practice notes

Paul Berry, Paul Sales

Encouraging take-up of condoms



Something for the weekend, sir?

In the interests of personal health, drug users have been more than ready to accept clean injecting equipment from drug agencies, and also talk in explicit detail about injecting techniques. But trying to get them to talk about safe sex or take condoms is another matter entirely. 'Sex?

Not me mate, don't know what you're talking about.' So what to do?

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he Needle and Syringe Exchange (NSE) service in Mansfield has been operating for over five years. During that time, we tried a variety of ways of getting people to take condoms without much success, such as offering to put some in their bag as we handed it to them, making the displays colourful, offering a range of different makes, or giving safer sex info leaflets and asking if they wanted a couple of packs. But our only real success was to put them in the bags with their syringes without giving any option. Unfortunately, this met our needs rather than theirs and didn't really give us any indication as to whether they were being used or not.

That condom moment

The first real breakthrough came by accident when we re-organised the equipment layout in the NSE. At this point we had the NSE equipment

behind us and the condom displays closer to the client. This meant we had to turn away from the clients during transaction to put what they requested in the bags. Once or twice I heard them take condoms while my back was turned, put them in their pockets, or slip them discreetly into their bags when they were handed them. Eventually we actually suggested to the clients that they could help themselves to condoms while we were turned away to get their equipment, or anything else we could think of that would give clients the space to get condoms. Also, if clients did take condoms, it gave us space to give them safer sex information.

Because our service is a dedicated needle exchange, rather than a closet exchange operated from a cupboard by anyone who was around, the workers had the opportunity to get to know the users and pick up on their individual

behaviour traits and target their needs specifically. Clients and workers also had the opportunity to become familiar with each other: we weren't in control of their prescriptions or any part of their 'treatment', so they tended to open up to us and tell us how it was for them, rather than tell us what they thought we wanted to hear. We paid particular attention to clients' comments regarding condoms, (whether they actually took them or not).

The 'feel-less' factor

The most common 'passing comment' was loss of sensitivity while using condoms and so I had an idea that in order to encourage take-up, we needed to be honest about this issue of sensitivity. Despite what most condom manufacturers tell you, condoms definitely contribute to loss of sensation during sex. So the thing to do was to recommend those where the most sensitivity would be felt. I contacted condom suppliers who were happy to supply us with a gross or so of mixed condoms in exchange for feedback.

I personally tried all the condoms (well someone had to), and asked my partner to score them with me for loss of sensation. The resulting score sheet made a remarkable difference to the information I could relay to the clients.

Icebreakers

I made a point of telling clients which ones I liked most, which ones my partner liked most, which ones were like bin liners, which ones I would only use for smuggling and so on. I found with this method, the barriers which had been up with virtually all of our clients dropped away completely, purely because of my admission of having sex, and using condoms. We supplied a large selection of the fun condoms which have proved to be excellent ice-breakers including stimulant on the outside and delay on the inside, great for the man who's been away for a while as well as coloured and flavoured with weird combinations like lager and lime with curry flavour for afters.

Through talking and joking with clients about condoms, we have picked up on individual requirements and introduced safe sex issues into conversations while we gather













important feedback about the condoms we need to provide for them without clients feeling they have lost control of the situation. Through this interaction, and based on my own assessment, I would estimate that around 60 per cent of our needle exchange users are now taking condoms and most importantly using them.

I didn't ask clients whether they were gay or not, although we did at one point buy a supply of extra strong condoms from a couple of companies. But the loss of sensation with these was enough to put off most clients from taking them, unless they were going abroad of course.

As far as the condom budget goes, we initially spent a large amount



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What kind of feedback do we get?

Comments like "they do the job I suppose" we take as positive, because while not exactly a ringing endorsement, such comments do at least indicate condom use. Also we have reached the stage where clients engage me in a conversation about why they're requesting a different type, and their opinions on which they feel are best and why. We have three or four clear favourites evolving purely on a client selection basis.

As far as Femidoms go, we practically had to pressure women into trying them out for us, and feedback was universally negative. I didn't even attempt to get males to take them as I thought (correctly, I hope) that the drive behind Femidoms was to enable women not on the contraceptive pill to take more control of contraception.

providing a very large selection, mainly nicely boxed in threes. We quickly sussed that if we bought them wrapped single, ie, clinic packs, this made them far less marketable outside of the exchange, like at car boot sales. We provided the same large selection of single condoms in tubs for clients to dip into and found this encouraged take-up, so eventually we thinned the selection, building up to perhaps four favourites types that we know will be used by our clients, because they have chosen them.

We continue to give service users the time and space to help themselves and we are now finding even first time users of the needle exchange volunteering to take condoms and engage in conversation regarding specific types. Obviously the word is spreading

