



THE MALE PERCEPTION OF THE FEMALE CONDOM
A CAMISINHA FEMININA SOB O OLHAR DO HOMEM
EL CONDÓN FEMENINO DESDE LA PERSPECTIVA MASCULINA

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ABSTRACT

Objective: to assess men's perception of the female condom. **Method:** this is a descriptive, exploratory, qualitative study. The study respondents were students of the Nursing Postgraduate Program, graduates of the Undergraduate Nursing Course in the School of Nursing, Federal University of Rio Grande, and their partners. This study analyzed questionnaires completed by male respondents. The data were collected between October 2012 and March 2013, through a semi-structured questionnaire. The subjects' statements were analyzed using the theoretical framework of the Collective Subject Discourse. The study project was approved by the Ethics Research Committee, Opinion 36/2012. **Results:** the subjects' statements showed their impressions, opinions, as well as the supposed advantages and disadvantages of the female condom. All respondents denied wanting to routinely use the female condom. **Conclusion:** given the cultural issues involved in sexual practices and the fact that respondents had little familiarity with the female condom, there is a need to problematize gender issues intertwined in the negotiation of using condoms and to achieve wider dissemination of this method. **Descriptors:** Female Condoms; Safe Sex; Gender; Nursing; Health Education.

RESUMO

Objetivo: conhecer a percepção dos homens acerca do preservativo feminino. **Método:** estudo exploratório-descritivo, qualitativo. Foram informantes estudantes do Programa de Pós-graduação em Enfermagem e formandos do Curso de Graduação em Enfermagem da Escola de Enfermagem da Universidade Federal do Rio Grande, e seus parceiros. Neste estudo analisaram-se os formulários com as respostas dos homens. Os dados foram produzidos entre outubro de 2012 e março de 2013, com formulário semiestruturado. Na análise foi empregada a Técnica do Discurso do Sujeito Coletivo. O projeto foi aprovado pelo Comitê de Ética, Parecer nº36/2012. **Resultados:** os discursos mostraram impressões, opiniões, vantagens e desvantagens do preservativo feminino. Foi unânime a negação quanto ao uso do método de forma rotineira. **Conclusão:** diante da pequena familiaridade com o preservativo e das questões culturais que permeiam as práticas sexuais, sinaliza-se para a necessidade de problematizar as questões de gênero imbricadas na negociação, bem como de realizar maior divulgação sobre este método. **Descritores:** Preservativos Femininos; Sexo Seguro; Gênero; Enfermagem; Educação Em Saúde.

RESUMEN

Objetivo: conocer la percepción de los hombres sobre el condón femenino. **Método:** estudio descriptivo exploratorio cualitativo. Los encuestados fueron estudiantes del Programa de Posgrado en Enfermería y egresados de la Escuela de Enfermería de la Universidad Federal de Río Grande, y sus parejas. En este estudio se analizaron los cuestionarios completados por los hombres. Los datos se produjeron entre octubre del 2012 y marzo del 2013, a través de un formulario semi-estructurado. Para realizar el análisis, se utilizó la técnica del Discurso del Sujeto Colectivo. El proyecto de investigación fue aprobado por el Comité de Ética en Investigación (Opinión nº 36/2012). **Resultados:** los discursos revelaron impresiones, opiniones, ventajas y desventajas del condón femenino. Los encuestados fueron unánimes al decir que no utilizarían el método de forma rutinaria. **Conclusión:** debido a la poca familiaridad con el condón femenino y las cuestiones culturales que subyacen las prácticas sexuales, se señala la necesidad de problematizar las cuestiones de género que están implicadas en las negociaciones, así como de realizar más publicidad y promoción de este método. **Descritores:** Condomes femeninos; Sexo seguro; Género; Enfermería; Educación en Salud.

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INTRODUCTION

The relationship between health and gender is recognized in public health. With the advent of HIV/AIDS, changes in the configuration of the disease have gradually appeared. Initially it was believed that the disease was restricted to homosexuals. However, we are currently observing a steady increase in heterosexual transmission of HIV and a feminization of the epidemic.¹⁻²

Epidemiological data show that, although the share of infected women is growing over time, men are still more affected by the HIV than women. In Brazil, the prevalence rate of HIV in the population aged 15-49 years is 0.42% among women and 0.52% among men.³ There is a similar scenario in Portugal, since men are the ones who more often die due of AIDS. Furthermore, in 2007 the number of cases associated with infection by heterosexual transmission accounted for the second most frequently affected group, the first being injecting drug users.²

Studies have shown that men rarely seek health services. Men's discourses reveal the stereotypical view that men are strong and therefore do not get sick or even that the woman is the one who needs care.⁴ Moreover, men cite shame of exposing their bodies to strangers (i.e., the professional) and the fear of discovering a serious illness as reasons for the neglect of self-care^{1,5-6} or even justify it by saying that "those who seek will find (a disease)."⁵

Empirical researches also discuss the challenge of shared responsibility between men and women when it comes to family planning. Women usually mention issues pertaining to their partners' working hours and work schedules as difficulties for joint participation in medical consultations.⁷

These assertions somehow explain the interweaving of gender into men's health-disease process. Society's historical-cultural patterns have naturalized power, strength, life outside the home and the domination of women as attributes of masculinity. Thus, this legitimized "manhood/masculinity" needs to be expressed, being converted into behaviors and practices that make men more vulnerable (to illness or injury).

Therefore, "gender" refers not only to the physiological

differences between sexes but also to ideas, institutions, structures, everyday practices, rituals and traditions, which together create social relationships.⁸ Thus, one can say that "gender" permeates the way men live and get

sick. Their sexual behavior also puts them at risk. The literature reveals that men are more likely to have casual unprotected sex, frequently exchange partners, and have intercourse with prostitutes^{2,9} than women.²

When it comes to sex, the male has the initiative and also decides about the use of condoms or not. Assuming that this method is, in practice, a men's domain¹⁰, women may find it difficult to negotiate the use of a condom. In this sense, a study which has assessed vulnerability to HIV infection found a significant difference regarding the correct use of male condoms among men aged 15-24 years.¹⁰ In addition, some women feel ashamed to carry a male condom in their purse¹⁰⁻¹¹ because they do not want to risk having it misinterpreted (by society and their partners) as female promiscuity.¹²

Thus, the female condom (FC) appears as an alternative resource for the prevention of HIV/AIDS, other Sexually Transmitted Infections (STIs), and pregnancy. It is shaped like a cylindrical bag and has two flexible rings. One ring fits into the cervix and the other ring protects the vulva.¹³ The female condom is as effective as the male condom and failures are generally attributed to incorrect use of the condom.¹³

Although some female and male users characterize the FC as difficult to insert and ugly in appearance¹¹, as well as expensive, it also has clear advantages: there is no need of penile erection for its placement, it is comfortable for both the woman and the man, and it produces no side effects or allergic reactions.¹³

Considering the need to understand the socio-cultural and institutional barriers for the proposal of measures that may contribute to the prevention of diseases and promotion of human health; that men's awareness about safe sex has an impact on women's health and vice versa; and nurses' role in exploring the common sense knowledge to implement new care practices, this study aims to:

- Assess men's perception of the female condom.

METHOD

This is a descriptive, exploratory, qualitative study. The study respondents were students of the Nursing Postgraduate Program and graduates of the Undergraduate Nursing Course in the School of Nursing, Federal University of Rio Grande, and their partners.

Two pilot studies have been conducted to create the instrument used in this research. Both studies had the participation of fifth-

semester nursing students and their partners. After evaluating the results of the first pilot study, adjustments were made. The instrument was then tested again and has proved adequate for data collection.

With approval of the Coordination committee of the Undergraduate and Postgraduate Nursing Courses, the students were invited in their classrooms to participate in the study. All participants signed an Informed Consent Form (ICF). Those who agreed to participate were given an envelope containing an informed consent form to be signed by their partners, two female condoms and two semi-structured questionnaires to be completed individually (one female and one male questionnaire).

The completed questionnaires were returned to the researcher in sealed envelopes. To protect the identity of participants, the envelopes were only opened after completion of all data collection. Data collection lasted five months. It started in October 2012 and ended in March 2013. In this study we only analyzed questionnaires completed by male respondents.

The subjects' statements were analyzed and interpreted using the theoretical framework of the Collective Subject Discourse. Such method is similar to assembling a puzzle. It tries to rebuild summary statements necessary to express a particular way of thinking or a specific imagery about a phenomenon through pieces of individual statements.¹⁴ This study was approved by the Research Ethics Committee of the Federal University of Rio Grande (Opinion number 36/2012).

RESULTS AND DISCUSSION

The sixteen men who participated in the study were aged 22-45 years and worked in a steady paid job in different sectors. All participants reported having a steady partner relationship, including during the conduction of this study. Nine respondents were aware of the female condom, but only one had already used it. A study conducted in Fortaleza also identified a lack of familiarity with the female condom. Of 35 women, only one had used the method before the study.¹⁵ In a study with 303 students of the Federal University of Ceará, only 0.5% of participants reported using the FC.¹⁶

In order to present the male perception of the FC, three categories were constructed: Impressions and opinions about the female condom; Realizing the advantages and

disadvantages of the FC; (Non-)routine use of the condom.

Impressions and opinions about the female condom

IC: The female condom is a safe method, but it is unattractive.

I had a good impression of it, it seems to be an efficient, safe and feasible method of contraception that protects against sexually transmitted diseases. Furthermore, I believe it provides greater autonomy for women and I think it is more comfortable for man, when compared to the male condom. On the other hand, is not something that would be used for its aesthetics, as it must be difficult for a woman to put it on. I get the impression that it may come out during sex and hinder the penetration.

We noticed that the initial impression about the method is positive. There is the recognition that it confers protection to the couple. However, when it comes to the visual characteristics, the statement reveals unfavorable opinions regarding the FC. The presence of a feeling of strangeness in relation to the FC was also found in a group of men who participated in another study. This feeling was associated with the aesthetics of the FC and the 'macho' culture of non-use of condoms.¹⁷

Such perceptions, evidenced in the statement may be the result of ignorance about the FC, given the difficulty of access to the method. The Ministry of Health only assured free distribution of the FC in 2012. However, women with AIDS or other sexually transmitted diseases, drug users, women in situations of domestic and sexual violence and sex workers have priority in access to the method.

The popularity of the FC, together with the realization that this method empowers women may result in changes in sexual practices, with consequent reduction of the transmission of STDs through heterosexual route. Therefore, it is necessary that women use the FC as a resource to protect themselves from unwanted pregnancy and STIs, acting against the female submission to the male condom, recognized as a choice that is to be made by men, that is in their control.

IC: The FC is uncomfortable, decreases sensitivity during intercourse, but the inner ring provides pleasure.

I found it quite uncomfortable and it also decreases sensitivity during intercourse, due to poor internal lubrication, I believe. My partner had trouble putting it on due to little practice with using the method and this ended up interfering with the flow of the sex act. But I also see its positive side,

because we had safe sex and the inner ring has provided moments of pleasure during sex.

Seven men participated in the placement of the FC and reported that the main difficulties were found when inserting the condom, because of the excess lubrication on the outer surface, which made the condom difficult to handle. This is in line with the findings of another study,¹¹ in which women also reported difficulties in adjusting the inner ring into the vaginal canal.¹¹

Given that the FC needs to be inserted into the vaginal canal, a knowledge of the anatomy and physiology of the reproductive tract could be seen as a facilitating factor to the use of the method. The partners of the subjects in this study were nurses. Thus, it can be inferred that the difficulties experienced by them are linked to a lack of familiarity with the FC, which was explicitly stated in the masculine discourse.

In this study, men highlight the decreased sensitivity during intercourse. This is in line with the findings of another study, which assessed the perceptions of heterosexual couples about the use of the female condom, and the factors that promote or hinder its use. The study revealed higher sensitivity and reduced friction, which facilitates penetration.¹¹

Positive aspects were also reported in this study. The statement above shows that the contact of the penis with the inner ring of FC provides pleasure during intercourse. This information could be used by health professionals to encourage the use of the FC, and to demystify false impressions and beliefs that hinder the use of such method, as evidenced in another study.¹⁸

It is understood that the routine use of the FC may enable more pleasurable intercourse, due to the lack of fear of the unknown or even of the concern about sexual performance. Eight participants believed that their partners would agree to to use it routinely, since they are health professionals and self-conscious about preventing disease and pregnancy.

● Realizing the advantages and disadvantages of the female condom

Six men reported seeing no advantage or benefit to the use FC, but they did not justify their opinion. With respect to the major mishaps identified during the use of the FC, respondents highlighted difficulties in penetration, insecurity during sexual intercourse and also the appearance of the FC.

IC: (Re)Thinking about its use, I found more disadvantages than advantages to it.

I think that there are more disadvantages than advantages to its use during intercourse. I experienced difficulties in penetration, because the inner surface of FC is poorly lubricated. I had to hold the outer ring; I was afraid that it would enter the vaginal canal. The thought that it could move during sex made me insecure, and sometimes I had to check to see if it was still in its correct place. The condom has a strange appearance, it is not attractive at all, and the price is higher compared to the male condom.

The respondents stated that the inner surface of the condom is poorly lubricated, which causes difficulties during penetration. The aesthetic appearance of the condom is also cited as a barrier to its use. The female genitalia, covered by outer ring, is seen with strangeness by men and looks unattractive to them.⁷

The feeling of insecurity regarding the undesirable shifting or displacement of the condom may be associated with a lack of skill in placement it. It is considered that the safe handling improves with experience/practice. This is evidenced in a study in which the proportion of women who reported not feeling confident about inserting the FC decreased after a month of use, from 5% to 0%; and 86% reported that the FC has always remained in place during intercourse.¹⁹

IC: The female condom also has advantages.

I found it more practical because I'm not the one who has to wear it, this method is under women's control and empowers them. I believe it gives me greater pleasure, because the male condom 'gets tight', causing discomfort.

Among the advantages cited by men there is the fact that they do not have to put on the female condom themselves, which makes it more practical compared to the male condom. Although women's autonomy is recognized, this idea is based on the principle that preventing unwanted pregnancy and STIs is not a man's responsibility, which implies that this is a 'female task'.

Moreover, the respondents stated that the use of male condoms affect their sexuality, because they need to interrupt the continuity of sexual act to put on the condom.¹⁹ this sense, the FC is a valuable alternative, since it can be inserted before the beginning of sexual intercourse, avoiding unwanted interruptions.

An obvious issue is the comparison with the male condom, which are widely known and

publicized. In the statement above, the male condom is associated with the words "tight" and "discomfort". This may make the use of the FC more attractive to men. On the other hand, there are some old arguments that are linked to the avoidance of protected sex.²⁰

♦ (Non-)routine use of the condom

When asked about the routine use of the condom, all respondents said that they would not use the FC routinely, and justified their answer by pointing out the disadvantages of the condom.

♦ IC: I disagree with routine use of the FC.

I would not use female condoms routinely because, in addition to being uncomfortable, I see no advantages compared to the use of male condoms. It hampers the sexual act, because it is poorly lubricated and impractical, and the price is too high to be used frequently; perhaps it could be used sporadically to spice things up. Another issue is that I do not use condoms because my partner and I only have sex with one another.

Gender issues are strongly associated with sexual life. The idea of male sexual dominance interfere in the choice of the female condom as a method of contraception.^{7,21} Thus, this requires not only alterations in men's consciousness and behavior, but also a deeper questioning of women's social, cultural, religious and political constraints.

The comparison with the male condom - most popular method of use among men - emerges once again in the discourse of the respondents. Participants highlight the price and distribution of the FC as barriers to its use. A study conducted in Maceio found that, in the first quarter of 2013, 1,542,884 male condoms and (only) 69,980 female condoms were distributed to the population of the city.²² The overall distribution of the FC in 2010 has been low, accounting for only 0.7% of the total number of condoms given out in countries where they are dispensed for free.²³

The time of the marital relationship seems to influence a couple's sexual behaviors. The analogy between self-health care, disease prevention, and use of condoms is recognized.²⁴ However, when it comes to affective intimate relationships, this and other empirical studies show that trust and monogamy are viewed as prevention methods.^{7,25} The concepts of conjugal

faithfulness and trust exclude the need for protection and thus leave couples more vulnerable to diseases.

Barriers at various levels have prevented the adoption of the FC as a method of routine use, namely: cost, availability, gender issues, and poor promotion of its use compared to other methods.²⁶ Thus, the promotion of this method by health services, as well as the use of advertising campaigns arise as a possibility to minimize bad impressions, stimulate interest and even encourage routine use of the FC.

CONCLUSION

The relevance of the study is that it could help (through men's discourse) implement health education actions in order to both demystify aspects related to the FC and encourage its use among men and women.

Although they recognize the benefits of the female condom as a method of dual protection against the risk of pregnancy and disease, as well as a facilitator of women's autonomy, all respondents stated that they would not make routine use of this method. Negative opinions were related primarily to disadvantages compared to the male condom, to the price of the FC and to its unaesthetic appearance.

Although the subjects' partners had knowledge of the anatomical and physiological aspects of the reproductive tract, the respondents' statements revealed a difficulty in using the FC and the fear of internalization of the condom into the vaginal canal during sex. Thus, it is believed that more frequent use would result in improved skills in handling the FC and increase the feeling of security during sex.

An increased familiarity with the method may result in the accentuation of the positive aspects of the FC, minimize the difficulties found, as well as the concerns with the placement of the condom, which are common at the beginning of use. Nurses, as health educators, need to provide more discussions on the subject, focusing on biological and social issues related to its use.

Cultural issues justify the non-use of FC and affect sexual and reproductive health outcomes, as the presumed monogamy is seen as a means of prevention by couples. Thus, the problematization of gender issues is important not only in health, but also in education, law, and ultimately society as a whole, because raising men's awareness about safe sex has an impact on women's health and vice versa.

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