

Condoms: The How To's...

by Terje Anderson
Vermont CARES

Condoms are one of the most valuable tools we have in fighting the spread of Acquired Immune Deficiency Syndrome (A.I.D.S.). Tests have shown that condoms effectively block the transmission of the virus (HIV) which causes A.I.D.S. Condoms also play a valuable role in stopping other sexually transmitted infections.

They are, however, only effective if used properly.

While it may seem like a simple proposition ("Just put it on"), in fact there are a few simple things which are important to remember about condoms.

Condoms have about a ten per cent failure rate when used as a birth control method. Virtually all of those failures could be prevented if the condom were used correctly. The same can be said of using condoms to prevent transmission of sexually transmitted infections.

Before the A.I.D.S. epidemic, condoms had fallen into general disfavor, being replaced by other birth control devices (the pill, diaphragm, etc.). Many people have forgotten how to use them, or never learned. Gay and bisexual men may never even have thought about them. A.I.D.S.

VT CARES Condom Give-away

Vermont CARES gave away more than 500 gift-wrapped packages of condoms as part of a Valentine's Day safe sex education effort. Ten Vermont CARES volunteers visited Colors in Brattleboro and Pearls in Burlington to distribute the condoms and risk reduction information.

Clad in tee-shirts emblazoned with the words "Free Condoms Here, Get Them While You're Hot," the volunteers reported an enthusiastic reaction from many of the bar-goers.

"We want to bring condoms out of the closet and into the open, we want to make people comfortable thinking about them and talking about them," said Terje Anderson, Executive Director of Vermont CARES. "We decided to do the bars on Valentine's Day because it was a fun and enjoyable way to introduce condoms to people."

"This is great!" said one Burlington man. "I've never even seen one of these things before, now I know how to use them. I can hardly wait to try it out."

Vermont CARES plans a wide range of future healthy sex educational promotions. For more information on upcoming activities, contact Vermont CARES at 862-5917, or write Box 1125, Montpelier 05602.

has changed all that, and now is a good time for a quick refresher course.

A step by step guide to using a condom

Putting it on:

Put the condom on an erect penis. If using a condom without a reservoir tip, leave about 1/2 inch of space at the tip. Squeeze any air out of the tip before unrolling (air bubbles may cause breakage). If putting a condom on an uncircumcised penis, pull the foreskin back before unrolling. Carefully unroll the condom down the length of the shaft.

Using it

Use plenty of water based lubricant on the outside of the condom and on the anus before entry. (Pre-lubed condoms usually need more lube before using -- they may dry out and break.

Using a water based lubricant is important, because oil based lubricants weaken the condom and cause breakage.

Water based lubricants include KY, Probe, Foreplay, H-R, and Ortho. Never use baby oil, Crisco, Vaseline products, sun tan oil, or commercial oil based lubricants.

AIDS INFORMATION

If the penis becomes soft during intercourse, or if the hole seems to be pulling the condom too tightly, holding fingers around the base of the condom will prevent it from sliding off.

Add more lubricant during sex if the condom seems to be drying out. Withdraw immediately if you feel the condom break or tear.

Pulling out

Withdraw after ejaculation while the penis is still erect. Waiting until the penis is soft means the condom may slip off inside of partner or that cum may spill. Hold onto the base of the condom and pull out gently.

Throw used condoms away

Never reuse a condom, and never use the same condom to have sex with different people.

These simple and easy to follow steps will make condoms an even more efficient way of preventing HIV transmission.

(Next month: How to have fun with condoms, making them an enjoyable part of your sex life.)

NGLTF Questions AIDS Testing

The Centers for Disease Control is considering recommendations that HIV antibody testing be greatly expanded, including mandatory tests for all hospital admissions and those seeking marriage licenses.

The National Gay and Lesbian Task Force has opposed mandatory and involuntary testing and questions the wisdom of the proposed new testing.

PPNNE Offers AIDS and Sexuality Information

Edsource, a newsletter published by Planned Parenthood of Northern New England, will devote the May issue to AIDS. Accompanying the cover article by Deborah Kutzko of the Vermont Department of Health will be book and media reviews of materials available for loan from our library.

Anyone interested in receiving a copy of this newsletter can call Connie Leff or Jan Hughes Fuller at 862-9637.

The lending library of Planned Parenthood is available for use 8:30 - 5:00, Monday through Friday. A library card fee of \$5.00 entitles individuals to borrow books for one year. Materials can be mailed directly to you if you are not within the Chittenden County area.

NGLTF has asked the CDC to address the following concerns about the proposals:

Can less intrusive measures to promote A.I.D.S. prevention be used? England and Switzerland, for example, have undertaken major education programs to reach every individual, regardless of so-called risk group. The United States has not.

Is testing a necessary part of a prevention program? A testing program is only as good as the counseling and education programs which accompany it. The experience of the gay community is that this requires long-term education and counseling. There is no evidence that knowledge of antibody status is a precondition for changing behavior.

What consideration has been given to the special counseling needs of individuals who self-define as low risk but will learn they are seropositive? The experience of blood banks is that an unexpected positive test result is devastating news requiring extensive long term counseling. The CDC does not take this kind of costly counseling into account.

What impact will testing have on prevention efforts with those who engage in risky behavior but test negative? By testing and targeting those who are positive for special attention, denial is encouraged

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