

**WHAT DO
YOU NEED
TO**
#MAKEITGOOD?

Insight Topic 4: **CONDOMS**

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INTRODUCTION

NHS Tayside and partners want to adopt a positive approach to young people's sexual health. An insight gathering project has engaged young people in discussion of what they need to make relationships good. The purpose of the insight process is to bring detail to consideration of future services, particularly the possible use of social marketing or broader communication messages targeting young people.

This paper is one of a number of topic chapters published at www.makeitgoodtayside.org Each topic chapter presents:

- Insight from young people.
- Insight from other research, resources or services.
- A summary and discussion points.

For more about the insight gathering process please refer to '**About the Insight Gathering project**' also published at www.makeitgoodtayside.org

1. INSIGHT FROM YOUNG PEOPLE

The topic of **CONDOMS** was raised and discussed in all of the initial 16 focus group discussions with young people. In terms of online engagement, responses to the **CONDOM** online survey came from 30 young people as follows:

Online engagement by Local Authority:

	Number of online submissions
Angus	5
Dundee	22
Perth and Kinross	2
Other area	1
Total by method	30

Online engagement by gender:

	Male	Female	Other gender identity
Number of participants	12	15	3

Online engagement by age:

	Under 16	16	17	18	19	20	21+
Number of participants	7	12	5	2	4	-	-

In addition to discussion in focus groups young people completing the **CONDOM** survey provided a response to the request: *Tell us about your experience of condoms when it comes to sex or relationships*. Insight from young people points to several themes.

Purpose of condoms

Young people associate condom use with both contraception/birth control and STI prevention.

Avoiding pregnancy and STDs. (16/Dundee/Female)

Having safe sex. (17/Dundee/Female)

Safe sex and no babies. (16/Dundee/Female)

Condoms are very important in sex because if you don't use one the girl could become pregnant or either people could contract a STD or STI.
(16/Dundee/Female)

I need condoms to be safe as I've recently came of the implant due to discomfort. (17/Angus/Female)

However, across contributions young people have largely focused on condom use being associated with prevention of pregnancy, with STI prevention being a secondary concern.

People don't think about STIs, it's just pregnancy they worry about. (Focus group 12)

In one focus group discussion this utilitarian view of condoms as a tool for preventing pregnancy or STIs was reinforced by a lack of discussion about using condoms in context, in the classroom.

It's all about STD's and not getting drunk and getting pregnant. It's not really any useful information. Even when they do talk about condoms it's really embarrassing and they don't really ask us anything. (Focus group 2)

Commitments to using condoms

While service providers may have worries about young people's ambivalent attitude toward condom use young people engaging in the insight gathering process have expressed commitments to use them. For some young people, using condoms is well-established and non-negotiable.

I wouldn't have sex with someone without protection. (Focus group 1)

I feel like everyone that I've spoken to about sex all expect to use protection, it's just like a thing that goes with having sex. (Focus group 1)

It's just how it is now I think, I mean why would you ever not use a condom?
(Focus group 6)

I wouldn't have sex without using something, I think I'm more afraid of getting pregnant than catching an STI though. They seem a lot less stressful! (Focus group 5)

Commitments can waver however. For this young person, planning condom use in advance of having sex, and basing intentions on the experience of peers, there remains some doubt as to their necessity.

I mean we talk about it with our close friends, but I don't really talk to other people about it. I haven't, you know, yet. But when I do I think I will want to use one. But then the girls I know who are in relationships and having sex with their boyfriends they don't use anything, or if they do now, they didn't for a long time.

So, I think the importance of it is maybe over-emphasised in school. Like if they aren't using them and they aren't you know dying of AIDS or getting pregnant then maybe it doesn't matter. (Focus group 2)

Responsibility for condom use

Whether a young woman or young man has responsibility for condom use has been a common theme across focus group discussion. In some discussion contributors placed the balance of responsibility for condom use with young women; this might be because young men don't think about it or think it's important.

I definitely think it's more expected for girls to protect themselves, guys don't seem that bothered. (Focus group 1)

Well they need to be more careful. Most of the girls round here are on the pill anyway, so they aren't gonna get pregnant. That's up to them if they want a child anyway. (Focus group 7)

With pregnancy seen as a greater concern than STIs, views were also expressed in discussion that a young woman should ensure she is using some form of contraception, especially in light of a young man's potential refusal to use condoms.

I think it's quite difficult for a girl to persuade a guy to use contraception. I think if she wants to use contraception she needs to sort it out herself. (Focus group 2)

Boys assume girls are on the pill. (Focus group 12)

Girls would use the pill or the morning after pill. (Focus group 14)

I'd assume they were using contraception. (Focus group 14)

However, some young people have also shared the view that condom use should be a shared responsibility.

I think it's both of your responsibility, I mean even if you are a lassie. It's not like you wouldn't notice if a guy hadn't put a condom on. I think it's ok for girls to refuse having sex, and guys as well for that matter, if their partner doesn't want to be protected. You have to share the responsibility and the result, if it goes wrong, equally. It's about respecting each other. (Focus group 6)

It's the responsibility of both the girl and boy to be taking precautions to make it safe. Like I'd always expect him to wear a condom even if I'm on the pill anyway. Cos I really don't want to get pregnant. (Focus group 8)

If not stated explicitly, responsibility for condom use can be ambiguous.

Both should be responsible, but in reality you might expect the other person to do it. (Focus group 13)

Motivations for condom use

In two focus group discussions, young people linked condom use and prevention of pregnancy with thinking about the future and aspirations. In the first the young man shares his own ambitions and vision for when he feels fatherhood would be right for him. In the second a young man shares a rather stark view of local young women and commitments to condom use.

I'd always wear a condom cos I don't want to be getting the clap or that, and I get myself checked out anyway, cos you can still get crabs even with a condom. They aren't like the sexiest of things but they are worth it. You have to be steady to have a kid, I'd never want to get a girl pregnant now, I'd need a job and somewhere to stay, a motor and that. (Focus group 8)

Maybe if you were from up the west side of Perth and like your bird was wanting to go off and study university or something then you might think about having a wee rubber sesh, but the girls round here aren't bothered. It's not like they are gonna stop you if you dinnae put a johnny on. (Focus group 7)

Condoms and relationships

Young people have given some insight into decisions about condom use in the context of relationships, with some identification of a relationship of several months being the point at which condom use might cease.

It is sometimes ok not to use condoms if you are in a long term relationship with someone you trust and you can openly talk to your partner. Shared responsibility between men and women. (17/Angus/Other gender identity)

Like wearing condoms and that, like I don't think you have to do it always. Like if you've been in a relationship for a while, like a few months or something. But I wouldn't just like sleep with someone random without wearing a condom. (Focus group 6)

If you are with a girl for a while, like a couple of months or that, and you think you can trust her and she's no got the clap then, aye, lower your defenses. But it's your body, so if you want to be healthy then make the good choices. (Focus group 7)

Availability: Buying condoms and being embarrassed

Tayside has a long established C Card service, yet young people have highlighted the cost of condoms as prohibitive.

Buy from bathroom. (16/Angus/Male)

Overpriced plastic life savers. (16/Dundee/Male)

Condoms are so expensive and guys never buy them, even my friends get me to buy them for them, they are really embarrassed. Now that we come here we can get condoms for free, but before we didn't know this sort of place existed, so I would spend like £5 on condoms and that is a lot of money for sex. (Focus group 1)

Johnny's are too expensive, they are like those machines in Asda and that £2 for 2 rubbers. It's no wonder people don't use them. (Focus group 7)

Alongside cost the process of buying condoms is seen as embarrassing.

Embarrassing to buy. (18/PK/Male)

One focus group contributor identifies that issues of cost and embarrassment would be addressed by improving access, including via an enhanced free condom service.

I feel like guys get really embarrassed about condoms, they treat it like it's a joke or something and they are fine with that, but actually when it comes to it, they don't know what to do. I buy condoms for guy friends because they are too embarrassed to go into the shops. If condoms were more available in schools and that, like even if condom machines worked rather than just taking your money, then it would be better cause I think it's important for people to feel they can get them and then choose to use them. But they are still too expensive. (Focus group 1)

However, in one discussion young people also recognised that even a free service can be embarrassing to use.

This place isn't always open, and when it is there's always somebody sat there. So if you were in here like helping yourself to johnny's every day, then you might get a bit of a reputation. (Focus group 7)

Problems using condoms

Responding online to the request to comment on condoms young women identified a number of issues which might suggest problems with 'fit', using condoms of poor quality/out of date or allergic reaction.

Condoms are not 100% safe. They are easily ripped or get small holes in them that you can't see. (17/Dundee/Female)

They fall off quite easily if u ride to hard. (19/Angus/Female)

Very sore, makes me not want to use them and I rarely do. (19/Dundee/Female)

Young women can worry that a partner does not have the condom on:

Guys will say they've put it on and they haven't. (Focus group 13)

Why young men don't like/won't use condoms

Earlier insight highlighted young people's commitment to condom use. This is balanced by others who do not share such a view, or for whom condom use is dependent on other factors such as being drunk.

Tend not to use them. (19/Dundee/Male)

Depends how drunk you are. (Focus group 14)

For young men condom use can be "a passion killer". (Focus group 9)

Naw, they get in the way of the joojoo. It's such a hassle and it breaks the flow. (Focus group 7)

I don't use them because I feel they take away the pleasure. (16/PK/Other gender identity)

They're shite... You feel less. (Focus group 11)

You can't feel it. I'm against it. You can't do it, they freak me out, feel dodgy. (Focus group 14)

Condom use can be difficult to either think about or negotiate in the moment.

You've got to respect yourself. Like everybody knows that having sex, you could catch something, but you have to make the decision in the minute. That means if you don't have a johnny and you are already there, then you are probably not gonna stop to sort yourself out with one. But everybody's different. (Focus group 7)

And other reasons to not like condoms can include smell, allergies and fit:

It's the smell of it, man the room reeks. You're not gonna get oral after your dick smells of rubber. (Focus group 14)

You might be allergic. They might not fit. (Focus group 11)

If a young man is making a decision about condom use, with priority given to maximising pleasure or avoiding the hassle of using them, this may not be countered by worry over STIs when these are seen as relatively easy to sort.

No one around here uses condoms, folk are pretty riddled and we know that. It's easier just to head up the Drumhar and get yourself seen to. (Focus group 7)

Finally, focus group discussion has identified that talking about condoms, or making commitments to use condoms, requires some consideration of how a young man sees himself *as a man*.

There is a real thing that guys don't think it's manly to use condoms, you never hear people talking about condoms unless it's like a joke or making fun of someone. (Focus group 2)

Guys have too big an ego, but really they're shy to actually go and get them. (Focus group 13)

Aye, it's funny 'cos it's...you might be the big man 'cos you've had loads of birds but actually when it comes to it, there's not much pride in protecting yourself. (Focus group 7)

2. INSIGHT FROM RESEARCH, RESOURCES OR SERVICES

The purpose of identifying insight from other sources is to help locate young people's perceptions and lived experience in a broader context, and where possible to provide further evidence to support the stress which young people have given to an issue, in this section regarding condoms.

This is not an exhaustive review of literature, the bulk of project resource has been put to engagement with young people, but an identification of what seems particularly important in consideration of the sexual health and wellbeing of young people and gives insight on other work that should form part of local partners' consideration of service development and particularly the use of social marketing in relation to sexual health.

In terms of condom use and risk, from the NATSAL 3 surveyⁱ we know that (UK figures) 16.4% of men and 14.3% of women aged 16 – 24 report **at least two sexual partners with whom no condom was used** in the year prior to survey.

NHS Tayside and partners support a **C Card service**. Evidence shows that such schemes provide positive benefits in a number of areas. Research reviewed by the US Centres for Disease Control and Preventionⁱⁱ finds that schemes increase condom use, prevent STI and save money (in terms of care and treatment costs) and that they do this by increasing availability, accessibility and acceptability of condom use. **Condom distribution schemes are viewed as an important part of a larger STI/HIV prevention strategy.**

Research helps us understand why young people – particularly young men – do not use condoms. A description of some work in this area will evidence that the earlier insight from young people is reflective of much of these findings.

Bethan Hatherallⁱⁱⁱ and colleagues (prepared for Brook by The Centre for Sexual Health Research, University of Southampton) have explored **young people's use of condoms**. Firstly, the research identified that although young people might use condoms *sometimes* this is not consistent and that condoms are more likely to be used:

- When no other form of contraception is being used.
- If condom use is discussed and agreed (a strong association was found).
- If a condom has been used previously.
- If it is thought friends use condoms (again a strong association)
- If sex is very much wanted rather than just a little or not at all.

The study also found that young people view condom use is primarily about contraception rather than STI prevention, with young people perceiving low levels of personal risk in this regard. A particular problem with condom use was seen as late application (after penetrative sex had begun) or early removal (before completing sex). Problems associated with condom use were likely to increase if alcohol was being consumed.

Looking to other research that explores why condoms are not used Larry Brown^{iv} and colleagues in the US enrolled 1,410 adolescents/young adults between the ages of 15 and 21 with a history of unprotected sex in the past 90 days at four study sites. They found that condom use was negatively affected by **a lack of communication** between sexual partners, a perception that talking about condom use would be reacted to badly by potential sexual partners and a belief in young men that using condoms means a loss of sexual pleasure.

Exploring the experiences of young heterosexual men (in Australia) Michael Flood^v and colleagues found five themes when young men talk about not using condoms, these are reflective of the research already highlighted and young people's earlier insight. Firstly, men stress the risk of pregnancy rather than the risks of STIs, and then rely on their female partners use of the contraceptive pill. Second, men say that using condoms reduces sensations and so pleasure and that condoms are difficult to use. Third, they say that condoms are difficult to use *in the moment*. Fourth, men minimise STI risk in the context of relationships and so they can quickly define involvement as a relationship; this means they say they trust a partner to be monogamous and so see no need for condoms. Finally, young men believe that they are very unlikely to contract HIV.

Looking to research from the US Crosby^{vi} and colleagues explored what they call **condom turn-offs** among adults. Nearly 2000 people completed a web-based questionnaire and the data from the 464 men and women who reported that condoms had 'turned them off' the last time they were used was analysed; for most turn-offs no gender differences were found. The most common turn-off related to loss of pleasure. Then respondents identified problems associated with putting condoms on. Smell was also a frequent turn off, as were problems linking using condoms with interference in terms of arousal and orgasm.

Exploring the particular problems associated with using condoms in a rushed way other research by Crosby^{vii} and colleagues report that when rushed the chances of breakage and slippage were almost doubled. Rushed application also increased the odds of not using condoms throughout sex and the problem of leakage.

Conducting a comprehensive review of the literature Rosie Webster^{viii} and colleagues have articulated **barriers and facilitators as well as theoretical/psychosocial predictors for condom use**; identified in the tables below these reflect findings described earlier and also key elements of the insight from young people.

Barriers to condom use	Reduced pleasure or sensation when condoms are used.
	Condoms cause interruption of sexual activity.
	Condoms reduce intimacy.
	Judging the risk of STI using appearance or behaviour.
	Saying one thing and doing another – the intention-behaviour gap.
	Partner perceptions/influence.
	Difficulty using condoms.
	Having sex under the influence of alcohol.
	Low perceived susceptibility to STIs.
	Condom problems (e.g., breaking, discomfort).
	Lack of awareness about risk of oral sex.

Facilitators to condom use	Condoms as prevention against pregnancy.
	Reflection on past behaviour as a motivator.
	Awareness/close personal experience of pregnancy or STI.
	Seeing condom use as an “essential behaviour”.
	Desire to avoid STI.
	Dislike of visiting clinics.
	Having condoms available.
	Communication about condoms with partner.

Theoretical/ psycho-social predictors identified in quantitative studies	Norms surrounding condom use.
	Attitudes towards condom use.
	Self-efficacy about using condoms.
	Perceived susceptibility/risk.
	Perceived benefits of and barriers to using condoms.
	Outcome expectancies.

While much of the literature focuses on problems associated with condom use, particularly thinking about young men, some research and tables 2 and 3 above also identify what facilitates condom use - the final table helps points to educational or clinical interventions that might address negative or ambivalent views and practices on condom use, building on the table above this might mean, for example:

- Young people could be provided with a variety of condoms and encouraged to play and practice with them to find a brand and size that maximises sexual pleasure.
- In playing and practicing with condoms they could be encouraged to recognise the importance of taking time and putting them on correctly.
- Efforts could be made to teach and support adolescents to effectively communicate with partners to use condoms; this might challenge norms that see young men making decisions in the realm of sex and young women bearing responsibility for contraception.
- Clinics could encourage young people to come with their partner and talk about choices and behaviours on contraception and condom use, helping them build communication about these matters.
- Using condoms could be associated with worry free, enjoyable sex.
- Using condoms needs to be seen as the norm – as something other young people do.

3. CONDOMS: SUMMARY AND DISCUSSION POINTS

When it comes to the insight offered by young people and other sources several important themes and issues have been highlighted. These are summarised below and discussion points are highlighted.

Role of the private sector

As well as services or at school, young people can access information about condoms from commercial companies. On their website Durex^{ix} have produced a number of short films that address barriers to condom use with titles such as: *Why wouldn't you use a condom? Are girls who carry condoms promiscuous?* There are also visual and text images that promote condom use. In essence the company are

using social marketing in order to reframe young people's relationships with condoms (and locate the brand/increase sales). These materials need some close examination for their possible use across services and in learning.

A new normal

For many, but not all, young people reasons for not using condoms are entrenched. The barriers to condom use (or reframing this as a positive challenge, *what motivates young men not to use condoms*) are powerful and have become accepted as the norm whether young men actually experience these problems in reality or not. So, condoms reduce pleasure, they don't fit properly, they come off or break, they are fiddly and ruin the moment, they smell, they are unnecessary because it's the girl's responsibility to use contraception. Encouraging young people to reframe their view of condoms will require (in social marketing terms) a mix of methods and approaches that could usefully start before young people have sex with the intention to foster positive attitudes, improve skills and create new norms when it comes to condom use.

A focus for social marketing

Condom use is a key issue for the commissioning partners because it is understood to be a proven response to addressing high conception rates and STI acquisition. It is therefore a strong candidate for the focus of a social marketing campaign. The approach has been used in Scotland before, targeting gay/bisexual men via the HIV Comeback Tour in Lothian and the Equal campaign by Health Boards in the west of Scotland. Lessons might be learned by exploring both these campaigns, how their work utilised the social marketing benchmarks described in the introductory chapter, and whether evaluation from the work evidenced impact beyond attitudes or knowledge to actual behaviour change.

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