

Give your vagina a choice

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They're not widely available in Australia and, at five dollars a pop, they're not cheap. They've also had a bit of bad press. Some say they're awkward to insert. Others complain about the noise they make.

So, why then has the female condom become a priority area of focus for NAPWA's women's network?

'It's simple,' explains Katherine Leane, who chairs the network. 'Finally we have an HIV prevention tool that gives women a choice and the opportunity for equity of power when negotiating safer sex.'

So, what is the female condom?

The female condom is like a large (17cm long) male condom with flexible rings at each end – one open and the other closed. It's made of polyurethane. The material is just as strong as the latex used in regular male condoms, however, both men and women report it has a more natural feel because polyurethane transfers more heat.

With up to a 95% success rate, female condoms are also a highly effective form of contraception. And because they extend outside the body, they can provide even more protection from some sexually transmitted infections ([STIs](#) [1][Sexually Transmissible (or Transmitted) Infection] Infections spread by the transfer of organisms from person to person during sexual contact. Also called venereal disease (VD) (an older public health term) or sexually transmitted diseases (STDs).) than the male condom.



[2]When inserted correctly and used with sufficient amounts of lubricant, they can also be incredibly sensual.

Although the experience varies from person to person, some women claim that wearing the female condom feels like wearing nothing at all and a lot of men say it's more comfortable than wearing a condom themselves. The roomier shape creates added sensation for the woman – stimulating more areas during sex – and men describe added stimulation from the wrinkles inside the condom.

The female condom can be inserted up to eight hours before sex which allows for more sexual spontaneity. And unlike the male condom, it doesn't rely on an erection to function properly. If interrupted, sex can resume without the need for another condom. And the female condom doesn't need to be removed immediately after ejaculation.

Some women and men adapt the female condom for anal use (but we should point out that it has been designed for vaginal use only). We should also mention that male and female condoms should never be used together. When the two condoms are combined, the friction that results can cause either or both condoms to slip or tear, and/or push the outer ring of the female condom into the vagina. Despite hearing stories to the contrary, female condoms are not designed to be reused. Although, at three to five dollars a piece, we're not surprised people attempt it.

The female condom in Australia

The female condom has been around for about ten years. Many women from culturally and linguistically diverse backgrounds, particularly African countries, are familiar with using them but find them difficult to source and afford

in Australia.

A few chemists and sexual or women's health centres stock them, as do some universities, but currently the only reliable place to buy them is at family planning clinics.

'We'd like women to start requesting them at their local pharmacy. And for the manufacturer to provide free samples – a promotional pack containing a female condom, a male condom and some lube would be a great idea – so a woman and her partner can compare the two.'

'We are well behind the eight ball in Australia,' says Katherine.

'As a national women's advocacy network we are concerned about their limited availability and utilisation and believe there are many sub groups of women in Australia who would benefit from improved access.

'None more so than sexually active teenagers and young women,' she added.

This suggestion is supported by the findings in a recent report completed for the Department of Health and Ageing into the attitudes, beliefs and behaviours of sexually active young Australians aged 16 to 29.

While male condoms were named by the group as their most common practice, nearly half the respondents also claimed they did not use one the last time they had sex.

The report reveals that among females the most common reason why a condom wasn't used was the availability of another form of contraception. For most people it seems safe sex means condoms but more often to prevent pregnancy rather than infections.

This strongly suggests the need for an alternative to the male condom – one that provides equivalent contraception and protection. And also one that can be instigated by the female.

'Many of us are mothers of sexually active teenagers and young adults,' says Katherine.

'We listen to their stories and experiences and get concerned that HIV and STIs are not high on their agendas. We worry that they tend to just listen to friends and are not accessing accurate information.

'In order to make informed decisions the source is vital. We also want to highlight to the policy makers the importance of listening to our young generation,' she concludes.

The Ministerial Advisory Committee on Blood Borne [Viruses](#) [3]A small infective organism which is incapable of reproducing outside a host cell. and STIs is currently reviewing the national strategies under the direction of a new chair, Professor Michael Kidd. Younger people are definitely a key focus for the new strategies, and Michael is also keen for them to be involved.

'Not just to be there to gain experience . . . but to be there to have a very real voice, and to inform the rest of the committee about what the important issues are for young people in Australia around these particular conditions,' he says.

'We're dealing with a very significant generational change, particularly around the impact of the internet. We know that the majority of people under 30 in Australia tell us that they get most of their important information through the internet, rather than from other sources. And, of course, this is going to be the way that many of the important health messages need to be disseminated as well.'

So, as new players and tactics are introduced into the HIV prevention game, perhaps it is also timely to introduce a new weapon.

NAPWA's women's network believes that the female condom could play a vital role in prevention programs, particularly those targeting young Australians.

The research certainly seems to indicate that younger people are looking for new ways to learn and to look after themselves. So, here's a suggestion: what about an internet-based prevention campaign that offers free female condoms? Simple and it might just work.

Where can you buy the female condom?

Nationally

- family planning clinics
- some sexual health centres, women's health clinics, chemists and universities

Online

- myshopping.com.au
- condomshop.com.au

South Australia

- AIDS Council of South Australia

FEMALE CONDOM PILOT PROJECT

With the assistance of a number of community agencies, Toronto Public Health conducted a pilot study to evaluate the use and acceptability of the female condom.

Participants

One hundred and seventeen women completed the pilot study:

- 41% of these women had a previous sexually transmitted disease and four had tested HIV positive
- 70% of the women who had been pregnant had at least one unplanned pregnancy
- 8% of the women had traded sex for drugs and money
- 71% had personal incomes of less than \$25,000 per year

Findings

- 36% of participants said that if the female condom was free, they would prefer the female condom to the male condom, and would continue to use it.
- Based on prior rates of protected sex, participants reported a 20% increase in the number of protected sex acts using the female condom.
- 78% of the women reported the female condom offered greater control over their sexual health than the male condom.
- Overall, the key ingredient for successful use of the female condom is practice – both privately and with partners.
- Difficulties inserting the female condom can be a barrier to use, but with practice and support, many women and couples are able to overcome these difficulties.
- Cost is a barrier to use. Participants said they could not afford to pay the current drugstore price (\$5 per condom).

Conclusions

- Providing a supply of both male and female condoms, free of charge, is a vital strategy for Toronto Public Health to prevent unplanned pregnancies and sexually transmitted diseases, including HIV.
- Providing effective teaching resources to community groups and health care providers with distribution of the female condom is integral to the success of this prevention strategy.

- [HIV prevention](#)

Links:

[1] <http://www.napwa.org.au/glossary/term/188>

[2] [http://www.napwa.org.au/files/images/female condom instructions.jpg](http://www.napwa.org.au/files/images/female%20condom%20instructions.jpg)

[3] <http://www.napwa.org.au/glossary/term/125>