

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

Insight Topic 16: **SAFE SEX**

Report authors:
Dr Colin Morrison/Ross Robertson
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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

In the initial focus groups, the topic of **SAFE SEX** was raised and discussed by 5 of the 16 groups. In terms of online engagement, responses to the **SAFE SEX** online survey came from 75 young people as follows:

Online engagement by Local Authority:

	Number of online submissions
Angus	22
Dundee	48
Perth and Kinross	5
Other area	-
Total by method	75

Online engagement by gender:

	Male	Female	Other gender identity
Number of participants	30	44	1

Online engagement by age:

	Under 16	16	17	18	19	20	21+
Number of participants	11	33	20	2	2	1	6

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

Safe sex, STIs and pregnancy

In some contributions to the discussion about safe sex young people made links with condom use and STIs. Responding to the prompt statement *tell us about your experience of safe sex when it comes to sex or relationships* young people said:

Wrap it before you tap it. (16/Dundee/Female)

Having sex whilst wearing a condom. (>16/Dundee/Female)

Safe sex was so drilled into me at school, I'm terrified to try other methods other than condoms. (21+/Angus/Female)

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/Angus)

You should use a condom, unless you want a childor an STD.
(16/Dundee/Male)

In group discussions however young people's main concern was to avert pregnancy rather than avoiding sexually transmitted infections.

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/PK)

While young people talk about condoms as a barrier to STIs *and* as a contraceptive they have also talked about contraception and avoidance of pregnancy *as safe sex*, perhaps meaning *safe from pregnancy*. Again, responding to the prompt *tell us about your experience of safe sex when it comes to sex or relationships* young people have said:

I use the contraceptive pill. (21+/Angus/Female)

Safe sex is using protection to prevent pregnancy and STI's.
(16/Angus/Female)

Sex without the danger of surprise pregnancy. (16/Dundee/Male)

When you use contraception while having sex with someone.
(>16/Dundee/Female)

condoms, the pill, abstinence, implants (16/Dundee/Male)

The insight chapter on CONDOMS explores condom use in more detail, but the insight from young people on *safe sex* confirms that young people view condom use as primarily about contraception rather than STI prevention, with young people perceiving low levels of personal risk in this regard. This young person questions the level of risk of STI infection and pregnancy young people might face.

I mean we talk about it in 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/Angus)

Responsibility for safe sex

While one young man's online response to *tell us about safe sex* was "I don't believe in it". (19/Dundee/Male) other young people have explored where responsibility lies for having safe sex, particularly using and negotiating condoms. Some young people see this as a shared responsibility, others recognise that

responsibility for condom use/safe sex (like that for contraception) often lies with young women.

Safe sex is extremely important for both partners as it prevents sexually transmitted infections and helps prevent unwanted pregnancy. Preventing these situations can save a lot of stress and family problems. (20/PK/Male)

It is up to both of you to make sure you are having safe sex, it is not one person's responsibility over the others. You should always use condoms. If you are having regular sex, I would recommend getting a backup contraceptive method too such as the pill, IUD or the rod. (19/Dundee/Female)

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/Angus)

Safe Sex means using a condom while actually doing it, and beforehand the girl either taking the pill or using the rod or another version of contraception. (16/Dundee/Female)

In response to the prompt *tell us about safe sex* one contributor raised abstaining from sex.

Cautious and sensible practice surrounding sex, the use of condoms and contraceptives but also people should be informed about abstinence (if you do not want to become pregnant do not have sex). (17/Dundee/Male)

The problem with condoms

The insight chapter on CONDOMS explores the barriers to condom use. Briefly, the following quotes capture these key barriers: embarrassment, whether using condoms is a thing men do, the feel and smell, the view that condoms get in the way or are awkward, a lack of confidence to negotiate condom use, fear over the consequences of raising the subject and a lack of knowledge of the availability of free condoms.

Better to stay safe than sorry, embarrassing to buy condoms. (18/PK/Male)

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)

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/Angus)

You can't feel it. I'm against it. You can't do it, they freak me out, feel dodgy. 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/PK)

I have an implant but have only ever used a condom a couple of times. I have had sex over 200 times. The only time I used one was when I was in a long term relationship and we both wondered what it would be like. I've never had the confidence to ask if the person I am having sex with would use a condom. (>16/Dundee/Female)

There's information on it but really? Hardly anyone knows anything. Sure EVERYONE knows of condoms, but knowing where to get them? Getting them free? C cards? There's a lot of ignorance. Don't get me started on OTHER contraceptives. Like, for example, the contraceptive implant for females. There's also the whole stigma of it's not so cool to go get condoms. For the guy anyways. I understand that it should be an equal contribution from both sides but when a guy wants to get it going he's way to embarrassed to go get condoms, even if you offer your c card and it's a youth clinic (with very friendly staff might I add). We need rid of the ignorance and the awkwardness. ASAP. (16/PK/Female)

Making decisions in long-term relationships

Contributions from young people also indicate that decisions are made to dispense with safer sex practices including condom use after being with a partner for some time, how long a period this should be varies in these responses.

Me and my boyfriend have been going out for 9 years now and we don't have safe sex. (21+/Dundee/Male)

I am currently in a lesbian relationship and I have been for the past two years, the first few times we had sex we used 'dams' and after that we were both clinically checked, I have had the same sexual partner for two years! (16/Dundee/Female)

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)

Consent and trust

In responses to the prompt *tell us about your experience of safe sex when it comes to sex or relationships* young people have also identified the importance of consent and trust. Both these important drivers for positive relationships are explored further in the insight chapters PRESSURE+CONSENT and TRUST+HONESTY.

Contraception. Consent on both sides. (16/Dundee/Female)

Consensual, happy, good. (>16/Dundee/Female)

Trust, love and condoms. (16/Dundee/Female)

Trust, honesty, protection. (>16/Dundee/Female)

Using protection and being with someone you trust. (16/Dundee/Female)

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 *safe sex*.

Young people aged 16 to 24 years old are the age group most at risk of being diagnosed with many STIs. For example, it is estimated that 1 in 10 sexually active people under the age of 25 have chlamydia; the highest rates of diagnoses per 100,000 populations are reported in NHS Tayside, NHS Lothian and NHS Dumfries & Galloway. In terms of genital herpes infection nearly two-thirds are diagnosed among persons aged under 30. Young gay and bisexual men are particularly at risk in terms of infectious syphilis and HIV.

In 2012 YouthNetⁱ conducted an online survey completed by over 700 young people aged 16 to 25-year-old (resident across the UK, although Scotland is under represented). The work had a particular focus on **young people's attitudes and behaviours relating to alcohol consumption and risky sexual activity**. The study confirms that alcohol consumption is a factor contributing to risky sexual behaviour for both young men and young women, but the relationship is not always straightforward. As the insight chapter ALCOHOL (also published at www.makeitgoodtayside.org) has also discussed, young people may use alcohol because they seek to relax and lower inhibitions or because it helps to later distance or excuse behaviour. It is also reported from findings that when young people consume alcohol they are less likely to use a condom for one-off sex, and particularly if they believe the young woman is using another form of contraceptive (with the emphasis on avoiding pregnancy rather than STIs).

In his qualitative research from 2015 Mark McCormackⁱⁱ used interviews with 30 young adults aged 16-25 to discuss several aspects of relationships and sex and relationship learning, including how they discuss safe sex in a range of contexts. The research identifies differences (in likelihood and confidence) in negotiating and using condoms with regular or romantic partners compared with those with whom sex is either unplanned or one-off. (These differences have also been explored in the insight topic chapter ONE-NIGHT STANDS). He reports that "while participants generally felt able to discuss safe sex within their romantic relationships, there was more debate about how to discuss it with potential 'hook ups' and less familiar partners. This was seen as a concern, and many worried about not using condoms when drunk". In terms of their online lives young people who were interviewed also reported that while sex was often discussed, safe sex and condom use was uncommon; they did however use the internet to search for information about condom use and safe sex. In the course of discussions with participants the

researcher proposed the use of a condom emoji (an ideogram used in electronic messages) that could be used on a social media profile or in an online chat, to indicate preferred use of condoms; 24 of the 30 interviews thought this would be a good way to make discussion and planning for safe sex and condom use informal, fun and generally easier. McCormack's research concludes that **"there is a disconnect between the general ease with which young people engage in sexual activity and the difficulty they have in discussing issues around safe sex"**.

In another of the insight chapters published at www.makeitgoodtayside.org the topic of CONDOMS considers how young people might be supported to see condom use as the norm, or rather as a new norm. In their work with young adults, exploring safe sex intentions, Christopher Armitage and Luke Talibudeenⁱⁱⁱ report that interventions that attempt to change the young person's subjective norms might (because they are related to intentions) be effective in changing behaviour, and that this might be a more productive approach than communicating risks and fears.

As part of a recent HIV Needs Assessment conducted by NHS Lothian and NHS GGC the FAQ Scotland^{iv} community engagement process explored a range of issues from **the perspective of gay and bisexual men**. The thematic reports, including chapters on *Younger Men and Anal Sex, Condoms and Condomless Sex* provide useful information which can inform this current NHS Tayside insight gathering process and considerations of safe sex as it applies to this population.

3. SAFE SEX: SUMMARY AND DISCUSSION POINTS

When it comes to the insight offered by young people and other sources important themes and issues have been highlighted. These are summarised below and discussion points are highlighted. Again, some attention is given to the use of insight from this project in terms of the use of social marketing to promote positive sexual health for young people.

How much does safe sex matter to young people?

In their 2001 publication supporting teachers educate about STI risk and prevention UNICEF^v report that: "The most common attitude of adolescents is that they are somehow invulnerable" and that "those feelings of invulnerability can be both constructive and potentially dangerous. They are constructive because they are an essential element in the self-esteem and decision-making capabilities of an adolescent. But they can be dangerous if the teenager thinks, "bad things only happen to others".

While young people participating in this insight gathering process have discussed condom use and STIs there is a tendency to conflate the issue of avoiding STIs and avoiding pregnancy; when this is done it is pregnancy that comes to the fore as the major concern. It may not be that young people feel invulnerable, but they do not seem overly concerned with STIs and so driven to consider or have safe/safer sex. In terms of learning and communicating key messages to young people this might

suggest that more needs to be done to improve awareness and knowledge of STIs. However, evaluations of young people's school-based RSHP learning would suggest that they feel they get enough of a focus on STIs (at least in terms of risks and dangers) and would rather spend time learning more about relationships and talking about sex more positively.

A focus on safe sex, alcohol and one-night stands

In their regular or romantic relationships, it appears young people have discussions about condoms and contraception. The likelihood of not using condoms (and so risk of acquiring an STI) appears to increase with use of alcohol and where sex is unplanned or a one-night stand. If messages are to be developed on safe sex it is perhaps in the context of this riskier scenario that these messages might be more acceptable and recognised as valid by young people.

A focus on what makes a relationship good

There has been some indication from young people that they understand safe sex as being about consent and trust. These attributes of a positive relationship, along with *happiness, love, respect* (all discussed in other insight chapters) might offer some way in to contextualising safe sex as a characteristic of the relationships young people aspire to.

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.

REFERENCES

ⁱ 'Alcohol and Sex: Young people's attitudes and behaviours' YouthNet (2012) <http://www.youthnet.org/wp-content/uploads/2012/04/Young-people-alcohol-and-sex-Research-Report-April-2012.pdf>

ⁱⁱ 'Young People's Attitudes Toward and Discussion of Safe Sex and Condom Use' Dr Mark McCormack Durham University (2015) <http://dro.dur.ac.uk/16925/1/16925.pdf?DDD34+mvr45+d700tmt>

ⁱⁱⁱ 'Test of a brief theory of planned behaviour-based intervention to promote adolescent safe sex intentions' Christopher J. Armitage and Luke Talibudeen British Journal of Psychology Volume 101 Issue 1 Feb 2010 pp155-172

^{iv} FAQ Scotland <http://faqscotland.co.uk/>

^ 'Sexually Transmitted Infections: Briefing Kit for Teachers' UNICEF (2001)
<https://view.officeapps.live.com/op/view.aspx?src=http%3A%2F%2Fwww.unicef.org%2Flifeskills%2Ffiles%2FBriefingKitForTeachers-STIs.doc>