



TAYSIDE CONDOM INITIATIVE

Distributor Handbook

**Version 3
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www.sexualhealthtayside.org

<http://www.sexualhealthscotland.co.uk/>

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Abbreviations

BBV	Blood Borne Virus
CDS	Condom Distribution Scheme
ISD	Information Statistics Division
LARC	Long Acting Reversible Contraceptives
MCN	Managed Care Network
MSM	Men who have Sex with Men
PLWHIV	People Living With HIV
PWID	People Who Inject Drugs
STI	Sexually Transmitted Infection
TCI	Tayside Condom Initiative

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Your responsibility

The recommendations in this handbook represent the view of NHS Tayside Condom Initiative (TCI), as informed after careful consideration of the evidence available. When exercising judgement, professionals and practitioners are expected to *take this handbook into account, alongside the individual needs, preferences and values of their patients or the people using their service.*

It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual. The care and protection policies and protocols of the distributing organisation, should always be followed.

Local commissioners and providers of healthcare have a responsibility to enable access to the TCI, when individuals from key populations wish to use it. They should do so in the context of local and national priorities, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

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1. Introduction

Welcome to the Tayside Condom Initiative distribution handbook. This handbook outlines how the free condoms distribution service will operate in Tayside including who this service is for, what the features are and how distributors and service users can access this. This document should primarily be used as a reference tool for distributors.

2. Background

The Sexual Health and Blood Borne Virus (BBV) Framework for Scotland 2011-2015¹, and its 2015-2020 update^{1b}, advocate interventions and approaches to improve health and wellbeing in Scotland. As a particular outcome the framework intends to reduce the number of newly acquired sexually transmitted infections (STIs), blood borne infections and unintended pregnancies by improving public health through strong health improvement prevention and education initiatives amongst professionals and the public, particular among those at risk.

The Information and Statistics Division (ISD) & Health Protection Scotland, collate epidemiological information on sexual health nationally. National data as well as data at regional and local authority level are provided at www.isdscotland.org/teenpregs/ and <http://www.hps.scot.nhs.uk/bbvsti/index.aspx>. Generally, across Scotland, diagnoses of STIs continue to increase, a trend which is mirrored in Tayside. HIV diagnoses for NHS Tayside total 8% of the cumulative Scottish diagnoses.² NHS Tayside no longer has the highest rates of teenage pregnancy in Scotland, however, Dundee City continues to report poor sexual health outcomes among young people in Scotland: rates of STIs are high and the city has some of the highest rates of teenage pregnancy of any local authority in Scotland. Nonetheless, there has been considerable improvement in recent years and the rate of teenage pregnancy has declined steeply since 2007. The most recent ISD data covering the year to 31st December 2016, shows the ninth successive annual reduction in the rate of teenage pregnancy in Tayside across all age groups.

There is evidence to suggest that when used consistently and correctly, male condoms are up to 98% effective and female condoms up to 95% effective at preventing unintended pregnancies and reducing the risk of STIs.³ Condom distribution can also be used positively as an opportunity to discuss and offer support around safer sexual behaviour and other contraceptive choices, particularly long-acting reversible contraceptives (LARC).

3. The approach to free condom distribution

This handbook draws on the available evidence. In brief, there are various ways to ensure condoms reach the right people in the right place, different models of condom distribution all have differing strengths and weaknesses to consider. However evidence suggests that there are essential components for effectively targeting free condoms (Table 1).

Table 1

Essential components	Rationale
Strategic Support	Strategic support is essential to allow front-line workers to develop local initiatives otherwise staffing and funding issues prevail. The NHS Tayside Condom Initiative Distribution Handbook outlines the strategic direction of the Sexual Health & BBV Managed Care Network (MCN) to give front-line workers guidance on how to set up free condom distribution and how best to reach those who are at higher risk from poor sexual health.
Child Protection	Under age sexual activity causes anxiety amongst professionals distributing condoms. This Handbook contains tools and information to support professionals working with young people who are under 16 who may be or become sexually active. You should always follow your own organisations' care and protection protocols.
Inter-agency working & offering a range of access options	The limitations of the health sector in its ability to improve health effectively on its own is acknowledged and a wide-ranging collaboration is an absolute necessity, which is internationally recognised. ⁵ Condoms that are distributed in a variety of settings by a variety of different professionals offer the best opportunity to improve sexual health. Where possible Condom Distribution Schemes, should be situated within existing organisations likely to be used by the target populations.
Sexual health information & support	<p>When condom distribution is combined with drop-ins⁵ (particularly those that are staffed on a multi-agency basis) it provides the information and support that individuals need.</p> <ul style="list-style-type: none"> • Tailor information and advice according to the young person's needs and circumstances, including their sexual identity and whether or not they are having sex or are in a healthy, consensual relationship.

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	<ul style="list-style-type: none">• Discuss the effect that alcohol and drugs can have on decision-making and their ability to consent.• Teach young people to use condoms effectively and safely (using education, information and where appropriate, demonstrations) before providing them.• Provide information about emergency contraception and post-exposure prophylaxis so that young people know what to do and where to go in the event of a condom failure.
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4. Aim

The aim of this service is to make free condoms available to target populations across Tayside.

Guiding principles of free condom distribution are:

- The reduction of unintended pregnancies;
- The reduction of sexually transmitted infections;
- The prevention of HIV transmission.

5. Who the service is for

It is not an aim to exclude/refuse anyone from accessing condoms and distributors should not refuse anyone condoms. However evidence suggests that a targeted approach impacts greatest on those at most risk.⁶ Nationally recognised priority groups include the following.^{1,7}

- Homeless People
- People who inject drugs (PWID)
- Learning disabled people
- Looked after or accommodated children (LAAC)
- Men who have Sex with Men (MSM)
- Minority ethnic groups including migrants
- People with substance misuse issues (drugs and/or alcohol)
- Prisoners
- Sex industry workers
- Students
- Those affected by gender based violence (which may include sexual assault or forced sex)
- Those at risk of blood borne viruses e.g. Hepatitis C, Hepatitis B and HIV
- Women with a history of unplanned pregnancy including abortion/teenage pregnancy
- Young offenders and their partners
- Young people aged 16-24 years
- Sexually active young people aged 13-15 years

With a targeted approach to condom provision, NHS Tayside will consider all current and potential condom distributors taking account of that distributor's potential in reaching and meeting the needs of those groups listed above.

6. Features of the Tayside Condom Initiative

The service has been redesigned to be user friendly for both those accessing and distributing. The main features are:

- Free condoms can be accessed across a range of sites in Tayside;
- There is no requirement for any client/patient registration or to provide any personal details in order to obtain condoms (with the exception of the C Card scheme (optional) and condoms by post service);
- Distributors do not have to undertake any detailed monitoring
- Condoms can be accessed on limitless occasions;
- A range of products is available.

7. Finding or becoming a distributor

A list of condom distributors can be accessed via:

- the Sexual Health Tayside website:
 - www.sexualhealthtayside.org
 - Free Condom section
- Free Condom Finder App (CCard Tayside)

Any organisation that would like to become a distributor should contact either **Adrienne Dale** or **Graeme Cockburn** in the first instance (see contact details on Page 2).

Outlets must agree to distribute condoms within a health promotion framework e.g. providing service users with leaflets and sexual health advice and ensure condoms are displayed appropriately to ensure that they are easily accessible.

Staff members must attend training provided by the Condom Initiative.

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8. Products

NHS Tayside offers the following products (Table 2) as part of its condom distribution service:

Table 2 Product guide

Product Name	Description	Additional information
Regular	Male/External condom	Improved shape and fit
Naturelle	Male/External condom	Wider at the head of the penis
Trim	Male/External condom	Narrower fit
King Size	Male/External condom	Wider fit, slightly longer
Sensitive (Feel)	Male/External condom	Thinner condom
Flavoured (Taste)	Male/External condom	Flavoured, recommended for oral sex
Black Velvet (Large)	Male/External condom	Slightly wider than regular condoms
The Smiley Range	Male/External condom	Individually wrapped with unique designs
The Pride Range	Male/External condom	Individually wrapped with unique designs
The Love Range	Male/External condom	Individually wrapped with unique designs
Red Ribbon	Male/External condom	Individually wrapped with unique designs
Sensiva	Male/External condom	Non-latex – for those with allergies only
Femidom	Female/Internal condom	Non-latex – can also be used for anal sex
TLC & Light Lube	Lubricant	Clear, odourless and pH balanced. Easily reactivated by adding a few drops of water or further lubricant

Evidence⁸ does not support the inclusion of other products such as extra/strong safe condoms therefore these are not supplied by the condom service. Where current evidence suggests an increase in condom uptake, condoms, such as glow-in-the-dark, contoured, coloured, will be considered. Condom distributors are strongly encouraged to work with clients to choose the most suitable condom from the range available and educate them on the normalisation of condom use.

Non-latex condoms are available for those with latex allergies. These should not be distributed unless a latex allergy is identified.

The TCI offers one type of lubrication for use with condoms. The lube comes in 5ml sachets and should be enough for one application, with minimal waste. The lubricant is odourless and safe to use with all latex and non-latex condoms.

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Lubricant should be provided on request, with every condom pack issued. In terms of condom safety, evidence suggests that there is no advantage in the use of lubricant for vaginal sex. In addition, some evidence suggests that condoms may slip/fail if lubricant is used inside the condom, during vaginal sex. We advise that lubricant should be used with condoms in cases where vaginal dryness is an issue.

Lubricant should always be used for anal sex as the anus has no natural lubrication.

Lubricant, offers no protection from unintended pregnancy or STIs.

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9. How to order

Order forms should be sent by post or e-mail **BY THE END OF EACH MONTH AT THE LATEST** to:

Adrienne Dale
Administrator - Tayside Condom Initiative
NHS Tayside
Kings Cross
Cleington Road
DUNDEE
DD3 8EA

e-mail: tay.bbvmcn@nhs.scot

Please note that you must use the order form in Appendix 1

Delivery/Collection of Orders

- a) If you are an NHS outlet, your order will be sent through the NHS Tayside Internal Mail system
- b) If your outlet is non-NHS in Dundee, you will receive a call informing you that your order is ready for collection from our department at Kings Cross, Cleington Road, Dundee. Your order should be collected within 7 days
- c) If you are a non-NHS outlet in either Angus or Perth & Kinross your order will be sent via the nearest NHS premises for collection
- d) Large orders (value £150 or more) will qualify for free delivery and will be sent direct from Pasante Healthcare – for guidance on the cost of orders please contact Veronica Patullo

10. Free condoms by post

NHS Tayside also offers a free condoms by post service. This service is for men who have sex with men, people living with HIV and those involved in prostitution. Free condoms by post are available by emailing tay.bbvmcn@nhs.scot or by ordering through <http://www.menonlytayside.com/condoms-by-post.html>. Individuals who wish to receive free condoms by post will need to register with the service. Distributors that are interested in promoting the service should contact tay.bbvmcn@nhs.scot for more information.

11. C Card and condom distribution scheme for 13-25 year olds

The C Card and condom distribution scheme for 13-25 year olds offers free condoms, sexual health advice and information with minimum embarrassment from distribution sites across Tayside. Any organisation can register as a distribution site, and receive up to date training to become part of the scheme.

11.1 Registration/"Unlock" and Distribution Points

Registration and distribution points are organisations that have registered with the C Card scheme and undergone training. They are able to register young people on the scheme, offer a consultation and provide free condoms and related services to young people. All participating organisations will receive an information pack with relevant resources.

To obtain more information or to register on the C Card scheme please contact Graeme Cockburn (contact details on page 2).

11.2 How it works

A young person requesting condoms has a consultation with a trained worker, this acts as an informal risk assessment. This involves a discussion of the young person's relationships, safer sex, consent, sex and the law, contraception use, risk taking (e.g. drugs & alcohol), and a condom demonstration. If they have requested one, the young person should be issued with a CCard or have their CCard app unlocked and given a condom pack. A risk assessment for under 16s will also be undertaken at each point of contact. After the assessment the young person is then able to show their C Card at any of the C Card condom outlets throughout the area and they will receive resources.

There are cards with a teal flash for under 16s and cards with a purple flash for over 16s. The CCard app, will automatically show the appropriate colour when "unlocked" based on the young person's year of birth.

11.3 Consultation

All young people will have a consultation at registration (see section 12). A confidential risk assessment for under 16s will also be undertaken at each further point of contact.

Information on working with under 16 year olds is detailed in the C Card pack and in section 12.

11.4 Numbers and type of condoms given

The aim of the scheme is to promote condom use and provide opportunities to discuss sexual health and well-being with clients. A young person should be offered to choose which condoms they would like, if they don't have a preference it is good practice to provide a variety of condoms to enable them

to try out different types. Discretion can be used to issue less/more if, for example, going on holiday / travelling.

11.5 Training

All workers distributing condoms on the scheme must undergo the training provided, and also attend updates to remain on the scheme

Currently training is arranged through Public Health at Kings Cross Hospital.

It aims to train key workers identified in the scheme to give sexual health advice to young people accessing free condoms and refer young people on to relevant services.

The current training lasts 4 hours and provides information on

- Sex & the law
- Condom use & demonstration
- Increased knowledge & skills around sexual health & wellbeing

Currently training is free and provided on a rolling basis but can be provided upon request. The training routinely updated and is subject to change.

All services that are signed up to distribute condoms to young people are expected to provide condoms to those aged under the age of 16 on the condition that they:

- Follow the guidance contained within this document
- Carry out a brief discussion with the young person as described
- Ensure that **all** young people are well supported, welcomed and not discouraged from attending the service
- Work within the National Guidance for [Under Age Sexual Activity](#)
- Adhere to care & protection procedures and policy, in place within their organisation
- Agree to attend any training updates as required

12. Providing condoms to young people under the age of 16

There is no legislation that makes it unlawful to provide condoms to those under the age of 16 although there has to be an awareness of the legislation⁹ and guidance^{10,11} which is pertinent to child protection.

The range in age at first sexual experience varies widely and is influenced by many factors. Not all young people under the age of 16 accessing condoms will be sexually active or considering sexual intercourse. Many will wish to access condoms to experiment, become familiar with or carry around.

The current legal framework Sexual Offences (Scotland) Act, 2009⁹ allows professionals working with young people, including those under the age of 16, to provide information about the use of condoms and to provide information, advice and support about sexual health. This means no criminal offence will incur when people are acting solely to protect someone from sexually transmitted infection or pregnancy, to protect their physical safety or emotional wellbeing or to provide appropriate sexual education.

With regards to child protection, all professionals are expected to risk assess each child they come into contact with. As such, distributors of condoms are asked to have a brief discussion with a young person attending their service for condoms as part of standard practice to ensure that they are not in an exploitive or abusive situation. It is best practice, but not mandatory, for this to occur every time they seek condoms.

[The National Guidance for Under-Age Sexual Activity: Meeting the Needs of Children and Young People and Identifying Child Protection Concerns \(2010\)](#)¹⁰ outlines instances where young people may be at risk of significant harm as a result of under-age sexual activity. Based on the National Guidance the following point should be adhered to when providing condoms to those under the age of 16:

- Where under-age sexual activity relates to under 13s, information *must always be shared* in accordance with local child protection procedures. If you become aware that anyone under the age of 13 has been involved in any sexual act, follow your service's local care & protection policies and procedures.

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- Prior to reporting you should explain to the young person that you intend to share information unless you feel explaining this to them would expose them to a more serious risk. You should discuss the reason you need to share the information, with whom information will be shared with and the possible consequences (positive and negative) for the young person. You should listen to and try to deal with any concerns the young person may have. You should ensure that they get any support they may need.
- The law states that it is an offence for 13, 14 and 15 year olds to have sex with one another. However, assuming there is no coercion, exploitation or risk of harm, it is unlikely that it would be in the public interest to prosecute such a case. However the risk assessment should still include a check that relationships between young people are consensual and that there is no immediate risk to the young person with regards to their sexual, physical and emotional health.
- Consensual sexual activity is not unlawful when both parties are aged 16 or over but there may be particular young people between the ages of 16-17 who may be at risk and require further support. Distributors should be aware of the need to refer these young people to local sexual health services or seek advice from local child protection leads if there are specific concerns.

Fraser Competency Guidelines apply specifically to the provision of contraception in assessing whether a child has the maturity to make their own decisions and to understand the implications of those decisions, however they are a useful tool in determining competency in a young person:

Fraser Competency guidelines state:

- The young person understands the professional's advice
- The young person cannot be persuaded to inform their parents
- The young person is likely to begin, or to continue having, sexual intercourse with or without contraceptive treatment
- Unless the young person receives contraceptive treatment, their physical or mental health, or both, are likely to suffer
- The young person's best interests require them to receive contraceptive advice or treatment with or without parental consent

More information on Fraser Guidance and Gillick competency is available in Appendix 1

13. Delay Messages

Those under 16 should be actively encouraged to delay sex until they are physically and emotionally ready to handle the implications of a sexual relationship in a positive way. The two main messages are:

'It's ok to say no'
&
'It's ok to wait till later'.

It's ok to say 'no' – young people should be made aware that they should not be pressured into having sex whether this be from partners, friends or external sources such as the media or assumed cultural 'norms'.

It's ok to 'leave it until later' – young people should receive a balanced message that it's acceptable to delay sex until it's a positive choice. Ideally, young people will have access to quality information around sexual health topics and being positive about intimacy, sex & pleasure.

Sexual experimentation is natural part of adolescent development and it is not within a professionals' role to condone active or passive choices by young people to be sexually active. It is important that young people under the age of 16 are able to access sexual health services, including condoms, to prevent unintended pregnancies and STIs.

14. Discussing sexual health and sexual behaviour with young people

Any work with young people regarding their health and wellbeing can be checked against the Getting It Right for Every Child (GIRFEC)¹¹ principles. These are:

- What is getting in the way of this child's or young persons well-being?
- Do I have all the information I need to help?
- What can I now do to help?
- What can my agency do to help?
- What additional help, if any, may be needed from others?

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Thus, condom distributors will wish to consider the following as part of their risk assessment for all young people, regardless of age:

- What is the age of this person?
- What is the age of their partner?
- What is the length of the relationship?
- Is there a significant age difference?
- What is the relationship?
- Is there a power imbalance?
- Is this a consensual relationship?
- Are there any risks regarding coercion or exploitation?
- Are parents aware of the relationship?
- Is this the first episode of sexual intercourse?
- What was the age of first sexual experience?
- How many previous sexual partners?
- Are there any particular vulnerabilities to consider? i.e. drugs, alcohol, accommodation status
- Are they in one or more of the priority groups (in addition to being under the age of 16)? (See page 6)
- What is the context of sex?
- Do they have or want to join C Card?

15. Guidance for condom use

The following information may be of use when giving advice/guidance to those collecting condoms.

Male/external condoms

- Use a new condom each time you have sex.
- Check the 'use by' date on the packet and for the relevant safety markings i.e. CE or BSI 'Kite' marked.
- Be careful how you take the condom out of the packet – sharp fingernails and jewellery can tear the condom.
- Make sure the condom is the correct way up with the “roll” on the outside.
- Find the closed end (teat/reservoir) and squeeze it to get rid of air. This will also help you roll the condom on the right way round.

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- If you have foreskin, you will find it easier and more comfortable to put the condom on with the foreskin pulled back, so that the head (or glans) of the penis is exposed. This lets the foreskin move freely and reduces the risk of the condom tearing or slipping off.
- Put the condom on when the penis is fully erect and **before** it touches the vagina or genital area.
- Still holding the end, roll the condom all the way down the penis, to the base.
- If it won't roll down then it's probably on inside out. If so, *start again with a new condom*.
- If the condom rolls up during sex, roll it back down. If the condom slips off during sex, it should be replaced by a new one immediately.
- As soon as the man has ejaculated, and before the penis goes soft, hold the condom firmly in place while pulling out. Do this slowly and carefully so you do not spill any semen (the creamy ejaculation fluid that contains sperm).
- Take off the condom, away from the vagina, anus and genital area.
- Wrap up the condom (e.g. in tissue) and put it in a bin. Do not put it down the toilet.
- Make sure the penis does not touch the genital area again, and if you have sex again, use a new condom.

Female/internal condoms

- Use a new condom every time you have sex.
- Check the 'use by' date on the packet and for the relevant safety markings i.e. CE or BSI 'Kite' marked.
- You can put the condom in any time **before** sex, but always before the penis touches the vagina or genital area. You can put the condom in when you are lying down, squatting or with one leg on a chair. Find the position that suits you best.
- Be careful how you take the condom out of the packet – sharp fingernails and jewellery can tear the condom.
- Hold the closed end of the condom and squeeze the inner ring between your thumb and middle finger. Keeping your index finger on the inner ring helps you to insert the condom into the vagina.
- With your other hand, separate the labia (folds of skin) around your vagina. Put the squeezed ring into the vagina and push it up as far as you can.
- Now put your index or middle finger, or both, inside the open end of the condom, until you can feel the inner ring. Push the inner ring as far back into the vagina as it will go. It will then be lying just above your pubic bone. (You can feel your pubic bone by inserting your index or middle finger into your vagina and curving it forward slightly).

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- Make sure that the outer ring lies close against the area outside your vagina (vulva).
- It is a good idea to guide the penis into the condom to make sure it does not enter the vagina outside the condom. Holding the outer ring in place, outside the vagina, also helps to stop the entire condom being accidentally pushed right into the vagina
- As the female condom is loose-fitting, it will move during sex. But you will still be protected as long as the penis stays inside the condom.
- To remove the condom, simply twist the outer ring to keep the semen inside. Then pull the condom out gently.
- Wrap the condom and put it in a bin. Do not put it down the toilet.
- Make sure the penis does not touch the genital area again, and if you have sex again, use a new condom.

Lubricant

- It is not recommended to add lubricant to the inside of a condom or to the penis before putting on the condom.
- Most male condoms come ready lubricated to make them easier to use. Some people also like to use additional lubrication. Lubricant can be applied on the outside of the condom once the penis is erect and the condom is on.
- If you are using a male/external, latex condom you should never use oil-based products – such as body oils, creams, lotions or petroleum jelly – as a lubricant. This is because they can damage the latex and make the condom more likely to split. Be aware that lip balm and lipstick, are also oil based and could cause degradation of latex condoms
- Some ointments can also damage latex. If you are using medication in the genital area – for example, creams, pessaries, or suppositories – ask your doctor, nurse or pharmacist if it will affect latex condoms.
- **Lubricant is always advised for anal sex**

A detailed information leaflet on the use of male and female condoms can be downloaded directly from the Family Planning Association (fpa):

<http://www.fpa.org.uk/media/uploads/helpandadvice/contraception-booklets/male-and-female-condoms-your-guide.pdf>.

There are also a number of leaflets that are available from the NHS Tayside Health Promotion Library. These can be ordered at the following link:

www.tayhp.com

17. Training

All training is arranged to suit the needs of individual distributors/staff groups but will cover the following:

- Awareness of local epidemiology (STIs & Teenage Pregnancy)
- Target Groups
- C Card Scheme (see section 11)
- How to do a condom demonstration

The session includes information on the aims of the service, service design and details on products, how to offer the service to young people and handling various enquiries. The length of this session can be agreed but usually takes two hours. All training is provided free of charge. Please contact the Condom Initiative Team to discuss your training needs further.

18. Local Services

NHS Tayside Sexual and Reproductive Health Services can be found at:

- Dundee Sexual & Reproductive Health Service: Level 7, South Block, Ninewells Hospital.
- Angus Sexual & Reproductive Health Service: Abbey Health Centre, Arbroath
- Perth & Kinross Sexual & Reproductive Health Service: Drumhar Health Centre, Perth

You will find further information on sexual health and condom distribution on:

Sexual Health Tayside	www.sexualhealthtayside.org
Free Condoms/ Service finder	via www.sexualhealthtayside.org
Men Only Tayside	www.menonlytayside.com
Cool2talk	www.cool2talk.org
The Corner	www.thecorner.co.uk
Free Condom finder/C Card app	www.ccardapp.co.uk

Need Tay Know Sexual Health Information App for Young People

Available to download for android and apple:

- iPhone v1.0.1 <https://itunes.apple.com/gb/app/needtayknow/id567715876?mt=8>
- Android phone v1.0.1 <https://play.google.com/store/apps/details?id=com.faffdigital.NeedTayKnow>
- iPad v1.0.0 <https://itunes.apple.com/gb/app/needtayknow-tablet/id596763205?mt=8>
- Android tablet v1.0.0 <https://play.google.com/store/apps/details?id=com.faffdigital.NeedTayKnowTablet>

19. Service Evaluation

The Tayside Condom Initiative will be evaluated annually. As a distributor, your business type (e.g. pharmacy, GP, school etc) and location will be reviewed routinely by the Sexual Health & BBV MCN to ensure that the spread of distributors across Tayside is representative and is in line with identified areas of need. In addition, the volume of condoms and the products ordered by each distributor will also be collected. As part of ongoing evaluation methods distributors may be asked to complete a short survey or be visited by a representative from the condom initiative team.

20. Acknowledgements

With thanks to Lisa Allerton, Sexual Health Project Manager, NHS Grampian who kindly allowed us to reproduce some of the information from the 'Free Condoms' Handbook for Distributors.'

21. References

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Appendix 1: Fraser Guidance and Assessment of Competency

1.1 How are the Fraser Guidelines applied?

The Fraser guidelines refer to the guidelines set out by Lord Fraser in his judgment of the Gillick case in the House of Lords (1985), which apply specifically to contraceptive advice. Lord Fraser stated that a doctor, nurse or health professional, could proceed to give advice and treatment:

"provided [they are] satisfied in the following criteria:

1. that the young person (although under the age of 16 years of age) will understand his advice;
2. that [the doctor, nurse or health professional,] cannot persuade the young person to inform their parents or to allow [the doctor nurse or health professional,] to inform the parents that [the young person] is seeking contraceptive advice;
3. that the [young person] is very likely to continue having sexual intercourse with or without contraceptive treatment;
4. that unless [the young person] receives contraceptive advice or treatment her physical or mental health or both are likely to suffer;
5. that the [young person's] best interests require [the doctor, nurse or health professional] to give contraceptive advice, treatment or both without the parental consent." ([Gillick v West Norfolk, 1985](#))

Condom distributors will wish to consider the following factors as part of their risk assessment for all young people, regardless of age:

- What is the age of this person?
- What is the age of their partner?
- What is the length of the relationship?
- Is there a significant age difference?
- What is the relationship?
- Is there a power imbalance?
- Is this a consensual relationship?
- Are there any risks regarding coercion or exploitation?
- Are parents aware of the relationship?
- Is this the first episode of sexual intercourse?
- What was the age of first sexual experience?
- How many previous sexual partners?

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- Are there any particular vulnerabilities to consider? i.e. drugs, alcohol, accommodation status
- Are they in one or more of the priority groups (in addition to being under the age of 16)? (See page 6)
- What is the context of sex?
- Do they have or want to join C Card?

Appendix 1

1.2: What do 'Gillick competency' and 'Fraser guidelines' refer to?

Gillick competency and Fraser guidelines refer to a legal case which looked specifically at whether doctors should be able to give contraceptive advice or treatment to under 16-year-olds without parental consent. But since then, they have been more widely used to help assess whether a child has the maturity to make their own decisions and to understand the implications of those decisions.

In 1982 Mrs Victoria Gillick took her local health authority (West Norfolk and Wisbech Area Health Authority) and the Department of Health and Social Security to court in an attempt to stop doctors from giving contraceptive advice or treatment to under 16-year-olds without parental consent.

The case went to the High Court in 1984 where Mr Justice Woolf dismissed Mrs Gillick's claims. The Court of Appeal reversed this decision, but in 1985 it went to the House of Lords and the Law Lords (Lord Scarman, Lord Fraser and Lord Bridge) ruled in favour of the original judgment delivered by Mr Justice Woolf:

"...whether or not a child is capable of giving the necessary consent will depend on the child's maturity and understanding and the nature of the consent required. The child must be capable of making a reasonable assessment of the advantages and disadvantages of the treatment proposed, so the consent, if given, can be properly and fairly described as true consent." ([Gillick v West Norfolk, 1984](#))

Appendix 1

1.3: How is Gillick competency assessed?

Lord Scarman's comments in his judgment of the Gillick case in the House of Lords (Gillick v West Norfolk, 1985) are often referred to as the test of "Gillick competency":

"...it is not enough that she should understand the nature of the advice which is being given: she must also have a sufficient maturity to understand what is involved."

He also commented more generally on parents' versus children's rights:

"parental right yields to the child's right to make his own decisions when he reaches a sufficient understanding and intelligence to be capable of making up his own mind on the matter requiring decision."

What are the implications for child protection?

Professionals working with children need to consider how to balance children's rights and wishes with their responsibility to keep children safe from harm.

Underage sexual activity should always be seen as a possible indicator of child sexual exploitation.

Sexual activity with a child under 13 is a criminal offence and should always result in a child protection referral.

<https://www.nspcc.org.uk/preventing-abuse/child-protection-system/legal-definition-child-rights-law/gillick-competency-fraser-guidelines/>

Further reading

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12. TAYSIDE CONDOM INITIATIVE ORDER FORM (January 2018)

	Date
Outlet Name	
Contact Name	
Email Address	
Contact Number	

PASANTE	
Condoms (144, bags & Leaflets)	
Regular	
Naturelle	
Trim	
King Size	
Feel (Sensitive)	
Taste (Flavoured)	
Black Velvet (Large)	
Smiley	
Pride	
Love	
Red Ribbon	
Femidom/female condom	
Sensiva (Non-Latex) 72 per pack	
Boxed (3 condoms) x 12 per pack	
Regular	
Naturelle	
Trim	
King Size	
Feel (Sensitive)	
Taste (Flavoured)	
LUBRICANT	
Light Lube 5mls (144)	
RESOURCES	
Pregnancy Myths Booklet (x25)	
Pregnancy Poster (x1)	
STI Booklet (x25)	
STI Poster (x1)	
Lubrication Booklet (x25)	
Lubrication Poster (x1)	
Contraception Booklet (x25)	
Contraception Poster (x1)	
How to Use a Condom (x1)	
Size and Shape Chart (A3) (x1)	
Condom Demonstrators	