

# Unit 17

## BARRIER METHODS

### (MALE AND FEMALE CONDOMS)

#### Learning Objectives

By the end of this unit, learners will be able to:

- ❖ Describe condoms
- ❖ Explain the effectiveness of condoms and how they work
- ❖ List the characteristics of male condoms and of female condoms
- ❖ State the medical eligibility criteria (MEC) for use of male condoms and female condoms
- ❖ Correct myths and misconceptions about male and female condoms
- ❖ Demonstrate skills in counselling clients to make informed choices about condoms
- ❖ Provide clients with strategies and skills to negotiate condom use with partners
- ❖ Demonstrate how to use male condoms and female condoms
- ❖ Provide client instructions for using male and female condoms.

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## Unit 17: Barrier Methods (Male and Female Condoms)

### Key Points

#### Male and female condoms:

- ❖ **Help protect against sexually transmitted infections (STIs), including HIV.**  
Condoms are the only contraceptive method that can protect against both pregnancy and STIs.
- ❖ **Require correct use with every act of sexual intercourse**
- ❖ **Require both male and female partner's cooperation.** Talking about condom use before sex can improve the chances one will be used.
- ❖ **May require some practice.** Putting on a male condom and inserting and removing the female condom from the vagina become easier with experience.

### 17.1 Defining Condoms

Condoms are a method of preventing pregnancy in which a plastic, latex, or animal-skin sheath creates a physical barrier preventing sperm from entering the woman's uterus. They are the most widely-used examples of barrier methods, which are contraceptive methods that work by creating physical or chemical barriers.

#### Types of condoms

There are two types of condoms:

- Male condoms
- Female condoms.

Both are available in Malawi.

#### How male and female condoms work

Both male and female condoms work by forming a mechanical barrier that keeps sperm out of the vagina, preventing pregnancy. They also help prevent infections present in semen, on the penis, or in the vagina from infecting the sexual partner. Condoms and other barrier methods require correct use with every act of intercourse.

## OTHER BARRIER METHODS

These other barrier methods do not provide protection against STIs, including HIV.

### **Diaphragms**

A bowl-shaped latex cup with a flexible rim that is inserted into the vagina to cover the cervix before intercourse. It requires fitting by a specifically trained provider. (Rarely used in Malawi)

### **Cervical cap**

A soft, deep, latex or plastic cup that is placed over the cervix before intercourse. It snugly covers the cervix. Requires fitting by a specifically trained provider. (Not available in Malawi)

### **Spermicides**

Spermicides are sperm-killing substances inserted deeply in the vagina shortly before intercourse. They work by breaking the membranes on sperm cells, killing the cells or slowing their movement. This keeps the sperm from meeting the egg. Spermicides are one of the least effective contraceptive methods. Available in several forms:

- Jellies, creams, and foam can be used alone, with a diaphragm or with condoms.
- Films, foaming tablets or suppositories can be used alone or with condoms.

## MALE CONDOMS

### 17.2 Male Condoms Description

- Sheaths, or coverings, that fit over a man's erect penis
- Also called rubbers, "raincoats," "umbrellas," skins, and prophylactics; known by many different brand names
- Most are made of thin latex rubber.

### 17.3 Effectiveness of Male Condoms

*Effectiveness depends on the user:* Risk of pregnancy or STI is greatest when condoms are not used with every act of intercourse. Inconsistent condom use results in far more pregnancies and infections than does incorrect use, slips, or breaks.

#### **Protection against pregnancy:**

- When used correctly with every act of sex, about 2 pregnancies per year occur in every 100 women whose partners use male condoms. This is known as "perfect use."
- As commonly used, about 15 pregnancies per year occur in every 100 women whose partners use male condoms. This means that 85 of every 100 women whose partners use male condoms will not become pregnant. This is known as "typical use."

#### **Protection against STIs/HIV:**

- Male condoms significantly reduce the risk of transmission of HIV and other STIs when used correctly with every act of sexual intercourse.
- Male condoms prevent 80% to 95% of HIV transmission that would have occurred without condoms.

Protect best against STIs spread by discharge, such as HIV, gonorrhoea and Chlamydia  
Also protect against STIs spread by skin-to-skin contact, such as herpes and human papillomavirus.

## 17.4 Characteristics of Male Condoms

### Advantages

- If properly and consistently used, are very effective
- Have no side effects
- Can be used as a backup to other methods
- Can be used without seeing a health care provider
- Are inexpensive in the short-term
- Promote partner communication
- Promote male involvement in family planning
- May prolong erection time
- Are sold in many places and generally easy to obtain
- Help protect against STIs, including HIV.

### Disadvantages

- Latex condoms may cause itching for people who are allergic to latex.
- They may decrease sensation, making maintenance of erection more difficult.
- Couple must take the time to put the condom on the erect penis
- Supply must be readily available.
- Condom may slip off or break during sexual intercourse.
- Partner's cooperation is essential for a woman to protect herself from pregnancy.

### Side effects—None

### Health benefits

- Help protect against STIs, including HIV
- May help protect against conditions caused by STIs: Recurring pelvic inflammatory disease and chronic pelvic pain; cervical cancer; infertility (male and female).

### Health risks

Extremely rare:

- Severe allergic reaction (among people with latex allergy)

## 17.5 Correcting Misconceptions

Male condoms:

- Do not make men sterile, impotent, or weak
- Do not decrease men's sex drive
- Cannot get lost in a woman's body
- Do not cause illness in a woman because they prevent semen or sperm from entering her body
- Do not cause illness in men because sperm "backs up"
- Can be used by married couples, not only for use outside marriage.

## 17.6 Barriers to Male Condom Use

- Not always available
- Provider attitudes possibly hindering adoption
- Myths and misconceptions
- Stigma
- Cultural/religious beliefs and practices
- Gender related issues.

## 17.7 Clients Who Can Use Male Condoms

All men and women can safely use male condoms except those with severe allergic reaction to latex rubber.

## 17.8 Counselling about Using Male Condoms

**Important:** Whenever possible, **show clients how to put on a condom.** (See instructions below.) Use a model of a penis, if available, or some other item, like a banana, to demonstrate.

Key counselling messages:

- Use a condom every time you have intercourse.
- Keep a supply of condoms available.
- Condoms can be weakened in their effectiveness if stored in too much heat, sunlight, or humidity.
- Do not use oil-based lubricants on the condom. These products can cause rubber to tear.

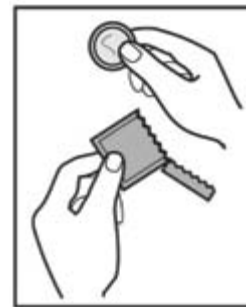
## How to put on a condom

### Basic Steps

1. **Use a new condom for each act of sex.**
2. **Before any physical contact, place the condom on the tip of the erect penis with the rolled side out.**
3. **Unroll the condom all the way to the base of the erect penis.**
4. **Immediately after ejaculation, hold the rim of the condom in place and withdraw the penis while it is still erect.**
5. **Dispose of the used condom safely.**

### Important Details

- Check the condom package. Do not use if torn or damaged. Avoid using a condom past the expiration date—do so only if a newer condom is not available.
- Tear open the package carefully. Do not use fingernails, teeth, or anything that can damage the condom.
- For the most protection, put the condom on before the penis makes any genital, oral, or anal contact.
- The condom should unroll easily. Forcing it on could cause it to break during use.
- If the condom does not unroll easily, it may be on backwards, damaged, or too old. Throw it away and use a new condom.
- If the condom is on backwards and another one is not available, turn it over and unroll it onto the penis.
- Withdraw the penis.
- Slide the condom off, avoiding spilling semen.
- If having sex again or switching from one sex act to another, use a new condom.
- Wrap the condom in its package and put it in the rubbish or latrine. Do not put the condom into a flush toilet, as it can cause problems with plumbing.



## 17.9 Managing Problems with Male Condoms

Problem	How to Manage
Condom might have holes or tears (noticed before intercourse)	<ul style="list-style-type: none"><li>• Discard and use a different condom.</li></ul>
Condom breaks or slips off (during intercourse)	<ul style="list-style-type: none"><li>• Withdraw the penis immediately and put on a new condom. Consider emergency contraception, HIV testing and post-exposure prophylaxis of HIV treatment.</li></ul>
Suspected allergic reaction to condom	<ul style="list-style-type: none"><li>• Rule out infection, allergy, or mechanical reaction. If allergy to a latex condom is established, help the client choose another method.</li></ul>

## FEMALE CONDOMS

### 17.10 Female Condoms Description

Female condoms are sheaths or linings made of thin, soft, transparent plastic film that fits loosely inside a woman’s vagina. They have flexible rings at both ends, one ring at the closed end helps to insert the condom while the ring at the open end holds part of the condom outside the vagina. They are lubricated with a silicone-based lubricant on the inside and outside.

### 17.11 Effectiveness of Female Condoms

Effectiveness depends on the user:

- When used correctly with every act of intercourse, about 5 pregnancies occur per 100 women using female condoms (95% effective). This is known as “perfect use.”
- As commonly used, about 21 pregnancies occur per 100 women using female condoms. This means that 79 of every 100 women using female condoms will not become pregnant (79% effective). This is known as “typical use.”

Protection against HIV and other STIs:

- Female condoms reduce the risk of infection with HIV and other STIs when used correctly with every act of sexual intercourse.

## 17.12 Characteristics of Female Condoms

Advantages	Disadvantages
<ul style="list-style-type: none"><li>• Help protect against both pregnancy and STIs, including HIV</li><li>• Women can initiate their use.</li><li>• Can be used without seeing a health care provider</li><li>• Can be inserted ahead of time so do not interrupt sex</li><li>• Are not tight or constricting for men like male condoms can be</li><li>• Do not dull the sensation of sex like male condoms sometimes do</li><li>• Do not have to be removed immediately after ejaculation.</li></ul>	<ul style="list-style-type: none"><li>• Expensive</li><li>• Woman must take the time to correctly insert the condom in the vagina.</li></ul>

**Side Effects: None**

**Health Benefits:** Help protect against STIs, including HIV

**Health Risks: None**

## 17.13 Correcting Misconceptions

Female condoms:

- Cannot get lost in the woman's body
- Are not difficult to use, but correct use needs to be learned
- Do not have holes that HIV can pass through
- Do not cause illness in a woman because they prevent semen or sperm from entering her body
- Can be used by married couples. They are not only for use outside marriage.

## 17.14 Barriers to Female Condom Use

- Not always available
- Provider attitudes possibly hindering adoption
- Myths and misconceptions
- Stigma
- Cultural/religious beliefs and practices
- Gender-related issues.

## 17.15 Clients Who Can Use Female Condoms

All women can safely use plastic female condoms. No medical condition prevents the use of this method.



## 17.16 Counselling about Using Female Condoms

### 1. Explain how to use female condoms.

(See instructions below.)

### 2. Ensure client understands correct use.

- Ask the client to explain the 5 basic steps of using the female condom while handling one.
- If a model is available, the client can practice inserting the condom in the model and then taking it out.

### 3. Ask the client how many condoms she thinks she will need until she can return.

- Give plenty of condoms.
- Tell the client where she can buy female condoms, if needed.

### 4. Explain why using a condom with every act of sexual intercourse is important.

- Just one unprotected act of intercourse can lead to pregnancy or STI—or both.
- If a condom is not used for one act of intercourse, try to use one the next time. A mistake once or twice does not mean that it is pointless to use condoms in the future.

### 5. Explain about emergency contraceptive pills (ECPs).

- Explain emergency contraception use in case of errors in condom use—including not using a condom—to help prevent pregnancy (see Unit 14: Emergency Contraceptive Pills). Give ECPs in advance, if available.

### 6. Discuss ways to talk about using condoms.

- Discuss skills and techniques for negotiating condom use with partners. (See section below on negotiating condom use.)

#### TIPS FOR NEW USERS


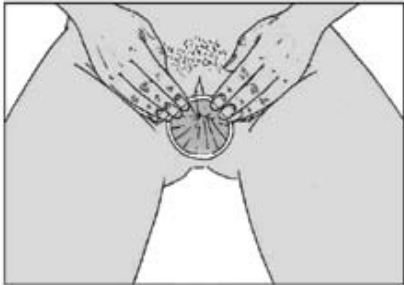

Suggest to a new user that she practice putting in and taking out the condom before the next time she has sex.



Reassure her that correct use becomes easier with practice. She may need to use the female condom several times before she is comfortable with it.

Suggest she try different positions to see which way insertion is easiest for her. The female condom is slippery. Some women find insertion easier if they put it in slowly, especially the first few times.

If a client is switching from another method to the female condom, suggest that she continue with the previous method until she can use the female condom with confidence.

## 17.17 How to Use a Female Condom

Basic steps	Important details
<p>1. Use a new female condom for each act of sex.</p>	<ul style="list-style-type: none"> <li>• Check the condom package. Do not use if torn or damaged. Avoid using a condom past the expiration date—do so only if newer condoms are not available.</li> <li>• If possible, wash your hands with mild soap and clean water before inserting the condom.</li> </ul>
<p>2. Before any physical contact, insert the condom into the vagina.</p> 	<ul style="list-style-type: none"> <li>• Can be inserted up to 8 hours before sex. For the most protection, insert the condom before the penis comes in contact with the vagina.</li> <li>• Choose a position that is comfortable for insertion—squat, raise one leg, sit or lie down.</li> <li>• Rub the sides of the female condom together to spread the lubricant evenly.</li> <li>• Grasp the ring at the closed end and squeeze it so it becomes long and narrow.</li> <li>• With the other hand, separate the outer lips (labia) and locate the opening of the vagina.</li> <li>• Gently push the inner ring into the vagina as far up as it will go. Insert a finger into the condom to push it into place. About 2–3 cm of the condom and the outer ring remain outside the vagina.</li> </ul>
<p>3. Ensure that the penis enters the condom and stays inside the condom.</p>	<ul style="list-style-type: none"> <li>• The man or woman should carefully guide the tip of his penis inside the condom—not between the condom and the wall of the vagina. If his penis goes outside the condom, withdraw and try again.</li> <li>• If the condom is accidentally pulled out of the vagina or pushed into it during sex, put the condom back in place.</li> </ul> 
<p>4. After the man withdraws his penis, hold the outer ring of the condom, twist to seal in contents, and gently pull it out of the vagina.</p>	<ul style="list-style-type: none"> <li>• The female condom does not need to be removed immediately after sex.</li> <li>• Remove the condom before standing up, to avoid spilling semen.</li> <li>• If the couple has sex again, they should use a new condom.</li> <li>• Reuse of female condoms is not recommended.</li> </ul> 

Basic steps	Important details
<p>5. <b>Dispose of the used condom safely.</b></p>	<ul style="list-style-type: none"> <li>• Wrap the condom in its package and put it in the rubbish or latrine. Do not put the condom into a flush toilet, as it can cause problems with plumbing.</li> </ul> <div style="display: flex; justify-content: space-around; align-items: center;">   </div>

## 17.18 Reasons to Return

Assure every client that she is welcome to come back any time—for example, if she has problems, questions, or wants another method; she has any major change in health status; or she thinks she might be pregnant. Also if:

- She has difficulty using female condoms correctly or every time she has sex.
- She recently had unprotected sex and wants to avoid pregnancy. She may be able to use emergency contraception (see Emergency Contraceptive Pills, Unit 14).

## 17.19 Managing Problems with Female Condoms

<b>May or may not be due to the method</b>	
<p>Problems with female condoms affect clients' satisfaction and use of the method. They deserve the provider's attention. If the client reports any problems, listen to her concerns and give advice. Male condoms can be given instead to provide protection from STIs, including HIV.</p>	
<b>Difficulty inserting the female condom</b>	<ul style="list-style-type: none"> <li>• Ask the client how she inserts a female condom. If a model is available, ask her to demonstrate and let her practice with the model. If not, ask her to demonstrate using her hands. Correct any errors.</li> </ul>
<b>Inner ring uncomfortable or painful</b>	<ul style="list-style-type: none"> <li>• Suggest that she reinsert or reposition the condom so that the inner ring is tucked back behind the pubic bone and out of the way.</li> </ul>
<b>Condom squeaks or makes noise during sex</b>	<ul style="list-style-type: none"> <li>• Suggest adding more lubricant to the inside of the condom or onto the penis.</li> </ul>
<b>Condom slips, is not used, or is used incorrectly</b>	<ul style="list-style-type: none"> <li>• Emergency contraception can help prevent pregnancy (see Emergency Contraceptive Pills, Unit 14).</li> <li>• Little can be done to reduce the risk of STIs if a condom breaks, slips, or is not used. If the client has signs or symptoms of STIs after having unprotected sex, assess or refer.</li> <li>• If a client reports slips, she may be inserting the female condom incorrectly. Ask her to show how she is inserting the condom, using a model or demonstrating with her hands. Correct any errors.</li> </ul>
<b>Difficulty persuading partner to use condoms; not able to use every time</b>	<ul style="list-style-type: none"> <li>• Discuss ways to talk with her partner about the importance of condom use for protection from pregnancy and STIs. (See "Negotiating Condom Use," below.)</li> </ul>
<b>Mild irritation in or around the vagina or penis (itching, redness, or rash)</b>	<ul style="list-style-type: none"> <li>• It usually goes away on its own without treatment.</li> <li>• Suggest adding lubricant to the inside of the condom or onto the penis to reduce rubbing that may cause irritation.</li> <li>• If symptoms persist, assess and treat for possible vaginal infection or STI, as appropriate.               <ul style="list-style-type: none"> <li>• If there is no infection, help the client choose another method.</li> </ul> </li> <li>• For clients at risk of STIs, including HIV, suggest using male condoms. If using male condoms is not possible, urge continued use of female condoms despite discomfort.</li> <li>• If neither partner has an infection, a mutually faithful sexual relationship provides STI protection without requiring condom use but does not protect against pregnancy.</li> </ul>
<b>Suspected pregnancy</b>	<ul style="list-style-type: none"> <li>• Assess for pregnancy.</li> <li>• It is safe to use female condoms during pregnancy for STI protection.</li> </ul>

## 17.20 Negotiating Male or Female Condom Use

There are many reasons why clients may feel that they cannot discuss condom use with their partners. Identifying them is an important first step in helping clients determine whether they can find ways to start this important conversation.

It is equally important to address the deeper fears or social issues behind client's reasons for not talking with their partners. Identifying these root factors can help clients understand their fears and anxieties related to talking with their partners and develop strategies for overcoming them.

If a client does not feel that she is able to discuss condoms, do not force her. She knows her relationship best. Urging her to press this issue when there is a power imbalance, especially when violence or abuse may occur, could place the woman's health and life in danger. Do not criticize the partner or spouse. Encourage the client to come back for further discussion, if appropriate.

### **Giving clients strategies and skills for negotiating condom use**

**Suggest to the client that she try one or more of the following strategies, as appropriate:**

- Identify areas of family life or relationships that they do talk about. See if there is some way that these issues can be included in those discussions.
- Start the conversation by saying that this is something that she heard about in a talk at the clinic and by wondering if the partner knows anything about these issues.
- Say that she has some health issues that the provider wants to discuss with him or some decision that he needs to make with her.
- Identify family members (his family or hers) who may be supportive and ask them to help her communicate about these issues with her partner.

### **Use role playing with the client to practice these strategies.**

- It may be helpful at first for the client to practice being the partner and for you to play the role of the client, to model how these issues can be discussed.
- Then switch roles, to give the client a chance to practice saying these things herself.

### **Be non-judgemental of the partner as well as of the client.**

- Criticizing the woman's partner may threaten her sense of well-being and end your counselling relationship.

### **Respect the client's willingness and ability to negotiate with her partner.**

- If she says that she cannot discuss this with her partner, explore other options.
- If there are truly no other options, schedule a follow-up visit and address the topic again.

(EngenderHealth 2003)

## Condom Negotiation Role Plays

(Adapted from Family Health International 1996)

### Directions for teacher

1. Divide students into pairs and instruct them to role play condom negotiation skills in the situations listed below.
2. Assign specific situations to each pair.
3. After they have role played, have the students come back to the larger group to discuss the process, review selected role plays and discuss what they learned, what was difficult, etc. Ask students to provide feedback on the effectiveness of the communication skills of the person negotiating condom use. Include any points you observed in the interactions.
4. Key messages should include:
  - Condoms contribute to pregnancy prevention and disease protection.
  - Partner communication and negotiation are critical skills for condom use.
  - Condoms are effective only when used correctly and consistently.
  - Counsellors should be able to demonstrate the use of a condom to a client in a counselling session.
  - Knowing one's HIV sero-status is an important factor in the decision to use condoms.

### Role play situations

- One partner is drunk.
- One partner is older.
- One partner is known to be violent.
- Money or gifts are offered for sex without a condom.
- The male partner is being aggressive.
- The female partner suggests condom use with a long-time boyfriend or with her husband.
- The male partner suggests condom use with a long-term girlfriend.

## Condoms Quiz Questions

(Adapted from Family Health International 1996)

**Questions 1–6.** Indicate whether the following statements are **true** or **false** by writing a **“T”** for true or an **“F”** for false in the space provided before each statement.

- \_\_\_ 1. Consistent and correct use of male or female condoms is an effective way to prevent pregnancy.
  - \_\_\_ 2. Male and female condoms do not protect against most types of STIs, including HIV.
  - \_\_\_ 3. Most male and female condom breakage is due to human error.
  - \_\_\_ 4. Laboratory studies have found that female condoms likely protect against both bacterial and viral STIs.
  - \_\_\_ 5. A new male condom should be used for each act of intercourse.
  - \_\_\_ 6. Opening a condom package with teeth or a sharp object or unrolling condoms before putting them on can cause breakage or slippage of the male condom.
7. Male condoms prevent the passage of:
- a. Sperm only
  - b. Sperm and bacterial STIs
  - c. Sperm, bacterial STIs and HIV
  - d. None of the above
8. Although when used correctly with every act of sexual intercourse male condoms are 98% effective, with typical use they are only:
- a. 95% effective
  - b. 85% effective
  - c. 65% effective
  - d. 45% effective
9. Which of the following are true about male condoms (tick all that apply):
- a. Male condoms may cause infertility in men.
  - b. Male condoms have no side effects.
  - c. Male condoms are inexpensive in the short run.
  - d. Male condoms are only for use outside of marriage.
  - e. None of the above are true about male condoms.
10. Which of the following are true about female condoms (tick all that apply):
- a. Female condoms must be removed immediately after ejaculation.
  - b. Female condoms do not protect against STIs, including HIV.
  - c. Female condoms can get lost in the woman’s body.
  - d. Female condoms can be inserted up to 8 hours before sex.
  - e. None of the above are true about female condoms.
11. Male and female condoms are examples of which type of contraceptive method?
- a. Barrier methods
  - b. Hormonal methods
  - c. Standard Days Method (SDM)
  - d. Implants
  - e. None of the above

# Condoms Quiz Questions Answer Key

**Questions 1–6.** Indicate whether the following statements are **true** or **false** by writing a “T” for true or an “F” for false in the space provided before each statement.

- T\_\_1. Consistent and correct use of male or female condoms is an effective way to prevent pregnancy.
- F\_\_2. Male and female condoms do not protect against most types of STIs, including HIV.
- T\_\_3. Most male and female condom breakage is due to human error.
- T\_\_4. Laboratory studies have found that female condoms likely protect against both bacterial and viral STIs.
- T\_\_5. A new male condom should be used for each act of intercourse.
- T\_\_6. Opening a condom package with teeth or a sharp object or unrolling condoms before putting them on can cause breakage or slippage of the male condom.
7. Male condoms prevent the passage of:  
c. Sperm, bacterial STIs and HIV
8. Although when used correctly with every act of sexual intercourse male condoms are 98% effective, with typical use they are only:  
b. 85% effective
9. Which of the following are true about male condoms (tick all that apply):  
b. Male condoms have no side effects.  
c. Male condoms are inexpensive in the short run.
10. Which of the following are true about female condoms (tick all that apply):  
d. Female condoms can be inserted up to 8 hours before sex.
11. Male and female condoms are examples of which type of contraceptive method?  
a. Barrier methods

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