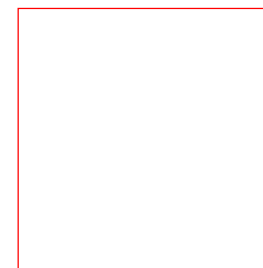
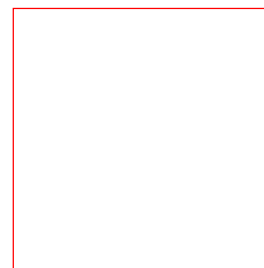
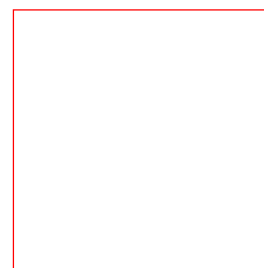


Ideas for action

- Personal questioning:
What would be your reaction to someone who wanted advice about condom use?
What would be your reaction if your wife/husband/girlfriend/boyfriend wanted to use a condom?
- Encourage couples to talk to each other about HIV and reproductive health.
- Train doctors to talk with, listen to, and advise, their patients about sexual behaviour, sexuality and safer sex.
- Promote condom use as fashionable, acceptable and responsible, and as an essential part of HIV/AIDS, sexual health and sex education.
- Make condoms more widely available, ensuring privacy and confidentiality at the point of acquisition and, where appropriate, use peer distribution.
- Advocate condom availability in bars, nightclubs and hotels—wherever people gather to have a good time.
- Advocate condom availability in prisons, barracks, lodgings and other places where men are kept confined for long periods.
- Review and, if necessary, revise policies and legislation that in any way restrict safer sex, condom awareness, or condom distribution or use by sexually active people.
- Ensure the production and distribution of only good-quality condoms.
- Advocate the removal of customs duties and taxes on condoms and the raw materials needed to make them.
- Advocate advertising and radio/TV/press campaigns to encourage condom use.
- Encourage national and international reproductive health, family planning and AIDS programmes, as well as donor agencies, to include condom provision and distribution in their programming and funding priorities.



Condoms and HIV prevention



UNAIDS/Anne Sterck

I care...do you?

World AIDS Campaign 2001



"I care... Do you?" is the slogan for the second year of a two-year campaign intended to create a sustained focus on the role of men in the AIDS epidemic.

Key messages

- The most effective ways of preventing the sexual transmission of HIV are:
 - i) abstaining entirely from sex;
 - ii) practising non-penetrative sex;
 - iii) remaining faithful when neither person is HIV-infected;
 - iv) always using condoms during sexual intercourse.
- Used correctly and consistently, condoms can prevent HIV infection and save lives.
- Condoms are currently the only available means of preventing the sexual transmission of HIV and some other sexually transmitted infections (STIs).
- Condoms exist for both men and women.
- Just because a condom's price is low, or the condom is given away free, it does not necessarily mean that it is of lower quality than a condom sold in a pharmacy, shop or market. Low-cost, socially marketed or freely distributed condoms may also be of high quality.
- Condoms should never be re-used or used after the expiry date on the package.

Facts

As a result of increasing awareness about AIDS and STIs, many people in longer-term relationships are changing their sexual behaviour. Some people are abstaining from sex until after they are married; many have decided to remain faithful to their partners, and others have started using condoms regularly and consistently for protection. However, large numbers of people have yet to adopt safer sexual behaviour through correct condom use. The spread of AIDS would be slowed if more people used condoms.

It is estimated that between 6 and 9 billion condoms are distributed around the world every year. Since the beginning of the AIDS epidemic, condom distribution has greatly increased. In most urban areas, and in many rural communities, men and women can obtain good-quality condoms free or at low, subsidized prices. However, recent analyses of condom use for HIV prevention in developing countries show that there is a growing but unmet demand for male and female condoms. In other words, the world's population of sexually active men and women needs more condoms.

Quality-assured male latex condoms, when properly used, are a proven, effective means of preventing the sexual transmission of HIV, some other STIs and pregnancy. Male latex condoms cannot be used with oil-based lubricants because such lubricants can weaken the condom, causing it to break. Male condoms are inexpensive, highly reliable, life-saving devices with no side effects. However, for many people, access to male condoms is difficult and, although condoms are relatively inexpensive, the cost is still prohibitive for low-income groups.

Condoms made especially for women (female condoms), are made of polyurethane and can therefore be used with both oil- and water-based lubricants. However, they are more expensive than male latex condoms. They are now available to a small number of people in some 70 countries. Studies have shown that they are well accepted by both men and women. The female condom is designed to give women more control over condom use. It, too, offers protection against HIV infection, other STIs and unwanted pregnancy. One of the great drawbacks with the female condom (apart from the fact that it is not readily available everywhere) is that it is costly. The subsidized price varies from country to country but is generally around US\$1.

Just because a condom's price is low, or the condom is given away free, it does not necessarily mean that it is of lower quality than a condom sold in a pharmacy, shop or market. Nor is high price in itself a guarantee of quality. The important thing to look for is a guarantee of quality from the distributor. Many developing countries manufacture excellent inexpensive condoms.

Issues

Obstacles to effective and widespread condom use include:

- Difficulties in obtaining condoms because of high prices, restricted availability, and lack of privacy for those wanting condoms at the point of distribution.
- Reluctance to use condoms because some people believe that condoms reduce pleasure or disrupt spontaneous sex.
- Social disapproval, including cultural beliefs and norms that restrict or stigmatize condom use. In some cultures, condom use is perceived as unmanly; in others, it is very difficult for women to propose condom use because it may imply doubt as to their husband's fidelity.
- Inadequate, inaccessible or inappropriate health counselling and facilities. In many places, facilities for family planning, as well as counselling on, and treatment of, HIV and other STIs, do not exist. Alternatively, where facilities do exist, access to them may be difficult due to the negative attitudes of staff, a lack of discretion or anonymity, inconvenient locations or opening hours, or the costs involved.
- Lack of control over condom use, due to unequal power relations between men and women, or lack of negotiating skills between partners when discussing condom use.
- Fear of condoms being introduced into a stable relationship due to the issues of fidelity and trust that may develop between partners, as a result.
- Lack of awareness (especially among sexually active young people) of the effectiveness of condoms in preventing the transmission of HIV/AIDS and some other STIs, as well as pregnancy.
- Poor-quality condoms, or condoms that have been improperly stored, are more likely to break and give people a false impression about condoms in general.
- Insufficiently strong condoms for anal intercourse.
- Difficulties in sustaining safer sex practices. Despite initial successes in many prevention campaigns, certain groups—particularly men who have sex with men—are practising safer sex less regularly. This is partly because people are tired of having safer sex and, with the advent of antiretroviral therapy, they believe that a reduced viral load reduces the risk of transmitting HIV through unsafe sex. They may also believe, mistakenly, that there is no need to have safer sex now that antiretroviral therapy is available.