

# Challenges

durex<sup>®</sup> network - Raising awareness of sexual health across the globe  
Issue 1, 2011

## Study highlights sexual confusion

Evidence shows that teenagers are unsure about what the term “sexual activity” really means

Ten per cent of the young adults in a United States study who had told researchers they were abstinent tested positive for sexually transmitted infections.

Study author Jessica Sales believes the findings underline the importance of all STI screening programmes being extended beyond those who admit to having had sexual intercourse.

The research was carried out as part of the National Longitudinal Study of Adolescent Health, which has tracked thousands of teenagers and young adults for more than a decade, and the results have been published in the *Pediatrics* journal.

Of the 964 teenagers who tested positive for an STI, 118 claimed they had not had sexual intercourse in the previous 12 months, and 60 said they had never had intercourse in their lives.

Ms Sales, a research assistant professor at Emory University in Atlanta, commented: “If an individual goes to their doctor and says they are sexually active, that’s when the doctor may suggest they get screened for STIs.”

But, she added, if someone says they are not sexually active, “it is not traditional practice to move forward with an STI test.”

There is no clear explanation of why there should be such a discrepancy between young people’s claims of abstinence and their sexual activity in practice.

adults agree penile-vaginal intercourse is sex, less than one in five think oral-genital contact counts as “having sex”.



Young adults interpret abstinence in different ways

They may have forgotten that they had had intercourse or simply failed to tell the truth. On the other hand, it may come down to their personal definition of abstinence.

A survey carried out in 2007 by Jason D Hans and colleagues at the University of Kentucky found that while most young

Their report – “Sex Redefined: The Reclassification of Oral-Genital Contact” – was published in 2010 in the *Perspectives on Sexual and Reproductive Health*. It showed a dramatic shift in thinking since a similar survey was carried out in 1991, when nearly twice as many respondents (around 40 per cent) classified oral-genital contact as sex.

A pivotal turning point in this changing view is believed to be former President Bill Clinton’s statement, “I did not have sexual relations with that woman” when referring to Monica Lewinsky.

“Like President Clinton, adolescents and young adults often interpret these words with a degree of latitude, depending on whether they want to maintain an image of being sexually experienced or inexperienced,” Dr Hans concluded. ■

### Inside News

Page 2 Teenage pregnancies in the recession  
Page 4 Interview with Ilze Melngailis of the GBC

Page 6 Films bring sexual health message  
Page 7 Education relies on parent power

# Teenage pregnancies in the global recession

The birth rate among teenage girls in the United States has fallen to a record low according to recently released figures – and the recession is being cited as one likely cause

A report from the US Centers for Disease Control and Prevention has revealed that the birth rate for 15-19-year-olds decreased from 41.5 to 39.1 births per 1,000 teenagers between 2008 and 2009.

The rate has declined for 16 out of the past 18 years and this was the lowest recorded figure in almost seven decades, ever since the US government first started collecting the data.

Although the CDC report itself does not put forward any suggested reasons for the decline, other experts have mooted that the country's ailing economy may well be a significant factor. Among these is Sarah Brown of the National Campaign to Prevent Teen and Unplanned Pregnancies, who told the *Washington Times*: "When money is very tight, all of us think harder about taking risks, expanding our families, taking on new responsibilities.

"Now, I know that teens may not be as savvy about money as those in their 20s and 30s – but many teens live with financially stressed adults, and they see neighbours and older friends losing jobs and even losing houses. So they, too, feel the squeeze and may be reacting to it by being more prudent."

Such a hypothesis is supported by a study

published in 2010 by the Pew Research Center, an independent public opinion survey organisation. This found that the US states which had suffered the most in the recession – such as Arizona and Florida – had also recorded the largest decline in birth rates. At the other end of the scale, North Dakota had seen rises in both its per capita income and fertility.

Pew senior researcher Gretchen Livingston commented: "Our evidence definitely suggested there was a link

between the economic circumstances and what was going on with fertility. This fits with the historical picture as well."

US schools and colleges are playing their part in getting the message across that bringing up a baby is a financial strain for a teenage mother, particularly in times of recession.

In Michigan, for example, the Department of Human Services (DHS) is championing a parenting awareness teaching

programme called "The Responsibilities of Parenting - RU Ready?" across the state. This programme, the DHS stresses, is aimed at giving young people instruction in the realities of what it means to be a parent rather than providing another form of sex education.

The programme being distributed to schools includes a student and teacher guide, information for parents and frequently asked questions about child support. Its curriculum warns that almost seven out of 10 teenage mothers in the state receive public assistance within a year of the birth of their child. These mothers are also less likely to receive adequate prenatal care and are at increased risk of dropping out of school.

"While parenting offers huge rewards, it is not as glamorous as Hollywood



Teenage girls are being encouraged to think twice about the consequences of becoming pregnant

Continued on page 3

Continued from page 2

makes it seem,” DHS Office of Child Support director Marilyn Stephen said. “It is our hope that teens make the decision to delay parenthood until after completing their education, securing employment and establishing a stable home.”

There has long been concern that ‘Hollywood’ - the film and television media - has influenced teenagers into believing that casual sex is an expected form of behaviour for their age group without any such repercussions as sexually transmitted infections or pregnancy.

However, a new genre of reality programmes is now showing the true scenario and this is being credited with having some positive effects.

Research by The National Campaign to Prevent Teen and Unplanned Pregnancy, carried out among young people aged 12-19, has measured the effect of popular shows such as MTV’s *16 and Pregnant*, which premiered in 2009.

Each hour-long episode follows a teenage girl through her pregnancy and during her first few months of parenthood with a realistic look at the wide variety of challenges that young mothers can face.

Among those young people who have watched the show, 82 per cent said it helps them to understand more clearly the challenges of teenage pregnancy and parenthood and how to avoid it.

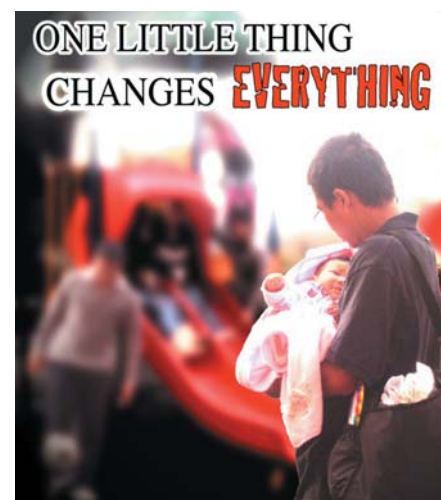
And a further study carried out with the Boys and Girls Clubs of America found that 93 per cent of those who watched an episode agreed they had learnt that teenage parenthood is harder than they had imagined.

Whether or not teenagers in the United States may be more cautious about becoming pregnant during a recession, there are fears that in the UK the opposite may be true.

A policy briefing paper prepared by the charity Youth Access warned of the possibility that an economic downturn could lead to increased teenage

pregnancy rates by making career-based aspirations appear less achievable and with financial constraints leading to more demand for free contraception and other sexual health services.

The paper quoted a literature review by the Department for Education and Science in 2002 that showed UK females who are not in education, employment or training are 22 times more likely to be teenage mothers than the average. ■



*A poster in Minneapolis puts the emphasis on young males to consider what fatherhood would mean to them*

## More young women in China are having abortions

Figures show that the number of abortions in China is rising year on year, with young, single women now indicated as making up an increasing percentage of the clientele.

Some 9.2 million abortions were recorded overall in 2008, compared with 7.6 million the year before. However the country’s state media has reported that these include only the terminations that took place in hospitals and the total number could be as high as 13 million.

Abortions have been common in China since the government began enforcing a one-child limit in 1980 to stem population growth and are widely available. What has become different in recent years is the age of those seeking terminations.

Social stigma deters single women from having a child on their own and the minimum age of consent for them to get married is 20. When these factors are combined with a more liberal attitude towards premarital sex among young people and little sex education, then abortion is seen as an inevitable result.

A UN-funded survey of 22,288 Chinese young people aged 15-24, conducted by the Peking University Population Research Institute in 2009, found that two thirds of those interviewed were accepting of premarital sex. And most had “very limited” levels of sexual reproductive health knowledge.

Although China has an extensive family planning network that promotes contraception, this focuses mainly on

married couples. Efforts to be more inclusive of younger people haven’t always been successful.

A recent example was a sex education clinic set up to provide advice and free condoms to those aged 15-24 in Shanghai. This closed at the end of 2010 after five years of trying to attract the young people to use the service.

A spokesman from the Shanghai International Peace Maternal and Child Health Hospital reported that the clinic only received two to three calls each day.

Many people of the target age group were said to be too embarrassed to consult strangers at a professional institute even though they needed information on sex. ■

# A healthy coalition

The Global Business Coalition (GBC) on HIV/AIDS, Tuberculosis and Malaria celebrates its tenth anniversary this year. Challenges spoke to Ilze Melngailis, Vice President of Partnerships and Impact Initiatives at the organisation, about what has been achieved in the last decade and what plans are in place for the future...

Since being founded in 2001, GBC has been working to unite the public and private sectors with the aim of defeating the devastating effects of HIV/AIDS, tuberculosis and malaria.

By bringing together more than 200 corporations, including The Coca-Cola Company, Anglo American, Bayer HealthCare, Goldman Sachs and Intel, GBC strives to turn business knowledge and assets into effective partnerships to fight these three diseases. In order to maximize the efforts of its member companies, GBC partners with myriad governments, NGOs and civil society.

As well as providing tailored support that allows companies to take an active role in defeating these pandemics, GBC also organises collective actions among companies and links the public and private sectors in ways that pool talents and resources.

“We act differently from other organisations in the sense that we don’t implement programmes ourselves,” says Ilze. “Instead, we connect the relevant companies with one another, with donor governments and with technical organisations so that they are able to have stronger impact in the areas in which they operate.”

“There is no one quite like the GBC out there, and as such we have a vast amount of expertise in arenas where business and development goals intersect.”

And so far this approach has helped GBC make a significant contribution in the fight against HIV/AIDS, tuberculosis and malaria.

Only a few years ago roughly 50,000 people in Africa had access to antiretroviral drugs, but today the number is well over four million. Meanwhile, more tuberculosis sufferers than ever before are being found

and treated, whilst in many parts of Africa malaria deaths are down by over 50 per cent.

Elsewhere, the organisation has been effective at raising awareness of the issues surrounding these three diseases. In a 2009 GBC survey, for example, 73 per cent of Russians admitted that they didn’t know enough about HIV. But after viewing a public service announcement – aired by GBC’s Russia Media Partnership – 30 million people in the country decided to take action. In China, meanwhile, 100,000 students have been educated about protecting themselves from tuberculosis, and this initiative further helped to deepen ties with the Chinese government at both national and local levels.

But it’s not just about raising awareness. In the Democratic Republic of Congo, for instance, more than 300 front line health workers have been trained to treat HIV positive patients, whilst the Health at Home initiative has seen over a million Kenyans tested for the virus.

With offices across five continents, GBC’s agenda truly is global. But the focus is not exclusively on developing countries.

“It’s about where there is need, in fact last year we launched an initiative for companies to get involved in tackling the resurging HIV/AIDS epidemic in parts of the US,” says Ilze, who worked at the International Planned Parenthood Federation and EngenderHealth in New York before joining GBC in 2007.

With such a broad reach, new approaches are continually required if these three diseases are to be tackled effectively.

GBC’s latest initiative – Healthy Women, Healthy Economies (HWHE) – was launched in Washington DC on January 6th 2011.



*Ilze Melngailis*

HWHE, which is a strategic partnership between GBC and the US State Department Office of Global Women’s Issues, is mapping out a global business action plan on girls’ and women’s health that ties in with US President Obama’s Global Health Initiative.

## **But why the emphasis on females?**

“Across the world women and girls bear a disproportionate share of health and economic burdens,” says Ilze. “Around three-quarters of all young HIV-positive Africans are female, and girls are three times as likely as boys to never see the inside of a classroom – these statistics are unbelievable, but true.”

It also makes economic sense. Studies have shown that women re-invest more than twice as much of their earned income back into their families as men do, and just one extra year of secondary school raises a girl’s lifetime wages by up to 25 per cent. Investing in women and girls really does lead to results for families, communities and economies.

[Continued on page 5](#)

Continued from page 4

According to Ilze, action is needed in five main spheres as part of the HWHE initiative.

“Companies are very keen to get involved in the locations where they have factories or offices,” she says. “The essential fields where we will be helping corporations to work with governments and NGOs are health, education, economic empowerment, gender-based violence and the engagement of boys and men.”

HWHE has a framework document that helps to show businesses how they will be able to take action to implement changes, and there are six general areas.

Workplace Programmes help empower both workforces and supply chains to be healthy and to encourage change,

Employee Engagement aims to channel employee know-how and increase engagement and donations, and Community Investment is all about promoting the health and vibrancy of the communities in which companies operate. In addition, organisations can get involved through philanthropy, by deploying business assets and via advocacy – using corporate influence and resources to promote positive changes.

#### So what next for HWHE?

GBC's HWHE is working with companies and government partners to form partnerships to advance the initiative's agenda and drive change. There will also be a number of roundtables and 'Deep Dive' discussions in the coming months, covering topics such as family planning, promoting the status of the girl child and

holistic HIV prevention. These discussions help companies to keep up to date on key issues and where and how they can further focus their efforts.

“We already have 11 formal corporate supporters on board, including Coca-Cola Company, Chevron Corporation, Anglo American, Anglo Gold Ashanti, Bayer HealthCare, BD, Dow Chemical Company, Intel, Goldman Sachs 10,000 Women, Russell Reynolds and Merck” says Ilze, “but we are hoping to identify additional companies to get involved.

“Put simply, the more partners we have the greater chance we will have to improve women's and girls' health across the globe – and that is the ultimate aim of HWHE.” ■

For more information visit [www.gbciimpact.org](http://www.gbciimpact.org)

## New service aims to reduce infection rates

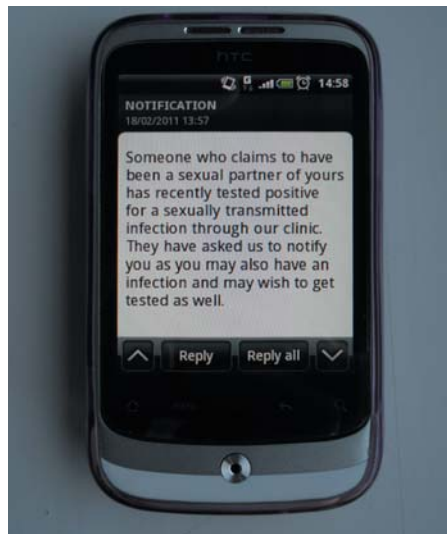
A new service has been launched that aims to tackle the growing number of STIs diagnosed in the UK.

The scheme allows those who have tested positive for an STI to contact previous sexual partners through an anonymous email. The email informs recipients that a former partner of theirs has been diagnosed with an STI, and advises them to get tested as soon as possible.

By eliminating the possibility of an embarrassing or sensitive conversation, the service hopes to reduce the country's rising rates of re-infection.

Half a million UK residents were diagnosed with an STI in 2009, some 12,000 more than in the previous year. And one in 10 of those who are diagnosed become re-infected within a year because a condom was not used.

The service is being provided by the TheSTIClinic.com, which is based in Harley Street, London. On request, staff at the clinic will be able to activate an email which reads: “Someone who claims to have been a sexual partner of yours has recently tested positive for a sexually transmitted infection through our clinic.



*Previous sexual partners can be contacted via an anonymous email that notifies them to have an STI test*

They have asked us to notify you as you may also have an infection and may wish to get tested as well.”

TheSTIClinic.com provides a simpler alternative to regular Sexual Health or 'GUM' clinics, offering a range of home testing kits, face-to-face consultations and treatment options.

Similar services have already proved to be successful in the United States. InSpot.org, which launched in 2004, is a San

Francisco-based organisation providing web cards that can be filled out and sent either anonymously or openly to previous sexual partners. Within a year of being launched, the website was recording 750 unique visitors every day and sending out 500 web cards each month.

But there is a downside: unlike the STIClinic.com, InSpot.org is open to pranksters who can abuse the services available. This resulted in people being contacted and incorrectly informed that they were likely to have an STI.

If it is used correctly and rolled out across the UK, the innovative new service from the STIClinic.com may help to slow down the country's increasing number of STI infections.

There is reluctance among many people to take part in an STI test, whether the reason is embarrassment, shame, fear of being diagnosed positive or simply a lack of knowledge in relation to sexual health.

This new service hopes to provide the necessary incentive to encourage more sexually active people to go for a sexual health check up - and in turn help to improve the sexual wellbeing of the UK. ■

# Sending a message through the medium of film

## Two new films have recently been released promoting sexual health in Europe and Africa

The last time Sweden produced its own sex education film - more than four decades ago - it caused controversy across the western world.

Featuring live actors in authentic scenes of intercourse and masturbation, the 1969 release *Language of Love* led to protests when it was shown in the UK and was seized by customs officials at the US border. Such was the notoriety that Sweden became synonymous with sex for many years to follow.

Now there is a new film, *Sex on the Map*, which has been co-produced by the Swedish Association for Sexuality Education (RFSU) and the Swedish Educational Broadcasting Company (UR).

This release is likely to be less controversial than the last, not only because times have moved on and today's more liberated audience is not so easily shocked by seeing sex on the screen, but also as it is a fully animated picture using cartoon characters.

The setting is a school library where a teacher talks about sex in a frank and open way to five teenagers. He explains everything from the basic anatomy of the genitals to sexual acts in all their various forms. All the content is based on real questions that Swedish teenagers have asked RFSU in recent years.

The decision to produce a new film followed concerns that the country's teenagers are not as knowledgeable as they should be. For the past 25 years, schools have relied on a Danish-made film and it was thought this was failing to meet the young people's needs.

The film's writer and director, Annamaria Dahlöf, found during her research that teenagers were struggling with even the most basic of questions about sex. "It wasn't uncommon to be asked 'Can you get pregnant if you have a bath in the same water that a boy has ejaculated in?' for instance," she told the *Dagens Nyheter* (DN) newspaper.

Despite this apparent lack of knowledge, Sweden stands out to some degree as a shining example to other European countries. Its teenage birth rate is significantly lower than the UK, for example, and it enjoys an open attitude towards sex and sexuality.

However, its infection rates for sexually transmitted infections such as chlamydia have been steadily rising during recent years and there is perceived to be a general lack of understanding and concern about the importance of using condoms, particularly among those aged 19-21 years.

It is intended that the new film will be shown throughout the Nordic region. A version with English subtitles will also be released, however there are no plans as yet to distribute it to the wider international market.

While the Swedish production relies on cartoon characters to put over its message, a new African release is taking a documentary approach.



*Elkana Ong'esa, a central character in the documentary 'Protection', is a Kenyan elder who, since losing his daughter to AIDS, is determined to spur discussions on HIV within his community*

*Protection: A Film About Men and Condoms in the Time of HIV and AIDS*, which is available in seven languages, is aimed at becoming an educational tool for organisations throughout the continent to bring home the realities of HIV and condom use for African men and boys.



*Sweden's sex education film uses animation*

The two films do have a Nordic connection as *Protection* stems from the Norwegian Refugee Council's education programmes and is funded largely by the Norwegian government.

While female-centred approaches to the fight against HIV have been central to the African response for some years, the goal of this film is to increase male participation.

Executive producer Jill Lewis explained: "HIV is a problem which occurs between men and women and the solution has to involve both fully. An underlying motivation of the film is to open up discussion that will help men and boys protect themselves better.

"If you can get them to protect themselves from HIV, then any of their partners will also be protected. If men and boys aren't on board, the women can be empowered to Timbuktu, but they're not going to enact that empowerment if men are pitched against them,"

*Protection* doesn't use the traditional approach of presenting HIV statistics or demonstrating condoms but instead relies on the interviewees to speak openly about their views, beliefs and experiences. These range from an HIV-positive bishop to a South African boxing champion and from a Kenyan elder to a young aspiring football player from Sierra Leone. Some believe passionately in condoms, others don't.

Lewis added: "The idea with this film is that you're seeing the different pulls, the contradictions, the world that men and boys are navigating to think about condoms, HIV and their lives." ■

# Education relies on parent power for success

Eastern and Western countries are united in the conviction that children need their parents to inform them in sexual matters

Parents are being placed at the forefront of a focus on compulsory sex education for children in Malaysia's primary and secondary schools.

Speaking during a television debate, Deputy Education Minister Dr Mohd Puad Zarkashi said the education would only succeed if parents played their part in discussing the subject with their children at home.

Social and reproductive health education is becoming a compulsory weekly module during Physical and Health Education lessons in the classroom. The syllabus will include health, psychology, sexual relationships and family, as well as social values.

The Education Ministry hopes that this will help to reduce social problems such as teenage pregnancy and baby dumping. Police records show that at least 100 babies are abandoned each year in Malaysia.

Teachers are reportedly uncomfortable with the proposals, saying they are already overworked and not qualified to teach the subject. Meanwhile, the proposals have won praise from some parents, with a mixed response from others.

"Some parents are more cautious of the subject while others are the 'anything can' type," Dr Puad commented.

The uncertainty felt by these Malaysian parents about discussing sexual matters

with their children is reflected in other parts of the world.

A recent study published by the *Journal of Adolescent Health* in the United States found that the vast majority of parents (98 per cent) thought that school-age children in principle should receive information about sex from parents. However, only 24 per cent considered they had been their own children's primary source.

Teachers were the parents' second choice as a good source of information (69 per cent), but, again, only 15 per cent believed this was actually what happened in practice.

On the other hand, the sources that parents thought were the most unreliable



Talking about sex with your children may be uncomfortable, but it pays dividends

for their children – friends/classmates (six per cent) and the media (four per cent) – were considered to be the most likely influences. Some 78 per cent cited friends as the biggest influence on their children and 60 per cent said the media.

For psychologist Nancy Irwin the study begs the question of why young people cannot get the information they want from their parents.

"This should be a wake-up call to parents," she commented. "You and your kids want the exact same thing. What are missing are the proper tools."

One new way of involving parents more fully is being introduced by schools in the Massachusetts district of Needham, where the focus is on blending sex education into the science curriculum.

Dr Kath Pinkham, the district's director of Health and Physical Education, explained: "We're looking at giving homework which could involve students asking parents what going through puberty was like for them. Research has shown that this open dialogue helps students learn how to communicate about sex in a healthy way.

"Talking about sex with your kids can be uncomfortable. We don't like to think of our kids as sexual beings and we don't like them to see us as sexual beings, but what's important to know is that they're going to get this information somehow and it's important that parents are involved." ■

## Pakistan shuns sexual guide

The publication of a book to educate young Muslims in sexual health has caused controversy in Pakistan.

Dr Mobin Akhtar, a psychiatrist, says the aim of his book, *Sex Education for Muslims*, is to teach young people about sex in a way that is in keeping with Islamic instruction.

He believes the fact that sex is not discussed in Pakistan is having serious

repercussions. He has seen cases where teenagers at puberty, not understanding what is happening to their bodies, have become depressed and even committed suicide.

Dr Akhtar told the BBC that there is nothing un-Islamic about discussing sex and he felt the best way to help people understand that was to write a book which brought together basic sex education with

information about the Islamic perspective on the subject.

But many Pakistanis have found Dr Akhtar's book unpalatable. Despite toning down the title – in Urdu it is called *Special Problems for Young People* – he has been accused by politicians of encouraging pornography. Very few bookshops are willing to stock the book and newspapers have refused to print paid advertisements for it. ■

# Threats counter safer sex advice

## Sex workers are bowing to male pressure not to use protection

Although a high proportion of sex workers in East Africa have been reached with HIV prevention messages, this is still not resulting in them following the advice to use condoms.

According to UNAIDS, more than seven out of 10 sex workers in Burundi have now received some form of HIV education. Yet HIV prevalence among these is 38 per cent, which is more than 12 times the national average.

In Kenya, 39 sex workers tested positive for HIV out of 143 taking part in a study carried out in the capital Nairobi. Between them, these 39 had had a total of 177 unprotected sex encounters during the study period.

The findings have been reported in *PlusNews*, the online HIV and AIDS news service of the United Nations Integrated Regional Information Networks (IRIN).

It is not that the sex workers are all ignorant of the risks they are taking, but these risks are being outweighed by other factors: particularly money and the fear of violence.

"I can't lie that I don't know how important a condom is – I know. But I can't count how many times I have slept with men without

it," Eunice Mueni, 23, a sex worker in Nairobi, told *PlusNews*.

"Some men tell you they like it without a condom. If you refuse, they beat you; some tell you they will give you double money. You fear being beaten and you like more money also, so you are in a dilemma and you just give in."



*Sex workers find it difficult to negotiate condom use with clients*

Sex workers find it difficult to negotiate with the man to use a condom. They are desperate for money – so they are reluctant to put off a man who promises to pay more for unprotected sex – and they would not report threats of violence because of the illegal nature of sex work.

According to Nicholas Muraguri, head of Kenya's National AIDS and Sexually Transmitted Diseases Control Programme, educating sex workers without doing the same for their clients only deals with half the problem.

"It would be useful to make people see the need to use condoms with all their sexual partners, including commercial sex workers," he said.

"The best places that you would reach such people with prevention measures are drinking joints, because those who patronize such places are the most likely to seek the services of sex workers." ■

## Conferences and events

### Current Issues in Sexual Health 2011: 3rd National Conference

**Date:** 24–25 March 2011

**Location:** London, UK

**Key Theme:** Bringing together leading experts in the fields of genitourinary medicine, sexual health and infectious diseases to discuss the central issues and current challenges in the prevention and treatment.

Contact:

[www.mahealthcareevents.co.uk/cgi-bin/go.pl/conferences/detail.html?conference\\_uid=223](http://www.mahealthcareevents.co.uk/cgi-bin/go.pl/conferences/detail.html?conference_uid=223)

### HIV Management 2011: The New York Course

**Date:** 28–29 April 2011

**Location:** New York City, USA

**Key theme:** Providing the latest information and practical guidance from experts on HIV pathogenesis, prevention, resistance, antiretroviral therapy and management of complications.

Contact: [www.newyorkcourse.com](http://www.newyorkcourse.com)

### The 20th Annual HIV Conference of the Florida/Caribbean AETC

**Date:** 13–14 May 2011

**Location:** Orlando, USA

**Key theme:** To increase the knowledge and skills of HIV health care providers with lectures and interactive case presentations.

Contact: [www.faetc.org/Conference/](http://www.faetc.org/Conference/)

### HIV in Europe - unity and diversity

**Date:** 25–27 May 2011

**Location:** Tallinn, Estonia

**Key theme:** Covering the key issues related to the HIV epidemic, prevention and care in the European region, with a special focus on Eastern European countries.

Contact: [www.aids2011.com](http://www.aids2011.com)

### 20th World Congress for Sexual Health

**Date:** 12–16 June 2011

**Location:** Glasgow, UK

**Key theme:** The biennial World Association for Sexual Health Congress unites international clinicians, researchers, educators, activists and policy makers specialising in the multitude of fields related to sexual health.

Contact: [www.kenes.com/was](http://www.kenes.com/was)

*Challenges* is an occasional publication produced by the Durex Network. While the articles are accurate summations of current sexual health matters, the views and opinions expressed are not those of the editor.

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