



**International
Planned
Parenthood
Federation**

Statement on Dual Protection against Unwanted Pregnancy and Sexually Transmitted Infections, including HIV

Key points:

- Family planning associations should promote the concept and practice of dual protection
- Consistent and correct use of condoms is highly effective for the prevention of both unwanted pregnancy and STI/HIV
- Clients may choose to use condoms alone for dual protection or to use them with another method

Introduction

The right of individuals and couples to enjoy a healthy sexual life includes the prevention of unwanted pregnancy and sexually transmitted infections (STI) including HIV.

The prevalence of curable STI such as gonorrhoea, chlamydia, and syphilis is high, and is even increasing in some countries. The HIV epidemic has reached devastating proportions, particularly in Sub-Saharan Africa, and is growing fast in other regions such as Asia and Eastern Europe.

Definition of Dual Protection

Dual protection is defined as the simultaneous prevention of STI/HIV infection and unwanted pregnancy. This can be achieved by the consistent use of condoms alone or by the simultaneous use of two methods – one of which must be condoms. Avoidance of penetrative sex, particularly in situations of high risk, is another means of achieving dual protection.

The Methods

Male latex condoms have proved to be the most effective method for protection against STI/HIV when used consistently and correctly with every act of sexual intercourse (non-latex condoms are less well studied). However, when condoms are used inconsistently and incorrectly they give much less protection against both pregnancy and STI/HIV.

Female condoms have a role in dual protection, though the data are more limited: on present evidence, they are less effective than male condoms for protection against pregnancy; the degree to which they protect against infection has not been fully assessed.

Although condoms can be highly effective, there are factors that lessen their acceptability to some clients – including the need to use them with every act of intercourse and the perception that they reduce sexual spontaneity and enjoyment.

Injectable and implantable steroid hormones, IUDs and sterilisation do not require substantial involvement of the user to be highly effective for pregnancy prevention. These contraceptive methods, however, do not provide protection against STI/HIV. Oral contraceptives, which are highly effective for pregnancy prevention when used correctly and consistently, likewise provide no protection against STI/HIV.

Programme Implications

The concept of dual protection should be promoted. Sexual and reproductive health programmes can integrate information and education on the need for protection against STI/HIV with that on protection against unwanted pregnancy. Adolescents, who are particularly vulnerable to the risks of unsafe sex, should be given high priority in a programme's activities on dual protection. Adolescent sexuality should be acknowledged and health care providers should be trained to counsel and support them in their decisions concerning sexual behaviour. While adolescents should be encouraged to delay penetrative sex as a means of achieving dual protection, contraception, including condoms for dual protection, should be made easily available to those who choose to engage in penetrative sex. Furthermore, efforts to reach men are essential. Their awareness of the risks of STI/HIV and unwanted pregnancy, and their participation in reducing these risks, are critical.

Counsellors must assist family planning clients in determining their actual STI/HIV risk and help them to make the best decisions for dual protection. Risk of STI/HIV varies from region to region. Where the prevalence of STI/HIV is high, every client may be considered at high risk and the use of condoms assumes greater importance. Where the prevalence is low, risk depends mainly on an individual's behaviour – for instance, having multiple sexual partners, having a partner known to be infected, or having a partner who has other sexual partners.

Clear instructions on correct condom use are essential. To provide optimum protection against infection, condoms have to be of good quality and must be used consistently and correctly. Used in this way condoms are also highly effective against pregnancy. Couples may wish to rely on condoms alone for dual protection. Hormonal pills for emergency contraception can be offered, to be kept as a backup in case a condom breaks or slips.

Many individuals who require maximum protection against unwanted pregnancy will prefer an even more effective method of contraception than condoms. This is particularly true of women for whom becoming pregnant or continuing a pregnancy, if it occurs, will carry a high risk, yet termination is unacceptable or safe abortion not

available. The practice of dual protection for these people means use of condoms in addition to their regular contraceptive, whenever they have reason to believe there is a risk of infection.

Statement developed by the International Medical Advisory Panel (IMAP), May 2000. IMAP reserves the right to amend this Statement in the light of further developments in this field.

INTERNATIONAL PLANNED PARENTHOOD FEDERATION

REGENT'S COLLEGE, INNER CIRCLE, REGENT'S PARK, LONDON, NW1 4NS, UK

TELEPHONE: +44 (0)20 7487 7847

FAX +44 (0)20 7487 7981

E-MAIL ADDRESS: medtech@ippf.org

IPPF WEBSITE: www.ippf.org