

Sexual Health

Contents

Volume 7 Issue 2 2010

Adding to the menu of modern methods – the diaphragm <i>W. Holmes</i>	101–102	Although trials have not been able to show a role for the diaphragm in HIV prevention, the associated acceptability studies suggest much potential for this old, but safe and reversible, method of contraception. Worldwide, up to half of all pregnancies are unintended, contributing to deaths from unsafe abortion and childbirth. Although not suitable for all, many motivated women in low-income settings could benefit if they were able to choose the diaphragm, especially a one-size-fits-all version. Research is needed to establish efficacy when the diaphragm is used continuously and without spermicide.
The practical and symbolic purpose of dental dams in lesbian safer sex promotion <i>J. Richters and S. Clayton</i>	103–106	Should dental dams be recommended for HIV and STI prevention in oral sex between women? Is there evidence of need? Are they effective? Would it even be possible to design a study to find out? We argue that routinely providing dams for oral sex between women is not an appropriate sexual health intervention and suggest possible reasons why some authorities have felt it necessary to provide them.
Interventions for young people in Australia to reduce HIV and sexually transmissible infections: a systematic review <i>M. Kang, R. Skinner and T. Usherwood</i>	107–128	This systematic review describes intervention studies that aim to reduce the impact of sexually transmissible infections and HIV among young Australians. There was a diverse range of intervention types and settings, most were uncontrolled intervention studies. Some conclusions can be drawn about the feasibility of testing for asymptomatic chlamydia infection in different settings, the impact of media campaigns and the usefulness of new technologies as adjuncts for influencing behaviour.
‘There is no love here anyway.’ Sexuality, identity and HIV prevention in an African sub-culture in Amsterdam, The Netherlands <i>L. Heus</i>	129–134	Why are undocumented African immigrants in Amsterdam at high risk for HIV infection, and how can prevention initiatives become more effective? This study shows that issues of power and identity construction, i.e. ‘concepts used in prevention messages’, ‘inter-cultural tension’, ‘identification with the educator’ and ‘stigma’, have great implications for the uptake of HIV prevention strategies by African immigrant groups and reveals important opportunities on which to focus prevention efforts.
Safer sexual behaviours after 1 year of antiretroviral treatment in KwaZulu-Natal, South Africa: a prospective cohort study <i>K. Pelzter and S. Ramlagan</i>	135–141	This prospective study with a baseline sample of 735 investigated factors associated with unsafe sexual behaviour as well as changes in sexual behaviour before commencing antiretroviral therapy (ART), at 6 and 12 months after initiating ART in KwaZulu-Natal, South Africa. Evidence shows inhibition of risky sexual behaviours over time. Although unsafe sexual behaviours had decreased, some proportion did not practice safer sex.
African Australians living with HIV: a case series from Victoria <i>C. N. Lemoh, S. Baho, J. Grierson, M. Hellard, A. Street and B.-A. Biggs</i>	142–148	African Australians with HIV are diagnosed late, and encounter difficulties accessing optimal care and support. This case series of 20 African-born Victorian residents living with HIV included 12 who acquired HIV heterosexually and four through sex between men; seven reported acquiring HIV in Australia. Nine of the 10 from the Horn of Africa were diagnosed late. Thirteen of the 18 on combination antiretroviral therapy achieved virological suppression at 12 months.
Sexual risk behaviours and HIV-1 prevalence among urban men who have sex with men in Cape Town, South Africa <i>E. Burrell, D. Mark, R. Grant, R. Wood and L.-G. Bekker</i>	149–153	Linked HIV prevalence and self-reported sexual risk behaviour data for men who have sex with men (MSM) in Cape Town not reported since 1986, suggest a mature epidemic with a consistent trend of high-risk taking, and clear correlation between select self-reported risk behaviours and HIV-1 serostatus. Continued and robust monitoring of HIV prevalence, along with risk behaviour trends over time are needed to inform risk-reduction interventions for this population.
Trends in the location of the HIV-positive population in Australia: implications for access to healthcare services and delivery <i>M. Carman, J. Grierson, M. Pitts, M. Hurley and J. Power</i>	154–158	A new analysis of existing data on the HIV-positive population in Australia, from the HIV Futures 5 survey, was based on linking a geographic breakdown of respondents with patterns of healthcare service access. This article examines existing and potential trends in the HIV-positive population, as a means to informing current and future healthcare service development and delivery.

Wear and care of the SILCS diaphragm: experience from three countries <i>P. S. Coffey and M. Kilbourne-Brook</i>	159–164	Data from two acceptability studies of a novel cervical barrier device, the SILCS diaphragm, conducted in the Dominican Republic, South Africa and Thailand are used to provide insights into how women care for and store the SILCS diaphragm, and both female and male perceptions about handling and re-using it. Results support the view that women are able to wear and care for diaphragms successfully in a variety of settings.
Do women use dental dams? Safer sex practices of lesbians and other women who have sex with women <i>J. Richters, G. Prestage, K. Schneider and S. Clayton</i>	165–169	Some safe sex guidelines recommend dental dams for cunnilingus. Using data from a lesbian community survey we found that among women who had recently had oral sex with a woman, 10% had used a dental dam, but most of them only did so once. Dam use was not more common among multipartnered women or those who had casual or group sex. Latex gloves and condoms were used more than dams.
Sexual practices and dental dam use among women prisoners – a mixed methods study <i>L. Yap, J. Richters, T. Butler, K. Schneider, K. Kirkwood and B. Donovan</i>	170–176	Dental dams are distributed to women prisoners for protection against HIV/sexually transmissible infections but we do not know whether they serve any useful public health purpose. Using quantitative and qualitative methods, we investigated women's sexual practices and dental dam use in NSW prisons. The data indicates that dental dams are not widely used and that, condoms and latex gloves may be more useful in woman-to-woman prison sex in combination with sexual health education.
Gay men's sex venues, the men who use them, and gay community perceptions: insights from a convenience sample of gay men attending a community festival in Melbourne <i>A. M. A. Smith, J. W. Grierson and H. von Doussa</i>	177–181	Gay men's sex venues are perceived to be associated with elevated risks of HIV and other sexually transmissible infections. Despite this, we know little about how sites are understood by gay men and the attributes gay men associate with particular venues. In this paper, we examine gay community attitudes to sex venues, the differences between users and non-users of venues and the characteristics attributed to the users of particular venues.
Understanding gay men's sex venues as sites for sexual health promotion <i>A. M. A. Smith, J. W. Grierson and H. von Doussa</i>	182–185	Gay men's sex venues are widely understood to be key sites for the transmission of HIV and other sexually transmissible infections. Despite this, we know very little about the nature of men's visits to these sites. Here, we explore gay men's sex venues as potential sites for sexual health intervention by documenting the duration of men's visit to venues and their allocation of time to various locations and activities within the venue.
Australian men's sexual practices in saunas, sex clubs and other male sex on premises venues <i>A. Lyons, A. M. A. Smith, J. W. Grierson and H. von Doussa</i>	186–192	Men who have sex with men were asked how many times they engaged in oral sex, anal intercourse (insertive, receptive, protected, and unprotected), mutual masturbation, and other sexual practices when visiting a sauna, sex club, or other male sex on premises venue. Findings from this study not only provide further insight into the effectiveness of existing safer sex campaigns, but may be helpful in the development of future strategies.
Preference and practices relating to lubricant use during anal intercourse: implications for rectal microbicides <i>M. Javanbakht, R. Murphy, P. Gorbach, M.-A. LeBlanc and J. Pickett</i>	193–198	An internet-based survey of lubricant use during anal intercourse found that lubricants are widely used, but barriers to use vary by age and region. Findings from this study suggest that a lubricant-like rectal microbicide maybe useful as a method of HIV prevention, however, targeted marketing and educational approaches maybe need to enhance acceptability.
Association of sexual risk-taking with having intercourse before 15 years in adolescent females in Cape Breton, Nova Scotia, Canada <i>D. B. Langille, M. Asbridge, G. Flowerdew and M. Allen</i>	199–204	This research examines associations of sexual risk talking in females aged 15–19 ($n=475$) in Nova Scotia, Canada, with their having had first intercourse before age 15. Data were gathered using a school-based survey. Early intercourse was associated with less condom use, unplanned intercourse due to substance use, having casual partners and having more partners. A history of early intercourse may signify current sexual risk-taking in adolescent females.
Sex and sport: sexual risk behaviour in young people in rural and regional Victoria <i>F. Y. S. Kong, J. S. Hocking, C. K. Link, M. Y. Chen and M. E. Hellard</i>	205–211	Chlamydia testing rates in Australia among young people are low and access to sexual health services in rural Australia is especially difficult. Our study suggest chlamydia screening through local sporting clubs may be a feasible and a "youth-friendly" environment to increase chlamydia testing rates in young people in rural Australia, especially among males.

Three years on: a review of medical terminations of pregnancy performed in a sexual health service

S. Downing, H. McNamee, D. Penney, J. Leamy, C. de Costa and D. B. Russell

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Access to abortion services in north Queensland is limited. One strategy to address inequity of access in regional areas is the provision of medical terminations of pregnancy through sexual health services. In 2006, the Cairns Sexual Health Service began providing medical terminations of pregnancy. The authors describe the clinical practice and report on the characteristics and outcomes of women undergoing this procedure over a 3-year period.

Book Review

Seductive Delusions: How Everyday

People Catch STDs

Reviewed by Belinda Hengel

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The Orgasm Answer Guide

Reviewed by Jane Howard

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Mandell, Douglas and Bennett's Principles and Practice of Infectious Diseases 7th edition

Reviewed by William John Hannan McBride

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