Abstract:

Integration of sexually transmitted disease (STD) and HIV/AIDS control efforts into family planning programs in sub-Saharan Africa offers the potential to reach women of childbearing age when the risk of exposure to STDs and HIV is greatest. Such a strategy is especially important now that the AIDS epidemic has come to involve women from lower risk groups infected as a result of their partner's contact with women from high-risk groups (e.g., commercial sex workers). In particular, there is a need to promote the concept of dual contraceptive method use to provide protection against both STDs and pregnancy. Integration of these services also permits maximization of the limited resources available in developing countries. An obvious disadvantage of integration is that such services may not reach men directly, necessitating family planning program reorientation to permit more interaction with men. This paper reviews the available evidence on the magnitude of the STD/HIV problem in sub-Saharan Africa, advantages and disadvantages of an integrated service strategy, dual method use, the effect of various contraceptives on HIV risk, and breast feeding and HIV. This review supports continuation of both oral contraceptive use and breast feeding in sub-Saharan Africa.