

Female Condoms: What Do They Mean For Women?

What are female condoms?

The female condom is a thin pouch that a woman can insert in her vagina before sex to prevent pregnancy and sexually transmitted infections (STIs), including HIV. It is the only proven, female-initiated method of HIV prevention currently on the market. Many women find that their ability to negotiate safer sex with a male partner is enhanced by having access to female condoms because it enables a woman to say, "If you don't want to use your condom, I will use mine." Some couples prefer the female condom to the male condom because it is not constricting, it transfers body heat and the external ring may provide increased stimulation. Female condoms can be used vaginally or anally. The World Health Organization (WHO) and the US Food and Drug Administration (FDA), however, have only approved them for vaginal use, not for anal use.

How does the female condom prevent the spread of HIV?

Once inserted, the female condom physically blocks semen from entering the woman's body. The model most widely available is called the FC Female Condom. First introduced in 1988, the FC1 was made of polyurethane (a thin plastic). A newer model, the FC2, was introduced in 2005 and is made of nitrile rubber (the same material used to make surgical gloves). Both models have flexible rings at each end. The user pinches the inner ring together to slide the condom deep into her vagina. When released, the ring opens and holds the condom in place inside the vagina.



For anal protection, the user may remove the inner ring, add lubrication inside the condom and then drape it over the insertive partner's penis. It will be loose on the penis, unlike a male condom. So it will stay in the rectum throughout intercourse, and is simply removed afterwards.

The FC is sold publicly and distributed through public health programs in 108 countries¹ under various brand names. You may see it branded as *Reality*, *Femidom*, *Dominique*, *Femy*, *Myfemy*, *Protectiv* and *Care*.



The Reddy Female Condom was introduced in 2002. It is made of latex and includes a soft polyurethane sponge inside. A firm, flexible outer ring holds it in place. It is marketed as *V Amour* in Africa, *L'amour* in South America and *VA – WOW* in the UK, Spain, Germany, Brazil and India.

What evidence is there that female condoms work?

Based on laboratory and clinical evidence, the US FDA has approved the FC1 and FC2 as effective when used correctly and consistently. WHO includes them on its "essential products" list of supplies distributed by United Nations (UN) agencies. The FC1, FC2 and Reddy female condom have all been approved for distribution in Europe. The Reddy female condom has not been approved by the US FDA and is not on WHO's essential products list. But it has been approved for sale in Brazil and India, as well as Europe.

What is happening now?

In 2008, the Female Health Company (manufacturers of the FC1 and FC2) sold 34.7 million female condoms². While that sounds like a large number, female condoms are still out of reach for most women. About 10 billion male condoms are distributed globally each year³ and even that number does not meet the worldwide need for them. Almost all (99.6%) of the condoms distributed globally are male condoms. About one third of one

¹ Female Health Company website home page, available at <http://www.femalehealth.com/>

² AVERT, "The Female Condom" fact sheet, available online at <http://www.avert.org/femcond.htm>

³ Female Health Company, "Female Health Company Receives FDA Approval for FC2 Female Condom" Press release issued on 11 March, 2009, available online at http://www.femalehealth.com/InvestorRelations/investor_pressreleases/press_2009_03_11_FDA_FC2_Approval.pdf

percent (.35%) are female condoms. **Only a tiny fraction of the women worldwide who could benefit from access to female condoms are actually getting them.** Several factors cause this:

- 1) **High price:** The new FC2 costs about one third less to manufacture than the FC1. But its public sector price (paid by public health agencies) is US 60 cents. Male condoms cost less than US 04 cents⁴. The public sector price of another women's condom, now under development, may be as low as US 30 cents.
- 2) **Perceived and real acceptability issues:** Female condom uptake has been slow and many people claim they are cumbersome, hard to use, partners do not like them, etc. The FC2 was re-designed to address some of these concerns, as well as make the FC2 less costly to produce (enabling the purchase price to be lowered). Unfortunately, health care providers tend to be biased against the unfamiliar device and people are less likely to use a product if it is not recommended to them. Studies done in more than 40 countries showed that once people become familiar with the female condom, it is viewed as acceptable by people from a wide range of social and economic backgrounds and ages.⁵ Most user concerns about the female condom can be resolved with programming that positively introduces the product to both providers and potential users; makes it affordable; and encourages women to practice inserting and removing it until they feel comfortable with using it.
- 3) **Not enough donor and policy-maker support:** Higher cost and claims that women "do not like" female condoms have led to low interest among some major donors and governments. They are reluctant to fund large female condom purchases and the programming needed to assure good uptake of the product.
- 4) **Discomfort among "gatekeepers"** such as health care providers and HIV and AIDS programme implementers: In many countries, health care providers, HIV and AIDS programmers and other public health gatekeepers share the wide-spread public discomfort with talking about a product that is used vaginally. Discussion of how it is inserted and used --and of female sexuality generally -- raises taboos that are difficult to overcome⁶.

What advocacy needs to be done?

Strong advocacy for the female condom, coming up from the community level, is needed to stimulate demand and increase access and availability. To help get this advocacy going, you can:

- **Develop an advocacy campaign** to demand that your government:
 - include female condoms in its commodities purchasing plans.
 - fund programming that effectively introduces and promotes female condoms in HIV prevention and reproductive health programs.
- **Advocate for the inclusion of female condoms** in your country's
 - National Strategic Plan used to guide country-level purchasing and programming decisions
 - Country Operational Plan submitted to the Global Fund to Fight AIDS, TB and Malaria.
- **Ask your government to join the UNFPA's Female Condom Initiative** (part of their Comprehensive Condom Programming Initiative) and collaborate with them on developing a national campaign.
- **Join the Prevention Now! Campaign** – which is working to support and catalyze efforts to increase female condom access. For more information, see www.preventionnow.net.

⁴ Associated Press, "New version of female condom touted", issued 19 April, 2009. Available online at <http://www.msnbc.msn.com/id/30250550/>.

⁵ UNDP/UNFPA/WHO/World Bank Special Programme of Research on Human Reproduction. *The Female Condom: A Review*. Geneva: World Health Organization, 1997; Cecil H, Perry MH, Seal DW, et al. The female condom: what we have learned thus far. *AIDS and Behavior* 998:2(3):241-56.

⁶ Global Campaign for Microbicides and UN Coalition on Women and AIDS, "Observations and Outcomes from the Experts' Meeting on Female Condom, December 10, 2004" available online at <http://www.global-campaign.org/clientfiles/FemaleCondomMeeting-Dec2004.pdf>.