

Abstract

This paper summarizes acceptability data published to date on the innovative female condom, and presents an additional study comparing the acceptability of the female condom and the latex male condom in a sample of low risk women attending private obstetrician/ gynaecologists' clinics in Nairobi, Kenya. Eighty-four percent of all subjects who completed interviewer-assisted questionnaires reported that they liked using the female condom, and more than two-thirds of all the women liked the female condom as much or better than the male condom. Fifty-five percent of the women would use the device in future if it were available. The least liked features were that the device was too large for easy insertion, messy to handle, and reduced sensation. Use became easier and more comfortable with experience. The most liked features were that the device made sex more enjoyable, protected against sexually transmitted diseases and pregnancy, and was under the woman's control. Male partner response was slightly less favourable, and sometimes resulted in women's noncompliance or discontinuation of use, despite the fact that such a device is supposed to empower women. This study provides preliminary data indicating that the female condom is a fairly acceptable method for some Kenyan couples, but recommends further research into safety, cost-effectiveness and hindrances to acceptability. PIP: A survey of 48 female volunteers recruited from 3 private gynecology-obstetrics clinics in Nairobi, Kenya, revealed preliminary support for the female condom as an acceptable family planning method. In the study's first phase, women were provided with 2 male and 2 female condoms to be used in the ensuing 3 weeks. In the second phase, they were supplied with 4 more female condoms. A total of 113 female condoms were used during the 2 study phases. Overall, 84% of women expressed favorable reactions to the female condom and 55% indicated they would use this method in the future were it available. In the first phase, 39% stated they preferred the female to the male condom, while 37% liked the 2 condoms about the same; all 12 women who completed the second phase preferred the female condom, suggesting that use becomes easier and more comfortable with time. Although 55% of male partners were reported to like the female condom the same or better than the male condom, and 39% liked it less; male partner disapproval was a major factor in study discontinuation. Enhanced enjoyment of sex, protection against pregnancy and sexually transmitted diseases, and female control were the most frequently cited positive attributes of the female condom; the device's large size, messiness, and reduced sensation were its least liked characteristics. Insertion difficulties and discomfort caused by the device's outer ring were common. There were 3 incidents (2.7%) of condom breakage and 11 (10%) of condom displacement during intercourse. More research on acceptability, cost-effectiveness, and safety is required before the female condom is slated for large-scale distribution in Kenya.