

A qualitative study of the viability of usage of the female condom among university students

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> (Recibido 20 de diciembre 2004/ Received December 20, 2004) (Aceptado 26 de abril 2005 / Accepted April 26, 2005)

ABSTRACT. The objective of this qualitative study is to assess the viability of the use of the female condom among Spanish university students. To reach this objective, we adopted a qualitative research approach. This is the first research on the viability of female condom use using a Spanish sample with young adult participants. Four groups were formed, consisting of sixteen individuals with an age range between 18 and 24. Two of these groups were formed exclusively of women, one group solely of men and a fourth group was mixed. Discussion themes for the groups were as follows: Image of, knowledge about, access to and availability of the female condom. The results demonstrate that gender and type of couple (steady vs. casual) condition the use of the female condom. Our research also confirms that knowledge and experience gained by young people people in the use of the male condom will tend to bias them unfavourably against the female condom in favour of he more familiar male one.

KEYWORDS. Female condom. Gender. Type of couple. Discussion groups. Qualitative study.

RESUMEN. El objetivo de este estudio cualitativo es evaluar la viabilidad del uso del preservativo femenino en estudiantes universitarios españoles. Para dar respuesta a dicho objetivo se recurre a una metodología cualitativa. Este es el primer estudio en el

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que se aborda la viabilidad del uso del preservativo femenino en España en el colectivo de jóvenes. Se formaron cuatro grupos en total de 16 personas con un rango de edad entre 18 y 24 años. Dos de estos grupos estaban formados exclusivamente por mujeres, otro grupo por hombres y un cuarto grupo mixto. Los temas de discusión para los grupos fueron los siguientes: la imagen, los conocimientos, el acceso y la viabilidad de uso del preservativo femenino. Los resultados demuestran que el género y el tipo de pareja (estable *vs*.casual) condicionan el uso del preservativo femenino. Esta investigación también confirma que los conocimientos y la experiencia acumulada en relación al preservativo masculino más familiar sesga favorablemente su mayor uso en detrimento del femenino.

PALABRAS CLAVE. Preservativo femenino. Género. Tipo de pareja. Grupos de discussion. Estudio cualitativo.

RESUMO. O objectivo desta investigação é avaliar a viabilidade do uso de preservativo feminino em estudantes universitárias espanholas. Para dar resposta a tal objectivo recorre-se a uma metodologia qualitativa. Este é o primeiro estudo em que se aborda a viabilidade do uso do preservativo feminino em Espanha num grupo de jovens. Formaram-se quatro grupos num total de 16 pessoas com um leque de idade entre 18 e 24 anos. Dois destes grupos estavam formados exclusivamente por mulheres, outro por homens e um quarto grupo misto. Os temas de discussão para os grupos foram os seguintes: a imagem, os conhecimentos, o acesso e a viabilidade do uso do preservativo feminino. Os resultados demonstram que o género e o tipo de casal (estável ou casual) condicionam o uso do preservativo feminino. Esta investigação também confirma que os conhecimentos e a experiência acumulada em relação ao preservativo masculino mais familiar influenciam favoravelmente o seu maior uso em detrimento do feminino.

PALAVRAS CHAVE. Preservativo feminino. Género. Tipo de casal. Grupos de discussão. Estudo qualitativo.

Introduction

The increase of the transmission of the HIV virus in heterosexual couples has seen a dramatic increase in the last few years in all western societies. In countries with higher numbers of infected people, such as the Sub-Sahara African, which makes up 70% of adults and 80% of children who live with AIDS, heterosexual transmission is the principal means of acquiring the HIV virus. The world-wide percentage of adults and children who live with AIDS reached 40 million in the year 2001 with a total of 5 million new infections in that year, of which 48% of the cases were women, and more than 50% were young adults between the ages of 15 and 24 (World Health Organization, 2001; Vera-Villarroel, Pérez, Moreno y Allende, 2004). In western countries such as the USA and Western European countries, heterosexual transmission is the main cause of the rise in the number of women and young people contracting the HIV virus. Spain, with a population of approximately 40 million, had 62.219 cases of AIDS as of December 31st 2001, making it one of the countries with the greatest number of AIDS cases in Western Europe (Bermúdez y Teva, 2004; EuroHIV. HIV/AIDS Sourveillance in Europe, 2001). With 66.8 AIDS cases per million inhabitants in 2000, second only to Portugal with 95.8. The AIDS virus in Spain is still transmitted in 52% of the cases by the interchange of materials employed for the consumption of injected drugs. However, cases of infection by heterosexual transmission have increased in recent years, rising to 24% by the year 2001 (Spanish Centre of Epidemiologist, 2001) to 40% of cases in women and 20% in men. These figures have increased since 1990, when only 17.5% of women and 5.4% of men contracted the virus through heterosexual relations. The higher number of infected women in the areas most devastated by HIV, and the increment of HIV infection in Western societies, makes it essential to offer widely available, preventative alternatives (for use in heterosexual relationships) which women can more directly control.

Until quite recently, the only way to control sexually transmitted diseases like AIDS was the male condom, originally used as a contraceptive. However, despite the increase in its use, due to the spread of HIV, there are still many people who engage in unprotected sexual practices, especially women, because the condom is a method controlled by men (Choi and Catania, 1996). Therefore, it is necessary to take into account the power imbalance in sexual relationships between women and men (Amaro, 1995). The female condom (passed by the FDA in May 1993) is the only method that women can use by themselves to prevent the transmission of sexually transmitted disease and unplanned pregnancy (Bonuds, Guillebaud, and Newman, 1992; Gollub and Stein, 1993), and it is as effective as any other barrier method (Farr, Gabelnick, Sturgen, and Dorflinger, 1994). The female condom is marketed under the name of Reality in the USA and is known as Femidom in Europe. It is made of polyurethane with a length of 17 cm. It has two flexible rings on both ends: one open to the exterior (the smaller end), which covers the external genitalia; the other, closed in the interior part of the vagina, permitting penile insertion into the vagina. It is lubricated with an inert and non-spermicidal, silicone-based fluid known as dimethicone lubricant. The advantages of the female condom over its male counterpart are numerous: firstly, it is under the control of the woman (Gil, 1995); secondly, it is made of more durable material than latex; thirdly, it is more heat conductive, so it is not affected by heat or humidity; fourthly, it may be used along with other oil-based lubricants; finally, it has only one size and its application does not depend on the presence of an erection (Cecil, Perry, Seat, and Pinkerton, 1998).

Studies on the safety and effectiveness of the female condom have satisfied standards set by European and American governments. More recently Lytle *et al.* (1997) concluded that polyurethane condoms provide a substantial barriers to viral transmission, although this depends on their correct and systematic use (World Health Organization, 1997). In fact, the correct use of the female condom has been estimated to reduce the per-act probability of HIV transmission by 97% and its contraceptive effectiveness does not differ significantly from that of the diaphragm, the sponge or the cervical cap (Trussell, Sturgen, Strickler, and Dominik, 1994). In addition, the contraceptive effectiveness of the female condom is similar to that afforded by male condoms (Pinkerton and Abramson, 1997). Despite all the advantages associated with the efficacy and effectiveness of the

female condom, both in vaginal sex and in anal sex (Inciardi, Surratt, Telles, and Pok, 1999), there still exists little scientific documentation aimed at evaluating the acceptability and viability of its use. The majority of the research has been developed with adult women samples and methodologically rigorous investigations have not yet been conducted. The majority of the existing research has been carried out in Africa, in those countries with a high level of heterosexual infection, where positive attitudes and a greater willingness to put the female condom into use have been recorded (Sapire, 1995; Shervington, 1993). In other studies, however, the results were not so favorable (Hart, Pool, Green, Harrison, Nyanzi, and Whitworth, 1999) in terms of acceptability of the female condom. In western countries, the female condom is little known and not yet widely used (El-Bassel, Krishnan, Schilling, Witte, and Gilbert, 1998; Haignere, Gold, Maskovsky, Ambrosini, and Rogers, 2000; Harrison, Bachman, Freeman, and Inciardi, 2001; Kalichman, Willians, and Nachimson, 1999; Macaluso, Demand, Artz, and Hook, 2000) and few studies have centred on the promotion of its use (Zimmers, Privette, Rosemary, and Ferd, 1999). Additional information is needed before intervention programs to promote its use can be designed and effectively implemented (Cecil et al., 1998). Only a few until now have been developed using adolescent samples (Haignere et al., 2000), and this is the group with the most rapidly increasing infection rates. The conclusion of Haignere et al. (2000) is that in many ways adolescents' reactions to the female condom were similar to those of adult women, but the adolescents' attitudes were more positive than adults.

Although the female condom is a method of contraception initiated by the woman, the man's cooperation is necessary (Welsh, Fekdblum, Kuyoh, Mwarogo, and Kungu, 2001) in its effective and systematic use. As studies demonstrate, partner resistance poses a barrier to female condom use (Choi and Catania, 1996). In using both the female condom and the male condom, communication between both members of the couple is essential. The worldwide campaign year 2000 for the prevention of AIDS, apart from recognizing women and young people as a risk group, has also focused on men's role in the AIDS epidemic, which is spotlighted with the slogan «men make a difference». In fact, more recent research on female condom use has recognized the need to take into account the partners of heterosexual women: namely, the men (Bogart, Cecil, and Pinkerton, 2000; Cecil *et al.*, 1998). This suggests that marketing the female condom needs to be aimed at both sexes, not just at women.

This is the first research on the viability of female condom use using a Spanish sample with young adult participants. The aim of this qualitative study (Montero and León, 2005) is to analyse the viability of the use of the female condom, and to discern attitudes, which can help us to anticipate the use of the female condom among younger people-not only women, but also men. There is a need to carry out studies on the acceptability and viability of the female condom among young men and women from European countries using qualitative methodology. Qualitative methodology makes it possible to understand some of the underlying factors in the use of the female condom, giving us very useful information about an area about which we have little knowledge. This information could lead to subsequent studies using quantitative methodology. Quantitative and qualitative methodology may be used as independent techniques but

combined to contribute to the fight against AIDS (Stall and Ekstrand, 1994). For drawing up this article, we followed the proposal by Ramos-Álvarez and Catena (2004).

Method

Participants

To carry out this research, four discussion groups were formed using sexually active students, who had prior knowledge concerning the female condom. In order to meet these conditions, sexually active volunteers were asked to participate in a study on the prevention of sexually transmitted diseases, to talk about one preventative method: the female condom. The participants accepted voluntarily after being informed about the aims of the study. The study group was composed of 36 university students at the University of Vigo (Northwest of Spain) in the Humanities Department, all with an age range between 18 and 24 years old. At the first meeting, they were given a female condom, together with a set of instructions, and told that they should both study the instructions and use the female condom before the following group discussion a week later. They were also instructed not to talk amongst themselves on said theme, in order to avoid a general consensus. No more information was given.

There were six focus groups: two groups were formed of women (FG1 and FG2), two groups of men (FG3 and FG4), and two groups of students of both sexes (FG5 and FG6). There were six participants per group. The objective of this distribution of the groups was to elicit reactions to the female condom from women and men alone and in a mixed group. The topic given for each group discussion was «the use of the female condom», to be followed by a discussion centred around four central themes: "product image", "information", "access to information", and "willingness to try it out". Each group discussion lasted approximately sixty minutes and was audiotaped and subsequently transcribed and analysed according to each theme.

Results

During the focus group discussions, we attempted to allow students to speak freely on the four topics at hand and we later tried to extract the most salient points from these discussions. The four points under discussion, to recapitulate, were: product image, information about the product, access to information, and willingness to try out the product.

Overall, the comments were more negative than positive with regards to the four topics under discussion. Both male and female participants seemed to feel that the initial impression of the female condom was a negative one that the population in general was very unfamiliar with the product, and that access to it was also quite limited. We were able to observe notable differences on the part of female and male participants, mainly with regards to the use of the female condom. We found that once the initial barriers of the negative first impression, lack of information and access to the product had been overcome, women were more favourable towards using the female condom than men were. By supplying each participant with a female condom, we hoped to overcome any barriers there might be in attaining and properly using them.

The image of the female condom

The disadvantages are related to size and a displeasing appearance: «... the size of it...», «...fiddly...», «...its horrible...» (FG1), «Jesus, how do you put it on?» (FG1), «I'm put off by the shape...» (FG2,) «Complicated», «sophisticated" (FG3)» «A larger male contraceptive» (FG4) "odd", "ugly", "looks like an intestine..." (FG1). These disadvantages are linked to a preconceived image of the condom, conditioned by familiarity with the male contraceptive, and the perception of the sexual act from the male perspective: «When I first opened it, I thought as a man might think, God, the length of it. But in reality, it's made for a woman, for the inside of a woman. Then that's what they say it is, made for a woman, and the size of the penis doesn't matter...but you automatically think that it's a male condom». «Sure, you're thinking what you're going to put up there» (FG2). «Many girls see this and say: My God! But it must be because you're thinking of a penis» (FG1). «The size of the thing!» «Family size!» (FG3). «The thing is, we're used to the other one and this seems strange to us» (FG4).

Notions of the female condom

As always occurs during the process of familiarization with and assessment of any new product, the female condom is constantly compared (generally negatively) to the male condom, which is better known, more familiar, and more widely used. The negative image of the female condom stems from its lack of familiarity: «I think it's fear of the unknown. In all the publications and advertising concerning sexual transmission or contact, the male one, not the female one appears» (FG1). «There's not a lot of information about this type of condom... they always talked about the male condom as the only way to avoid contracting diseases» (FG2). «I remember in high school we had talks on sexuality, and they showed it to us, but the method they emphasized the most was the male condom» (FG1).

Access to the female condom

Access to this type of contraceptive is seen as more difficult because of its cost, its lack of visibility in pharmacies, its non-existence in bars and other public places, and the existence of just one brand on the market. Furthermore, in prevention campaigns, this type of contraceptive is never given out to young people.

Use

Finally, we found the greatest differences in attitudes between the young men and women in this study in regards to the use of the female condom. An important question arose: who should help more to spread its usage, men or women? The men argued that it should be the woman's responsibility, whereas the women said the responsibility should be shared: «Who is really going to take the blame for not using it? I think it's the women, since they're more immediately involved in the whole thing» (FG5, men). «What do you mean by *them*?. It's society's job» (FG6, women). «O.K., but first you've got to get to know it yourselves, to get familiar with it, because one way or another, it's you who are going to be using it... Don't you understand?» (FG6, men).

The men acknowledged that there were advantages to the female condom inasmuch

as it meant taking the responsibility of insuring safety away from them: «Well, easier for me...» (FG3). «The girl has to take the initiative...» (FG3). «The easy part is that with you being a guy, you don't have to worry...». «Let the girls pay, and let them come with it all ready to go ... » (FG3). On the one hand, it seems easier because the man does not need to pay such close attention, but at the same time, this is really no advantage. This arrangement can turn out to be unreliable, as things are taken out of his control. Men's acceptance of the female condom seems to come in large part from the trust bestowed on the female partner, which was reflected by a clear preference to use it within a steady relationship: «This all depends on if you trust the girl, or I don't know, it it's one of those that comes along now and again...or maybe they say they've got a female condom, and what they have there is full of holes, so later they come at you with a paternity suit or something ... » (FG3). «Its all about trust ... » (FG3). "Me... if I could trust someone...yes. But not without trust, no..."(FG3). This contradicts the women's discussion, in which they see it as an element that gives them greater freedom and control over their own sexuality, seeing it as ideal for sporadic relationships: «Greater safety and greater peace of mind» (FG1). «It's something that she buys, she uses...she doesn't have to depend on the other person to use it properly or put it on in time...» (FG1). «Putting it on seems easy enough, and much better at the moment of penetration...the condom seems to ruin the mood, the spontaneity much more...» (FG2). «You put it in beforehand, not in the moment: You don't have to be waiting for the right moment to put it on, and that makes it a lot easier ... » (FG2). «It allows for more foreplay ... »

«...You can put it in a few hours before...». «...I think that for women who are interested in not being infected, if they're having one night stands or something...you're looking after yourself...you don't have to be there talking it over with your partner» (FG2).

At the same time, they are conscious of potential rejection on the part of their partner, normally due to lack of information and trust: «...You look at it in a different way depending on if you're a girl or a guy...». «...You're out at night, you score, and you whip out one of these and they flip...» (FG2). « If you have a one night stand, the guy isn't going to trust it..." (FG2). I see it as a good thing if you're in a steady relationship, one method is as good as the next because there is a certain trust, but in sporadic relationships, well, I think you could really frighten the guy..."(FG1). They did not overlook the fact that it fits inside of the vagina, making it difficult to check if it is inserted correctly, this not being the case with the male counterpart: «You put the male condom on and you know if its on right or not, because it's external...». «It's easier to see ..."(FG2).

Discussion

Despite the existing differences between young people from developed and developing countries, our results are in line with those of prior studies done on the people from Sub-Saharan Africa (Bogart *et al.*, 2000). In these studies, women demonstrate more positive attitudes toward and a greater willingness to use the female condom than men

do. Furthermore, our study confirms that men as well as women name a greater number of disadvantages as opposed to advantages associated with its use. Gollub, Brown, Savouillan, Waterlot, and Coruble (2002) confirms these findings; in a recent study African women had more positive attitudes toward female condom use than French women or women from other European countries. There is also the need to analyse the use of the female condom, taking into account the type of couple that is having sexual relations (steady versus casual), given that the type of couple may affect its acceptance and use, as occurs with the male condom. The female condom may be more acceptable in steady relationships and the male condom in casual relationships (Macaluso et al., 2000). The men seemed to prefer the idea of using the female condom in steady relationships. Cecil and Pinkerton (2000) argue that in order for men to feel positive toward using the female condom, they need to use it in a relationship based on trust so that then can feel assured that the female condom is being employed correctly and as such that it is working correctly (Seal and Ehrhardt, 1999). Men want to remain in control, at least to some extent, of the means of protection (Pool, Hart, Harrison, Nyanzy, and Whitworth, 2000). This data is highly positive if we take into account that for the majority of young people, the mark of a couple is the sexual relation they enjoy. And it is precisely in this type of relationship where the male condom is least used; as the relationship grows more and more stable, sex becomes increasingly unprotected. We must take into account that during youth, it is quite likely that there will be more than one sexual partner, owing to the phenomena known as «serial monogamy». As such, the use of the female condom offers a promising alternative in the fight to reduce the risks of sexually transmitted diseases and unwanted pregnancies among young people.

According to the results of this research, unlike men, women see the female condom as more viable in casual relationships, underlining its importance as a safety device against the transmission of sexual diseases and unwanted pregnancies in such situations. There is the additional advantage that women do not have to rely on their male partner to put on a condom. However, the women in our sample study did not experiment in the use of the female condom, and probably underestimate the need for co-operation and acceptance of the female condom by men (Ford and Mathie, 1993). As female condom use was less common with new and casual partners than with steady partners (Macaluso *et al.*, 2000). However, while we must recognize the need for men's collaboration in using the female condom, its most important facet is that it empowers women to protect themselves from STD's (Gollub, French, Latka, Rogers, and Steun, 2001; Green *et al.*, 2001). For this reason, it is necessary to develop future research that can support these findings and improve our knowledge about female condom use in younger people.

Our research also confirms that knowledge and experience gained by young people in the use of the male condom will tend to bias them unfavourably against the female condom in favour of the more familiar male one. This may help to explain its lack of popularity; its being evaluated as a substitute for the male condom, together with its high cost, seems to condition young people's willingness to use the female condom. Moreover, previous marketing of the male condom was carried out on a much wider scale at a much more affordable price. The female condom is virtually unknown in comparison, explaining the public's lack of confidence in the product and initial reluctance to use it. From these results, we can conclude that it is vital to develop promotional campaigns to encourage the use of the female condom, taking into account gender differences (Amaro, 1995; Bogart et al., 2000) together with the type of couple (steady vs. casual) (Macaluso et al., 2000). But it is important to keep in mind that the product should be promoted as an alternative to the male condom rather than as a replacement for it (Haignere *et al.*, 2000). For this last objective to be achieved, behavioral intervention that promotes both female and male condom usage ought to be implemented (Artz et al., 2000). No less important is the need to recognise that in confronting individual actions it is necessary to take into consideration the importance of wider-scale interventions (Cohen and Scribner, 2000). This assumes that the sexual behavior of our youth is quite conditioned, not just by individual variables, but also by contextual ones, as in the case of peer pressure (Svenson and Hanson, 1996). Peer pressure feeds off messages received from external sources, especially those which come from the mass media. For this reason, we consider it essential that macro-advertising campaigns be organized around the female condom, since it is much less well known than the male condom. Campaigns that help to create a positive image among today's youth would undoubtedly help to increase its usage. As such, we must be aware of the fact that the use of the female condom depends on political, not solely individual decisions.

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