

Dual Protection: Prevention of Unwanted Pregnancy and STIs/HIV

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WHO



What is DUAL PROTECTION?

Protection from both unwanted pregnancy AND STI/HIV through:

- Consistent and correct use of male and female condom
- Use of condom and other contraceptive method



Dual Protection is particularly important for...

- Sexually active adolescents
- Men who put themselves and their partners at risk because of their sexual behaviour
- Commercial Sex Workers
- Women or men at risk because of the high-risk sexual behaviour of their partners
- Individuals, or partners who have an STI and/or HIV
- Sexually active people in settings where the prevalence of STIs and/or HIV is high



A Dual Protection Strategy implies:

- Equal attention to men, women and adolescents
- Equal attention to disease and pregnancy prevention needs
- Assisting clients in determining actual HIV/STI risk and in making the best decisions



Dual Protection requires:

- Acceptance by family planning providers of the condom as effective contraception
- Availability affordable, good quality condoms
- Counseling on the importance of correct and consistent condom use



Why Condoms?

Male latex condoms, *when used correctly and consistently*, represent the only technology so far that has been proven to be highly effective in preventing the sexual transmission of HIV and unwanted pregnancy at the same time



What must Family Planning Programs do differently?

- Promote condoms within their programs
- Reach out to men within clinical and community settings
- Reach out to adolescents
- Address provider bias



How are providers “Biaised ”?

Providers tell clients...

“Condoms are very effective against HIV/STIs but not as effective as other methods for pregnancy prevention. Some other methods like sterilization, IUDs, and implants are more effective than condoms.”



Why are providers biased?

Because condoms are associated with relatively higher pregnancy rates in typical use compared with other contraceptives.

However...



Provider bias and condom effectiveness

FACT!

Risk of acquisition of some STIs is several-fold larger than risk of pregnancy



Provider Bias & condom effectiveness

Therefore condoms, if used correctly and consistently to be effective against STI must also be effective against pregnancy



Concepts of exposure

Although transmitted by same behaviour (penile-vaginal intercourse), outcomes “pregnancy” & “genital infection” have different epidemiological profiles.



Concepts of Exposure

Difference 1:

The percentage of population at risk



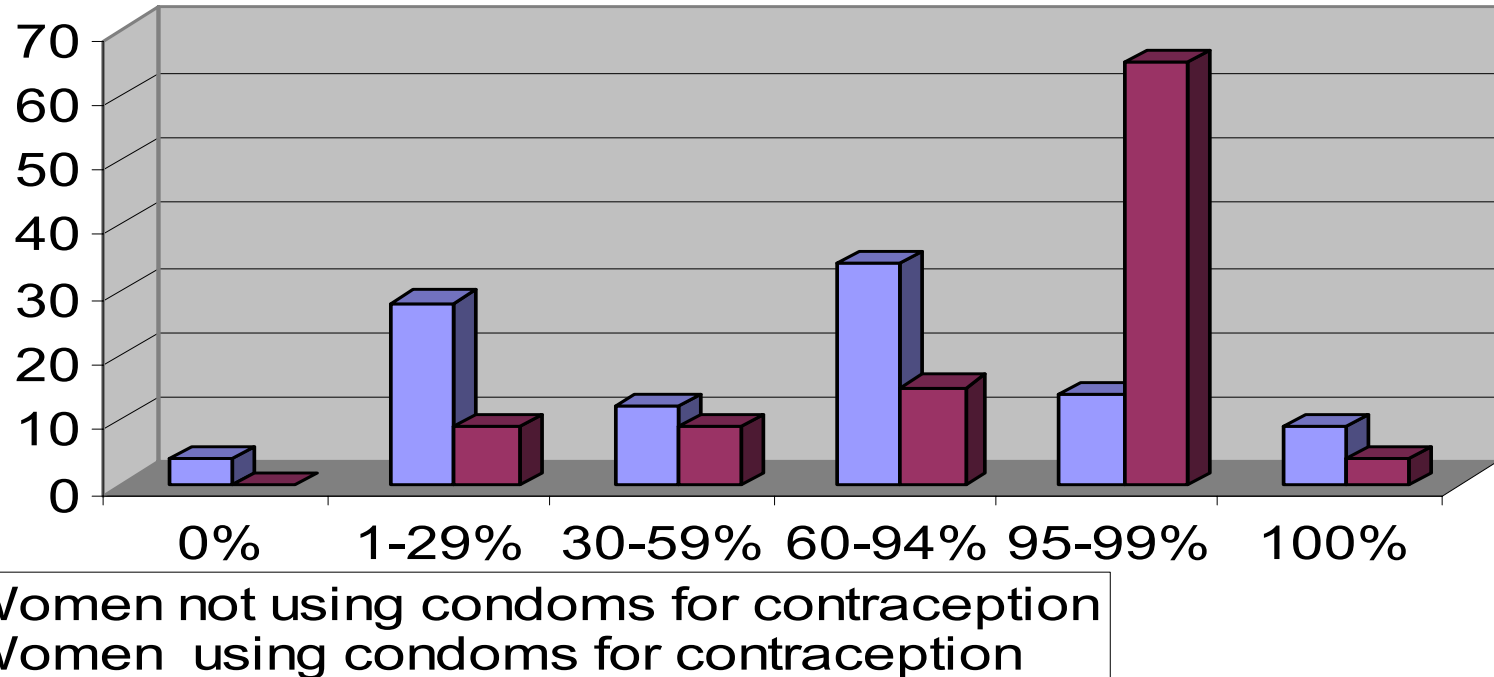
Concepts of Exposure

Difference 2:

The rate of transmission per each coital episode



Condoms Used More Consistently for Contraception



Source: Lippincott Williams & Wilkins, 2001



HIV-1 infection among sex workers of Addis Ababa, Ethiopia

- Cross sectional survey of 374 sex workers
- sex workers using condoms for contraception were:
 - more likely to use condoms consistently (65% versus 24%, respectively; $P < 0.001$)
 - less likely to be HIV-infected (55% versus 86%, respectively; $P < 0.001$).

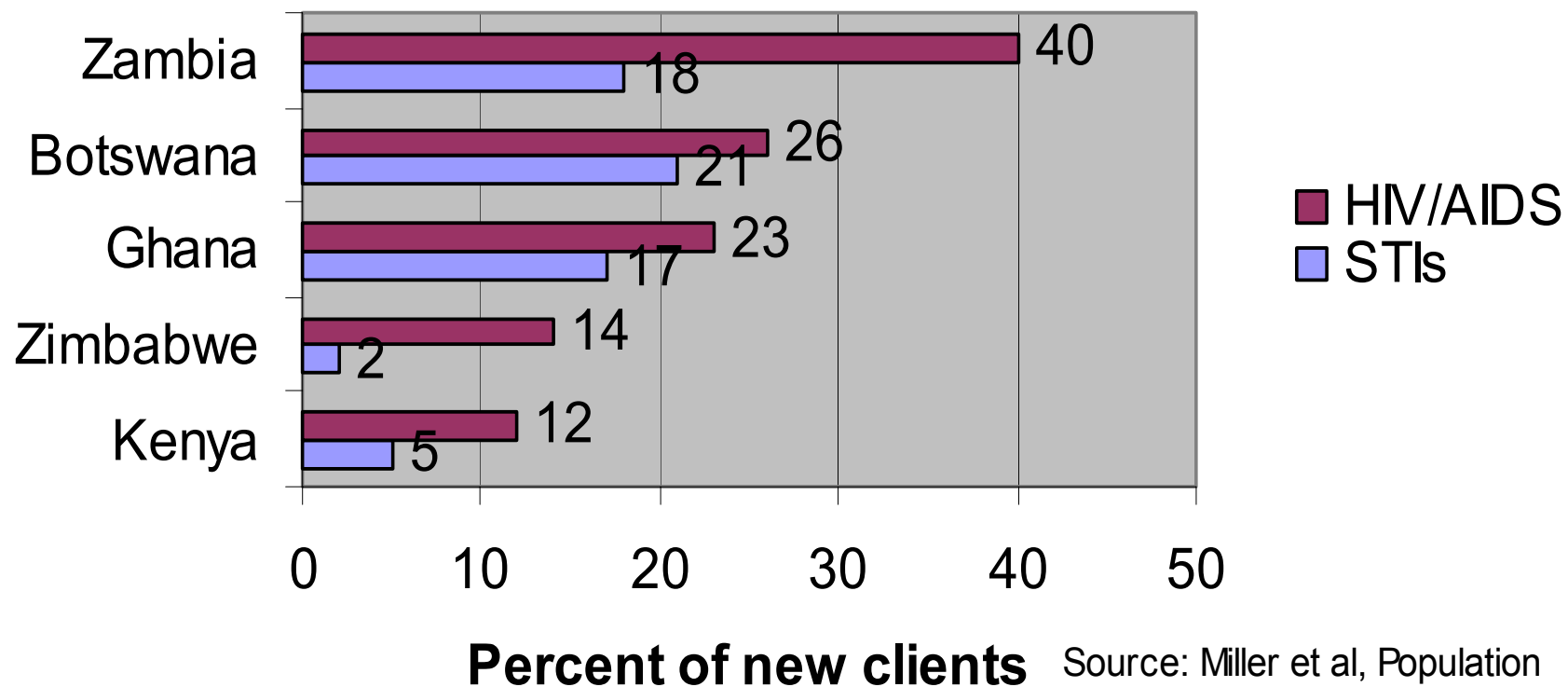


Promote Condoms within Programmes

- Stop decrying the condom as an ineffective method of contraception
- Change provider and policymaker attitudes
- Promote true informed choice, based on complete information
- consider gender issues and power dynamics in negotiating condom use



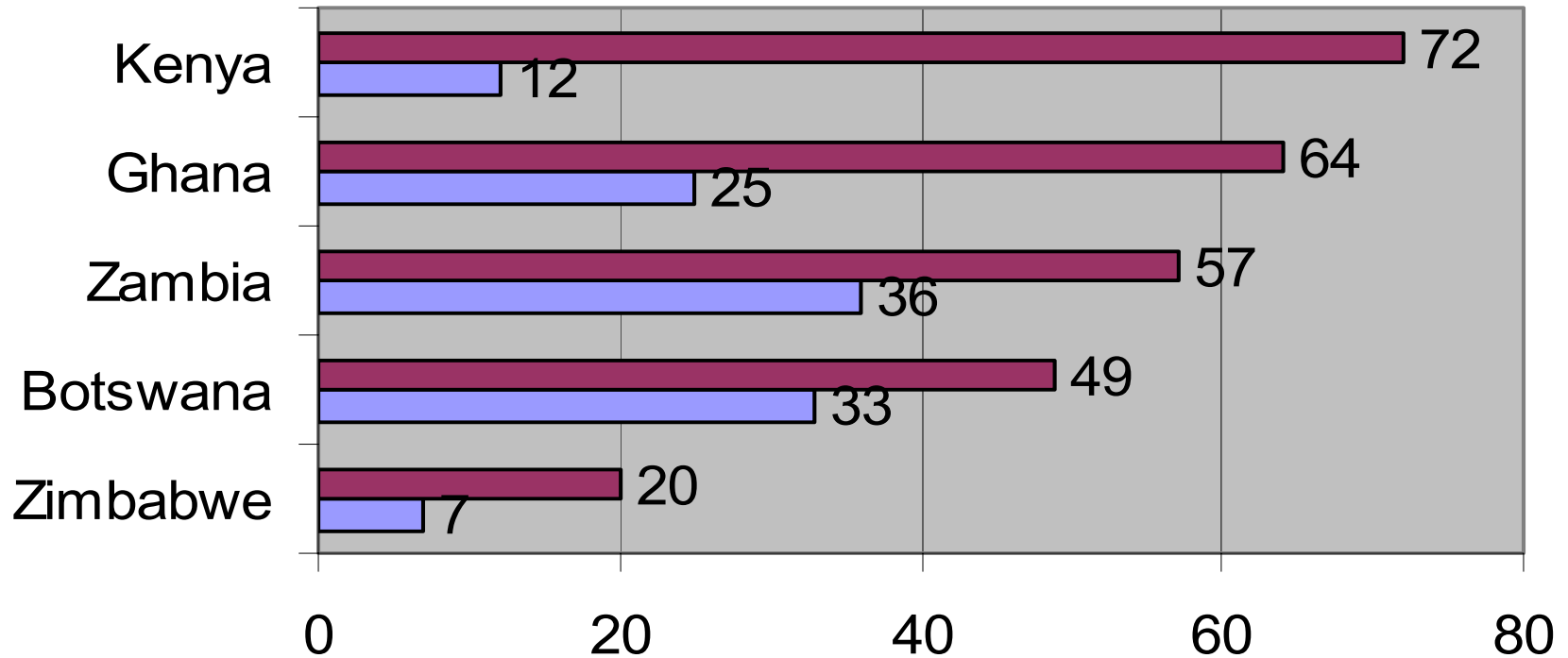
Percentage of New Family Planning Clients with whom HIV/AIDS and STIs were discussed



Source: Miller et al, Population Council, 1998



Percentage of New Family Planning Clients Hearing about condoms as Protection Against Pregnancy or STIs



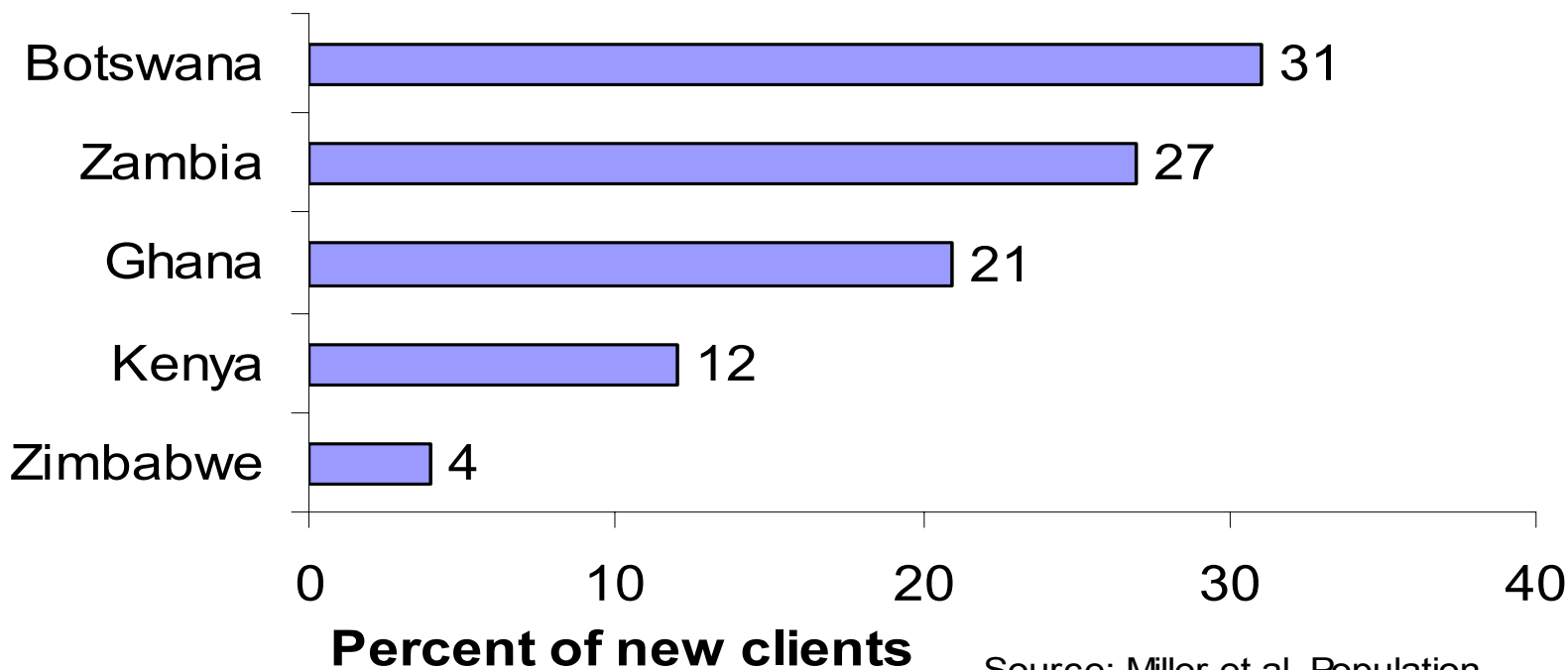
Percent of new clients

■ Condom as STI protection ■ Condom as pregnancy protection

Source: Miller et al, Population Council, 1998



Percentage of New Family Planning Clients Hearing a Dual-Protection Message in Relation to Condoms



Source: Miller et al, Population Council, 1998

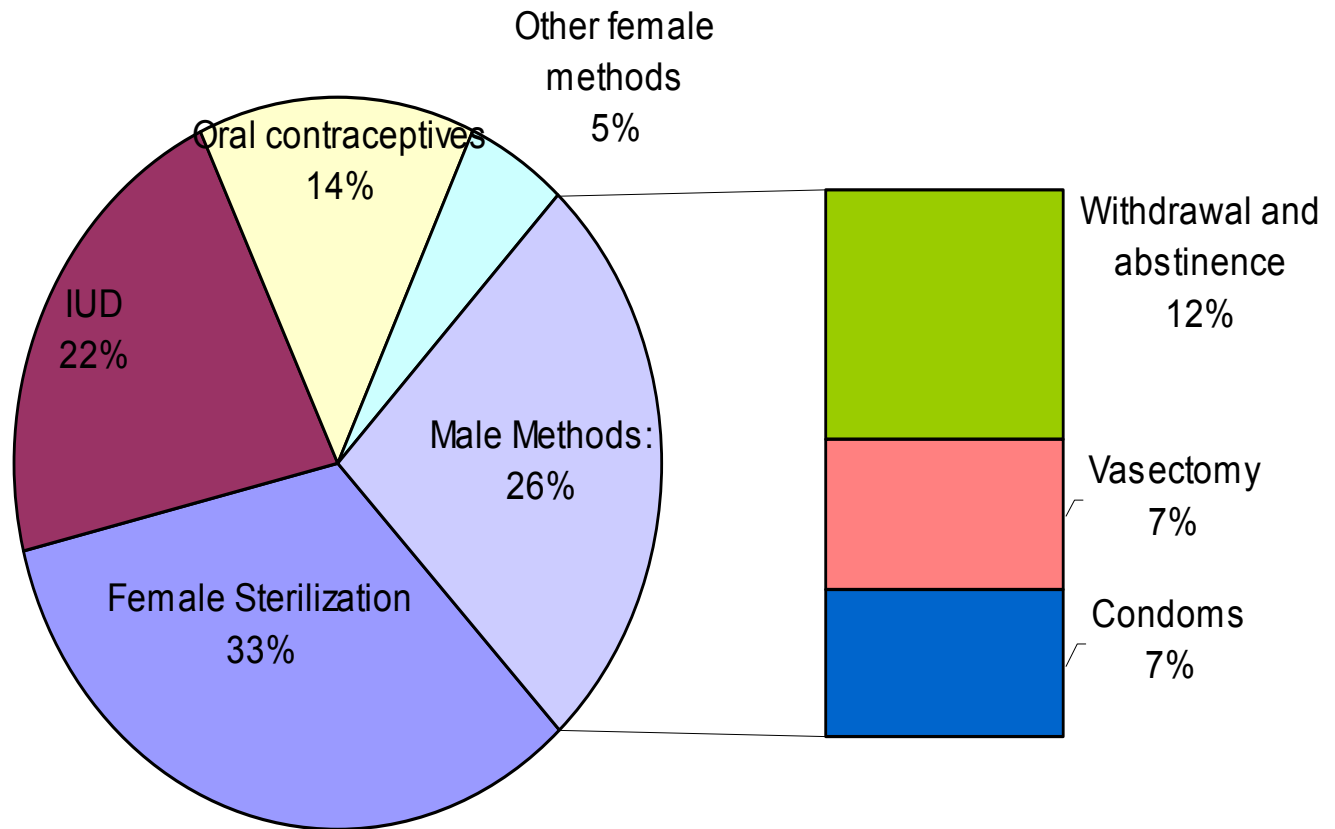


Involving Men in Prevention

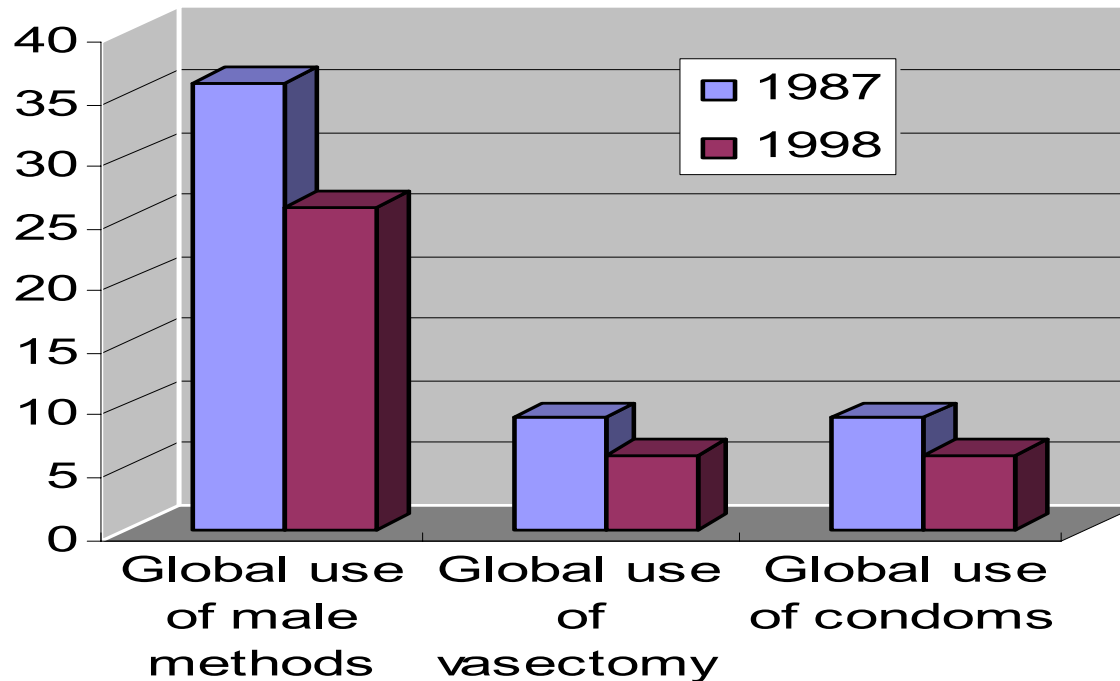
- Critical for effective STI/HIV prevention
- FP programs can reach men by:
 - appealing to their self interest in avoiding STIs
 - promoting STI prevention for men
- Consistent condom use has advantages for men
- Helps women
- Role in partner notification



Male Methods: 26% of Global Contraceptive Use



Use of Male Methods Declining as Proportion of Overall Use



Address Objections to the Condom

- Association with commercial or illicit sex
- Fear of loss of sensation or loss of erection
- Providers, peer educators and social marketing campaigns can address these fears



What Do Men Know?

- In 21 of the 22 DHS surveys, at least 90% of men knew of AIDS; most knew of condoms
- In most of these countries, only 25% - 45% knew that condoms can prevent AIDS

Source: Gardner, *Popul Report* 1999; H (9)



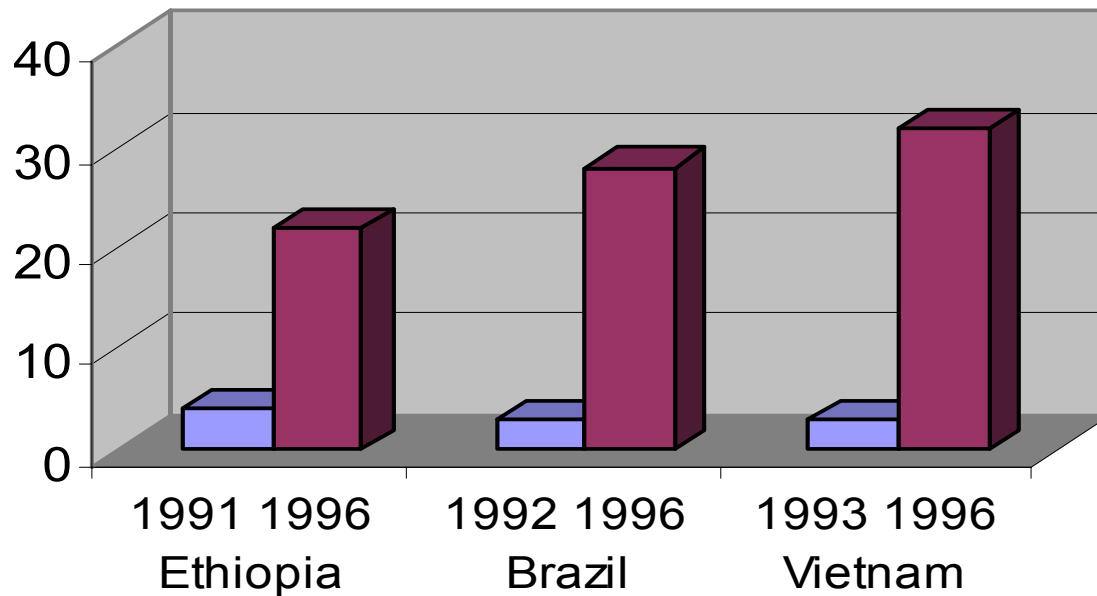
What Motivates Men To Use Condoms?

Determine why men DO use condoms
instead on focusing only on why men do not
use them



Condom Promotion and Access

Condom promotion can increase condom use
Annual Condom Social Marketing Sales



DKT International, 1992-1996 in World Bank, 1997



A special application for dual protection

Preventing HIV in mothers and infants, or PMTCT



Four-pronged Strategy for PMTCT Prevention

Prong 1:

Prevention of HIV in women, especially young women

Prong 2:

Prevention of unintended pregnancy in HIV infected women

Prong 3:

Prevention of transmission from HIV infected woman to her infant

Prong 4:

Care for infected women, their infants and families



UNGASS Goals for HIV in infants

- 20% reduction by 2005
- 50% reduction by 2010
- with nevirapine (47%) effective, reaching these goals through Prong 3 alone is not possible



Prong 2 emphasis is needed!

- In ANC, referral to postpartum FP
- for positive women, advice to choose most effective pregnancy prevention
- for negative women, advice to choose dual protection
- linking testing and counseling with these other services



Conclusion

- Dual protection is vital but under-promoted
- conceptual, traditional, programmatic hurdles to its promotion
- critical opportunities are lost
- viewing services from the client perspective, not the provider perspective

