despite an increasing number of singles, most Ukrainians live in families. In 2003, Ukraine legislated the new Family Code, which determined the basics of marriage, spouses' property rights, parents' and children's rights and duties, as well as those of adopters and adopted, and so on. New clauses in the Code have been introduced dealing with the process and responsibility of engagement, the guarantee of rights for supporting a parent or caregiver for a disabled child, setting a contract for married life and the terms for its validity, the child's right for a proper upbringing by the parents or relatives, parental duties before and after childbirth, and so on. In Ukraine, the minimum age for marriage is 17 years for women and 18 for men. The marriage can be dissolved by mutual consent of the spouses. The divorce is equally available to both men and women. The husband is required to provide the maintenance of children until they are 18 years old. Custody of children, maintenance, and property must be decided before the couple divorce.

The main stream in developing marriage and family during the transition period involves replacing the patriarchal model of family functioning and shifting to a self-sufficient model. The phenomenon of increasing numbers of street children-about 53,000 children are in out-of-home care across the country-has been promoted in part by destructive tendencies during transition. A growing number of infants are abandoned soon after birth. Most of these infants receive institutional care. Thus, in 1991, the rate of children (aged 0 to 3) in infant homes was 153.4 per 100,000 population. In 2000, this increased to 308.5 per 100,000. Some children receive care in foster families, which are starting to develop in Ukraine in the adoption system. The recent transition period has also caused a rise in the age of first marriage. Thus, in 1997, the average age of first marriage for women was 21.6 years and for men 23.5. In 2000, it rose to 22.8 and 25.3, correspondingly. As a result, the Ukrainian family produces fewer children, with an increase in the share of nonmarital births from 11.9% of total live births to 17.3% in 2001.

The typical family in Ukraine is a nuclear family. This kind of family started to increase from the 1930s after the dissolution of the extended family pattern. Shifts in family structure were mostly triggered by increasing urbanization. Millions of young people were induced to migrate to urban industrial regions in search for employment, education, and occupational mobility. In 1920, 20% of Ukrainians lived in city areas; by 1980, this percentage had more than tripled. This process has increased labor participation rates for women and decreased the size of the nuclear family. More than half of all Ukrainian families are one-child families.

The nuclear family has increased the demands for equal sharing of responsibilities and household roles between the spouses, as well as raised the intrafamily factors like emotional support, shared values, sexual satisfaction, common income distribution, attention and expression, mutual assistance, and moral protection.

#### Divorce and Remarriage

The increasing divorce rates are a reflection of the diminished dependence of spouses on each other and the desire of obtaining a legal marital dissolution rather than remaining in a harmful relationship.

The incidence of divorce has increased rapidly since the 1960s. The failure of a marriage usually stems from a multiplicity of factors. A marital relationship breaks down as the result of failure of spousal and parental roles. Marriage failures then correlate with such factors as early marriage, addiction to alcohol, material and financial needs, and lack of interpersonal communication. The incidence of marriage failure is still growing. The general rate of divorce in Ukraine per 100 marriages in 1990 was about 39.9, in 1991 40.7, in 1995 45.9, in 1990 51.0, and in 2000 71.9 per 1,000. The rate of children (age 0 to 17) involved in divorce per 1,000 population was 12.9 in 1991 and 13.0 in 2000. According to statistics, Ukrainian men seldom want to divorce; the initiative usually comes from women. There is a great difference in the divorce rates for urban and rural citizens, 5.5 per 1,000 compared with 1.9 per 1,000 in rural areas. Surveys indicate that about 75% of divorced men remarry within five years and only half of divorced women within 10 to 15 years after their divorce. In the case of remarriage, the rights of all children of every spouse are protected as stepchildren.

#### Cohabitation

In the past 25 years, as the marriage rate slowly declined, the number of unmarried cohabiting couples quadrupled. Cohabitation among Ukrainians is called "to live on trust." The estimated rate of cohabitation is about 17% among all couples, and it has been increasing during the past decade, especially among the young generation. The process of mate selection has passed from the state and relatives' control to personal choice. In Ukraine, there is no special law regulating cohabitation, but legislation does offer some protection for the rights and responsibilities of cohabiting partners, and their children, who are protected as though the couple were married. While the legal system provides some rights for persons who cohabit for some period of time, these rights are much less than those of married couples.

#### D. Persons with Physical Disabilities, and Older Persons

Unfortunately, most individuals with disabilities are cut off from the active contacts with the social environment. The services for any social assistance, education, welfare, and transportation facilities are almost totally absent, as they were in former Soviet times when the needs of this population were mostly ignored by society and treated as a family concern. Privacy and independence are vital for the physically handicapped. Even in large cities, it is hard to find the convenient access and passages across the streets, as well as a lot of other facilities for the disabled. These necessities affect the development of sexuality very much because of the personal isolation. Only specialized sanatoriums offer places for temporary relationships of individuals with special needs. In Ukraine today, there are about 60 disabled persons per 1,000 under 60 years of age.

Only recently has the Ukrainian society begun to recognize the abused fate of the physically handicapped, and to break their isolation by improving the conditions of their existence by providing for common interests—sports, education, hobbies, and therapy—and by slowly increasing their access to social allowances.

The Ukrainian society also needs to overcome a rather strict and condemnatory attitude toward any sexual activity by older people or public acknowledgment of same. In comparison to Western contemporaries, Ukrainian women over 40 years old usually consider themselves too old for any sexual intimacy, and thus stop taking care of their own appearance and sexual attractiveness.

#### E. Incidence of Oral and Anal Sex

Traditionally, in Ukraine, sex is an extremely personal and very private matter. Moral, emotional, gender, and age factors influence attitudes toward anal sex and its enjoyment. While anal sex holds a great attraction for male homosexuals, and heterosexual couples may engage in anal sex for the enjoyment of one or both partners, there are no special studies undertaken to discover the frequency of anal sex. What data are available usually comes from sexological clinics. According to this data, more than 30% of males have had an experience with anal sex, either with a woman or with a man, prior to age 30 years. In jails, anal sex is usually engaged in as a temporary substitute for heterosexuality, or for maintenance of power.

Oral sex is rather popular for both heterosexual and homosexual couples. It is also very often practiced by adolescents as a part of youth subculture which is largely propagated by mass media, especially by commercials. Cunnilingus is mostly a part of couple foreplay during lovemaking in order to stimulate female orgasm. It is used in many cases by men with sexual dysfunctions. Fellatio is much more widespread as a kind of foreplay for intercourse, or as a separate sexual activity. Fellatio technique involving partial penis penetration into the woman's mouth or penis licking or sucking or kissing are very popular among the lovers of all ages, but mostly among teenagers and persons under age 30.

#### 6. Homoerotic, Homosexual, and Bisexual Behaviors

Historically, gender and sexual behavior in Ukraine were strongly influenced by the Christian tradition, which restricted any manifestation of sexuality and considered homosexual orientation as a great sin.

The concept of a homosexual identity as same-sex attractions and sexual behavior has some historical evidence in Ukrainian history. Tolerance towards homosexuality can be traced to the Cossack Republic (1500s to 1600s), where liberation and personal freedom had become the key notions of social activity. Later, during the period of Russian oppression, there was evidence of a homosexual underground for men. The development of lesbian networks is a modern-day phenomenon.

Ukraine, as well as the other states of the former Soviet Union, was and still remains a very heterosexist society with strict gender stereotyping. All social institutions and social opinion place considerable pressure on gay men and lesbian women. Most individuals with a same-sex orientation kept their sexual drives and orientation deeply hidden.

The democratic processes in the newly independent Ukraine gave the opportunity for the people to share the discovery of their sexual-orientation and gender-identity problems within sympathetic communities and support groups, in the mass media, and with specialists—physicians, sexologists, and psychologists. However, most Ukrainians still consider homosexual behavior as abnormal and socially unacceptable and reject both male and female homosexuality. This is partly because of the rigid manifestation of cultural heterosexism, as well to a reminiscence of Soviet mass psychology and nontolerance to another one.

#### A. Children

Because information on sexology and psychology of gender was prohibited in former Soviet Ukraine, little is known about the early experiences of those who today identity themselves as gay or lesbian. No national research on developmental sexuality in childhood was conducted.

In an ideological system that denies any non-heterosexual form of behavior, children with the same-sex orientation encounter a lot of discrimination and even violence. Atypical gender behavior during childhood is usually ridiculed within the society and results in being rejected by parents, relatives, or teachers as not adjusted to the male or female social role. In early childhood, the measurement of gender-role behavior includes easily observable facts, as preference for same play interests, toys, sex peers, dressing, and so on.

The behavior markers of gender identity emerge in Ukrainian children typically between ages 2 and 5 years. At puberty, a child's sexual interests and desires normally emerge. In many features, lesbian, gay, and bisexual youths are similar to other children. However, a pervasive heterosexism of the social environment at home and school causes young gay men or lesbians to experience their cross-gender feelings and behavior in isolation from the significant others. Because of the inner conflict stirred by social and family rejection, they must hide their sexual attraction from others at the very time they are becoming aware of it. Growing up with forbidden and unacceptable sexual attractions influences personality development, often resulting in a negative image of the self as a homosexual female or male.

The initial recognition of same-sex attraction usually becomes evident at puberty and adolescence. Discovery of one's orientation often leads to some sexual activity involving persons of the same sex, starting with simple touching, kissing, petting, stroking the genitals, oral-genital contact, and more rarely, anal intercourse.

Although attendance at a professional high school or summer camp provides wide opportunity for teenage sexual experimentation, and many adolescents have even more homosexual than heterosexual encounters, they are not considered as really gay or lesbian behaviors. The capacity to respond sexually to a person of the same gender in the teenage years is considered being bisexual rather than homosexual. Many teenagers who identity themselves as homosexual in fact are bisexual. Many such Ukrainian youths try to change their sexual orientation by different kinds of therapies. These usually are not successful in reaching the desired goal.

A predominant sexual attraction to persons of the same gender with a constitutional lack of attraction to members of the opposite gender in late teenage years signals the development of a homosexual orientation.

#### **B.** Adults

#### Gender Roles, Courtship, and

#### Relationship Patterns

In the Ukrainian society, where intimacy and relationships have been focused primarily on heterosexual patterns of behavior, the sexual minority groups try to develop their own language for communicating with similarly minded peers about courtship and discovering sexual roles for future intercourse. The image of the self as a homosexual female or male is mostly dependent on the success of lifelong intimacy with a partner and on the opportunity for the selfextension in experiencing the feelings of sexual attractiveness, physical fitness, and good looks. In a traditionally hostile society, coming out as a homosexual poses great problems. The inability to define one's self in terms of social and private activities thus becomes a common characteristic of adults with gender dysphoria.

Many lesbian women and gay men are modeling their relationships on heterosexual behavior forms and communication. A lifelong monogamous commitment is often a desirable model of homosexual relationship. The partners share household and home labor in accordance with active (masculine) and passive (feminine) roles in sexual intercourse. There are a lot of jealous feelings in the attitudes towards each other, passionate love, and sympathy. Many homosexual adults develop their sexual and romantic relationships much as heterosexual couples do, but with the significant difference of fear for manifesting that love and attachment in a hostile environment. In contrast to gay men, many lesbian couples have made parenting an important part of their life. But because homosexual relationships are usually hidden, long-term monogamous homosexual couples are rare in Ukraine.

Despite the hostile social environment, homosexual adults elaborate some elements in dressing, gestures, and behavior that signal a homosexual orientation to knowledgeable observers. Still, even in metropolitan Kyiv, homosexual persons meet each other in covert ways and endure some period for tentative exploration before overtly connecting. Usually there are some places in cities and towns where homosexual individuals can meet each other. In such public places, including sections of certain parks, certain bars, and steam baths, homosexual persons can safely meet, interact, and relate to each other.

In former Soviet times, disclosure or discovery of homosexual orientation meant destruction, ostracism in the workplace and family, forced hospital treatment, and even prison. Lesbians and gays today are as diverse as the society to which they belong. They differ widely in both educational level and economic status. Depending on their social status, they may either conceal their sexual orientation or be open about it. They may have multiple partners or prefer one. Feelings of unhappiness because of the lack of a mate, feelings of alienation, a minimum of understanding regarding their situation, stressful life experiences, anxiety, depression, and substance abuse are common difficulties in the private lives of homosexual persons in Ukraine.

#### Social Status

The social attitude regarding homosexual persons in the former Soviet Ukraine was determined by Statute N121 in the criminal code, which supported penalties for the male homosexuality, as well as for the homosexual seduction of children, teenagers, and adults, and punishment for homosexual rape. Female homosexuality was not noted as criminal in that law.

In postliberation Ukraine, researchers and clinicians studying the patterns and quantity of homosexual, lesbian, and bisexual behavior have rejected the Soviet diagnosis of homosexuality as deviant and a mental illness and now make use of the Western paradigms, statistics, and assessment measures, particularly those of the American, Alfred Kinsey, and his colleagues.

This dramatic shift, coupled with the beginning of the democratic process in Ukraine, has given impetus for homosexuals to "come out from the closet." Today, Ukrainians can openly visit a consulting center to meet a sexologist or psychologist to discuss some private problems concerning lesbian or gay orientation or activity. Today, lesbian women and gay men are becoming more open about their sexual identities, social processes in which developmental changes affect their life. One can easily find many advertisements in the erotic newspapers placed by homosexuals of both sexes seeking a partner. There have also been some recent efforts to organize a gay liberation movement. In May 1995, the First Ukrainian International Congress of Homosexuals and Lesbians, which called itself Two Colors, was held in Kyiv. The association was organized to serve the social, political, and cultural needs of the gay and lesbian population by promoting a positive image for homosexual status in society. In comparison to Western gay liberation movements, Ukrainian lesbians and gays are not separate in their social needs; they are one in their efforts to promote common ideas.

In the late 1990s, the first Ukrainian magazine for gays began publication. Called *One of Us*, it explores different intimate and social factors that are important in the gay lifestyle for men trying to create their non-heterosexual identities in community life.

Although homosexuals in post-socialist Ukraine are not relegated to a deviant status, there is still a lot of prejudice against gay and lesbian persons, and many individuals oriented toward same-sex sexuality keep their attitudes hidden. This is partly because of the rigid manifestation of cultural heterosexism, as well to a reminiscence of Soviet mass psychology of nonreconciliation and nontolerance of anyone who does not fit the majority model. Homophobic tendencies among Ukrainians were and are mostly connected with gay men but not lesbians. This is in part because of a fear for the younger generation being molested, seduced, or infected by HIV. But another factor is an ancient blame for men's abstinence from heterosexual intercourse causing a decrease in childbirth, threatening the future of the nation.

#### The Ukrainian Homosexual Culture

The basic demographic characteristics and size of the homosexual population in Ukraine remains a subject of debate. Little is yet known about the relationships of homosexual couples, as well as about the functioning and life course of families with lesbian and gay adults.

As mentioned, most homosexual women and men try to remain invisible. The dominance of exclusively heterosexual orientations in Ukrainian society presses homosexuals to hide their drives and attitudes. One result of this hostile environment is the number of men and women who pose as transsexuals to obtain sex-change surgery in order to change their sex on their passports and thus obtain the opportunity for a legal relationship with a partner of the desired sex. Ukrainian scientists have suggested the significant importance of social factors in the origin of such orientation because of the high valuation by the Soviet system for manifestation of masculine features and of masculine traits expressed by women. Thus lesbian women are more independent, dominant, unconventional, and self-sufficient than most Ukrainian heterosexual women.

The patterns of a sexual partnership among gays and lesbians are significantly influenced by the sexist society with strict polarization of gender roles in housekeeping, raising the children, and in the social sphere. What limited statistics are available suggest that only about 1.5% of gay male couples achieve a stable, long-lasting relationship of more than five years; 2.7% have relationships that last three years, while about 7% have relationships that last a year or so. Lesbians and gays have occasional sexual encounters for anonymous short-time enjoyment; some have sex in pairs or in groups. Some homosexual couples emphasize social needs rather than pure sexual contacts.

Homosexual as well as bisexual relationships satisfy many social, sexual, and emotional needs—many homosexual couples enjoy common professional interests, shared lifestyle, cognitive satisfaction, and cooperation, although their welfare in Ukrainian society is generally not so high. Although there are many different challenges in gay and lesbian experiences, including communications and intimacy, the main widespread problems involve a special need for a positive self-redefinition, coming out as a part of personality development and interpersonal growth, and social activity and well-being as an affirmation of the personality. Ukrainian society needs to provide a social environment in which gay and lesbian persons can feel that their sexual orientation is not pathological or immoral.

#### 7. Gender Diversity and Transgender Issues

The beginning of the democratic processes in Ukraine allowed the problems of people with gender conflicts to surface. Because of this, Ukrainian society faces some new questions about the status of such individuals in postsocialist society and the ways in which they interact with the public, family, and friends.

Ukrainian scientists consider that the cases of gender dysphoria, in which a person rejects his or her biological sex and requests surgery and the gender identity of the opposite sex, occurs in about 1 out of every 30,000 to 50,000 persons.

During the Soviet rule, the only center that provided medical treatment and sex-change surgery for transsexuals was in Moscow. In the late 1980s, when legal and medical procedures for altering sex were for the first time performed in Kyiv, female-to-male transsexuals outnumbered maleto-female transsexuals seven to one. In Western countries, the proportion is about equal or favors male-to-female by about three to one. The reasons for this sharp difference might be social-learning experience and the prevailing status of men in Soviet society.

A government commission for transsexualism has recently been organized in Kyiv to deal with individuals with gender dysphoria. The chairman is Professor Borys Vornyk (Address: 8 Smolenska vul., Kyiv 02057). Its members include qualified transgendered "alienist" persons, surgeons, sexologists, psychologists, and lawyers. The clinical and psychological strategy for managing sex change and identity cases is based on the best of foreign experience and practice. The procedure of personality evaluation before undergoing sex reassignment are based on preliminary criteria: originally over age 21, but since 1995, over age 25; having no children under age 18; no criminal offenses; a consistent gender disorder not connected with psychosisabsence of mental diseases or psychosis; a long-standing (from early childhood age), irreversible, cross-gender identification with positive self-conception, physical appearance, and demeanor as a member of the opposite sex, and a strong identity with the opposite sex; and referral to "nuclear" transsexual by a psychiatrist and psychologist based on at least one year of psychotherapy-a stable ego conception; economic and residence stability-minimum problems in self-support; sexual satisfaction of self and the partner, if involved; a positive relationship with family; adequate psychological support; and an adequate understanding of the hazards of the operation.

The commission considers the importance of family diagnosis in an evaluation of gender identity, as the transsexuals will meet a lot of psychological problems involving military registration and alienation from and nonacceptance by society.

Many people react negatively to the phenomena of transsexualism and transvestism because these contradict traditional gender behavior and assumptions.

A transvestite's social and family situation is usually very difficult, because the lack of privacy in everyday life does not allow him to have the opportunity to dress even partially as a member of the opposite sex. The cases of male-to-female cross-dressing are usually connected with a hyperfeminine expression. The lack of community and nonavailability of public places for mixing with others as a woman restrict the options for cross-dressing.

Cases of berdachism and other atypical sexual identities are extremely rare in Ukraine and exist mostly as rumors rather than as clinical or scientific studies.

#### 8. Significant Unconventional Sexual Behaviors

The incidence of socially unaccepted kinds of sexual behaviors are increasing rapidly as the process of political and economic transition affects the whole culture and everyone in it.

#### A. Coercive Sexual Behavior

Child Sexual Abuse, Incest, and Pedophilia

Any kind of child molestation has always been condemned in Ukrainian society, and Ukrainian folk traditions consider any sexual abuse of children as the most heinous of crimes.

Known cases of sexual abuse are mostly connected with girls assaulted between 3 and 7 or 8 years old. More than half of the offenders are close friends or neighbors of the parents. More than half the victims have been killed by the seducers after the pedophilic acts because of the fear for criminal responsibility and punishment. The penalty for sex molestation is the same as for the rape of minors or incest; Statute 117 of the criminal code mentions the penalty from three to 15 years in jail and even death. Most of the perpetrators of this crime are men 20 to 30 years old.

More often than not, cases of pedophilia are not connected with penetration. only with genital foundling or handling. The children involved in such sex games with adults are about equally male or female.

The frequency of pedophilia in our country is sometimes connected with homeless girls and boys who run away from home to escape from parents and are in turn victimized by adult male strangers in return for some food, money, reward, and temporary shelter. Usually, they do not report their offenders and keep the sexual experience secret from parents and others. Cases of incest are a rather rarely reported form of child sexual abuse. Accounts of sex between a parent and child are more frequent than are officially reported. Sexual relations between a mother and son or a father/stepfather and daughter are seldom discovered or reported. Very few scientific statistics and little information are available about sexual relations between brothers and sisters. The recent development of sexual consultation centers with psychoanalytic services will help in obtaining data on the incestuous involvement of children in Ukraine.

#### Sexual Harassment

[*Editors' Note*: In this section, the Ukrainian authors adopt a broader and less specific definition of sexual harassment than is common in Western usage.]

Violations of personal boundaries, a basic element in the administrative-commanding system of the former Soviet Ukraine, made sexual harassment an everyday normative behavior in official and informal relations. Fear of the authority that was taught by the Soviets fostered a tolerant attitude towards sexual harassment as a usual and expected behavior of authorities and subordinate persons. Although Statute 119 in the Ukrainian criminal code deals with a penalty for forcing a woman to engage in sex, no incidents of such violations were ever reported or registered.

Sexual harassment behavior is widespread, especially among youths. Sexual remarks, jokes, explicit conversation about having sex, as well as such behavior as following, staring, leering, and taunting are regarded by both men and women as inoffensive and even just larking. Such behavior is mostly considered to be an acceptable way of getting acquainted in public places, and as normal masculine communication in mixed-gender interactions.

According to a survey conducted in different regions of Ukraine, one in seven students in secondary school and college has been subject of undesirable contact, and one in six students is confronted with sexual harassment. The incidence of teenager sexual harassment is strongly determined by the type of child educational institution. Girls become the object of sexual harassment much more often than boys. Every third girl has experienced sexual harassment, every fifth girl has experienced undesirable touch, and one in ten has been the subject of sexual abuse as a strong traumatic experience. Sexual harassment is accepted as an inevitable in receiving a prestigious job. Young women also have more chances to be an object of sexual harassment in the job market. There are many economic factors that contribute to sexual violence against women.

#### Sexual Assault and Rape

The incidence of rape is growing very quickly. Stranger rape accounts for about 94% of all reported rape cases; 67% involve group or gang rape; 13% result in serious physical harm. According to the criminal statistics for the Kyiv region, most of the reported perpetrators were under age 20. Most of the victims are under the age of 18. Most of the rapists did not have a previous criminal record and used alcohol.

#### **B.** Prostitution

The danger of prosecution does not limit the offers of sexual services in return for financial gain. Historically in the Ukrainian community, there was always a negative attitude toward women who had sexual relations with men outside marriage. But starting at least in the early 1970s, the attitude towards prostitution, especially among youth and middleaged adults, has shifted to be very permissive. Prostitution is spreading among young women and girls as young as 10 to 15 years old. Poverty and transition-related issues, such as unemployment, have increased the need to earn money on the streets. These young girls are the victims of drug and alcohol abuse, poor diets, venereal diseases, and sexual abuse. Another phenomenon linked with prostitution is trafficking in persons. Many women and some men, discouraged by job opportunities at home, look for a work abroad. In many cases, Ukrainian migrants are being engaged in prostitution, becoming the victim of exploitation and violence.

Ukraine is considered to be a major source of young girls and women sold into international commercial sex markets, especially in the Middle East and Balkans. As the result of being trafficked, a lot of women have found themselves trapped in slavery dependence and had to solve their problems by sexual servicing.

#### C. Pornography and Erotica

A Project of Law prohibiting the production and distribution of pornography, and the formation of the Presidential commission on obscenity were still being discussed in the Ukrainian Parliament as of mid-1995.

Although Ukrainian society has become more permissive sexually, it does not provide adequate values of human sexual activity. With the breakdown of the Soviet regime, sexuality became one of the most important symbols of social and cultural liberation. Widespread public ignorance about sex in former years has been replaced by everyday representations in commerce and movies. Television programs and filmmakers have exploited sex; the display of the bodies of young women as available sexual objects are not only on cinema screens, but in advertising, on posters, photographs, and drawings. After 70 years of repression, Ukraine has a large market for pornographic products. Television programs portray and revel in various types of sexual experience, and frank expressions of nudity with erotic excitement are displayed in public places for everybody.

The public discussion of the harmful role of pornography for grownup sexual expectations and values makes it clear that, under the slogans of democracy, new businessmen are exploiting sex roles, promoting the image of a happy life associated with sexual pleasure, drinking, smoking, and male control of the opposite sex.

Newly opened sex shops and the appearance of such newspapers as *Pan Plus Pani* and the sex magazine *Lel'* have broken all previous taboos on sexual subjects, recognizing the sexual culture and providing sexual education for different age groups. Artistic eroticism has started to recover from years of repression, producing pictures, stories, and theater plays in the best national traditions, based on gender equality in relationships, personal freedom and dignity, Ukrainian humor, and the pursuit of a full-blooded life.

#### 9. Contraception, Abortion, and Population Planning

#### A. Attitudes, Education, Availability, and Usage of Contraceptives

The maintenance of an appropriate population level is vital to the survival of any society, but especially for Ukraine after the Soviet takeover. During the famines deliberately created by Soviet policy in 1920 and especially 1933, six million Ukrainian peasants from the central, east, and south regions died from artificial hunger or were removed from their native land to Siberia and the Far East. The devastation of World War II also reduced Ukraine's population significantly.

From the middle of 1979, the Ukraine birthrate started to drop rapidly; since the end of 1980, the birthrate has remained below the replacement rate. Although the former Soviet authorities tried to encourage families to have more children in order to get a larger labor force, their efforts did not reverse the trend. By the end of 1960, most Ukrainian women had to combine parenthood with professional work because of economic needs and the necessity of guaranteeing family income.

As a consequence, Ukraine is characterized by the rapidly increasing proportion of older persons. In 1960, there was one person of pension age for every 11.5 nonpension persons. Today the ratio is one in every six. And the birthrate continues to decline. Under such circumstances, the social and economic situation has had a great impact on the family: We have an increase of single persons of marriageable age, and a high proportion of divorce and one-parent families (the number of one-parent families in 2002 constituted 14.0% of all families).

Historically, most Ukrainian families did not limit the number of their children, nor did religious doctrine permit use of contraception. However, sexual intercourse was forbidden during major religious festivals. And most women knew about medicinal herbs that could be used to prevent pregnancy or induce a miscarriage. In the 11th century, the daughter of King Jaroslav Mudryj Jevpraksija wrote the first book on the medical use of herbs, describing their use in preventing or terminating pregnancy. The average Ukrainian family was large, with the women sometimes having more than ten childbirths and five to nine surviving children.

The involvement of Ukrainian women in the labor force in 1930 and in 1950 reduced the number of childbirths and increased the number of induced abortions, even though from 1936 to 1955, abortion was forbidden by Soviet law. In the end, economic factors enabled the government to give impetus to a family planning policy and promote the development of contraception. Nevertheless, from the late 1960s to the present, Ukraine remains at the head of countries where abortion is the main form of birth control.

Induced abortion is not a method of contraception, but one of family planning. In 1998, 45 pregnancies out of 100 ended in abortion. The number of abortions has been decreasing in recent years (see Table 1).

Overall, the number of abortions among women of reproductive age in 1998 was as follows: ages 18 to 34, 79.1%; ages 35 to 49, 18.3%; ages 15 to 17, 2.6%; and under age 14, 0.05%. In recent years, the situation has improved. There has been no increase in the number of abortions among girls under the age of 14 and teenagers aged 15 to 17. Among girls aged 10 to 14 years who interrupted their pregnancy, the number having an abortion increased from 47.4% to 94.0%. This was promoted by the creation of a network of family planning centers and work with girls who have already become pregnant.

Since sex-education programs were focused on adults, the sexual behavior of youths was not regarded as important for family planning. In the context of such policies, the incidence of teenage pregnancy started to rise. A second reason for the failure of the government program to promote contraception was the fact that the sex-education programs were focused mostly on women in gynecological clinics, and not on all women of childbearing age. This policy ignored the family as a unit of a man and a woman and the male's responsibility in family planning. With this policy, husbands simply assumed that the wife would take responsibility for contraception, which they sometimes, but not always, did.

But the major factor was that the most effective birthcontrol methods, such as oral contraceptives and hormonal implants, were not recommended by the physicians, and remained unpopular among both adults and teenagers. In addition to the strong prejudice against the hormonal contraceptive pills, another factor in their nonuse is their high cost in Ukraine.

From 1994 on, tubal ligation for the female and male vasectomy have been increasingly chosen by Ukrainian couples who do not want any more children or who prefer to remain childless.

In general, Ukraine needs a greater availability of contraception and improved sex information in order to reduce the increasing numbers of unwanted pregnancies.

#### Table 1

#### Abortion Rates in Ukraine for Selected Years

Year	Abortions per 100 pregnancies	Abortions per 100 deliveries			
1991	60.1	145 (est.)			
1995	59.2	119			
1998	54.4	106			
2000	55.0	_			
2001	48.1	92			

Source: Data of the Ministry of Health of Ukraine

#### **B.** Teenage Pregnancies

Teenage pregnancy is often a motivation for establishing a marriage relationship. According to one survey, unmarried pregnancy occurred among 83% of young couples under 20 years old; most of them considered the childbirth undesirable. The decision to have an abortion or to keep a child is made by the young woman with additional agreement of parents or relatives when the girl is under 16 or 17 years old. There are no special schools or classes for pregnant teenagers. Usually, the relatives take the responsibility for a newborn baby. The destiny of such babies is often unhappy when a young mother gives her child up for adoption or to an orphanage. During recent decades, the population of the rejected babies in an orphanage has increased many times in comparison to the number of the orphaned children in Ukraine after World War II. The high rate of adolescent pregnancy demonstrates that Ukraine needs to improve its school and community sex-education programs and to provide free or low-cost contraceptive services to all teenagers who need them.

#### C. Abortion

Abortions have been legal in Ukraine since 1955. They are available to any woman after the age of 18 years and are mostly free of charge—the state pays the medical expenses of low-income women. The abortion is usually done at a special clinic or gynecology department up to 12 weeks after the last menstrual period. Although abortions usually are medically safe, many factors affect the women after an operation: anxiety, depression, and complications in reproductive function.

In Ukraine, abortion is the main cause of infertility. More than 200,000 cases of inflammatory diseases of the fallopian tubes and ovaries are recorded annually, of which 130,000 are first occurrences among women aged 18 years. Among teenagers aged 15 to 17 years, about 10% have inflammatory diseases of the reproductive system. Twentysix women died in 1998 as a result of an abortion, for a rate of 0.05 deaths per 1,000 abortions. Seven deaths occurred as a result of an abortion that was not performed in a medical establishment.

The percentage of miscarriages out of the total number of pregnancies also increased as a result of abortions. In 1998, the percentage increased by 1.8 times in comparison to 1990. About 60% of stillbirths are premature births, and from 50% to 70% are first births. There has been a growing antiabortion movement in Ukraine, especially among some religious denominations, scientists, teachers, and some social organizations. These groups emphasize that a woman should take responsibility either for preventing pregnancy or for giving the life to a new baby because of the right to life of the unborn fetus.

#### **D. Efforts to Regulate Population Growth**

With regard to the demographic situation, the Ukrainian government considers the improvement of living standards for all women, but especially for young couples, as a measure of fertility, womanhood, and parenthood. For this purpose, the Committee of Women's Affairs, the Children, and the Population was organized in April 1995 by the cabinet of the ministers of Ukraine. The committee started to develop family-planning policy and different social programs to permit the women and the families to promote their wellbeing, their health, and parenthood.

Since Ukraine became an independent state, a series of strategic national programs have been adopted. Among them: a Long-Term Program on Improvement of the Status of Women, Family, Protection of Maternity, and Childhood; a National Program on Family Planning, and a National Program "Children of Ukraine." In 1997, the National Plan of Action for 1997-2000 "on the improvement of status of women and their role in society" was approved. The National Program of Family Planning has the following strategic objectives:

- Form regional institutions for family planning;
- Prepare medical and educational personnel to work on family planning;
- Meet the population's contraception needs;
- Prevent undesired pregnancies; and
- Create an infrastructure for infertility treatment.

#### 10. Sexually Transmitted Diseases and HIV/AIDS

#### **A. Sexually Transmitted Diseases**

The history of the medical treatment of sexually related diseases in the 19th century was connected with such scientists as J. Zelenev. J. Popov, B. Zadoroznij, and J. Mavrov. In Czarist Russia, around 1850, it was estimated that about 10% of all reported illnesses involved venereal diseases. Syphilis and gonorrhea were found mostly in the large industrial centers like Kyiv, Kharkiv, Odesa, and Mykolajiv. In 1901, *The Journal of Skin and Venereal Diseases* was founded in Charkiv; it carried articles describing the symptoms of common sexually transmitted diseases and their complications.

World War I and the October 1917 Revolution led to widespread sexual promiscuity and increasing cases of venereal diseases. In 1920 in Ukraine, special dispensaries for treating STDs were organized in all large cities. This helped to slow the spread of these infections. World War II created a huge new public health problem, which lasted until 1950. In comparison to other former Soviet republics, Ukraine was characterized by the lowest level of STDs, because of the sanitary preventive measures.

#### Incidence, Patterns, and Trends

After the dissolution of the U.S.S.R., social factors such as large-scale migrations, the ease of reproducing erotic and pornographic videos and their availability, changes in the economic situation, and the double moral standard have influenced the recent outburst of venereal diseases. In Ukraine, as in other countries, the teenaged population appears hardest hit by the STD epidemic. Venereal diseases are increasing in epidemic proportions among teenagers because of lack of knowledge, early sexual experience, multiple sexual partners, and a high level of sexual activity.

In the past five years, syphilis cases among 14-year-old boys has increased about 400%, and for 15- to 17-year-olds by about 800%. Among teenage girls, syphilis has increased by about 500%. Venereal diseases such as gonorrhea and syphilis are now the chief sexually related diseases in Ukraine. The incidence of gonorrhea and syphilis began to climb in 1992. In 1995, 208.5 new cases were reported per 100,000 population. In 1996, the rate was 226.5, declining to 144.8 in 2000. Among 15- to 19-year-old girls and 12- to 14-year-olds, an epidemic has become a national pandemic. There has been an unprecedented increase in the incidence of syphilis among women. The indicator rose from 6.2 cases per 100,000 in 1990 to 134.8 in 1998, which naturally has created a favorable environment for the spread of HIV infection. Females and males between the ages of 17 and 27 are most at risk of infection, and they account for the majority of all STD cases reported. In the past five years, the common infections, like syphilis, gonorrhea, herpes, and chlamydia, have increased about 300% in adult females and by 400% in adult males. This continuing increase in the incidence of STDs is creating urgent social problems.

#### Availability of Treatment and Prevention Efforts

In Ukraine today, there is a system of STD control, and appropriate healthcare is available throughout the country for people of all ages, in the rural areas as well as in the cities and large metropolitan areas. Everyone can obtain free and confidential routine medical testing and care. It is obligatory for all the personnel of medicine, nutrition, and provision services to be tested periodically for STDs and HIV, since the best way to fight the epidemic process is to block it. Some clinics provide resident treatment, and some dispensaries provide outpatient care with pre- and post-test counseling. All services are free, with the patient paying only for medication when they can afford it. Besides medical services, these clinics provide free printed contraception and HIV/AIDS information.

The program for high-risk youth includes testing and follow-up care. Special venereal departments provide a wide range of medical services, all free and confidential. The only requirement for the patient is to identify all the partners, so they can be tested and referred to medical services in case treatment is needed. Some venereal clinics offer extensive treatment for individuals addicted to drugs or alcohol, or to a person whose behavior put him or her at risk for being infected.

Ukrainian physicians prepare special information for adolescents aged 14 to 18 in order to give them the facts they need to protect themselves from STDs. But this work is insufficient in the area of mass media, especially television, and in educational programs in the schools, where some are still embarrassed when speaking of "sexually transmissible." A sexually enlightened society is not afraid to influence the consciousness and attitudes of the masses with an honest voice.

According to a UNAIDS report for 2002, the incidence of syphilis cases increased dramatically from less than 10 cases per 100,000 in 1990 to 118 per 100,000 in 1995; in some regions this rate reached 220 per 100,000. Over 60,000 new syphilis cases were reported in 1995 alone. Gonorrhea has been underreported.

#### **B. HIV/AIDS**

The epidemiology of HIV and AIDS infection in Ukraine demonstrates worrisome trends.

#### Incidence, Patterns, and Trends

The epidemic of HIV/AIDS in Ukraine has progressed in two stages: The first phase started in 1987 when the first six cases of HIV infection were registered among Ukrainian citizens. Until 1994, annually about 40 HIV-infected people were registered. Geographically, the cases of infection concerned large industrial cities and the spreading speed was quite slow. The main way of infection transmission was heterosexual. The number of HIV-positive Ukrainians during that period was 183. The second stage started in 1995 when the two first cases of HIV infection among intravenous drug users (IDUs) were found in Mykolajiv. Since that time, the rate of infected IDUs has been growing rapidly. By January 1, 2002, there were 43,600 HIV/AIDS IDU cases.

Starting from 1998, consecutive substantial reduction in the rate of HIV-registered cases can be explained not by the slowing down of the epidemic, but by the adoption in 1998 of a new law "About HIV/AIDS Prevention and Social Defense of Population." In accord with the United Nations Declaration, that law initiated the use of HIV-testing on a volunteer basis. In 1997, HIV/AIDS infection reached all regions of the country. By the end of 2000, the eastern and southern regions of Ukraine were most affected by the epidemic. The Odessa, Dnipropetrovsk, and Donetsk regions contained 60% of the entire HIV-positive population of Ukraine.

The explosive character of the HIV/AIDS epidemic in Ukraine is connected with the dramatic growing of the number of IDUs, the peculiarities of intravenous drug use, the late initiation of prophylactic work inside the IDU group, and the lack of attention to such work by the official authorities and establishments.

The period between 1990 and 2000 was characterized by a sharp increase in drug dependency. In 1990, narcotic services were monitoring 22,466 individuals, while by the beginning of 2001, there were 75,489 clients. The experts estimate that the real number of drug users can be five to ten times higher. Nearly 95% of the registered drug users are actually IDUs.

The rates of the HIV/AIDS-epidemic spread in Ukraine are the highest in the Central and Eastern Europe. During the recent years, the number of people registered as ill or dead from AIDS has increased dramatically.

The maximum loss from AIDS among males in the age group 30-to-34 years was 29%, while in females, this was true for 26% of the age group 25-to-29 years. The data of AIDS rates and deaths from AIDS are lower than actual rates because of insufficient levels of medical diagnostics; 84% of all individuals who died from AIDS were only diagnosed with AIDS when they were in the terminal stage of the disease or after they had died.

The epidemiological situation in Ukraine becomes even worse: The number of people who donate their blood while being HIV-infected is getting larger (from 0.06% in 1997 to 0.07% in 2000); as are those who have other sexually transmitted diseases (from 0.5% to 0.71%); those with multiple sexual partners (from 0.55% to 1.02%); and pregnant women (from 0.09% to 0.17%). Among European countries, Ukraine is the leader in the level of HIV-infected blood donors, as well as in the speed of the epidemic's spread, in the Central and Eastern Europe.

The trends of the epidemic development remain vague because of lack of adequate information. We can assume the beginning of the dangerous tendency of the epidemic to transfer to the "main" groups of the population. This assumption is supported by the fact that the rate of individuals infected by sexual activity through sexual ways, and not through intravernous drug use or transfusion, is getting larger. The rate of those infected through intravenous drug use in 1997 constituted 83%; in 1998, 77%; in 1999, 65%; and only 62% in 2000. But between 1997 and 2000, the percentage of pregnant women who were infected through sexual relations grew from 66% to 75%.

#### Availability of Treatment and Prevention Programs

The first national program for HIV/AIDS prevention was adopted in February 1992 and ran through 1994. Now the fourth one is running out, and the next has been developed for years 2004-2006. All plans were developed by a national committee against AIDS and are supported by a number of organizations: the Ministry of Public Health, the Ministry of Economics, the Social Defense Ministry, and the Department for Family and Youth. The general lines of the programs include promotion of condom use, an educational project, mass media action, and providing healthcare clinics.

The general goal is to slow down the epidemic of HIV and save thousands of lives. Medical aspects of the program are designed to reduce or eliminate the risk of getting HIV. The health workers have set themselves an ambitious goal: mass awareness and understanding of how sexual intercourse can be made safer to reduce the risk of getting HIV. Another effort is to supply the population with condoms; approximately 150 million condoms will be provided annually for the needs of the Ukrainian population. The medical campaign against AIDS also requires testing donated blood and blood products by checking two million blood samples annually on a voluntary basis. Testing is compulsory for pregnant and some categories of the population.

Special attention will be given to laboratory testing for HIV-infection. More then 170 institutions will make four million tests a year, using clinical tests produced by the American firm Abbott and the French firm Sanofi Diagnostic Pasteur. The state will also promote development of a national industry for transfusion blood screening. The program also contains measures for healthcare of laboratory and hospital personnel in order to reduce the risk of their becoming infected.

The development of AIDS service organizations requires special training programs for responding without fear to the needs of all HIV-infected people who require medical or psychological help. Already, clinics in regional centers serve people with HIV or AIDS. Usually, they offer confidential medical services, pre- and post-test counseling, meals, housing and rental assistance, and complete medical evaluations. Again, all such services are free and confidential. The national program includes research studies of the viral causes of AIDS, the development of new diagnostic and treatment methods, and the search for an AIDS vaccine.

The main program direction is on promoting AIDS awareness among the population. A mass media effort on radio and television and in the newspapers should be effective in raising the knowledge about AIDS, especially how everyone can gain some protection. The information-educational work is focused on separating the scientific facts from the myths and providing information about the connection between sexual intercourse, oral and anal sex, and HIV transmission. High-risk groups will receive special attention, for example, prevention of mother-to-child HIV/ AIDS transmission.

In November 2000, the President of Ukraine issued a decree, "About Urgent Steps to Prevent HIV/AIDS Spread." In order to fulfill this decree, the Government created a committee, which is responsible for inventing and monitoring strategic programs; coordinating central and peripheral executive authorities; and keeping the President, the Parliament, and the international public informed about the state of anti-epidemic measures.

Because of this Decree, the number of centers for AIDS prophylactics and control is getting larger. By November 2001, there were 27 such centers, seven of them had inpatient departments. Meanwhile, the National Program "Reproductive Health 2001-2005" (passed by Presidential Decree) and the HIV/AIDS Prophylactics Program of 2001-2003 (passed by Decree of the Cabinet of Ministers) have assumed governmental control over the epidemiological situation, medical examination on a voluntary basis together with after-test counseling, and regular and complete informing of the public about HIV/AIDS.

The main obstacle to realization of the governmental program lies in absence of its adequate regulation, monitoring, and effectiveness examination. The Program is missing the chapters about estimated results, effectiveness, criteria, and evaluation of fulfilled projects. The coordination of actions between different Ministries, departments, and specialized governmental institutions is a separate difficult question. Governmental programs on HIV/AIDS prevention assume counseling services for the public. But the realization of the corresponding measures still remains in the initial stage.

The effectiveness of the existing counseling services is not sufficient, particularly for teenagers, youth, and especially for those groups who are at high risk for HIVinfection.

The most difficult obstacles on the way to effective counseling are:

- insufficient training of the specialists who deal with HIV/AIDS prevention and high-risk groups;
- lack of knowledge among children and youth about governmental establishments that give counseling services on HIV/AIDS;
- negative attitudes towards HIV-positive individuals on the part of both society and medical staff; and
- absence of control over the quality of counseling services as for HIV/AIDS.

[Update 2002: UNAIDS Epidemiological Assessment: By the end of 2001, a cumulative total of 39,752 cases of HIV infection had been reported to the National Health Authorities. Until 1991, HIV/AIDS surveillance was organized mostly through mandatory screening in subgroups of the population, together with contact tracing. Testing policies changed in 1991 with the introduction of anonymous voluntary testing. Testing remained compulsory for sex workers, IDUs, STD patients, blood donors and "other populations based on epidemiological considerations." In reality, few changes occurred; voluntary, anonymous, and free testing was less than 5% of all testing done in 1996. Diagnosed HIV infections that have been officially investigated are reported nationally with the name of the individual.

[In early 1995, HIV started to spread very rapidly among IDUs. The number of diagnosed infections increased from 398 cases for the whole period 1987 to 1994, to 1,490 in 1995, 5,400 in 1996, and a total of 23,315 in 1997 to 1999. These figures represent only officially registered cases and therefore underestimate the number of diagnosed cases. Highest rates of reported HIV infections were initially found in the region of Odessa and Nykolayev, but cases are now reported from all 27 regions of the country. Increases in HIV prevalence were also seen among STD patients and blood donors.

[Prevalence is mostly estimated from the screening programs. Sentinel surveillance is being implemented in IDUs in Odessa. Data on the relatively low HIV spread among homosexuals should be interpreted with caution in the context of a society where, until 1991, homosexuality was illegal and punishable. The diffusion of the epidemic through heterosexual contact is difficult to assess. Proportions of HIV-positive tests among pregnant women in Odessa and Nykolayev have reached levels similar to those of Western European cities. However, because the mode of transmission is not available in most cases, it is not possible to determine to what extent pregnant women have been infected through IDU or other means.

[The estimated number of adults and children living with HIV/AIDS on January 1, 2002, were:

Adults ages 15-49:	250,000 (rate: 1.0%)	)
Women ages 15-49:	76,000	
Children ages 0-15:	NA	

[An estimated 11,000 adults and children died of AIDS during 2001.

[No estimate is available for the number of Ukrainian children who had lost one or both parents to AIDS and were under age 15 at the end of 2001. (*End of update by the Editors*)]

#### 11. Sexual Dysfunctions, Counseling, and Therapies

#### A. Concepts of Sexual Dysfunction

A network of sexological consulting centers started to appear in Ukraine in 1965. It was a time when the first Scientific Research Institute of Kidney and Urinogenital Diseases started to function. There was a lab of endocrinology, which in 1972 was renamed the department of sexopathology, with two laboratories, endocrinology and spermatology. In 1974, the department was redesignated the Ukrainian Scientific Counseling and Organizational Methodical Center of Sexopathology and Andrology. The inspiration for its development belonged to Ivan Junda (1924-1994) the honored scientist, State prize-winner, doctor of medical sciences, and professor. The main direction of his research was the etiology, pathogenesis, clinical symptoms, and methods of sexual dysfunction, treatment, men's infertility, and its prophylactics.

From the time of the Chernobyl catastrophe, the main direction of the research has been the occurrence of erectile dysfunction, urinary tract diseases in the territory of radiation dissemination, risk factors in the development of men's barrenness and women's infertility, and new methods of treatment of sexological and preventative measures for andrological diseases.

In 1992, the Ministry of Health renamed the department the Department of Sexology and Andrology. The head of the department is Honored Physician of Ukraine, Doctor of Medical Sciences, Professor Ihor Horpinchenko. The main direction of the research and treatment has been generative and copulative function in survivors of the Chernobyl catastrophe, an approbation of nontraditional treatment methods, and development of surgical methods for vascular forms of erectile dysfunctions. Special attention is paid to the research of the prevalence of some dysfunctions and infertility of nucleosides. The sexological investigation of such patients has led to development of tactics for their rehabilitation.

#### **B.** The Availability of Diagnosis and Treatment

Ukraine was the first of the former Soviet republics where the system of regional counseling centers was created. Since the beginning of the 1990s, every large city in Ukraine has had its family or sexology consultation centers where sexologists and psychologists have begun to work together. Medical examination of the individual or couple is accompanied by psychological testing. This cooperation became more widespread with the creation in 1997 of Family Planning Centers.

Many women and men are seeking help at these centers, be it guidance, information, or reassurance. The number of sexological problems are considerable, but most are connected with the individual psychological culture. The diagnostic services of the consultation centers focus on the communications abilities and relationships between wife and husband or lovers, and the psychology of human sexual response. The latter is not limited to coitus, but extends to all the pleasurable and negative sensations associated with any sexuoerotic contact.

The treatment part of the counseling deals with couple guidance and relationship problems, and on teaching interpersonal skills that can be applied in their everyday interactions as a couple. The program, usually a combination of traditional psychotherapy with behavioral-oriented therapy, is aimed at personal growth of the patient(s), and sexual healing, using dialogue, role playing, and group therapy. Constant efforts are made to help the patient(s) develop a warm and well-functioning relationship. Most counseling services are free of charge and confidential. There are some nongovernmental family consultation services, available for those who can afford them.

#### C. Therapist Training and Certification

There is no special licensing for sexologists at the Ukrainian universities. Mostly, sexologists by profession are those who hold the position of urologists (about 50%), psychiatrists (about 40%), and endocrinologists (about 10%), all with the education of a physician. Nevertheless, in 1988, a new physician speciality as sexologist was introduced by an order passed by Ministry of Health. In 1992, an order from the Ministry of Health regarding improvement of serological services stimulated development of medical-psychological and andrological counseling centers, as well as the Ukrainian Center of Sexopathology and Andrology at the Institute of Urology and Nephrology of the Academy of Medical Sciences. The Academic Director is Prof. O. Vozianov and the Center's Head is Prof. I. Horpinchenko. Since 1997, each regional (oblast) center has a department of medical-psychological family counseling, which is functioning under the guidance of regional head sexopathologist. Mostly, they deal with andrology diseases and infertility problems and are free of charge.

Sexological or family consultation centers are staffed primarily by physician-sexologists and by psychologists. Medical sexology as a discipline for physicians is taught by gynecologists, psychiatrists in graduate courses at the medical universities in Kyiv, Odesa, Dnipropetrovs'k, and other cities, and in postgraduate courses at the Chair of Sexology and Medical Psychology, the Ukrainian Medical Postgraduate Academy (Kharkiv). Psychological problems in sexology are studied at the Teachers Training Universities in graduate courses, and in the candidate and doctoral program at the Institute of Psychology. The Ministry of Public Health of Ukraine, the Ministry of Education, the State Universities, and their scientific boards establish the criteria for programs, coursework, and requirements for education and certification in fields involved in diagnosis and treatment of sexual dysfunctions.

#### 12. Sex Research and Advanced Professional Education

#### A. Institutes and Programs for Sexological Research

Several government agencies are involved in and support sexological research. These include some divisions of the Ministry of Public Health of Ukraine and Ministry of Science and Education of Ukraine, Academy of Pedagogical Sciences, and Academy of Medical Sciences.

Institute of Urology and Nephrology: Professor Olexandr Vozianov, director. Department of Sexopathology, Androgyny, and Sexology Clinic: Professor Ihor Horpinchenko, chairperson. Address: 9a, Kotsubinskyj vul., Kyiv 04053; tel.: 38-044-216-5054; fax 38-044-244-6862. Research includes: the sexology and andrology of aging; the Chernobil catastrophe and changes in the reproductive function; development of objective diagnostic methods for sexual dysfunctions; investigation of the pathospermia factors in infertility couples; and biochemical aspects of erectile dysfunction.

Kyiv Research Institute of Clinical and Experimental Surgery: Professor Valerej Saenko, director. Address: 30 Herojiv Sevastopolia vul., Kyiv 04180; tel.: 38-044-483-1374; fax 38-044-483-5219. Research includes: improvement and development of body surgery corrections of transsexual persons; diagnosis and treatment of the vascular impotence; and endoorthopedic prosthetic appliances. Kyiv Medical Postgraduate Academy, the section of Parenatology of Child Obstetrics and Gynecology: Professor Zoreslava Shkiriak-Nyzhnyk, chairperson. Address: 8 Manujil'skoho vul., Kyiv 04050; tel.: 380-44-213-6271; fax 380-44-213-6271, chislow@public.ua.net. Research includes: family and female reproductive health; sexual enlightment; sexual morality; and bioethics.

Kyiv Research Sexology and Andrology Center: Head: Holotsvan Olena, Ph.D. Address: 8 Smolenska vul., Kyiv 04057; tel.: 380-044-228-0103; fax 380-44-543-8421. Research includes: adult sexual dysfunction; male and female infertility; personal disharmonies in sexual relationship; social and biological factors in transsexuality and homosexuality; hospital investigation and the treatment of sexual diseases (prostatitis, urethritis, epidermitis, etc.); and treatment of gender identity disorders and conditions.

Ukrainian Postgraduate Academy (Kharkiv). The Chair of Sexology and Medical Psychology: Professor Valentyn Kryshtal'. Address: 81/85 Myronositska vul. Charkiv 310023; tel.: 38-057-245-1056. Research includes: gender dysphoria; sexual identity disorders; prophylactics of sexual dysfunctions; VCT counseling; matrimonial disharmonies; causes as well as medical and psychological methods for the evaluation of dysfunctional couples; marital therapy and treatment programs.

Other major institutes with programs for sexology and gender-related research are governed by the Ministry of Science and Education and Academy of Pedagogical Sciences.

National Pedagogical M. Dragomanov University, Institute of Psychology and Pedagogy. Address: 9 Pyrohova vul., Kyiv; tel.: 380-044-216-3007; fax 380-44-224-2251. Research includes: techniques for teaching human sexuality courses; childhood sexual development and behavior; and comparisons of gender behavior in cross-cultural investigations.

Ukrainian Academy of Pedagogical Sciences, H. Kostjuk Institute of Psychology, Prof. P. Chamata's Laboratory of the Psychology of Personality: Professor Myroslav Boryshevskiy, chairperson. Address: 2 Pan'kivs'ka vul., Kyiv 01033; tel.: 380-44- 244-3320; fax 380-44-244-1963. Research includes: development of gender self-consciousness in childhood and adolescence; parental roles in developing child sexuality; and development of sex-education programs for children and teenagers.

V. Hnatjuk Ternopil Pedagogical University, Institute of Psychology. Head of the Institute: Professor Volodymyr Kravets; tel.: 380-353-3-1297. Research program manager: Dotsent Oksana Kikinezhadi. Address: 2 Maksyma Kryvonosa vul., Ternopil, 46027; tel.: 380-35-222-1587; email: okikinezhd@tspu.edu.ua. Research includes: gender socialization; psychosexual development; and sexual education.

#### B. Graduate Programs and the Advanced Study of Human Sexuality

According to the basic college education, there are a variety of postgraduate advanced courses of study available in Ukraine. Some of these are listed here with their focus, sponsoring agency, and address.

Master's degree programs in human sexuality: Ministry of Public Health of Ukraine, Ukrainian Postgraduate Academy. The chair of sexology and medical psychology: Professor Valentyn Kryshtal'. Address: 81/85 Myronositska vul., Kharkiv 310023; tel.: 380-57-245-1056.

Graduate courses in sexology for the physicians' advanced training; doctorate programs in sexuality and family studies: Ministry of Public Health of Ukraine. Address: Kyiv Research Institute of Urology and Nephrology, 9 a In. Kotsubinskiy vul., Kyiv 252053; fax: 380-44-244-6862. Postgraduate courses on sexual behavior for an academic degree in developmental psychology: Mychailo Drahomanov National Pedagogical University, Address: 9 Pyrohova vul, Kyiv 01601; fax: 380-44-224-2251.

#### C. Ukrainian Sexological Journals

Four sexological journals are published in Ukraine:

*The Journal of Sexology and Andrology*. Address: Editor, 9 a Kotsubynskoho vul., Kyiv 04053; fax: 380-44-244-6862.

*All-Ukrainian Scientific-Practical Journal: Man's Health.* Edited by Kyiv State Department of the Ministry of Public Health, Institute of Urology and Nephrology Academy of Medical Sciences. Address: 53 Hlybochitskaja vul., Kyiv, 04050; tel.: 380-44-23784; tel./fax: 380-44-243-3533; email: elenaprofessional@svitonline.com.

Scientific Medical Journal: Dermatology, Cosmetology, Sexopathology. Established in 1997, and edited by Dnipropetrovsk State Medical Academy, Sexual Health Center. Address: 3a, Artema vul., Dnipropetrovsk, 49001; tel.: 380-562-44-0562; fax: 380-567-44-3140.

*The Journal of Sexopathology and Andrology*. Address: Borys Vornyk, Ph.D., editor, 8 Smolenska vul., Kyiv 02057; fax: 380-44-456-2203. (A semi-annual publication).

Two important popular mass-media publications in Ukraine deal with sexuality:

*Lel'*. Editor: S. Chyrkov. Address: 38-44 Dehtjarivs'ka vul., Kyiv 04119; tel.: 380-44-211-0268; 213-3220; email: lel@torba.com. (A quarterly Ukrainian erotic magazine).

*Family Medical-Social Problems* (a quarterly journal) Editor: V. Chajka. Address: Panfilova Prospect 3, Donetsk 83114; tel.: 380-622-58-4366.

#### **D. Major Sexological Organizations**

The Ukrainian Society of Sexologists. Address: 9 a In. Kotsubinskiy vul., Kyiv 04053; tel.: 380-044-216-5054; fax 380-44-244-6862. This national professional organization includes physicians, psychologists, and teachers of secondary high schools, colleges, and graduate schools who unite their efforts in a scientific research and applied work on human sexuality.

The European-Asian Association of Sexologists. Address: P.O. Box 274., Kyiv 01034; tel.: 380-44-455-0280; email: eaas@ukr.net. This is an international organization of sexologists from former Soviet republics and of professionals from abroad. Its annual meetings in sexual science are usually held in September in Kyiv, the capital of Ukraine.

Ukrainian Family Planning Association. Address: Pr. Pobedy 30, apt. 32 Kyiv, 03055; tel.: 380-44-236-6540; fax: 380-44-236-9704; email: ufpa@semja.kiev.ua.

#### 14. Ethnic Minorities

Ukraine is motherland to more than 130 ethnic groups. Bulgarians, Serbs, and Poles have been settled in Ukrainian territory since the 18th century, Moldavians since the 16th century, gypsies since the 15th century, and Jews since the 14th century. Most of these ethnic minorities identify themselves with some nation in the world, but some of them, like the Budjak Gaguasers and Tavrida Tartars, have developed as an ethnic group within Ukraine, and thus consider themselves a native minority population.

#### A. The Tartars

In the 1940s, all Tartars, descendants of various Mogul and Turkish tribes, were forced to leave their homes in Ukraine. Today, those who survived Stalin's genocide policies are trying to return to the Crimea and Tavrida steppes. According to the all-Ukrainian census in 2001, 248,200 Tatars were registered, which is 5.3 times higher than in 1989. In the Crimea, there are 243,400 Tatars, 12% of the population, which is 6.3 times higher than in 1989.

The Tartar family, as any family, is a system for social control and inculcating cultural behavior patterns for all its members. Before their forced eviction, the Tartars lived mostly in extended families. These family communities included two or more brothers with their wives, married children, and grandchildren. Such kin constituted an independent economic and social group, which remained a primary vehicle for preserving and transferring customs and traditions.

Most Tartar families today are nuclear, although the authority of males, especially older males, is maintained as a tradition. In all family settings, the superiority of males is considered normal and natural. Marriage is prohibited within seven generations of blood kinship. Tartar sexual culture is more permissive for men, whether young or old; women are held to much stricter standards. The wife's devotion to her husband is very much appreciated and expected, as well as the obedience of all women to their father, brothers, and male relatives by marriage. The family is viewed as a social, religious, and moral unity, based on the wife's efforts to support her husband and maintain a positive psychological climate among the relatives. That is why developing honesty and innocence is the main focus in raising girls. The Tartars have different rituals to protect virginity, and its public manifestation indicates the important role virginity plays in the appreciation of marital intimacy. It is taboo for bridegrooms to admit sexual competence before their wedding.

In modern Tartar wedding celebrations, a lot of ethnic prescriptions are maintained. The women's and men's communities are located in different rooms. Newlyweds are expected to show the groom's relatives the signs of the bride's virginity by the time of marriage. The young wife puts a red kerchief on her head, while her husband wears a red ribbonbelt around his waist as a symbol of sexual innocence. Red strings link the generations, as well as brothers, sisters, and relatives by marriage. All play special roles during the wedding ceremony and try to help the young couple as they settle into married and family life. According to ethnic beliefs, sexual feelings and private matters should be subject to human reason and the stability of marital relationships. Some traditional presents for newlyweds symbolize the support of the family: a wedding candle to make life light and clear, and a round meat pie (kobete) to symbolize good health and children.

#### **B.** Koreans

Koreans as an ethnic minority came to Ukraine mostly after World War II. In families where one spouse is Korean and the other non-Korean, national customs are much more carefully maintained when the wife is Korean than when the husband is Korean and his wife non-Korean. Korean gender behavior is determined by the commandments of *Conphutsy* [Confucian?] ideals of great respect for ancestors, harmony within the marital unit and society, strict subordination of the younger to their elders, and the high authority of the father and male relatives.

Korean marriage is considered not only the unity of husband and wife, but of two families or kinships. Although the dominant position of the male is preserved in all family matters, the Korean woman does not change her last name after marriage. Thus, many Korean families in Ukraine have doubled names with two surnames. The Korean minority has adjusted to Ukrainian holidays but try to preserve their national festivals. One of the more important of these is the commemorative feast in which every person celebrates in him- or herself the past, the present, and the future of parentage.

An appreciation of the growing personality and the older generation is at the core of most Korean family holidays. Among these is the celebration of a hundred days after the baby's birth. The belief is that if a hundred guests share in the banquet that day, the child will live a happy and long life. When a baby is 1 year old, he or she may foretell his or her future destiny. For that purpose, the parents place some different toys before the child. If the baby chooses the money, it will be successful in business in the future; if a book is chosen, the future adult will be lucky in science and intellectual pursuits, and so on.

Since Korean marriage is considered to be a union of two kinships, special gender behavior patterns are honored during the wedding ceremony. The bride and groom stand face-to-face, bow to each other, ritually clean the hands, exchange goblets of wine, and drink from the cup. Usually, Korean families remember and commemorate four times a year at least four generations of their ancestors who are known by name and profession.

The sexual attitudes and customs of Tartar and Korean ethnic minorities in Ukraine, like any ethnic minority in any country, are continually undergoing change and adapting, being influenced by the majority culture and, at the same time, more or less influencing and changing that majority culture.

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<sup>\*</sup>*Editors' Note*: Because of differences in transliterating certain Ukrainian characters and the anglicizing of names since this chapter was first written, names spelled with *G* or *H* in English appear alphabetically as the authors originally spelled them. For example, the first author of this section, T. V. Hovorun, originally appeared in volume 3 of the *IES* as "Govorun."

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