



The Female Condom

Introducing female-initiated methods

What have we learned from history & what does it mean for microbicides

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May 2002

Microbicides 2002



What was said in 2000/1

- UN Target to reduce new HIV infections 25% in 15-24 year-olds in most-affected countries by 2005, and globally by 2010
- Women are at greatest risk
- UN agencies highlight urgent need to “intensify efforts to prevent HIV and STIs in women by providing women and girls with female-initiated protection methods”
- UNGASS Declaration calls for increased support for the female condom and microbicide development



Products and Protection

- Our focus is not – or at least should not be – on the products
- Our collective goal is to have more options for women and men to protect additional sex acts to prevent new infections
- The technology is the means to the end



Challenges

- How to recognize the urgent need to develop more options to prevent HIV without undermining interest, enthusiasm or funding for existing, available methods.
- It should not be “either/or”; we can and must do both.



New method introduction

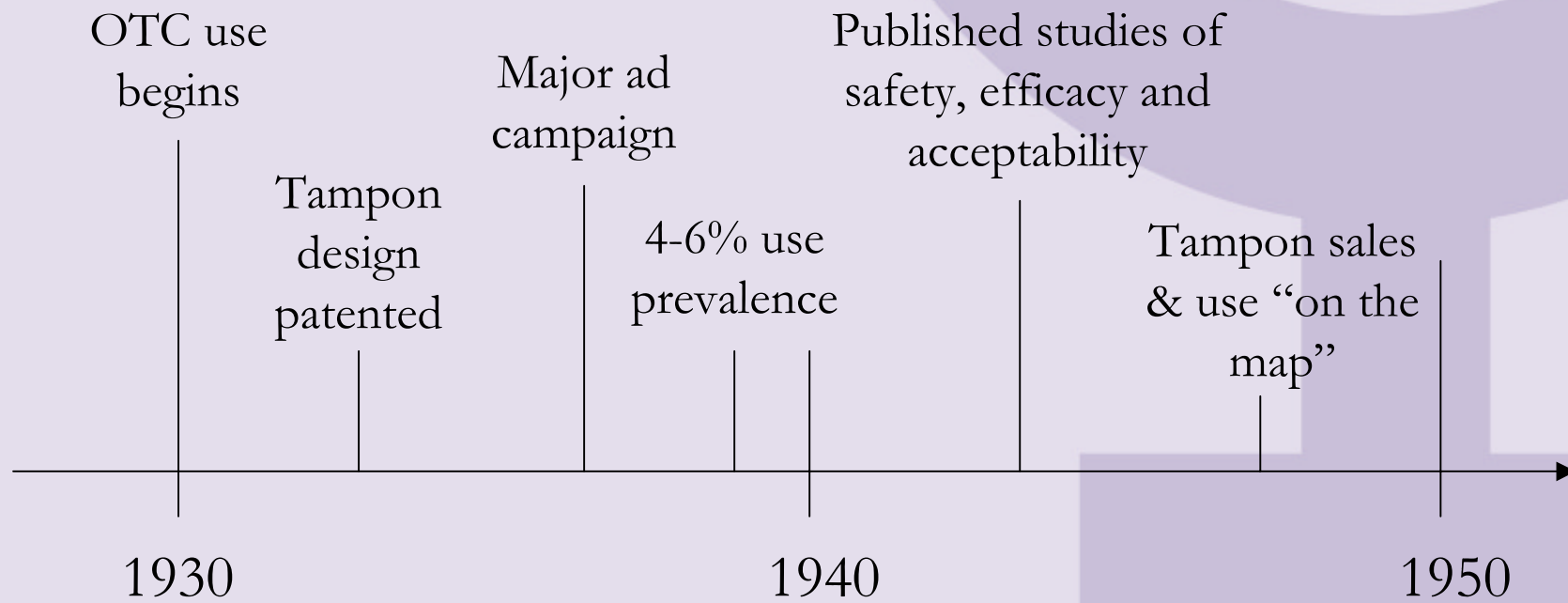
Historically, introducing new technologies have been hampered by:

- Provider bias
- Limited data
- Doubts about potential market size and actual use
- Limited infrastructure for distribution & promotion
- Limited resources for – or investment in – training, communication and outreach.

These issues are not unique to any one product.



The Tampon in America



Source: Latka, Journal of Urban Health, 2001



What the future holds?

- “Women won’t use that.”
- “That’s not what I meant when I said I wanted a microbicide.”
- “I don’t have time to promote that.”
- “I am not convinced of its effectiveness.”
- “*Our women* don’t insert things in their vaginas.”



What the future holds?

- “*This* microbicide is not the one; let’s develop something better.”
- “It’s not for everyone.”
- “Yuck – it’s messy!”
- “We need acceptability and/or effectiveness data from our country.”
- “But there is no real demand – it is just novelty.”



What the future holds?

- “Not everyone is using it.”
- “Not enough people are using it.”
- “People aren’t using it consistently.”
- “It’s a sex worker product.”
- “My partner doesn’t want me to use it.”



Key lessons from the FC

- Adding options increases protection
- Acceptability changes over time
- Practice make perfect
- One person's product advantages, are another person's disadvantages – different strokes for different folks



Key lessons from the FC

- Some assumptions about sex, sexuality, demand, acceptability, likes and dislikes, etc. are true, and...
- Some are not.
- Demand use
- Access use



Key lessons from the FC

- Do not over-promise or create unrealistic expectations.
- “Consistent” condom use is the ultimate, but not all women (and men) need to (or will) use any one product all the time to have public health impact.



Key lessons from the FC

- It's not the product, it's the programme!
- A vaccine – or a microbicide, or a female condom – that sits on the shelf is useless.
(adapted from Jonas Salk)
- The science is easy...
- ...compared to getting the product distributed, accepted and used.



What we need now for all methods

- Trained providers
 - address provider potential bias
 - encourage “practice makes perfect”
 - does not over-complicate product use
 - incorporates anatomy, sexuality, communication & negotiation
 - respects women and provides opportunities for control & empowerment
- Potential users with knowledge of their bodies
- Potential users with communication and skills
- Outreach, distribution, education & training for men
- Network to deliver product and – more importantly – message, outreach, support



Expanding access

An investment of \$10 million today would

- Protect no fewer than 20 million sex acts now.
- Reduce the unit cost of the female condom by over 25%.
- Provide programme, financial and technical support to dozens of country, regional and community programmes.
- Build a solid foundation of programmes and networks of providers, programmers, policy makers, users and partners for the introduction of microbicides.



Final thoughts

“The story of the tampon demonstrates that a method does not have to be adopted by all users immediately to play an important role, and that even initially controversial methods can become widely accepted as mainstream. The early history of the tampon sheds perspective, and hope, on where we stand with the female condom. While much-needed work is under way to develop microbicides, we should take advantage of the fact that the female condom is already available and promote it to those in need now.”

(Latka, Journal of Urban Health, 2001)



Final thoughts

- Don't want an article in 20xx comparing tampons, FCs and microbicides