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The alphabet of prevention

New prevention methods were one of the main topics of this year's XVI International Aids Conference in Toronto. Of course some of those new prevention technologies – once they become available – will be of great benefit to women.

The expansion of prevention methods is made even more significant because of the volume of evidence presented in Toronto proving the failure of restrictive preventive approaches such as ABC: A = abstinence, B = be faithful, C = use a condom. For example this year the rise in HIV infections in Uganda reported by UNAIDS was by some blamed on the endorsement of the ABC approach to HIV prevention by the US government PEPFAR – The President's Emergency Plan for AIDS Relief.

Stephen Lewis, the UN Special Envoy for HIV/AIDS in Africa, told the New York Times last year that the large condom shortage caused by governmental restrictions on condom imports implemented late in 2004 was a direct consequence of PEPFAR's 'ABC' policy: 'there is no question that the condom crisis in Uganda is being driven and exacerbated by PEPFAR [which] undoubtedly will cause significant numbers of infections which should never have occurred.'

In Toronto Beatrice Were of ActionAid Uganda also commented that the 'ABC' policy now emphasises abstinence and fidelity over condom use. This was highlighted in a report by Human Rights Watch published last year. 'The 'C' part is now mainly silent', she said, and as a consequence, 'the success story is unravelling.'

During one of the best presentations I witnessed in Toronto Dr Gita Ramjee of the South African Medical Research Council showed us some of the new prevention technologies in the pipeline and illustrated how prevention could become much more than ABC... It could also include a second C and DEFGH!

Let's have a look at the new letters in the alphabet of prevention:

C is for circumcision

Research has showed that men who are circumcised have a reduced risk of HIV infection. This has been explained by the fact that the foreskin that is removed by circumcision has a large number of immune cells which are usually used as host by HIV when entering the body. Moreover the skin of the penis after circumcision becomes slightly thicker, which also helps preventing HIV infection. It was reported that in Swaziland men were queuing up at the doors of clinics performing the operation, after the news of the effectiveness of circumcision spread! A first clinical trial in South Africa showed a reduction of 60% transmission; however this data needs to be confirmed by comparison with other ongoing trials in Uganda and Kenya. We shouldn't have to wait too long: 2007 and 2008 will give us more results on the research. There are lots of questions around circumcision, apart from efficacy. Is it going to be culturally and religiously acceptable? What are the ethical challenges? I am sure that much more debate will follow this issue.

D is for diaphragm

The diaphragm is a kind of cap made of very soft rubber that is placed at the top of the cervix. Women have been using it for decades as a contraceptive. There is some evidence that the diaphragm, by covering the cervix, can protect against some STIs. Scientists are investigating if it could also offer some protection against HIV if used in conjunction with a microbicide. A large trial on the efficacy of cervical barriers, the diaphragm included, is currently taking place in Durban, Johannesburg and Harare; the results of this trial are expected by June 2007. This would be a very welcome addition to existing prevention methods because it would be women who have control of its use.

E is for exposure prophylaxis

This prevention technology is known as Pre-exposure Prophylaxis (PreP) and it means using some HIV treatment in healthy, uninfected people in order to prevent infection. This concept is not something new in Western medicine: it is similar to what is done to prevent Malaria. The HIV drugs which are on

trial for use in PreP are Tenofovir and Truvada. Those drugs are good candidates because they have been proven very safe and with low toxicity during treatment of HIV positive patients, as well as because they are once a day regimens. Trials are taking place in the US, Thailand, Botswana and Latin America and we will receive the first results by the end of 2008. What are the key challenges of those trials? Firstly there is the question of whether it is acceptable to make otherwise healthy people take medications for a chronic disease; secondly the appropriate level of adherence is difficult to establish; thirdly scientists need to consider the risk of a number of people developing infection with a drug resistant strain of the virus and the implications for future treatment options; and lastly there is the question of whether the availability of PreP would lead to abuse among those people who refuse to use condoms.

F is for female control option

This of course includes our beloved microbicides! PW has been involved in campaigning for these products for years and if you would like more information on the campaign you can request back issues of this magazine or look at the website: www.global-campaign.org

Microbicides are chemical products – like a gel or a cream – which can be applied in the vagina to prevent HIV infection. They are female initiated, so that women will have the choice to decide whether or not to inform their partner, especially in relationships where they are at risk of acquiring infection yet do not have the ability to negotiate safer sex. Ultimately, microbicides could give women the power to protect their health, the health of their partner and save a lot of lives.

Other new exciting developments concerning microbicides presented during the Toronto conference are that scientists are testing products that use ARVs. These products may be more effective because they are HIV specific and suppress the virus as soon as it enters the vagina or the rectum. Another innovative product on trial is a vaginal ring that can be inserted in the vagina which then releases an active protective ingredient over 30 days. This would make it easy for many women to comply and would definitely be welcome by those of us who enjoy spontaneous sex and don't want to fiddle too much with inserting a cream at the last minute!

In Toronto it was announced that there are five products in phase III trials – their effectiveness and safety is being tested on a large number of women- and some of those trials are coming to an end in December 2007. Also there are about 30 to 40 candidates involved in pre-clinical development and 14 in early safety trials. However, even if a product is found to be safe and effective by the end of 2007 it will still take some time before they are licensed and available on the market. If we want to be optimistic, a product may be available for use, hopefully, in four years' time.

G is for genital tract infection

Scientists and health professionals have known for a long time that the presence of untreated STIs increases hugely the chances of passing HIV. Therefore investing in better provision of STIs treatment would definitely result in a decrease in HIV infections and can be included as a prevention method.

H is for herpes suppression (HSV-2)

There are many scientific studies that show that genital herpes make people more susceptible to HIV infection. Herpes often presents itself as small sores in the genital area, which are an easy transmission route for the virus. Moreover herpes also makes people who are already HIV positive more infectious: some studies have shown that HIV positive people have a higher viral load during a bout of herpes. Moreover people living with HIV usually experience more frequent and longer episodes of herpes. Considering all of the above it makes good sense that controlling herpes will result in a reduction of HIV transmission. At the moment there are several trials establishing the effectiveness of controlling HSV-2 with the use of acyclovir and how it affects transmission of HIV. First results for the trials will be available by the end of 2007 and more by the end of 2008.

Political will and community involvement are still central to the process of prevention as Dr Gita Ramjee stressed. There is no quick medical fix to prevention.

It is quite revealing that existing prevention methods, which are known to be extremely effective, are still not implemented on the scale they should. For example providing clean injecting equipment to drug users is still opposed by too many governments, including the United States. Condom distribution in Africa is still well below the level of need: apparently, at the current level each African man would have access to just three condoms a year!

Therefore, once again we HIV positive people and the people who work with us to halt the growth of the epidemic have the duty to keep our governments and health ministries under pressure. Our involvement is vital in ensuring not only that medical research is carried out in an ethical way, but also that when new prevention technologies are available, the resources and policies will be there to make them accessible to all those who need them.

Silvia

Tips for better (safer) sex

Good sex can be safer, and safer sex can be very good especially when you know these sexy tips; try them out in your own sex life and share them in sex education programmes! The following tips are a wide and varied selection from around the globe – some you will like and some hate – you can do what you think is exciting and leave the rest to others!

Remember that safer sex is any sexual activities where sexual fluids don't mingle – you can have rough, saucy or dirty sex but don't let cum get into the anus or vagina or your mouth – use a condom, femidoms or dental dam for any activities in these areas. By careful of any sex that might cause any bleeding that also could be passed into your partner's mouth, vagina or anus.

Lube it up!

One of the best-kept secrets of good (and safer) sex is water-based lubricant. Many people simply don't realise that water-based lube can make sex feel wetter (and so much better) while also preventing condom breakage during dry or rough sex.

The truth is natural lubrication varies from person to person and throughout our lives. Age, medications (including contraceptives) and other factors can reduce the amount of natural lubrication we have. Many people use what's handy to lubricate during sex, such as cooking oil, spit and body oils. What they may not know, however, is that many substances, including oil, can break down the latex of condoms, exposing you to sexually transmitted infections and pregnancy.

Some tips for slippery and safe sex:

- Drop a bit of water-based lube in the tip of a condom for extra feeling and sensitivity as he penetrates – this gives a kind of squishy feel around the head of the penis.
- Add lube to the outside of the condom, use flavoured lubricants to make safe sex blowjobs taste better and for smooth and tasty sex.
- Lube is absolutely essential during anal sex and makes fisting (putting your whole hand in the vagina or anus) a pleasure rather than a pain. Lube helps prevent tearing of delicate anal and vaginal tissues, which helps reduce the risk of STI transmission.
- Lubing up your partners erect penis inside a condom can be very horny, as you can be in control about how much lubricant you put on, and he's going to enjoy the feeling of having his penis rubbed!



A night in alone with yourself

- Why not try playing with yourself with your opposite hand to usual – it will feel clumsy at first but how much fun to feel like a stranger to yourself?
- Similarly make your hand go dead and do the same – then you will really feel like a stranger (who you know very well) is playing with you.
- Position yourself with a mirror and a light and enjoy watching yourself get turned on – have you ever looked that close before?
- While fast and furious finger bobbing is sometimes called for, it's a good idea to spend quality time getting to know yourself. Create an erotic space to play in, spray your favourite scent around the room, dim the lights and lock the doors...

If you are keen to delay orgasm and want to learn more about your limits try these techniques –

- Use the Scale of Ten method. With ten representing orgasm, masturbate until you feel your tension level rise to seven or eight on the scale of ten, then ease off until you drop back to five. Repeat several times before finally allowing yourself to hit the high notes. Then sing!
- Or you can masturbate to the count of ten: try in strokes or circles, then wait for ten beats, then nine, then eight, then seven and so on right down to one and then work back up again. This is tantric sex... It is very exciting and suddenly you won't be able to stop yourself from coming.



The female condom is not just for women

Imagine someone stops you on the street and says, 'I have a great new sex toy. Just get your partner to push it inside you. It has an inner ring to push against the back of your vagina and an outer ring to rub on your clitoris. He'll get turned on because he can feel the ring rubbing in his penis and you can feel his warmth through it. Plus: it protects you from infections and pregnancy.' Wouldn't you be queuing up to get one? Then get yourself the female condom!

- Ask (or tell) your partner to insert it and use the inner and outer rings to turn you on. Many people find the deeper penetration on the inner ring super stimulating.

- Insert while the partner watches. Tell him or her they can look but not touch.
- In Zimbabwe, a new word in Shona – ‘tekenyenya’ – was invented to describe the gorgeous tickle that men feel when the inner ring of the female condom rubs on their penis.
- Women in India reported their first orgasms as they inserted the lubricated female condom inside themselves.
- Rub the outer ring on your clitoris both with your fingers and his penis.
- The polyurethane that the female condom is made of is much thinner than latex so you can feel the heat transfer from your partner to you.
- As for lube, any oils or water based lube will work. Oil-based lubricants do not break down the female condom the way they do male condoms, so you avoid breakage.

(For more information about the female condom, email info@the-pleasure-project.org and they will send you a brochure about ‘The Female Condom and Pleasure’.)

Penetration is so 1990s!

Try these other parts to pleasure. Do you and your partners still see penetration as the ultimate? Get with the programme and avoid penetration for more (and safer) pleasure.

- Use examples from the Kama Sutra of extremely exciting but non-penetrative sex as a way of exciting men safely.
- Use your thigh or armpit to tighten his penis. Use lots of lube and enjoy the different position.
- Breast sex – hold his penis tightly between your breasts – he’ll love pushing into your softness and you can also have easy access to kiss and lick him.
- And of course, there are vibrators and other sex toys which enable you to vary the size and shape of what is pushed into you, and can be completely safe if kept clean or used with a condom. Women who have not yet had orgasm may find that sex toys are the easiest way to achieve this.
- Ever tried shaving each other ‘down there’? It requires a steady hand and not too much giggling but the power play and control as well as the feel and new access beyond hair can be a very sexy experience.
- Some women like their entire breasts to be gently stroked with fingertips – the underside are often sensitive. Slowly trace big circles around the breast gradually getting smaller as you close in on the nipple. Once you’ve tried it with your fingers, follow suit with your tongue, then pucker up for a nipple suck.
- Watch each other masturbate – it can be very exciting to see your lover make him or herself come while you look.

Getting from A to F modes of transport

- Travel knicker-less with your lover on the top of a double-decker bus – taunt each other with semi views and the risk of being found out...

Hot and cold delights

- Suck on some ice, take it out and quickly suck his or her private parts. Then swish some hot or warm water in your mouth and go down again. Alternate several times for an exhilarating thrill.
- If you are lucky enough to own a bidet then turn the water jet on high and cold on your private parts or whatever feels good – and just feel the pleasure of the blast.

Way-out-there stuff for women

- Start your sex play slow, then gently push or rub the g-spot (the round, spongy mound just inside the front of the vagina). You may be able to make her ejaculate (the fluid is different from ordinary vaginal fluid, and is thin like urine – but it’s a totally different substance). This is not the same as having an orgasm, but it can be slippery and exciting for you both.

Talk dirty!

It couldn’t be simpler! One of the biggest turn-ons is talking dirty, and it’s also the best way to make everything – including using condoms and lube and telling your partner what you do and do not like – hotter! Sexy talk isn’t easy for many people, but with practice (and as you see the results – hotter, better, safer sex) it gets easier. Communicating with your partner is an important way to ensure you are satisfied, safe and turned-on. If you’re gonna talk why not make it a part of the fun with sexy words?

- Write each other erotic emails before you meet, tell your partner what you want to do and what you want him/her to do to you.
- Why not try phone sex – get into the fun and say things you wouldn’t normally dare...

This article is an edited version of Sexy Tips which appears on The Pleasure Project’s website (www.the-pleasure-project.org). It was reproduced with the kind permission of The Pleasure Project.

