



Omnibus Survey Report No. 37

Contraception and Sexual Health 2007/08

A report on research using the National Statistics
Omnibus Survey produced on behalf of the NHS
Information Centre for health and social care

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Conventions and symbols

Presentation of data

A percentage may be quoted in the text for a single category that is identifiable in the tables only by summing two or more component percentages. In order to avoid rounding errors, the percentage has been recalculated for the single category and therefore may differ by 1 percentage point from the sum of the percentages derived from the tables.

The row or column percentages may add to 99 per cent or 101 per cent because of rounding.

0 per cent in the tables indicates that fewer than 0.5 per cent of people gave this answer. Instances where no answers for a particular response were given are indicated in the tables by '-'.

A few people failed to answer some questions. These 'no answers' have been excluded from the analysis, and so tables that describe the same population have slightly varying bases.

Small bases are associated with relatively high sampling errors and this affects the reliability of estimates. In general, percentage distribution is shown if the base is 50 or more. Where the base is smaller than this, actual numbers are shown within square brackets. Where estimates are considered unreliable due to relatively high sampling error, figures in the tables are presented with a turquoise shaded background.

Due to changes in the design of the National Statistics Omnibus survey, the sample size from 2005 was approximately two-thirds of that in previous years. Some tables which were shown in previous reports are therefore not included here because they contain too many small bases. The tables have been renumbered accordingly and so do not always correspond with table numbers in previous reports.

Sampling error

Since the data in this report were obtained from a sample of the population, they are subject to sampling error. The Omnibus survey has a multi-stage sample design, and this has been taken into account when identifying statistically significant differences in the report.

Any differences mentioned in the report are statistically significant at the 95 per cent confidence level, unless otherwise stated. Sampling errors and design effects were calculated for age or sex comparisons and were usually between 1.0 and 1.2. For other comparisons, an estimated design effect of 1.2 was used.

It is important to remember that factors other than sampling errors can affect the reliability of the results obtained from any survey. Other sources of inaccuracy include, for example, non-response bias and under-reporting, which are more difficult to quantify.

Weighting

Because only one household member is interviewed at each address, people in households containing few adults have a higher probability of selection than those in households with many. Where the unit of analysis is individual adults, as it is for this module, a weighting factor is applied to correct for this unequal probability of selection. This was the weighting system used for previous reports.

The weighting system used for 2007/08 figures also adjusts for some non-response bias by calibrating the Omnibus sample to ONS population totals. The weighting ensures that the weighted sample distribution across regions and across age-sex groups matches that in the population. Tables in this report show the 2007/08 estimates and bases weighted to population totals, and the bases are also shown unweighted.

The tables in this report showing time-series data also give 2007/08 estimates weighted only for unequal probability of selection (as in previous years) to give an indication of the effect of the revised weighting system. There appeared to be little effect on the estimates by introducing the new weighting system. When comparing the 2007/08 estimates and those from previous years, the 2007/08 figures used in the commentary are those based on the old weighting system unless figures from previous years are not quoted. Care should be taken when comparing 2007/08 estimates based on the new weighting system with those from previous reports using the old weighting system.

Summary

This report presents the results of a survey on contraception and sexual health carried out by the Office for National Statistics (ONS) in 2007/08 on behalf of the NHS Information Centre for health and social care. Questions on contraceptive use and sexual health were addressed to women aged 16-49 and men aged 16-69. Most respondents used a self-completion format.

Contraceptive use among women aged under 50 (Chapter 2)

- The majority of women under 50 (74 per cent) were using contraception. The most popular method was the contraceptive pill (28 per cent) followed by the male condom (24 per cent).
- Approximately one in four women (26 per cent) were not currently using a method of contraception of whom just over a half (14 per cent of all women under 50) were not engaged in a sexual relationship with someone of the opposite sex.
- Among contraceptive users, younger women were more likely than older women to be using the pill or male condom. Conversely, older women were more likely than younger women to rely on sterilisation or partner's vasectomy.
- Contraceptive users who were single were more likely to use the pill or condom than those in other marital status groups. Reliance on surgical methods of preventing pregnancy were least common among single women.

Reasons for not using contraception (Chapter 2)

- Among those who were in a heterosexual relationship, the main reason that women did not use contraception was because their partner had been sterilised (53 per cent). The next most common reason was planned pregnancy (15 per cent).

Women 'at risk' of pregnancy (Chapter 3)

Women were defined as 'at risk' of pregnancy if they were in a heterosexual relationship and were neither pregnant nor relying on surgical methods of contraception.

- Among women 'at risk' of pregnancy, 88 per cent used at least one method of contraception – a percentage similar to that found in previous years.
- The pill and the condom were the most popular methods, each being used by over a third (42 per cent and 37 per cent respectively). One in five women under 30 used both methods.

Emergency contraception (Chapter 3)

- As in previous years, almost all women (91 per cent) had heard of hormonal emergency contraception (the 'morning after pill').
- Fewer were aware of the emergency intrauterine device (IUD) (37 per cent) and this awareness has fallen from 49 per cent in 2000/01 .
- In 2007/08 just under half (49 per cent) of women who had heard of emergency contraception were correctly aware that the 'morning after pill' remains effective up to 72 hours after intercourse, while only 8 per cent knew that the emergency IUD was effective if inserted up to five days after sex.
- Women who had heard of hormonal emergency contraception were asked which, if any, of seven statements about the 'morning after pill' were true. Only a fifth (19 per cent) identified six or seven of these statements correctly.
- Only 6 per cent of women who had heard of emergency contraception incorrectly believed that the 'morning after pill' protected against pregnancy until the next period and less than 1 per cent believed that it protected against sexually transmitted infections.
- Six per cent of women had used hormonal emergency contraception and less than 1 per cent had used the emergency IUD in the year prior to interview. These percentages were similar to those observed in previous years.

Sterilisations and vasectomies (Chapter 4)

- Six per cent of women under 50 had been sterilised and 16 per cent of men under 70 had undergone a vasectomy. The great majority of sterilisations (92 per cent) and vasectomies (75 per cent) had been performed by the NHS.
- The percentage of vasectomies carried out by the NHS increased significantly from 66 per cent in 2000/01 to 74 per cent in 2007/08, having peaked in 2006/07 at 78 per cent.

Sexual behaviour (Chapter 5)

- Most men (92 per cent) said they had only had sex with women; 1 per cent said they had only had sex with men and less than 2 per cent said they had had sex with both men and women.
- Fourteen per cent of men under 70 had had no sexual partners in the previous year, 75 per cent had had just one partner and 11 per cent had had more than one. For women under 50, these percentages were 13 per cent, 78 per cent and 9 per cent.
- Within all age groups between 20 and 49 a higher percentage of men than women reported multiple sexual partners while, in most age

groups, proportionately more women than men reported having had just one partner.

Condom use (Chapter 5)

- The percentages of men and women who had used a condom in the previous year were similar to those recorded in previous years of the survey – 43 per cent of men and 50 per cent of women.
- Prevention of pregnancy was cited as a reason for using a condom almost twice as often as prevention of infection.

Knowledge of sexually transmitted infections (STIs) (Chapter 6)

- Over a half of men (57 per cent) and of women (50 per cent) reported making no changes to their behaviour as a result of what they had heard about HIV/AIDS and other STIs. However, 34 per cent of men and 37 per cent of women said they had increased their use of condoms. Those who had had just one partner in the last 12 months were more likely than those who had had more than one partner to report that STI publicity had not caused them to change their behaviour.
- Television programmes were the most commonly mentioned source of information about STIs (31 per cent) followed by television advertisements (22 per cent) and newspapers, magazines or books (20 per cent). The internet was rarely used as a source of information about STIs, even by young people.
- The percentage of people who recognised that Chlamydia is an STI has increased sharply since the question was first asked in 2000/01 – from 35 per cent to 85 per cent for men, and from 65 per cent to 93 per cent for women.
- Those who knew Chlamydia was an STI were asked about the symptoms. Women were almost twice as likely as men to give correct responses to all five questions (42 per cent compared with 24 per cent).
- Over a quarter (26 per cent) of women had undergone a test for Chlamydia at some point in the past, of whom 37 per cent had done so in the previous year (table not shown). The test was most common among young women and those who had had more than one sexual partner in the past year.

1: Introduction

This report presents the results of the module of questions on contraception and sexual health included on the National Statistics Omnibus Survey during 2007/08. The module was sponsored by the NHS Information Centre for health and social care¹.

The Omnibus is a multipurpose survey developed to be a fast, cost-effective and reliable way of obtaining information on a variety of topics too brief to warrant a survey of their own. The sample is a stratified random sample of individuals rather than households². The Omnibus Survey has been carrying questions on contraception on behalf of the Department of Health, and subsequently the NHS Information Centre, since it began in 1991. The contraception module includes questions on contraception use, sexual health, and knowledge of sexually transmitted infections (STIs).

During 2007/08, the contraception module was carried out in four months, August, October, December (2007) and March (2008), and in these months 4,500 adults were interviewed. Questions on contraceptive use, sexual health and STIs were asked of women aged 16–49 and men aged 16–69. The results presented in this report are based on the information provided by the 2,707 respondents (1,543 men and 1,164 women) who were eligible to participate and who responded.

Some of the questions in this module are of a sensitive nature and to avoid any potential embarrassment respondents are able to complete the module using a self-completion method: the majority of respondents opted for self-completion during 2007/08.

The Omnibus contraception questions are provided in Appendix B and details of all the reports in the Omnibus contraception and sexual health series can be found in Appendix C.

¹ The NHS Information Centre for health and social care (IC) was created in April 2005 out of the former NHS Information Authority and the Department of Health Statistics Unit.

² Further details of the National Statistics Omnibus Survey are given in Appendix A and are also available online at: www.statistics.gov.uk/about/services/omnibus/default.asp

2: Contraceptive use among women aged under 50

This chapter describes contraceptive use by women under 50 according to their demographic characteristics and educational background. It also looks at women's reasons for not using contraception.

As discussed previously, the weighting system used for 2007/08 figures also adjusts for some non-response bias by calibrating the Omnibus sample to ONS population totals. The tables in this report showing time-series data also give 2007/08 estimates weighted only for unequal probability of selection (as in previous years) to give an indication of the effect of the revised weighting system. When comparing the 2007/08 estimates and those from previous years, the 2007/08 figures used in the commentary are those based on the old weighting system.

Use of contraception

In 2007/08 the majority (74 per cent) of women under 50 were using at least one method of contraception. This percentage includes women who were using at least one non-surgical method (58 per cent) and women who were sterilised or whose partners had had a vasectomy (17 per cent). As in previous years, the contraceptive pill was the most popular method of contraception (28 per cent) followed closely by the male condom (24 per cent). Partner sterilisation (10 per cent) and self sterilisation (7 per cent) were the next most popular methods. Other methods of contraception used included the intrauterine device (IUD) (4 per cent), withdrawal (4 per cent), hormonal injection (3 per cent) and hormonal intrauterine system (IUS) (3 per cent). One in four women (26 per cent) were not currently using a method of contraception of whom just over a half (14 per cent of all women) were not engaged in a sexual relationship with someone of the opposite sex.

The percentages using different forms of contraception and the overall percentage using at least one method have shown little change over the eight years that the Omnibus survey has monitored usage.

Table 2.1

In 2007/08, the women aged 16-19 were the least likely to be using contraception (56 per cent) followed by those aged 45-49 (69 per cent) and those aged 20-24 were the most likely (86 per cent were using at least one method of contraception). It should be noted that as the figures for those aged 16-19 are based 78 respondents, they should be treated with caution.

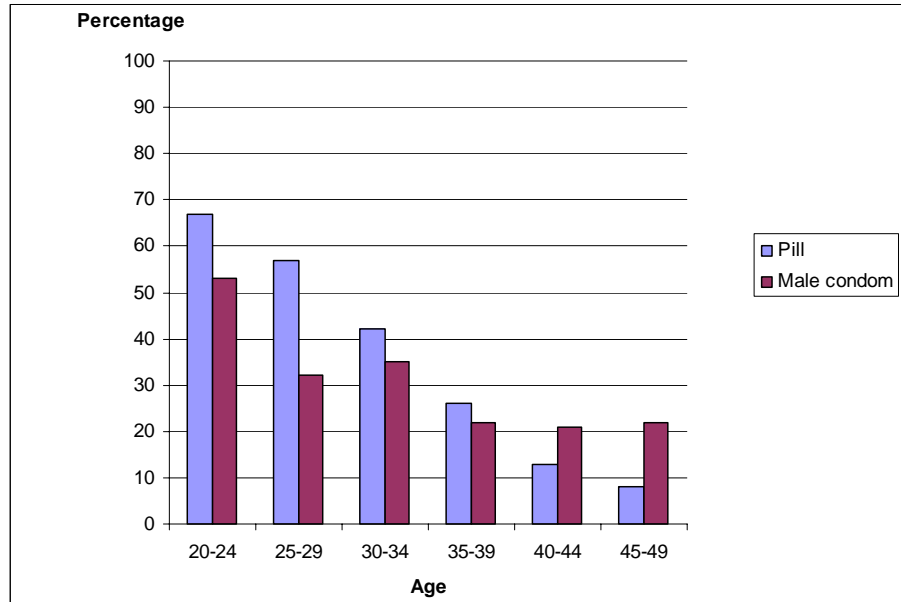
Among those who were using at least one form of surgical or non-surgical contraception, the percentage using the pill decreased steadily with age from 67 per cent among women aged 20-24 to 8 per cent of those aged 45-49. Use of the male condom was also more prevalent among younger women

decreasing from around a half (53 per cent) of 20-24 year olds to 22 per cent among 45-49 year olds. Reliance on hormonal injections or implants as a method of preventing pregnancy showed a similar pattern, with use of these methods being more common among younger women.

Conversely, older women who were using contraception were more likely than younger women to rely on surgical methods. About one in three (32 per cent) women aged 45-49 reported having a partner who had undergone a vasectomy compared with fewer than one in a hundred women aged under 30. Female sterilisation was also more common among older women.

Tables 2.2 and 2.3 and Figure 2.1

Figure 2.1 Percentage of women using the contraceptive pill or the male condom: by age, 2007/08



Married or cohabiting women were more likely than their single or widowed, divorced and separated counterparts to be using contraception: 82 per cent of married women did so, compared with 65 per cent of single and 64 per cent of widowed, divorced and separated women.

Among those using some form of contraception, there were differences between single women and women in other marital status groups in their choices of both surgical and non-surgical methods of contraception. Looking first at non-surgical methods, contraceptive users who were single were more likely to use the contraceptive pill (61 per cent) or the male condom (50 per cent) to prevent pregnancy than were married or cohabiting women (29 per cent and 27 per cent for these methods respectively). Married and cohabiting women were more likely than those in other marital status groups to use withdrawal as a method of contraception (7 per cent compared with 2 per cent of single women). Widowed, divorced and separated women were more likely than single women to use an IUD. For other forms of non-surgical contraception there were no statistically significant differences between the marital status groups.

Reliance on surgical methods of preventing pregnancy was least common among single women: 36 per cent of widowed, divorced and separated and 28 per cent of married or cohabiting women who were using contraception were either sterilised themselves or had a partner who had had a vasectomy, compared with 5 per cent of single women.

Tables 2.4 and 2.5

Looking at level of qualification, although it appeared that women with no qualifications were less likely than others to be using at least one form of contraception the difference was not statistically significant.

Among those who were using at least one method of contraception, women with a degree or an equivalent qualification were the most likely to use the male condom and women with no or lower level qualifications were the least likely to do so: 47 per cent of women with degree level qualifications used this method compared with 17-34 per cent of those with no or lower level qualifications.

Although there was some statistically significant variation in sterilisation and partner sterilisation with educational level, there was no consistent pattern.

Tables 2.6 and 2.7

Reasons for not using contraception

Women aged 16-49 who were currently in a heterosexual relationship and who were neither using contraception nor sterilised were asked their main reason for not using contraception. Over a half (53 per cent) of these women were not using contraception because their partner had been sterilised. The next most common reason was planned pregnancy (reported by 15 per cent of these

2: Contraceptive use among women aged under 50

Contraception and Sexual Health 2007/08

women). A further nine per cent said they were currently pregnant. Eight per cent of women aged 16-49 in a heterosexual relationship who were not using contraception were (possibly) infertile.

Table 2.8

2: Contraceptive use among women aged under 50
Contraception and Sexual Health 2007/08

Table 2.1 Current use of contraception: 2000/01 to 2007/08

<i>Women aged 16-49</i>									<i>Great Britain</i>
Current use of contraception	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
<i>Percentage who used:</i>									
Non-surgical									
Pill*	25	28	25	25	25	24	27	27	28
Minipill	5	5	5	5	6	5	6	6	6
Combined pill	17	21	18	17	17	17	18	17	18
Male condom	21	21	20	23	22	21	22	24	24
Withdrawal	3	4	3	3	4	4	3	4	4
IUD	5	3	5	4	4	5	4	4	4
Injection ⁺	3	3	3	3	4	3	3	3	3
Implant ⁺						1	1	2	2
Patch	-	-	-	-	-	-	0	0	0
Safe period/ rhythm method/ Persona	1	2	1	1	2	1	3	1	2
Cap/ diaphragm	1	1	1	1	1	1	1	0	0
Foams/ gels	0	0	0	0	0	0	0	0	0
Hormonal IUS	1	1	1	1	1	1	2	3	3
Female condom	0	0	0	0	0	0	0	0	0
Emergency Contraception**	1	1	1	1	1	1	1	1	1
Total at least one method non-surgical	51	53	51	52	53	53	56	56	58
Surgical									
Sterilised	11	10	11	11	10	10	9	7	7
Partner sterilised	11	12	12	12	12	11	11	11	10
Total at least one method	73	75	74	75	75	74	76	75	74
<i>Unweighted base</i>									1164
<i>Weighted base (000s)²</i>									12,385
<i>Weighted base¹</i>	1967	2068	2190	2044	1994	1377	1252	1205	

* Includes women who did not know the type of pill used

** Category included for the first time in the 2000/01 questionnaire

Percentages sum to more than 100 as respondents could give more than one answer.

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

2: Contraceptive use among women aged under 50

Contraception and Sexual Health 2007/08

Table 2.1 Current use of contraception: 2000/01 to 2007/08 - continued

<i>Women aged 16-49</i>									<i>Great Britain</i>
Current use of contraception	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
Not using a method									
No heterosexual relationship***	13	13	15	14	13	14	13	14	14
Sterile after another operation	4	3	3	3	3	3	2	2	2
Wants to get pregnant	3	2	2	2	3	3	4	3	3
Pregnant now	2	1	1	2	2	1	1	2	2
Going without sex to avoid pregnancy	1	0	1	1	1	0	1	1	1
Unlikely to conceive because of menopause	1	1	1	1	1	2	0	1	1
Possibly infertile	2	2	2	1	1	2	2	1	1
Doesn't like contraception	1	0	0	0	1	0	0	1	0
Other reason	2	2	1	1	2	1	2	1	1
Total not using a method	27	25	26	25	25	26	24	25	26
<i>Unweighted base</i>									1164
<i>Weighted base (000s)²</i>									12,385
<i>Weighted base¹</i>	1967	2068	2190	2044	1994	1377	1252	1205	

*** In 2001/02 this category was changed to "No method used - no sexual relationship with someone of the opposite sex", prior to this the category was "No method used - no sexual relationship"

Percentages sum to more than 100 as respondents could give more than one answer.

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

Table 2.2 Current use of contraception: by age, 2007/08

<i>Women aged 16-49</i>								<i>Great Britain</i>
Current use of contraception	Age							Total
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	
	%	%	%	%	%	%	%	%
Uses at least one method	56	86	78	79	76	74	69	74
Does not use method	44	14	22	21	24	26	31	26
<i>Unweighted base</i>	78	113	169	193	213	213	167	1146
<i>Weighted base (000s)¹</i>	1,409	1,667	1,653	1,824	1,935	2,046	1,852	12,385

¹ weighted to population totals

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

2: Contraceptive use among women aged under 50

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Table 2.3 Current use of contraception by women using at least one method: by age, 2007/08

<i>Women aged 16-49 using contraception</i>								<i>Great Britain</i>
Current use of contraception	Age							Total
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	
Non-surgical	<i>Percentage who used:</i>							
Pill	[26]	67	57	42	26	13	8	37
Male condom	[23]	53	32	35	22	21	22	33
Withdrawal	[1]	-	1	9	5	5	9	5
IUD	[0]	1	3	9	10	8	5	6
Injection	[3]	9	3	1	3	3	1	4
Implant	[4]	3	3	1	1	1	0	2
Patch	[0]	0	-	1	1	-	-	0
Safe period/ rhythm method/ Persona	[0]	-	3	2	4	3	2	2
Cap/ diaphragm	[0]	-	-	1	1	1	-	0
Foams/ gels	[0]	1	-	-	-	1	-	0
Hormonal IUS	[0]	1	4	2	7	7	3	4
Female condom	[0]	-	-	-	1	1	-	0
Emergency Contraception	[3]	3	0	-	2	-	-	2
Surgical								
Sterilised	[0]	2	4	2	11	15	24	9
Partner sterilised	[1]	0	1	8	18	25	32	13
<i>Unweighted base</i>	45	98	130	150	157	148	107	835
<i>Weighted base (000s)</i> ¹		1,437	1,294	1,437	1,478	1,510	1,279	9,221

Percentages sum to more than 100 as respondents could give more than one answer.

¹ weighted to population totals

Table 2.4 Current use of contraception: by marital status, 2007/08

<i>Women aged 16-49</i>				<i>Great Britain</i>
Current use of contraception	Marital status			Total *
	Single	Married or cohabiting	Widowed, divorced or separated	
	%	%	%	%
Uses at least one method	65	82	64	74
Does not use method	35	18	36	26
<i>Unweighted base</i>	373	607	163	1146
<i>Weighted base (000s)</i> ¹	4,132	7,110	1,097	12,385

* includes women whose marital status is not known.

¹ weighted to population totals

2: Contraceptive use among women aged under 50

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Table 2.5 Current use of contraception by women using at least one method: by marital status, 2007/08

<i>Women aged 16-49 using contraception</i>				<i>Great Britain</i>
Current use of contraception	Marital status			Total *
	Single	Married or cohabiting	Widowed, divorced or separated	
Non-surgical				
	<i>Percentage who used:</i>			
Pill	61	29	22	37
Male condom	50	27	15	33
Withdrawal	2	7	2	5
IUD	3	6	14	6
Injection	5	3	5	4
Implant	3	2	3	2
Patch	0	0	1	0
Safe period/ rhythm method/ Persona	0	3	-	2
Cap/ diaphragm	1	0	-	0
Foams/ gels	1	0	-	0
Hormonal IUS	2	5	3	4
Female condom	0	0	2	0
Emergency Contraception	4	0	4	2
Surgical				
Sterilised	3	9	31	9
Partner sterilised	2	19	5	13
<i>Unweighted base</i>	243	491	101	835
<i>Weighted base (000s) ¹</i>	2,686	5,830	706	9,221

* includes women whose marital status is not known.

Percentages sum to more than 100 as respondents could give more than one answer.

¹ weighted to population totals

2: Contraceptive use among women aged under 50

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Table 2.6 Current use of contraception: by education, 2007/08

<i>Women aged 16-49</i>						<i>Great Britain</i>
Current use of contraception	Educational qualifications					Total
	Degree or equivalent	Below degree level, above GCSE	GCSE A-C or equivalent	GCSE D-G or equivalent	None	
	%	%	%	%	%	%
Uses at least one method	74	77	74	78	65	74
Does not use method	26	23	26	22	35	26
<i>Unweighted base</i>	289	302	288	160	107	1146
<i>Weighted base (000s) ¹</i>	2,989	3,426	3,203	1,640	1,128	12,385

¹ weighted to population totals

Table 2.7 Current use of contraception by women using at least one method: by education, 2007/08

<i>Women aged 16-49 using contraception</i>						<i>Great Britain</i>
Current use of contraception	Educational qualifications					Total
	Degree or equivalent	Below degree level, above GCSE	GCSE A-C or equivalent	GCSE D-G or equivalent	None	
<i>Percentage who used:</i>						
Non-surgical						
Pill	35	42	32	40	39	37
Male condom	47	34	24	32	17	33
Withdrawal	5	3	6	4	6	5
IUD	4	7	6	4	7	6
Injection	2	4	5	6	3	4
Implant	2	1	3	2	3	2
Patch	0	0	-	1	0	0
Safe period/ rhythm method/ Persona	4	1	1	2	-	2
Cap/ diaphragm	0	0	-	1	2	0
Foams/ gels	-	1	-	1	-	0
Hormonal IUS	4	5	4	4	-	4
Female condom	1	0	-	0	-	0
Emergency Contraception	2	2	2	1	-	2
Surgical						
Sterilised	3	6	13	9	22	9
Partner sterilised	13	12	17	10	11	13
<i>Unweighted base</i>	206	227	212	123	67	835
<i>Weighted base (000s) ¹</i>	2,213	2,633	2,363	1,277	734	9,221

Percentages sum to more than 100 as respondents could give more than one answer

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

¹ weighted to population totals

2: Contraceptive use among women aged under 50

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Table 2.8 Main reason for not using a non-surgical method of contraception: 2000/01 to 2007/08

<i>Women aged 16-49 in a heterosexual relationship, not using contraception and not sterilised</i>									<i>Great Britain</i>
Main reason for not using contraception	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
	%	%	%	%	%	%	%	%	%
Partner sterilised	52	59	61	61	59	55	57	54	53
Wants to become pregnant	12	10	12	12	13	15	18	14	15
Possibly infertile	10	9	9	6	6	8	10	7	8
Pregnant now	9	7	7	10	8	6	5	8	9
Doesn't like contraception	4	2	2	2	3	2	2	3	3
Menopause	3	5	5	4	4	8	2	6	6
Other reason	9	8	5	5	7	6	6	6	7
<i>Unweighted base</i>									211
<i>Weighted base (000s) ²</i>									2,287
<i>Weighted base ¹</i>	410	432	426	411	404	278	249	235	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

3: Women 'at risk' of pregnancy

For the purposes of this report women were defined as 'at risk' of pregnancy if they were in a heterosexual relationship and were neither pregnant nor reliant on surgical methods of contraception (self or partner sterilisation). During 2007/08, 66 per cent of women interviewed were 'at risk' of pregnancy. The percentage of women 'at risk' decreased from 86 per cent among women aged 20-24 to 62 per cent among those aged 35-39 and to 41 per cent among women aged 45-49.

Among women who were 'at risk' of becoming pregnant 88 per cent used at least one method of contraception, a percentage that has shown little change since 2000/01. The pill and the condom were the most popular methods, each being used by over a third (42 per cent and 37 per cent respectively).

Eighty two per cent of women aged 16-29 used the pill (59 per cent) and/or the condom (44 per cent). The fact that these percentages sum to well over 82 per cent indicates that a high proportion, about 1 in 5, used both methods. About a third of 'at risk' women aged 30-49 used the pill (29 per cent) and/or condom (31 per cent) with very few using both methods.

Tables 3.1 to 3.3

Knowledge of emergency contraception

There are two forms of emergency contraception available for women to use after intercourse. These are the hormonal emergency pill (the 'morning after pill') which must be taken within 72 hours of intercourse, and the emergency IUD which must be inserted within five days if it is to be effective. Women who were not sterilised (or had been sterilised within the last two years) were asked if they had heard of these two methods.

In 2007/08, 91 per cent of women said they had heard of the 'morning after pill', a percentage which has remained relatively stable since 2000/01. In contrast, awareness of the emergency IUD has fallen from 49 per cent in 2000/01 to 37 per cent in 2007/08.

There was no consistent variation in awareness of the 'morning after pill' or emergency IUD between women in different age groups. A greater percentage of women who had some educational qualifications (of any level) knew about the 'morning after pill' (85 per cent or more) than women with no qualifications (75 per cent).

Tables 3.4 to 3.6

Women who had heard of emergency contraception were asked how long after sexual intercourse they thought the 'morning after pill' and the emergency IUD could be used effectively. In 2007/08 just under half (49 per cent) of women were correctly aware that the 'morning after pill' remains effective up

to 72 hours after intercourse, while only 8 per cent knew that the emergency IUD was effective if inserted up to five days after sex. Forty four per cent of women underestimated the effective time period for the emergency pill and 41 per cent underestimated it for the emergency IUD. A much smaller percentage overestimated the effective time period (less than one per cent for the emergency pill and 2 per cent for the emergency IUD). However, nearly half (49 per cent) of women said that they did not know how long after intercourse the emergency IUD could be used. These percentages were similar to those recorded in previous years.

Table 3.7

Beliefs about emergency contraception

Women who had heard of hormonal emergency contraception were asked which, if any, of the following seven statements are true:

"The emergency pill...

1. ...has no identified harmful long-term side-effects
2. ...can sometimes cause nausea/make you feel sick
3. ...is more effective the sooner it is taken after intercourse
4. ...is safer and more effective than it has been in the past
5. ...can still be effective taken at any time up to 72 hours after intercourse
6. ...protects against sexually transmitted infections (STIs)
7. ...protects against pregnancy until the next period"

(Answers 1-5 are true and 6-7 are false)

Of the five statements that were true, the statements that the 'morning after pill' "...is more effective the sooner it is taken after intercourse" and "...can sometimes cause nausea/make you feel sick" were most likely to be recognised as accurate (67 per cent and 57 per cent respectively believed the statements to be true). Over half of women (54 per cent) believed that the 'morning after pill' "...can still be effective taken any time up to 72 hours after intercourse". About a third (34 per cent) believed that it "...has no identified harmful long-term side-effects" and about a quarter (27 per cent) believed that it is "...safer and more effective than it has been in the past".

Six per cent of women incorrectly believed that the 'morning after pill' "...protects against pregnancy until the next period" and less than 1 per cent of women believed that it "...protects against sexually transmitted infections".

The percentage who thought that the 'morning after pill' "...is more effective the sooner it is taken after intercourse" increased from 54 per cent in 2000/01 to 67 per cent in 2007/08. Similarly, the percentage who believed that the

'morning after pill' "...can still be effective taken any time up to 72 hours after intercourse" had increased from 42 per cent in 2000/01 to 53 per cent in 2007/08. The percentage who thought the other statements were true has shown little change since 2000/01.

An overall score across all seven statements was computed for all women so that accuracy of knowledge about the 'morning after pill' could be assessed. Women were assigned one point for each statement they correctly identified as true or false. Only a fifth (19 per cent) of identified six or seven of these statements correctly.

There were some differences in the percentage of women who could identify which statements were true by age, marital status and educational qualifications. The percentages identifying 6 or 7 statements correctly were highest among women under 39 and those educated to degree level. There were some differences between women in different marital status groups, for example single women were more likely than married or cohabiting women to know that the morning after pill is effective taken any time up to 72 hours after intercourse. Nearly one in ten single women (9 per cent) believed that the 'morning after pill' protects against pregnancy until the next period.

Tables 3.8 to 3.11

Use of emergency contraception

Six per cent of women had used the 'morning after pill' at least once in the year prior to interview, a similar percentage to that observed in previous years. Of those women who had used the 'morning after pill', most had done so only once in the year prior to interview. Less than 1 per cent of women had used the emergency IUD during 2007/08, a percentage which has remained stable over the last eight years.

Use of the 'morning after pill' was more common in women aged under 30 than among older women. Single women were more likely than their married counterparts to have used the 'morning after pill'. There were no differences in the use of the 'morning after pill' between women with different educational qualifications nor between women who were currently using a method of contraception and those who were not.

Tables 3.12 to 3.16

Of those women who had used the 'morning after pill' in 2007/08, just over half (51 per cent) had obtained it directly from a chemist or pharmacy, a fifth (20 per cent) had obtained it directly from their own GP or practice nurse and just under a quarter (23 per cent) had obtained it from a Community Contraception Clinic. However, as these figures are based on around 60 women, they should be treated with caution.

Eight per cent of women who had used the 'morning after pill' had experienced some difficulty obtaining it during 2007/08. Condom failure remained the

most common reason why the 'morning after pill' was used, with 34 per cent of women citing this. The next most common reason was missing or forgetting to take the oral contraceptive pill (29 per cent). Again, these figures should be treated with caution due to low bases.

Tables 3.17 to 3.19

Family planning services

Over half of women aged 16-49 (56 per cent) had used one or more family planning services during the five years prior to interview. This percentage was similar to most previous years. Service use was greatest among 25 to 29 year olds (81 per cent) and lowest among those aged 45 to 49 (24 per cent). Within each age group, GPs/practice nurses were the most popular source of contraception, with the exception of 16 to 19 year olds who were as likely to use Community Contraceptive Clinics as they were to use their own GP/practice nurse (although as this is based on 76 women, the results must be treated with caution).

Tables 3.20 to 3.21

3: Women 'at risk' of pregnancy
Contraception and Sexual Health 2007/08

Table 3.1 Whether 'at risk' of pregnancy: by age, 2007/08

<i>Women aged 16-49</i>								<i>Great Britain</i>
Whether 'at risk' of pregnancy	Age							Total
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	
	%	%	%	%	%	%	%	%
'At risk' *	59	86	82	80	62	53	41	66
'Not at risk'	41	14	18	20	38	47	59	34
<i>Unweighted base</i>	78	113	169	193	213	213	167	1146
<i>Weighted base (000s)¹</i>	1,408	1,667	1,653	1,824	1,935	2,046	1,852	12,385

¹ weighted to population totals

* women aged 16-49 who were not pregnant, had a sexual relationship and were not protected by their own or their partner's sterilisation

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

Table 3.2 Current use of contraception by women 'at risk' of pregnancy: 2000/01 to 2007/08

<i>Women aged 16-49 'at risk' of pregnancy</i>									<i>Great Britain</i>
Current use of contraception	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
	<i>Percentage who used:</i>								
Pill	42	47	44	43	42	38	42	41	42
Condom	36	35	34	40	36	34	35	36	37
IUD	8	6	8	7	7	8	6	7	6
Other methods	19	19	19	18	24	22	24	24	24
Not using contraception because of infertility, menopause or wants to become pregnant	9	8	9	7	8	10	10	8	8
Not using contraception because of other reasons	5	4	2	3	3	3	2	3	3
At least one method used	86	88	89	90	89	86	87	88	88
<i>Unweighted base</i>									743
<i>Weighted base (000s) ²</i>									8,149
<i>Weighted base ¹</i>	1169	1241	1273	1178	1203	845	800	783	

* women aged 16-49 who were not pregnant, had a sexual relationship and were not protected by their own or their partner's sterilisation
 Percentages sum to more than 100 as respondents could give more than one answer.

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
 Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

3: Women 'at risk' of pregnancy
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Table 3.3 Use of contraception pill and condoms: by age, 2007/08

Women aged 16-49 (excluded if pregnant, self or partner sterilised or no sexual relationship)* *Great Britain*

	Age		Total
	16-29	30-49	
<i>Percentage who were:</i>			
Pill user**	59	29	42
Partner of condom user**	44	31	37
Neither pill user nor partner of condom user	18	46	34
<i>Unweighted base</i>	279	464	743
<i>Weighted base (000s)¹</i>	3,627	4,522	8,149

¹ weighted to population totals

Percentages sum to more than 100 as respondents could give more than one answer.

* refers to the woman's partner whether in the household or not.

** women who used the pill and whose partner used the condom are included in both rows.

Table 3.4 Knowledge of emergency contraception: 2000/01 to 2007/08

Women aged 16-49 (excluded if sterilised at least two years ago) *Great Britain*

Has heard of ...	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
<i>Percentage who had heard of ...</i>									
Hormonal emergency contraception	92	94	93	94	93	93	92	92	91
Emergency IUD	49	46	45	43	41	42	46	37	37
<i>Unweighted base</i>									1069
<i>Weighted base (000s)²</i>									11,571
<i>Weighted base¹</i>	1722	1839	1938	1779	1776	1228	1128	1120	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

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Table 3.5 Knowledge of emergency contraception: by age, 2007/08

<i>Women aged 16-49 (excluded if sterilised at least two years ago)</i>								<i>Great Britain</i>
Has heard of ...	Age							Total
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	
	<i>Percentage who had heard of ...</i>							
Hormonal emergency contraception	86	91	93	90	92	93	94	91
Emergency IUD	35	25	35	36	42	41	42	37
<i>Unweighted base</i>	78	109	165	190	202	191	134	1069
<i>Weighted base (000s)¹</i>	1,408	1,640	1,610	1,816	1,821	1,789	1,487	11,571

¹ weighted to population totals

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

Table 3.6 Knowledge of emergency contraception: by education, 2007/08

<i>Women aged 16-49 (excluded if sterilised at least two years ago)</i>						<i>Great Britain</i>
Has heard of ...	Educational qualifications					Total
	Degree or equivalent	Below degree level, above GCSE	GCSE A-C or equivalent	GCSE D-G or equivalent	None	
	<i>Percentage who had heard of ...</i>					
Hormonal emergency contraception	94	96	92	85	75	91
Emergency IUD	42	31	37	40	32	37
<i>Unweighted base</i>	284	287	256	148	94	1069
<i>Weighted base (000s)¹</i>	2,925	3,261	2,860	1,519	1,006	11,571

¹ weighted to population totals

3: Women 'at risk' of pregnancy

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Table 3.7 Knowledge of how long after intercourse emergency contraception is effective: 2000/01 to 2007/08

<i>Women who had heard of emergency contraception</i>									<i>Great Britain</i>
How long after intercourse respondent thought it is effective	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
Hormonal emergency contraception									
("Morning after pill")	%	%	%	%	%	%	%	%	%
Up to 12 hours	14	15	14	15	15	12	13	15	15
Up to 24 hours	26	29	31	29	31	32	28	29	29
Up to 72 hours	52	49	49	50	48	47	53	49	49
Up to 5 days	1	1	0	0	1	1	1	0	0
Over 5 days	0	0	0	0	0	0	0	0	0
Don't know	7	5	6	6	5	7	5	7	7
<i>Unweighted base</i>									979
<i>Weighted base (000s)²</i>									10,570
<i>Weighted base¹</i>	1585	1720	1791	1668	1652	1134	1037	1027	
Emergency IUD									
	%	%	%	%	%	%	%	%	%
Up to 12 hours	13	13	12	13	13	12	14	13	13
Up to 24 hours	16	14	16	13	12	13	11	15	15
Up to 72 hours	15	11	13	12	16	14	13	13	13
Up to 5 days	11	12	10	10	11	9	12	8	8
Over 5 days	2	3	2	2	2	3	3	2	2
Don't know	43	47	47	49	47	49	48	48	49
<i>Unweighted base</i>									402
<i>Weighted base (000s)²</i>									4,226
<i>Weighted base¹</i>	839	847	862	764	733	514	518	415	

In 2001/02 "successfully" was removed from the question: "how long after sexual intercourse has taken place do you think the pill/IUD method of emergency contraception can successfully be used?"

The correct responses were 'up to 72 hours' for hormonal emergency contraception and 'up to 5 days' for the emergency IUD
2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

3: Women 'at risk' of pregnancy
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Table 3.8 Percentage of women who identified each of the statements about hormonal emergency contraception as true: 2000/01 to 2007/08

<i>Women aged 16-49 who had heard of the "morning after pill"</i>									<i>Great Britain</i>
Statements about hormonal emergency contraception	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
"The emergency pill	<i>Percentage who thought statement was true ...</i>								
Correct statements									
....has no identified harmful long-term side-effects ¹	38	39	35	39	35	34	38	35	34
....can sometimes cause nausea/make you feel sick"	57	60	57	63	59	59	62	57	57
....is more effective the sooner it is taken after intercourse"	54	56	59	63	64	61	66	67	67
....is safer and more effective than it has been in the past"	29	33	31	32	35	31	34	27	27
....can still be effective taken at any time up to 72 hours after intercourse"	42	55	54	56	52	54	58	53	54
Incorrect statements									
....protects against sexually transmitted infections (STIs)"	..	1	0	1	1	0	0	1	1
....protects against pregnancy until the next period"	..	9	8	8	8	7	7	6	6
None of these	4	4	3	3	3	3	2	2	2
<i>Unweighted base</i>									968
<i>Weighted base (000s)²</i>									10,451
<i>Weighted base¹</i>	1486	1634	1768	1650	1631	1127	750	1,015	

* in 2000/01 this code read "...is equally effective taken at any time up to 72 hours after intercourse"

** this statement was included for the first time in 2001/02

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

3: Women 'at risk' of pregnancy
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Table 3.9 Percentage of women who identified each of the statements about hormonal emergency contraception as true: by age, 2007/08

<i>Women aged 16-49 who had heard of the "morning after pill"</i>				<i>Great Britain</i>
Statements about hormonal emergency contraception	Age			Total
	16-29	30-39	40-49	
"The emergency pill	<i>Percentage who thought statement was true ...</i>			
Correct statements				
....has no identified harmful long-term side-effects"	34	35	35	34
....can sometimes cause nausea/make you feel sick"	61	62	47	57
....is more effective the sooner it is taken after intercourse"	71	64	66	67
....is safer and more effective than it has been in the past"	26	27	29	27
....can still be effective taken at any time up to 72 hours after intercourse"	61	53	44	54
Incorrect statements				
....protects against sexually transmitted infections (STIs)"	1	1	-	1
....protects against pregnancy until the next period"	7	6	5	6
None of these	1	3	4	2
Identified 6 or 7 statements correctly	22	21	14	19
<i>Unweighted base</i>	<i>318</i>	<i>355</i>	<i>295</i>	<i>968</i>
<i>Weighted base (000s)¹</i>	<i>4,187</i>	<i>3,284</i>	<i>2,980</i>	<i>10,451</i>

¹ weighted to population totals

3: Women 'at risk' of pregnancy

Contraception and Sexual Health 2007/08

Table 3.10 Percentage of women who identified each of the statements about hormonal emergency contraception as true: by marital status, 2007/08

<i>Women aged 16-49 who had heard of the "morning after pill"</i>				<i>Great Britain</i>
Statements about hormonal emergency contraception	Marital status			Total
	Single	Married or cohabiting	Widowed, divorced or separated	
"The emergency pill	<i>Percentage who thought statement was true ...</i>			
Correct statements				
....has no identified harmful long-term side-effects"	33	34	44	34
....can sometimes cause nausea/make you feel sick"	61	56	56	57
....is more effective the sooner it is taken after intercourse"	70	66	66	67
....is safer and more effective than it has been in the past"	29	25	33	27
....can still be effective taken at any time up to 72 hours after intercourse"	60	49	51	54
Incorrect statements				
....protects against sexually transmitted infections (STIs)"	1	0	1	1
....protects against pregnancy until the next period"	9	5	6	6
None of these	1	3	3	2
Identified 6 or 7 statements correctly	21	17	28	19
<i>Unweighted base</i>	336	513	116	968
<i>Weighted base (000s)¹</i>	3,679	5,970	747	10,451

¹ weighted to population totals

3: Women 'at risk' of pregnancy

Contraception and Sexual Health 2007/08

Table 3.11 Percentage of women who identified each of the statements about hormonal emergency contraception as true: by education, 2007/08

<i>Women aged 16-49 who had heard of the "morning after pill"</i>						<i>Great Britain</i>
Statements about hormonal emergency contraception	Educational qualifications					Total
	Degree or equivalent	Below degree level, above GCSE	GCSE A-C or equivalent	GCSE D-G or equivalent	None	
"The emergency pill	<i>Percentage who thought statement was true ...</i>					
Correct statements						
....has no identified harmful long-term side-effects"	42	30	31	32	41	34
....can sometimes cause nausea/make you feel sick"	66	61	50	49	49	57
....is more effective the sooner it is taken after intercourse"	72	76	57	63	52	67
....is safer and more effective than it has been in the past"	38	28	21	15	25	27
....can still be effective taken at any time up to 72 hours after intercourse"	62	55	51	47	38	54
Incorrect statements						
....protects against sexually transmitted infections (STIs)"	-	1	1	2	1	1
....protects against pregnancy until the next period"	4	5	6	8	20	6
None of these	1	1	5	3	3	2
Identified 6 or 7 statements correctly	28	20	14	14	13	19
<i>Unweighted base</i>	265	275	236	124	68	968
<i>Weighted base (000s)¹</i>	2,705	3,118	2,618	1,271	740	10,451

¹ weighted to population totals

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

3: Women 'at risk' of pregnancy
Contraception and Sexual Health 2007/08

Table 3.12 Use of emergency contraception during the year prior to interview:
2000/01 to 2007/08

<i>Women aged 16-49 (not sterilised or sterilised in last two years)</i>									<i>Great Britain</i>
Use of emergency contraception	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
Hormonal emergency contraception									
("Morning after pill")	%	%	%	%	%	%	%	%	%
used once	6	6	5	4	6	4	4	4	4
used twice	1	1	1	1	1	1	1	1	1
used more than twice	1	0	1	0	0	1	0	0	0
used at least once	8	7	7	6	7	5	6	5	6
not used	92	93	93	94	93	95	94	95	94
Emergency IUD									
used	0	0	1	0	0	0	0	0	0
not used	100	100	99	100	100	100	100	100	100
<i>Unweighted base</i>									1065
<i>Weighted base (000s)²</i>									11,533
<i>Weighted base¹</i>	1726	1833	1934	1781	1774	1227	1126	1119	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

Table 3.13 Use of emergency contraception during the year prior to interview:
by age, 2007/08

<i>Women aged 16-49 (not sterilised or sterilised in last two years)</i>								<i>Great Britain</i>
Use of emergency contraception	Age							Total
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	
Hormonal emergency contraception								
("Morning after pill")	%	%	%	%	%	%	%	%
used once	4	10	9	2	3	2	2	4
used twice	3	2	0	1	-	-	-	1
used more than twice	-	-	1	0	-	0	-	0
used at least once	7	13	10	3	3	2	2	6
not used	93	87	90	97	97	98	98	94
Emergency IUD								
used	1	1	1	-	0	1	-	0
not used	99	99	99	100	100	99	100	100
<i>Unweighted base</i>	78	109	165	189	201	191	132	1065
<i>Weighted base (000s)¹</i>	1,408	1,640	1,610	1,808	1,813	1,789	1,465	11,533

¹ weighted to population totals

3: Women 'at risk' of pregnancy

Contraception and Sexual Health 2007/08

Table 3.14 Use of emergency contraception during the year prior to interview: by marital status, 2007/08

<i>Women aged 16-49 (not sterilised or sterilised in last two years)</i>					<i>Great Britain</i>
Use of emergency contraception	Marital status				Total
	Single	Married	Co-habiting	Widowed, divorced or separated	
Hormonal emergency contraception					
("Morning after pill")	%	%	%	%	%
used once	9	0	3	8	4
used twice	2	0	-	1	1
used more than twice	0	0	-	1	0
used at least once	11	1	3	9	6
not used	89	99	97	91	94
Emergency IUD					
used	0	0	1	2	0
not used	100	100	99	98	100
<i>Unweighted base</i>	364	413	151	134	1065
<i>Weighted base (000s)¹</i>	4064	4732	1824	867	11,533

¹ weighted to population totals

Table 3.15 Use of emergency contraception during the year prior to interview: by education, 2007/08

<i>Women aged 16-49 (not sterilised or sterilised in last two years)</i>						<i>Great Britain</i>
Use of emergency contraception	Educational qualifications					Total
	Degree or equivalent	Below degree level,	GCSE A-C or equivalent above GCSE	GCSE D-G or equivalent	None	
Hormonal emergency contraception						
("Morning after pill")	%	%	%	%	%	%
used once	6	5	4	4	4	4
used twice	0	3	0	-	-	1
used more than twice	0	0	0	-	-	0
used at least once	6	8	4	4	4	6
not used	94	92	96	96	96	94
Emergency IUD						
used	0	0	0	2	-	0
not used	100	100	100	98	100	100
<i>Unweighted base</i>	282	286	255	148	94	1065
<i>Weighted base (000s)¹</i>	2,905	3,253	2,849	1,519	1,006	11,533

¹ weighted to population totals

3: Women 'at risk' of pregnancy

Contraception and Sexual Health 2007/08

Table 3.16 Use of emergency contraception during the year prior to interview: by current use of contraception, 2007/08

<i>Women aged 16-49 (not sterilised or sterilised in last two years)</i>			<i>Great Britain</i>
Use of emergency contraception	Use of contraception		Total
	Currently using a method	Currently not using a method	
Hormonal emergency contraception			
("Morning after pill")	%	%	%
used once	5	3	4
used twice	1	0	1
used more than twice	0	0	0
used at least once	6	3	6
not used	94	97	94
Emergency IUD			
used	1	0	0
not used	99	100	100
<i>Unweighted base</i>	764	289	1065
<i>Weighted base (000s)¹</i>	8,462	2,947	11,533

¹ weighted to population totals

3: Women 'at risk' of pregnancy

Contraception and Sexual Health 2007/08

Table 3.17 Where hormonal emergency contraception (the 'morning after pill') was obtained: 2000/01 to 2007/08

Women aged 16-49 who had used the "morning after pill" in the past year									Great Britain
Where obtained	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
	<i>Percentage who obtained from ...</i>								
Own GP or practice nurse*	59	43	44	41	33	30	31	22	20
Community contraception clinic	33	31	18	21	21	24	6	21	23
Other GP or practice nurse*	3	9	5	3	-	1	4	2	1
Hospital Accident and Emergency	3	2	5	5	2	1	2	-	-
Chemist or pharmacy**	..	20	33	27	50	45	55	50	51
A walk-in centre or minor injuries unit**	..	1	0	11	3	4	3	8	8
Other	5	2	4	1	2	1	3	-	-
<i>Unweighted base</i>									59
<i>Weighted base (000s)²</i>									659
<i>Weighted base¹</i>	134	135	129	105	123	67	54	61	

* "practice nurse" added to code for the first time in 2001/02

** these codes included for the first time in 2001/02

Percentages sum to more than 100 as respondents could give more than one answer

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

3: Women 'at risk' of pregnancy

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Table 3.18 Percentage of women who had experienced difficulty in obtaining hormonal emergency contraception (the 'morning after pill'): 2000/01 to 2007/08

<i>Women who had used the "morning after pill" during the past year</i>								<i>Great Britain</i>	
	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
<i>Percentage who:</i>									
Had experienced difficulty obtaining the "morning after pill"	15	13	9	4	11	9	14	7	8
<i>Unweighted base</i>									59
<i>Weighted base (000s)²</i>									659
<i>Weighted base¹</i>	134	135	131	106	123	67	65	61	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

Table 3.19 Main reason for using hormonal emergency contraception (the 'morning after pill') on the most recent occasion it was used in the last year: 2002/03 to 2007/08

<i>Women aged 16-49 who had used emergency contraception in the year prior to the interview</i>							<i>Great Britain</i>	
Main reason for using emergency contraception	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²	
	%	%	%	%	%	%	%	
Condom failure	42	49	46	45	45	33	34	34
Missed pill/forgot to take the pill	23	23	17	22	21	29	29	29
Condom not available	11	9	13	4	13	20	21	21
Did not want to use a condom	9	2	6	9	6	6	5	5
Other routine contraceptive failure	1	5	5	7	3	2	2	2
Other reason	14	13	13	13	12	11	9	9
<i>Unweighted base</i>							66	66
<i>Weighted base (000s)²</i>							720	720
<i>Weighted base¹</i>	136	110	128	69	67	67		

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

2002/03-2006/07 percentages and bases weighted for unequal chance of selection

The question was asked in 2001/02 but the results were not reported.

2002/03-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

3: Women 'at risk' of pregnancy

Contraception and Sexual Health 2007/08

Table 3.20 Use of family planning services during the five years prior to interview: 2000/01 to 2007/08

<i>Women aged 16-49</i>									<i>Great Britain</i>
Use of family planning services	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
	<i>Percentage who had used ...</i>								
Own GP or practice nurse*	48	48	47	46	46	44	47	46	46
Community contraception clinic	20	22	19	18	19	18	20	16	16
Other GP or practice nurse*	2	2	2	2	1	1	1	2	2
Chemist or pharmacy**	..	4	5	5	5	5	4	6	6
Walk-in centre or minor injuries unit**	..	1	1	1	1	1	1	1	1
Somewhere else	2	1	1	2	1	2	1	2	2
Used at least one service	58	61	58	57	57	54	57	56	56
Not visited anyone	42	39	42	43	43	46	43	44	44
<i>Unweighted base</i>									1158
<i>Weighted base (000s)²</i>									12,510
<i>Weighted base¹</i>	1975	2074	2197	2052	2003	1378	918	1216	

* "practice nurse" added to code for the first time in 2001/02

** these categories included for the first time in 2001/02

Percentages sum to more than 100 as respondents could give more than one answer

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

3: Women 'at risk' of pregnancy

Contraception and Sexual Health 2007/08

Table 3.21 Use of family planning services during the five years prior to interview: by age, 2007/08

Use of family planning services	Age							Great Britain
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	Total
	<i>Percentage who had used ...</i>							
Own GP or practice nurse	29	57	72	65	53	30	20	46
Community contraception clinic	29	21	27	12	10	17	5	16
Other GP or practice nurse	1	2	6	2	-	2	2	2
Chemist or pharmacy	5	9	10	8	6	2	2	6
Walk-in centre or minor injuries unit	3	1	1	1	-	0	0	1
Somewhere else	1	2	3	4	3	1	1	2
Used at least one service	50	68	81	73	59	44	24	56
Not visited anyone	50	32	19	27	41	56	76	44
<i>Unweighted base</i>	76	114	169	195	216	217	171	1158
<i>Weighted base (000s)¹</i>	1,376	1,682	1,653	1,853	1,961	2,081	1,904	12,510

Percentages sum to more than 100 as respondents could give more than one answer

¹ weighted to population totals

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

4: Sterilisations and vasectomies

This chapter describes age and educational variations in sterilisation among women aged under 50 and vasectomies among men aged under 70. It also details the percentages of men and women who had become sterile after an operation not intended for this purpose.

In 2007/08 six per cent of women under 50 had been sterilised and a further 2 per cent had had an operation for another purpose which had resulted in sterility. The majority (92 per cent) of women who had been sterilised reported that their surgery had been carried out within the NHS. This figure should be treated with caution as it is based on fewer than 100 women.

One in six (16 per cent) men under 70 had undergone a vasectomy of whom 75 per cent stated that their operation had been performed within the NHS. One per cent of men had become sterile after an operation not intended to cause sterility.

There has been no statistically significant change in the last eight years in the percentages of men and women who have undergone sterilisation or who have become sterile as a result of an operation for another purpose. Although the percentage of female sterilisations carried out within the NHS rose from 91 per cent in 2000/01 to 97 per cent in 2005/06, the apparent decrease to 92 per cent in 2007/08 was not statistically significant due to low bases. The percentage of vasectomies carried out by the NHS increased significantly from 66 per cent in 2000/01 to 74 per cent in 2007/08, having peaked in 2006/07 at 78 per cent.

Table 4.1

In 2007/08, the percentage of men and women who had been sterilised increased with age. The percentage of women who had been sterilised increased from 2 per cent among those aged 16-29 to 16 per cent of those aged 45-49. Becoming sterile after an operation not intended to cause sterility was also slightly more common among older women, increasing from less than one half a per cent among 16-29 year olds to 7 per cent among 45-49 year olds.

The percentage of men who had undergone a vasectomy increased from only one per cent of those aged 16-29 to 30 per cent of those aged 50-54 and then remained relatively constant thereafter.

Table 4.2

Sterilisation was most common among women with no qualifications; the percentage of women who had been sterilised increased from 2 per cent among those educated to degree level to 14 per cent among those with no qualifications.

4: Sterilisations and vasectomies

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Sterilisation among men also became less common with increased educational attainment: 22 per cent of those with no qualifications had had a vasectomy in comparison with 11 per cent of those with degree level qualifications.

Table 4.3

4: Sterilisations and vasectomies
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Table 4.1 Female sterilisation and male vasectomy: 2000/01 to 2007/08

<i>Women aged 16-49 and men aged 16-69</i>									<i>Great Britain</i>
	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
<i>Percentage who ...</i>									
Women									
had been sterilised	11	10	11	11	10	10	9	7	6
had had another operation causing sterility	4	3	3	3	3	3	2	2	2
<i>Unweighted base</i>									1162
<i>Weighted base (000s)²</i>									12,568
<i>Weighted base¹</i>	1979	2079	2200	2047	2000	1378	1258	1221	
<i>Percentage who ...</i>									
Men									
had had a vasectomy	17	15	18	17	18	18	17	18	16
had had another operation causing sterility	1	1	1	1	1	0	0	1	1
<i>Unweighted base</i>									1541
<i>Weighted base (000s)²</i>									18,404
<i>Weighted base¹</i>	2543	2759	2928	2544	2533	1842	1633	1667	
<i>Percentage who had their sterilisation/vasectomy carried out on the NHS</i>									
Women	91	92	94	94	96	97	93	92	92
<i>Women who had been sterilised</i>									
<i>Unweighted base</i>									76
<i>Weighted base (000s)²</i>									813
<i>Weighted base¹</i>	220	212	236	226	195	134	114	80	
<i>Percentage who had their sterilisation/vasectomy carried out on the NHS</i>									
Men	66	66	69	71	72	73	78	74	75
<i>Men who had been sterilised</i>									
<i>Unweighted base</i>									263
<i>Weighted base (000s)²</i>									2,934
<i>Weighted base¹</i>	427	361	532	435	450	326	276	303	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.
¹ weighted for unequal chance of selection
² weighted to population totals

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Table 4.2 Female sterilisation and male vasectomy: by age, 2007/08

	Age								Total
	16-29	30-34	35-39	40-44	45-49	50-54	55-64	65-69	
<i>Women aged 16-49 and men aged 16-69</i>									
<i>Percentage who ...</i>									
Women									
had been sterilised	2	2	8	11	16	nc	nc	nc	6
had had another operation causing sterility	0	-	0	4	7	nc	nc	nc	2
<i>Unweighted base</i>	363	195	216	217	171	nc	nc	nc	1162
<i>Weighted base (000s)¹</i>	4,769	1,853	1,961	2,081	1,904	nc	nc	nc	12,568
Men									
had had a vasectomy	1	6	15	19	20	30	31	30	16
had had another operation causing sterility	1	-	0	1	1	-	1	1	1
<i>Unweighted base</i>	293	140	162	166	174	125	334	147	1541
<i>Weighted base (000s)¹</i>	5,084	1,572	1,980	2,019	1,991	1,507	3,062	1,189	18,404

nc not collected

¹ weighted to population totals

Table 4.3 Female sterilisation and male vasectomy: by education, 2007/08

	Educational qualifications					Total
	Degree or equivalent	Below degree level,	GCSE A-C or equivalent above GCSE	GCSE D-G or equivalent	None	
<i>Women aged 16-49 and men aged 16-69</i>						
<i>Percentage who ...</i>						
Women						
had been sterilised		2	4	10	7	14
had had another operation causing sterility		1	1	3	3	1
<i>Unweighted base</i>		292	308	290	162	110
<i>Weighted base (000s)¹</i>		3,022	3,495	3,232	1,656	1,163
Men						
had had a vasectomy		11	15	18	17	22
had had another operation causing sterility		0	1	1	1	0
<i>Unweighted base</i>		354	413	314	210	249
<i>Weighted base (000s)¹</i>		4,266	5,304	3,842	2,412	2,565

¹ weighted to population totals

5: Sexual behaviour and condom use

The Omnibus Survey includes questions about sexual health in relation to HIV/AIDS and other sexually transmitted infections (STIs). Although detailed questions on these topics are thought to be inappropriate for this type of survey, more general questions on sexual behaviour are included in the Omnibus to provide background information for the interpretation of the data on condom use. In particular, it is possible to estimate the percentage of men in this survey who reported having sex with other men and also the number of individuals with multiple partners. These two groups are most 'at risk' of transmitting the HIV virus through unprotected sex.

Sexual behaviour

Men aged 16-69 were asked which of the following statements best described their situation:

1. I have had sex only with women
2. I have had sex only with men
3. I have usually had sex only with women but have had sex at least once with a man
4. I have usually had sex only with men but have had sex at least once with a woman
5. I have not (yet) had a sexual relationship

The great majority of men (92 per cent) said they had only had sex with women; 1 per cent said they had only had sex with men. Six per cent of men said they had not yet had a sexual relationship. Less than 2 per cent fell into the two remaining categories – usually had sex with women but at least once with a man and usually had sex with men but at least once with a woman. The percentage of men who said they had not yet had a sexual relationship has fluctuated between 3 per cent and 6 per cent in the period since the question was first asked in 2000/01. The percentages of men in each of the other categories have shown little change over the last eight years. About a fifth of 16-24 year-old men had not yet had a sexual relationship.

Tables 5.1 and 5.2

Sexual behaviour in the past year

Male respondents aged under 70 and female respondents aged under 50 were asked how many sexual partners they had had during the year prior to the interview. As the eligible age ranges for men and women differed, the overall distributions cannot be directly compared. In 2007/08, 14 per cent of men under 70 had had no sexual partners in the previous year, 75 per cent had had

just one partner and 11 per cent had had more than one. For women under 50, these percentages were 13 per cent, 78 per cent and 9 per cent. The percentage of men and the percentage of women who had had no sexual partners in the previous year has remained at a similar level since 2000/01.

The percentages of both men and women who had not had a sexual partner in the previous year was generally highest amongst the oldest and the youngest age groups. Among both sexes, the percentages who had had multiple sexual partners tended to decline with age. Within all age groups between 16 and 49, a higher percentage of men than women reported multiple sexual partners while, in those under 35, more women than men reported having had just one partner.

Married or cohabiting women were the least likely to report having multiple sexual partners (1 per cent) than those in any other marital status group (21 per cent of single women, 15 per cent of widowed, divorced or separated women). Similarly, single men were more likely to have had multiple sexual partners (31 per cent) than those who were widowed, divorced or separated (17 per cent) or married or cohabiting (1 per cent). Respondents who were single or previously married were more likely to have had no sexual partners in the previous year than respondents who were married or cohabiting. About one-quarter of men (30 per cent) and of women (27 per cent) who were single, or of widowed, divorced or separated men and women (30 and 28 per cent) had not had a sexual partner in the last year. Among those who were married or cohabiting, 5 per cent of men and 3 per cent of women had not had a sexual partner in the last year.

Tables 5.3 to 5.5

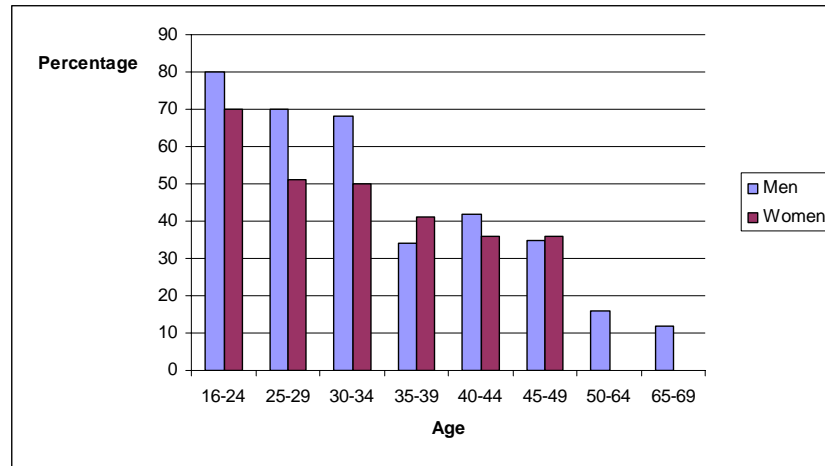
Condom use

Men aged 16-69 and women aged 16-49 who were either currently in a sexual relationship or had been in one during the last year were asked whether they had used a condom in the year prior to their interview: 43 per cent of men and 50 per cent of women had used a condom in the past year – similar to the percentages recorded in previous years of the survey.

Among both men and women the percentage using condoms was highest in the younger age groups and decreased with age. For example, 80 per cent of 16-24 year old men had used a condom in the last year compared with only 12 per cent of those aged 65-69. Similarly, 70 per cent of 16-24 year old women had used a condom in the last year compared with 36 per cent of those aged 40-49. A higher percentage of men than women used condoms in the 25-29 age group (70 per cent compared with 51 per cent) and in the 30-34 age group (68 per cent compared with 50 per cent).

Tables 5.6 to 5.7 and Figure 5.1

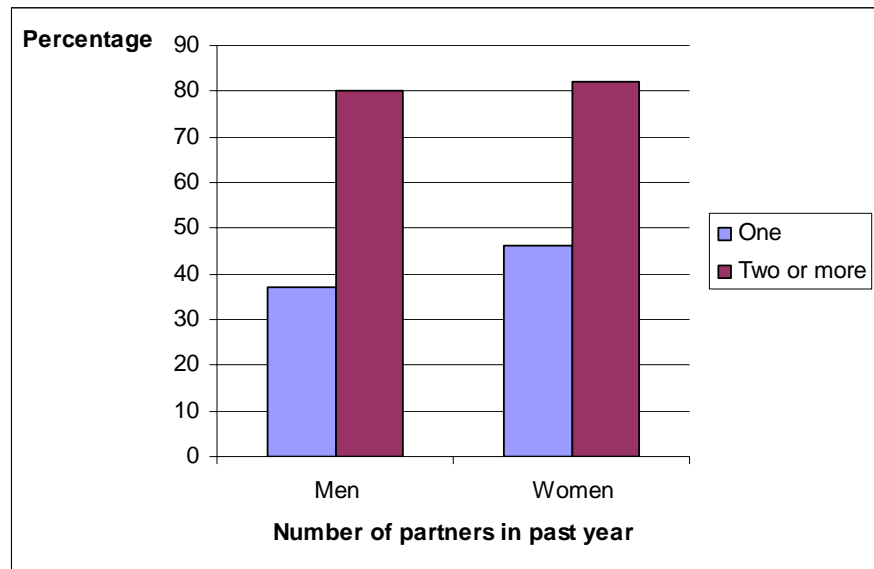
Figure 5.1 Condom use in the previous year: by age and sex, 2007/08



Those who had had more than one sexual partner were more likely than those who had only had one partner to have used a condom in the past year. Among men aged 16-69, 80 per cent of those who had multiple partners had used a condom in the past year compared with 37 per cent of those who had a single partner. There was a similar variation for women – 82 per cent of those with multiple partners used a condom compared with 46 per cent of those with just one partner (although as the figure for women with multiple partners is based on fewer than 100 cases, the result should be treated with caution).

Figure 5.2

Figure 5.2 Condom use in the previous year: by number of partners, 2007/08



Use of condoms in the past year was also related to educational qualifications. About a half of men who had a degree or who had below degree level, but above GCSE qualifications (51 per cent and 50 per cent respectively) had used a condom compared with 31 per cent of those with GCSE D-G or equivalent and 33 per cent of men who had no qualifications. Similarly, women who had a degree were more likely to have used a condom (59 per cent) than those whose highest qualification was the equivalent of a GCSE grade A-C (43 per cent) or had no qualifications (36 per cent, although as this is based on fewer than 100 women, it should be treated with caution).

Table 5.8

Reasons for using a condom

The most common reason cited for using a condom by both men and women was prevention of pregnancy (89 per cent of men and 91 per cent of women). Under a half cited prevention of infection as a reason (44 per cent of both men and women) most of whom cited pregnancy prevention as well.

These figures have fluctuated slightly over the years but there is no clear pattern of changing behaviour. Again, it is not possible to make overall comparisons between men's and women's reasons for using condoms because of the different age ranges.

Table 5.9

Among men, use of a condom to prevent pregnancy decreased from 97 per cent of those aged 16-24 to 71 per cent of those aged 45 and over. Similarly the

percentage of men using a condom to prevent infection fell from 59 per cent among men aged 16-24 to 30 per cent among men aged 45 and over. The percentage of women citing prevention of pregnancy or prevention of infection as a reason for using a condom did not show any significant pattern with age, possibly because the number of women in each age group was very small.

Table 5.10

Those who had had two or more sexual partners in the past year were nearly twice as likely as those who had only had one partner to cite prevention of infection as a reason for using a condom (67 per cent of men and 75 per cent of women compared with 37 per cent of men and 37 per cent of women), although as some of these figures are based on a low sample size, they should be treated with caution.

Table 5.11

Regularity of condom use in high risk groups

Over half of those who had used a condom in the past year said that they always used one when having intercourse: 54 per cent of men and 58 per cent of women who used a condom said they always did so. This percentage was similar for men and women and has hardly changed over the seven years that this question has been asked. There was also little difference in the percentage of men and women who said they sometimes used one (24 per cent and 28 per cent).

Table 5.12

Use of condoms is of particular interest in the group who are at most risk of contracting STIs. Table 5.13 shows condom use only among those people who had had two or more sexual partners in the past year. Although about two-fifths of people with multiple sexual partners (38 per cent of men and 43 per cent of women) always used a condom, about a fifth (20 per cent of men and 17 per cent of women) never did so.

Table 5.13

5: Sexual behaviour and condom use
Contraception and Sexual Health 2007/08

Table 5.1 Sexual partners of men: 2000/01 to 2007/08

Men aged 16-69 Which of the following best describes your situation?	Great Britain								2007/08 ²
	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	
	%	%	%	%	%	%	%	%	%
I have had sex only with women	93	92	93	92	94	92	92	93	92
I have had sex only with men	2	2	1	2	1	1	1	1	1
I have usually had sex only with women but at least once with a man	1	1	1	1	1	0	1	1	1
I have usually had sex only with men but at least once with a woman	1	1	0	0	1	0	0	0	0
I have not (yet) had a sexual relationship	3	5	5	5	4	6	6	5	6
<i>Unweighted base</i>									1536
<i>Weighted base (000s)²</i>									18,358
<i>Weighted base¹</i>	2533	2735	2913	2522	2527	1840	1631	1663	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

Table 5.2 Sexual partners of men: by age, 2007/08

Men aged 16-69 Which of the following best describes your situation?	Great Britain							Total
	Age							
	16-24	25-29	30-34	35-39	40-44	45-49	50-69	%
I have had sex only with women	76	90	96	97	96	95	97	92
I have had sex only with men	2	1	2	2	0	2	1	1
I have usually had sex only with women but at least once with a man	-	0	-	1	1	0	1	1
I have usually had sex only with men but at least once with a woman	1	-	0	-	1	1	0	0
I have not (yet) had a sexual relationship	21	8	2	-	2	2	1	6
<i>Unweighted base</i>	155	137	140	162	166	174	602	1536
<i>Weighted base (000s)¹</i>	3,256	1,806	1,572	1,980	2,019	1,991	5,735	18,358

¹ weighted to population totals

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Table 5.3 Number of sexual partners in the previous year: by sex, 2000/01 to 2007/08

<i>Men aged 16-69 and women aged 16-49</i>									<i>Great Britain</i>
Number of sexual partners	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
	%	%	%	%	%	%	%	%	%
Men									
None	12	13	15	13	13	16	13	14	14
One	75	74	74	74	74	73	74	76	75
Two or three	9	9	8	8	9	8	8	6	7
Four or more	4	4	4	4	4	4	4	3	4
<i>Unweighted base</i>									1502
<i>Weighted base (000s)²</i>									17,997
<i>Weighted base¹</i>	2415	2737	2908	2520	2495	1792	1598	1630	
Women									
None	11	11	12	13	10	12	12	12	13
One	79	81	80	78	80	81	78	79	78
Two or three	8	8	6	7	7	6	8	7	7
Four or more	2	1	1	1	2	1	2	2	2
<i>Unweighted base</i>									1119
<i>Weighted base (000s)²</i>									12,078
<i>Weighted base¹</i>	1803	2057	2182	2022	1965	1333	1211	1178	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

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Table 5.4 Number of sexual partners in the previous year: by age and sex, 2007/08

<i>Men aged 16-69 and women aged 16-49</i>									<i>Great Britain</i>
Number of sexual partners	Age								Total
	16-24	25-29	30-34	35-39	40-44	45-49	50-64	65-69	
	%	%	%	%	%	%	%	%	%
Men									
None	27	11	8	6	4	8	14	29	14
One	40	70	81	86	88	90	84	71	75
Two or three	19	14	8	5	6	2	2	-	7
Four or more	14	5	3	2	1	1	0	-	4
<i>Unweighted base</i>	151	136	138	161	163	169	450	134	1502
<i>Weighted base (000s)¹</i>	3,157	1,796	1,550	1,968	1,982	1,940	4,511	1,094	17,997
Women									
None	20	8	4	10	14	15	nc	nc	13
One	57	84	90	86	83	83	nc	nc	78
Two or three	17	7	5	4	3	2	nc	nc	7
Four or more	6	1	1	-	1	-	nc	nc	2
<i>Unweighted base</i>	182	169	190	213	204	161	nc	nc	1119
<i>Weighted base (000s)¹</i>	2,919	1,653	1,775	1,942	1,971	1,818	nc	nc	12,078

nc not collected

¹ weighted to population totals

Table 5.5 Number of sexual partners in the previous year: by marital status and sex, 2007/08

<i>Men aged 16-69 and women aged 16-49</i>				<i>Great Britain</i>
Number of sexual partners	Marital status			Total
	Single	Married or cohabiting	Widowed, divorced or separated	
	%	%	%	%
Men				
None	30	5	30	14
One	39	93	52	75
Two or three	20	1	12	7
Four or more	11	0	5	4
<i>Unweighted base</i>	399	919	173	1502
<i>Weighted base (000s)¹</i>	5,252	11,574	1,033	17,997
Women				
None	27	3	28	13
One	52	96	56	78
Two or three	16	1	14	7
Four or more	5	0	1	2
<i>Unweighted base</i>	355	604	157	1119
<i>Weighted base (000s)¹</i>	3,881	7,084	1,067	12,078

¹ weighted to population totals

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Table 5.6 Use of condoms in the previous year: by sex, 2000/01 to 2007/08

Men aged 16-69 and women aged 16-49 and currently in a sexual relationship or had been in one in the last 12 months

	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	Great Britain 2007/08 ²
<i>Percentage who had used condoms in the previous year</i>									
Men	40	41	39	41	40	41	43	40	43
<i>Unweighted base</i>									1318
<i>Weighted base (000s)²</i>									15,967
<i>Weighted base¹</i>	2248	2385	2496	2211	2215	1561	1420	1446	
Women	48	49	47	50	47	46	48	49	50
<i>Unweighted base</i>									828
<i>Weighted base (000s)²</i>									8,907
<i>Weighted base¹</i>	1429	1470	1534	1449	1443	973	899	860	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

Table 5.7 Use of condoms in the previous year: by age and sex, 2007/08

Men aged 16-69 and women aged 16-49 currently in a sexual relationship or had been in one in the last 12 months

Use of condoms in previous year	Age								Total
	16-24	25-29	30-34	35-39	40-44	45-49	50-64	65-69	
<i>Percentage who had used condoms in the previous year</i>									
Men	80	70	68	34	42	35	16	12	43
<i>Unweighted base</i>	122	126	130	151	158	155	374	102	1318
<i>Weighted base (000s) *</i>	2,433	1,633	1,464	1,847	1,957	1,846	3,921	866	15,967
Women	70	51	50	41	36	36	nc	nc	50
<i>Unweighted base</i>	154	143	158	148	137	88	nc	nc	828
<i>Weighted base (000s)¹</i>	2,343	1,419	1,502	1,354	1,301	988	nc	nc	8,907

nc not collected

¹ weighted to population totals

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

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Table 5.8 Use of condoms in the previous year: by number of partners in the past year and sex, and by education and sex, 2007/08

Men aged 16-69 and women aged 16-49 currently in a sexual relationship or who had been in one in the past 12 months

Great Britain

Use of condoms in previous year	Number of partners		Educational qualifications				None	Total
	One	Two or more	Degree or equivalent	Below degree level, above GCSE	GCSE A-C or equivalent	GCSE D-G or equivalent		
<i>Percentage who had used condoms in the previous year</i>								
Men	37	80	51	50	38	31	33	43
<i>Unweighted base</i>	1113	163	316	367	279	177	178	1318
<i>Weighted base (000s)¹</i>	13,519	2,002	3,852	4,705	3,381	2,107	1,906	15,967
Women	46	82	59	54	43	48	36	50
<i>Unweighted base</i>	707	93	209	231	190	125	73	828
<i>Weighted base (000s)¹</i>	7,586	1,001	2,149	2,620	2,101	1,271	766	8,907

¹ weighted to population totals

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

5: Sexual behaviour and condom use
 Contraception and Sexual Health 2007/08

Table 5.9 Reasons for using a condom: by sex, 2000/01 to 2007/08

Men aged 16-69 and women aged 16-49 currently in a sexual relationship or had one in the last 12 months and had used a male condom during the last year

Why do you use a condom?									Great Britain	
	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²	
<i>Percentage who used condoms to:</i>										
Men										
Prevent pregnancy	92	90	92	90	90	88	91	88	89	
Prevent infection	43	38	40	41	46	47	47	45	44	
Other reason	3	3	4	4	3	4	3	5	5	
<i>Unweighted base</i>										536
<i>Weighted base (000s)²</i>										6,632
<i>Weighted base¹</i>	897	987	971	913	894	633	611	575		
Women										
Prevent pregnancy	92	91	91	91	91	90	88	92	91	
Prevent infection	41	39	42	46	46	43	50	43	44	
Other reason	5	6	4	3	2	6	4	3	3	
<i>Unweighted base</i>										395
<i>Weighted base (000s)²</i>										4,352
<i>Weighted base¹</i>	682	728	720	720	687	451	435	420		

Percentages sum to more than 100 as respondents could cite more than one reason

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

5: Sexual behaviour and condom use

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Table 5.10 Reasons for using a condom: by age and sex, 2007/08

Men aged 16-69 and women aged 16-49 currently in a sexual relationship or had one in the last 12 months and had used a male condom during the last year Great Britain

Why do you use a condom?	Age				Total
	16-24	25-34	35-44	45-69*	
Men	<i>Percentage who used condoms to:</i>				
Prevent pregnancy	97	95	88	71	89
Prevent infection	59	48	36	30	44
Other reason	1	1	4	16	5
<i>Unweighted base</i>	96	174	129	137	536
<i>Weighted base (000s) *</i>	1,931	2,122	1,428	1,393	6,632
Women					
Prevent pregnancy	89	95	88	[28]	91
Prevent infection	66	35	29	[13]	44
Other reason	2	4	4	[0]	3
<i>Unweighted base</i>	99	149	116	31	395
<i>Weighted base (000s)¹</i>	1,620	1,480	1,018		4,352

¹ weighted to population totals

Percentages sum to more than 100 as respondents could cite more than one reason

* women 45-49

5: Sexual behaviour and condom use

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Table 5.11 Reasons for using a condom: by number of partners in the past year and sex, 2007/08

Men aged 16-69 and women aged 16-49 currently in a sexual relationship or had one in the last 12 months and had used a male condom during the last year

Why do you use a condom?	Number of partners in past year		Great Britain
	One	Two or more	Total
<i>Percentage who used condoms to:</i>			
Men			
Prevent pregnancy	88	91	89
Prevent infection	37	67	44
Other reason	6	1	5
<i>Unweighted base</i>	393	122	536
<i>Weighted base (000s)¹</i>	5,018	1,590	6,632
Women			
Prevent pregnancy	91	90	91
Prevent infection	37	75	44
Other reason	4	-	3
<i>Unweighted base</i>	313	72	395
<i>Weighted base (000s)¹</i>	3,503	849	4,352

¹ weighted to population totals

Percentages sum to more than 100 as respondents could cite more than one reason

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

5: Sexual behaviour and condom use
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Table 5.12 Regularity of condom use: by sex, 2000/01 to 2007/08

Men aged 16-69 and women aged 16-49 and currently in a sexual relationship or had one in the last 12 months, and uses a condom *Great Britain*

How regularly do you use a condom?	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
	%	%	%	%	%	%	%	%	%
Men									
Always	55	59	58	56	56	59	60	54	54
Usually	20	18	19	16	20	16	19	22	22
Sometimes	25	23	23	28	23	25	22	24	24
<i>Unweighted base</i>									534
<i>Weighted base (000s)²</i>									6,850
<i>Weighted base¹</i>	895	983	965	911	893	611	608	574	
Women									
Always	60	54	60	64	63	62	59	59	58
Usually	15	19	13	13	15	15	18	14	14
Sometimes	25	27	27	23	22	23	23	27	28
<i>Unweighted base</i>									395
<i>Weighted base (000s)²</i>									4,471
<i>Weighted base¹</i>	677	723	718	720	683	436	437	420	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

Table 5.13 Regularity of condom use: 2007/08

Men aged 16-69 and women aged 16-49 and had more than one sexual relationship in last 12 months *Great Britain*

How regularly do you use a condom?	Great Britain	
	Men	Women
	%	%
Always	38	43
Usually	28	20
Sometimes	14	20
Never	20	17
<i>Unweighted base</i>	163	94
<i>Weighted base (000s)¹</i>	2002	1027

¹ weighted to population totals

6: Knowledge of sexually transmitted infections

This chapter describes the impact which publicity about sexually transmitted infections has on the behaviour of men and women, their sources of information and their knowledge of such diseases.

Impact of information on behaviour

Men aged 16-69 and women aged 16-49 who were currently in a sexual relationship, or who had been in the last 12 months, were asked whether their behaviour had been influenced by what they had heard about HIV, AIDS and other sexually transmitted infections (STIs). They were shown a card listing the following response categories and asked to choose the answer(s) that applied:

1. When I have sexual intercourse I use a condom more often than I used to.
2. I have fewer one-night stands.
3. When I change partners I have a test for sexually transmitted infections.
4. I do not change partners as I am in a long-term exclusive relationship.
5. It has not influenced me at all.

The fourth category was introduced in 2005/06 because respondents in previous surveys had felt that the responses offered did not represent their situation adequately. The trend table therefore only shows results for 2005/06 onwards. Since the interest is in the behaviour of those who are most 'at risk' of contracting an STI, the analyses exclude responses to the fourth option.

Over a half of men who were not in a long-term exclusive relationship (57 per cent) said that information on STIs had had no effect on their behaviour. The main effect of publicity was a reported increase in condom use, mentioned by about a third (34 per cent). Six per cent said they had fewer one-night stands and 6 per cent had a test for sexually transmitted infections when they changed partners. Among women the pattern was almost identical except that a higher percentage, 17 per cent, had an STI test when they changed partners.

There has been no statistically significant change over time.

Table 6.1

Men and women who had had one partner in the last 12 months were at least three times as likely as those who had had more than one partner to report that STI publicity had not caused them to change their behaviour, 68 per cent compared with 22 per cent for men and 58 per cent compared with 17 per cent

for women. Although the table shows that over two-fifths (41 per cent) of women who had had two or more partners said that they had an STI test when they changed partners, this figure should be treated with caution as it is based on 85 women.

Table 6.2

Sources of information about HIV, AIDS and other sexually transmitted infections

All men aged 16-69 and women aged 16-49 were asked about their main source of information about HIV, AIDS and other STIs. In 2007/08 television programmes were the most commonly mentioned source (31 per cent) followed by television advertisements (22 per cent) and newspapers, magazines or books (20 per cent). Television programmes and advertisements have been the most popular sources since the questions were introduced but the percentages mentioning them have fallen slightly from 37 per cent and 27 per cent respectively in 2000/01. Conversely, the percentage whose main source of information came from their school or college increased from 6 per cent in 2001/02 to 8 per cent in 2007/08.

Table 6.3

Men were more likely than women to find out about STIs from television advertisements (24 per cent compared with 20 per cent) while women were more likely than men to mention their school or college (11 per cent compared with 8 per cent). Television and newspapers were again the predominant sources for older people but younger people had a more diverse range. Among those aged 16-24, just under a third (31 per cent) had obtained information from their school or college and 7 per cent from friends and family. Even in this age group, however, very few (3 per cent) mentioned the internet as their main source of information. Those in the 16-24 age group were less likely than other age groups to use TV programmes as a source of information (14 per cent compared with a third or more of older people).

Table 6.4

The percentage obtaining their information about STIs from television advertisements decreased with qualification level, falling from 28 per cent among those with no qualifications to 13 per cent among those with a degree or equivalent. The percentage using newspapers, magazines or books showed the opposite trend, rising from 13 per cent among those with no qualifications to 32 per cent among those with a degree-level qualification.

Table 6.5

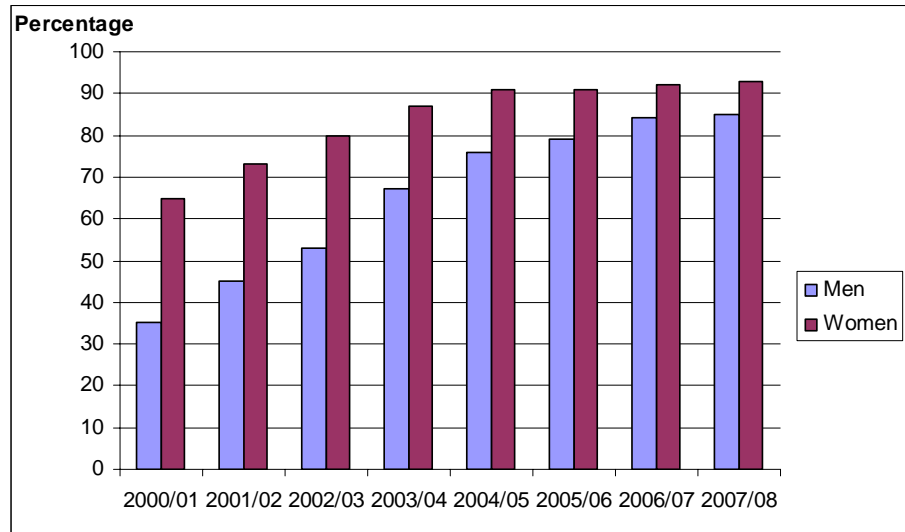
Awareness of sexually transmitted infections

All respondents were asked whether they thought each of the following five diseases was a sexually transmitted infection: Gonorrhoea, Tuberculosis, Chlamydia, Listeria and Diabetes. In previous years, the form of this question has been slightly different with respondents being presented with a card listing five conditions and asked to say which were sexually transmitted infections. From 2005/06 respondents were asked about each condition as a separate question. This change may have affected responses although the trend data suggest that figures from the updated questions are in line with those for previous years.

Gonorrhoea was correctly identified as an STI by 92 per cent of men and 91 per cent of women (using the old comparable weighting system), percentages which have shown little change over time. The percentages recognising Chlamydia as an STI, however, have shown a sharp increase over this period. Among men, this percentage more than doubled rising from 35 per cent in 2000/01 to 85 per cent in 2007/08. Recognition of Chlamydia among women has been greater than that among men throughout the period but women also have shown an increase in awareness of Chlamydia. The percentage of women correctly identifying Chlamydia as an STI rose from 65 per cent in 2000/01 to 93 per cent in 2007/08. Overall, over a half of women (52 per cent) but only two-fifths of men (40 per cent) correctly classified all five diseases.

Table 6.6 and Figure 6.1

Figure 6.1 Percentage of respondents who thought Chlamydia was an STI: 2000/01 to 2007/08



Broadly speaking, recognition of Gonorrhoea increased with age among both men and women. Thus, 95 per cent of men and women aged 45-49 correctly identified Gonorrhoea as an STI compared with 86 per cent of men and women aged 25-49. There was no consistent age variation in awareness of Chlamydia, although, as in previous years, recognition was relatively low (79 per cent) among men aged 50-69. The gap between the percentages of men and women who correctly classified all five diseases tended to increase with age.

Table 6.7

High levels of awareness of Gonorrhoea were evident among men in all educational groups whereas recognition of Chlamydia tended to decrease at the lower level of qualifications. Thus, 89 per cent or more men with qualifications above GCSE level correctly identified Chlamydia as an STI compared with 68 per cent of those with no qualifications. Likewise, the percentage of men who correctly identified all five diseases decreased from 51 per cent among those with a degree to 26 per cent among the unqualified. For women, levels of awareness of both Gonorrhoea and Chlamydia were higher among those with qualifications of any level compared with the unqualified. The percentage of women who correctly identified all five diseases decreased from 64 per cent among those with a degree to 25 per cent among the unqualified.

Table 6.8

Awareness of Chlamydia symptoms

Men and women who knew that Chlamydia was an STI were asked about the symptoms. As was the case with the recognition of this disease, women were also more knowledgeable than men about its symptoms. About three-quarters of women correctly knew that it could cause infertility and ectopic pregnancy (78 per cent) and that it did not always cause symptoms (74 per cent) while well over a half (58 per cent) knew that it could be easily treated by antibiotics. Among men the corresponding percentages were 67 per cent, 58 per cent and 45 per cent. A small percentage of both men and women incorrectly believed that it had no serious side effects (3 per cent), that it only affected men (1 per cent) or that it had none of the symptoms listed (4 per cent of men and 2 per cent of women). Overall, women were more likely than men to give correct responses to all five statements (42 per cent compared with 24 per cent).

The percentages correctly identifying the symptoms of Chlamydia have fluctuated over the eight years in which this question has appeared in the Omnibus but there has been no consistent pattern.

Table 6.9

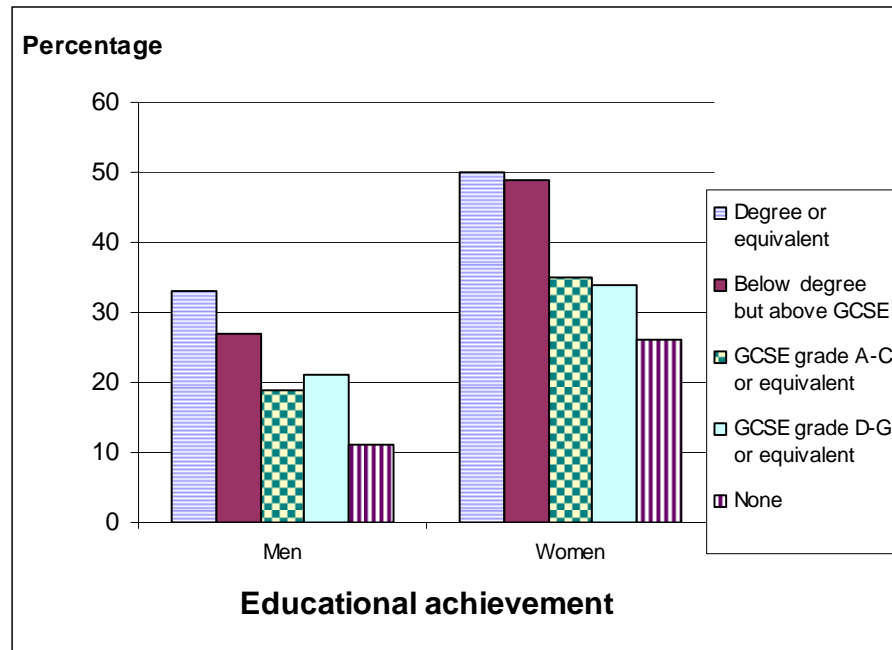
Among men, the percentages correctly identifying the symptoms varied by age but the pattern was different for each symptom. Overall, the percentage giving a correct response on all the symptoms decreased from 29 per cent among those aged 25-29 to 20 per cent of those aged 50-69. For women, there was no consistent pattern of age variation.

Table 6.10

Knowledge of the symptoms of Chlamydia tended to decrease with qualification level among both men and women. The percentage of men giving all correct responses decreased from 33 per cent among those with a degree to 11 per cent among the unqualified. For women, the difference was even greater, 50 per cent decreasing to 26 per cent. This pattern was also observed for responses to the statements that Chlamydia does not always cause symptoms and that it can cause infertility and ectopic pregnancy. There was no statistically significant pattern of educational variation in responses to the statement that it can be easily treated by antibiotics.

Figure 6.2 and Table 6.11

Figure 6.2 Percentage of respondents who gave the correct responses to all five statements about Chlamydia: by education and sex, 2007/08



Women aged 16-49 were asked whether they had ever had a test for Chlamydia and, if so, whether this was in the past year. Overall, 26 per cent had undergone a test at some time in the past, of whom a third (37 per cent) had done so in the previous year (table not shown). The test was most common among younger women: 33 per cent of 16-29 year old women and 30 per cent of 30-39 year olds had been tested compared with 15 per cent of 40-49 year olds. Among women who had had more than one partner in the previous year, the percentages who had undergone a Chlamydia test at some point was twice that of women who had had just one partner (57 per cent compared with 27 per cent). Experience of the test was also related to knowledge about Chlamydia – 39 per cent of those who correctly answered all five statements about Chlamydia had undergone the test compared with 26 per cent of those who answered four correctly and 16 per cent of those with fewer correct answers.

Table 6.12

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.1 Whether what the respondent has heard about HIV/AIDS and other sexually transmitted infections influenced their behaviour: by sex, 2005/06 to 2007/08

*Men aged 16-69 and women aged 16-49 who had had a sexual relationship in the last 12 months ***

	2005/06	2006/07	2007/08 ¹	Great Britain 2007/08 ²
<i>Percentages who said ...</i>				
Men				
When I have sexual intercourse I use a condom more often than I used to	37	39	31	34
I have fewer one night stands	9	7	6	6
When I change partners I have a test for sexually transmitted infections	3	3	5	6
It has not influenced me at all	55	57	61	57
<i>Unweighted base</i>				611
<i>Weighted base (000s)²</i>				7,368
<i>Weighted base¹</i>	624	508	659	
Women				
When I have sexual intercourse I use a condom more often than I used to	38	36	36	37
I have fewer one night stands	6	6	6	6
When I change partners I have a test for sexually transmitted infections	11	11	16	17
It has not influenced me at all	53	54	51	50
<i>Unweighted base</i>				389
<i>Weighted base (000s)²</i>				4,124
<i>Weighted base¹</i>	365	320	395	

2001/05-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

Percentages sum to more than 100 as respondents could give more than one answer

** In the interview there was an additional category 'I do not change partners as I am in a long-term exclusive relationship'. Responses to this option are not included here as the interest is in those who are at risk of contracting an STI.

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.2 Whether what the respondent has heard about HIV/AIDS and other sexually transmitted infections influenced their behaviour: by number of partners in the past year and sex, 2007/08

*Men aged 16-69 and women aged 16-49 who had had a sexual relationship in the last 12 months***

	Great Britain		Total
	Number of partners in past year		
	One	Two or more	
<i>Percentages who said ...</i>			
Men			
When I have sexual intercourse I use a condom more often than I used to	26	60	34
I have fewer one night stands	4	14	6
When I change partners I have a test for sexually transmitted infections	3	14	6
It has not influenced me at all	68	22	57
<i>Unweighted base</i>	451	137	611
<i>Weighted base (000s)¹</i>	5,453	1,669	7,368
Women			
When I have sexual intercourse I use a condom more often than I used to	32	57	37
I have fewer one night stands	4	11	6
When I change partners I have a test for sexually transmitted infections	12	41	17
It has not influenced me at all	58	17	50
<i>Unweighted base</i>	285	85	389
<i>Weighted base (000s)¹</i>	3,016	905	4,124

¹ weighted to population totals

Percentages sum to more than 100 as respondents could give more than one answer

** In the interview there was an additional category 'I do not change partners as I am in a long-term exclusive relationship'. Responses to this option are not included here as the interest is in those who are at risk of contracting an STI.

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid. Any use of these shaded figures must be accompanied by this disclaimer.

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.3 Main source of information respondent learnt about HIV/AIDS and other sexually transmitted infections: 2000/01 to 2007/08

Main source of information about HIV/AIDS and other STIs	Men aged 16-69 and women aged 16-49								Great Britain
	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08 ¹	2007/08 ²
	%	%	%	%	%	%	%	%	%
TV programmes	37	36	35	33	33	32	29	32	31
TV advertisements	27	23	23	24	23	21	24	22	22
Newspapers, magazines, books	22	21	22	22	21	21	20	20	20
Government information leaflet	2	3	2	2	2	3	2	2	2
Friends or family	3	3	2	3	3	4	4	3	3
GP	1	2	1	2	2	2	2	2	2
Community contraception clinic	1	1	1	1	1	1	1	1	1
GUM or sexual health clinic in hospital	1	1	1	1	1	1	1	1	1
Internet*	..	0	1	1	0	2	2	3	4
School or college*	..	6	6	8	8	9	9	8	9
Somewhere else	7	5	5	5	5	5	5	5	5
<i>Unweighted base</i>									2698
<i>Weighted base (000s)²</i>									30,920
<i>Weighted base¹</i>	4505	4827	5108	4584	4528	3216	2874	2884	

* These categories were introduced in 2001/02

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.4 Main source of information respondent learnt about HIV/AIDS and other sexually transmitted infections: by sex and by age, 2007/08

Men aged 16-69 and women aged 16-49 *Great Britain*

Main source of information about HIV/AIDS and other STIs	Sex		Age			Total
	Men	Women	16-24	25-49	50 and over ⁺	
	%	%	%	%	%	%
TV programmes	32	30	14	33	43	31
TV advertisements	24	20	17	24	23	22
Newspapers, magazines, books	19	21	14	21	24	20
Government information leaflet	2	3	2	2	2	2
Friends or family	3	4	7	2	1	3
GP	1	2	2	2	0	2
Community contraception clinic	0	2	3	1	-	1
GUM or sexual health clinic in hospital	1	1	2	1	0	1
Internet	4	2	3	4	2	4
School or college	8	11	31	5	0	9
Somewhere else	5	4	4	6	4	5
<i>Unweighted base</i>	<i>1539</i>	<i>1159</i>	<i>348</i>	<i>1745</i>	<i>605</i>	<i>2698</i>
<i>Weighted base (000s)¹</i>	<i>18,383</i>	<i>12,536</i>	<i>6,369</i>	<i>18,799</i>	<i>5,751</i>	<i>30,920</i>

⁺ percentages in this age group are based on men only

¹ weighted to population totals

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.5 Main source of information respondent learnt about HIV/AIDS and other sexually transmitted infections: by education, 2007/08

Main source of information about HIV/AIDS and other STIs	Educational qualifications					Total
	Degree or equivalent	Below degree level, above GCSE	GCSE A-C or equivalent	GCSE D-G or equivalent	None	
	%	%	%	%	%	
TV programmes	30	29	33	32	32	31
TV advertisements	13	19	30	30	28	22
Newspapers, magazines, books	32	20	13	17	13	20
Government information leaflet	1	2	2	2	5	2
Friends or family	4	4	3	2	2	3
GP	2	1	1	2	2	2
Community contraception clinic	1	1	1	1	1	1
GUM or sexual health clinic in hospital	1	2	1	1	1	1
Internet	5	5	2	2	2	4
School or college	6	11	11	7	10	9
Somewhere else	6	6	4	4	2	5
<i>Unweighted base</i>	646	720	603	370	358	2698
<i>Weighted base (000s)¹</i>	7,292	8,788	7,059	4,052	3,173	30,920

¹ weighted to population totals

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.6 Diseases respondents thought were sexually transmitted infections: by sex, 2000/01 to 2007/08

<i>Men aged 16-69 and women aged 16-49</i>									<i>Great Britain</i>
Diseases	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
<i>Percentages saying condition was an STI</i>									
Men									
Sexually transmitted infections									
Gonorrhoea	87	86	89	90	91	89	92	92	91
Chlamydia	35	45	53	67	76	79	84	85	86
Not sexually transmitted infections									
Tuberculosis	2	2	2	3	2	4	3	4	4
Listeria	3	3	3	3	4	10	9	13	13
Diabetes	0	0	0	1	1	1	1	1	1
All diseases correctly classified	..	..	..	..	..	39	43	40	40
<i>Unweighted base</i>									1542
<i>Weighted base (000s)²</i>									18,413
<i>Weighted base¹</i>	2494	2646	2827	2491	2496	1843	1630	1669	
<i>Percentages saying condition was an STI</i>									
Women									
Sexually transmitted infections									
Gonorrhoea	87	86	88	89	89	88	89	91	91
Chlamydia	65	73	80	87	91	91	92	93	93
Not sexually transmitted infections									
Tuberculosis	2	1	2	1	2	4	3	3	3
Listeria	2	2	3	3	2	7	8	9	10
Diabetes	0	0	1	0	0	1	1	0	0
All diseases correctly classified	..	..	..	..	..	55	56	54	52
<i>Unweighted base</i>									1160
<i>Weighted base (000s)²</i>									12,542
<i>Weighted base¹</i>	1922	2020	2139	2028	1968	1382	1256	1219	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals
Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.7 Diseases respondents thought were sexually transmitted infections: by age and sex, 2007/08

<i>Men aged 16-69 and women aged 16-49</i>								<i>Great Britain</i>
Diseases	Age							Total
	16-24	25-29	30-34	35-39	40-44	45-49	50-69	
<i>Percentages saying condition was an STI</i>								
Men								
Sexually transmitted infections								
Gonorrhoea	88	86	89	90	88	95	96	91
Chlamydia	87	89	92	92	91	87	79	86
Not sexually transmitted infections								
Tuberculosis	7	4	5	5	3	5	3	4
Listeria	20	17	8	9	10	7	13	13
Diabetes	1	-	-	1	1	3	1	1
All diseases correctly classified	19	29	45	51	48	53	42	40
<i>Unweighted base</i>	<i>156</i>	<i>137</i>	<i>140</i>	<i>162</i>	<i>166</i>	<i>174</i>	<i>607</i>	<i>1542</i>
<i>Weighted base (000s)¹</i>	<i>3,279</i>	<i>1,806</i>	<i>1,572</i>	<i>1,980</i>	<i>2,019</i>	<i>1,991</i>	<i>5,767</i>	<i>18,413</i>
Women								
Sexually transmitted infections								
Gonorrhoea	90	86	88	93	93	95	nc	91
Chlamydia	94	94	88	93	94	94	nc	93
Not sexually transmitted infections								
Tuberculosis	7	6	3	0	1	1	nc	3
Listeria	14	13	8	8	7	5	nc	10
Diabetes	1	1	1	-	-	1	nc	0
All diseases correctly classified	24	40	58	68	68	71	nc	52
<i>Unweighted base</i>	<i>192</i>	<i>169</i>	<i>195</i>	<i>217</i>	<i>217</i>	<i>170</i>	<i>nc</i>	<i>1160</i>
<i>Weighted base (000s)¹</i>	<i>3,091</i>	<i>1,653</i>	<i>1,853</i>	<i>1,966</i>	<i>2,081</i>	<i>1,898</i>	<i>nc</i>	<i>12,542</i>

¹ weighted to population totals

nc not collected

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.8 Diseases respondents thought were sexually transmitted infections: by education and sex, 2007/08

<i>Men aged 16-69 and women aged 16-49</i>						<i>Great Britain</i>
Diseases	Educational qualifications					Total
	Degree equivalent or	Below degree level, above GCSE	GCSE A-C or equivalent	GCSE D-G or equivalent	None	
<i>Percentages saying condition was an STI</i>						
Men						
Sexually transmitted infections						
Gonorrhoea	92	93	92	90	88	91
Chlamydia	92	89	89	83	68	86
Not sexually transmitted infections						
Tuberculosis	4	3	5	4	6	4
Listeria	10	11	15	14	18	13
Diabetes	1	0	-	1	4	1
All diseases correctly classified	51	42	37	32	26	40
<i>Unweighted base</i>	355	413	314	210	249	1542
<i>Weighted base (000s)¹</i>	4,276	5,304	3,842	2,412	2,565	18,413
Women						
Sexually transmitted infections						
Gonorrhoea	93	96	92	82	79	91
Chlamydia	94	96	94	88	85	93
Not sexually transmitted infections						
Tuberculosis	1	4	2	6	7	3
Listeria	6	10	11	11	13	10
Diabetes	0	-	0	2	1	0
All diseases correctly classified	64	55	56	37	25	52
<i>Unweighted base</i>	292	307	290	162	109	1160
<i>Weighted base (000s)¹</i>	3,022	3,484	3,232	1,656	1,148	12,542

¹ weighted to population totals

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.9 Knowledge of Chlamydia by sex: 2000/01 to 2007/08

<i>Men aged 16-69 and women aged 16-49 who recognised Chlamydia as a sexually transmitted infection</i>									<i>Great Britain</i>
Knowledge of Chlamydia	2000/01	2001/02	2002/03	2003/04	2004/05	2005/06	2006/07	2007/08¹	2007/08²
Men									
<i>Percentages agreeing with the statement</i>									
Correct statements									
....Does not always cause symptoms	58	60	60	56	60	54	54	57	58
....Is easily treated by antibiotics	56	58	58	52	52	47	49	45	45
....Can cause infertility and ectopic pregnancy	75	74	78	80	81	68	70	66	67
Incorrect statements									
....Has no serious side effects	5	7	5	4	4	4	4	3	3
....Only affects men	3	3	2	2	2	2	1	1	1
None of these	7	5	5	5	4	5	5	4	4
All correct responses	..	..	..	..	..	..	25	24	24
<i>Unweighted base</i>									1260
<i>Weighted base (000s)²</i>									15,305
<i>Weighted base¹</i>	804	1033	1335	1485	1894	1402	1356	1372	
Women									
Correct statements									
....Does not always cause symptoms	71	75	73	76	78	74	76	74	74
....Is easily treated by antibiotics	59	65	67	60	63	59	56	58	58
....Can cause infertility and ectopic pregnancy	83	84	82	86	88	81	81	78	78
Incorrect statements									
....Has no serious side effects	5	6	6	5	4	4	4	3	3
....Only affects men	1	2	1	1	1	1	1	1	1
None of these	4	1	3	2	1	2	2	2	2
All correct responses	..	..	..	..	..	..	41	41	42
<i>Unweighted base</i>									1063
<i>Weighted base (000s)²</i>									11,537
<i>Weighted base¹</i>	1189	1396	1623	1696	1789	1255	1146	1125	

2000/01-2006/07 data weighted for unequal chance of selection, from 2007/08 data also weighted to population totals

Trend tables show figures for 2007/08 weighted using both methods to give an indication of the effect of the weighting.

¹ weighted for unequal chance of selection

² weighted to population totals

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.10 Knowledge of Chlamydia: by age and sex, 2007/08

<i>Men aged 16-69 and women aged 16-49 who recognised Chlamydia as a sexually transmitted infection</i>								<i>Great Britain</i>
Knowledge of Chlamydia	Age						Total	
	16-24	25-29	30-34	35-39	40-44	45-49		50-69
<i>Percentages agreeing with the statement</i>								
Men								
Correct statements								
....Does not always cause symptoms	66	60	58	58	60	68	47	58
....Is easily treated by antibiotics	44	45	51	46	42	44	43	45
....Can cause infertility and ectopic pregnancy	65	74	77	71	63	62	64	67
Incorrect statements								
....Has no serious side effects	4	2	4	4	0	5	4	3
....Only affects men	-	-	0	2	-	2	1	1
None of these	3	3	0	2	7	2	6	4
All correct responses	25	29	33	25	22	25	20	24
<i>Unweighted base</i>	133	123	124	147	148	144	441	1260
<i>Weighted base (000s)¹</i>	2,807	1,594	1,424	1,791	1,779	1,687	4,224	15,305
Women								
Correct statements								
....Does not always cause symptoms	73	75	75	72	78	69	nc	74
....Is easily treated by antibiotics	62	55	64	53	55	57	nc	58
....Can cause infertility and ectopic pregnancy	75	77	78	82	78	78	nc	78
Incorrect statements								
....Has no serious side effects	4	-	2	3	3	4	nc	3
....Only affects men	1	2	1	1	0	-	nc	1
None of these	4	2	4	1	1	1	nc	2
All correct responses	44	40	46	38	40	40	nc	42
<i>Unweighted base</i>	180	158	172	198	198	157	nc	1063
<i>Weighted base (000s)¹</i>	2,903	1,542	1,606	1,812	1,917	1,756	nc	11,537

¹ weighted to population totals

nc not collected

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.11 Knowledge of Chlamydia: by education and sex , 2007/08

Men aged 16-69 and women aged 16-49 who recognised Chlamydia as a sexually transmitted infection

Great Britain

Knowledge of Chlamydia	Educational qualifications				None	Total
	Degree or equivalent	Below degree but above GCSE	GCSE grade A-C or equiv	GCSE grade D-G or equiv		
<i>Percentages agreeing with the statement</i>						
Men						
Correct statements						
....Does not always cause symptoms	64	61	56	52	46	58
....Is easily treated by antibiotics	50	44	42	44	40	45
....Can cause infertility and ectopic pregnancy	75	70	63	64	49	67
Incorrect statements						
....Has no serious side effects	3	2	4	6	3	3
....Only affects men	0	1	0	0	1	1
None of these	3	4	2	6	9	4
All correct responses	33	27	19	21	11	24
<i>Unweighted base</i>	320	357	261	165	156	1260
<i>Weighted base (000s)¹</i>	3,866	4,624	3,232	1,937	1,631	15,305
Women						
Correct statements						
....Does not always cause symptoms	80	78	70	64	64	74
....Is easily treated by antibiotics	62	64	55	50	51	58
....Can cause infertility and ectopic pregnancy	85	83	72	74	64	78
Incorrect statements						
....Has no serious side effects	2	2	3	2	5	3
....Only affects men	1	1	1	-	-	1
None of these	3	1	2	2	8	2
All correct responses	50	49	35	34	26	42
<i>Unweighted base</i>	274	290	269	141	89	1063
<i>Weighted base (000s)¹</i>	2,816	3,318	3,018	1,425	960	11,537

¹ weighted to population totals

Shaded figures indicate the estimates are unreliable and any analysis using these figures may be invalid.

Any use of these shaded figures must be accompanied by this disclaimer.

6: Knowledge of sexually transmitted infections

Contraception and Sexual Health 2007/08

Table 6.12 Whether women had ever had a screen or test for Chlamydia: by number of partners in the past year, and by knowledge of Chlamydia and by age, 2007/08

<i>Women aged 16-49</i>							<i>Great Britain</i>			
Had a test or screen	Number of partners in past year			Correct answers to Chlamydia questions			Age			Total *
	none	one	two or more	0-3	4	5	16-29	30-39	40-49	
	%	%	%	%	%	%	%	%	%	%
Yes	9	27	57	16	26	39	33	30	15	26
No	88	69	42	82	70	58	63	65	81	69
Don't know	4	4	1	3	4	3	4	5	4	4
<i>Unweighted base</i>	141	877	98	329	278	453	361	410	386	1157
<i>Weighted base (000s)¹</i>	1,544	9,455	1,054	3,694	3,027	4,790	4,744	3,799	3,973	12,516

¹ weighted to population totals

* includes women who did not recognise chlamydia as an STI

Appendix A: The National Statistics Omnibus Survey

The Omnibus Survey is a multi-purpose survey carried out by the Office for National Statistics for use by government departments and other public or non-profit making bodies. Interviewing is carried out every month³ and each month's questionnaire covers a variety of topics, reflecting different users' requirements.

The sample

Interviews are conducted with approximately 1,200 adults (aged 16 or over) in private households in Great Britain each month. The Omnibus Survey uses the Postcode Address File of small users as its sampling frame; all private household addresses in Great Britain are included in this frame. A new sample of 67 postal sectors is selected for each month and is stratified by: region; the proportion of households where the household reference person is in the National Statistics Socio-economic Classification (NS-SEC) categories 1 to 3 (i.e. employers in large organisations; higher managerial occupations; and higher professional employees/self-employed); and the proportion of people who are aged over 65. The postal sectors are selected with probability proportionate to size and, within each sector, 30 addresses (delivery points) are selected randomly.

If an address contains more than one household, the interviewer uses a standard ONS procedure to randomly select where to interview – this may be at one or more households⁴. In households with more than one adult member, just one person aged 16 or over is selected for interview with the use of a Kish grid. Proxy interviews are not taken.

Weighting

Because only one household member is interviewed at each address, people in households containing few adults have a higher probability of selection than those in households with many. Where the unit of analysis is individual adults, as it is for this module, a weighting factor is applied to correct for this unequal probability of selection.

The weighting system used for 2007 figures in this report also adjusts for some non-response bias by calibrating the Omnibus sample to ONS population totals. Despite the considerable efforts made by interviewers to maximize response rates, approximately 30% of selected individuals decline to take part or cannot be contacted. Differential non-response among key subgroups in the population is especially problematic because it can result in biased estimates being produced.

The weighting ensures that the weighted sample distribution across regions and across age-sex groups matches that in the population.

³ The Omnibus survey was previously conducted in eight months of the year, with a larger monthly set sample size of 3,000 addresses, and an achieved monthly sample of about 1,800 interviews.

⁴ The procedure for dealing with multi-household addresses was changed in 2005 to reduce bias caused by the under-representation of multi-household addresses and is now an ONS standard method.

Consequently, respondents belonging to sub-groups that are prone to high levels of non-response are assigned higher weights. For example, young males living in London have a lower response rate and are therefore assigned higher weights than are males living in other regions.

Grossing up the data by age and sex and by region to ONS population totals will reduce the standard errors of survey estimates if the survey variable is correlated with age, sex and region.

Fieldwork

Interviews are carried out in people's homes using computer assisted interviewing by interviewers who have been trained to carry out a range of ONS surveys. Advance letters are sent to all addresses giving a brief account of the survey. Interviewers must make at least three calls at an address at different times of the day and week to establish contact.

As with all ONS surveys, a quality check on fieldwork is carried out by re-interviewing a proportion of respondents.

The contraception and sexual health module was included in the August, October, December 2007 and March 2008 Omnibus months.

Questions

The module of questions (which are shown in Appendix B) was developed in conjunction with the Department of Health and the NHS Information Centre for health and social care.

Response rates

The small users' Postcode Address File includes some business addresses and other addresses, such as new and empty properties, at which no private households are living. The expected proportion of such addresses, which are classified as ineligible, is about 9-10 per cent. They are eliminated from the set sample before the response rate is calculated.

The response rate for the four months in which the contraception and sexual health module was included (August, October and December, 2007, and March, 2008) was 61 per cent, as shown in Table A.1. The number of respondents who completed the contraception and sexual health sections is shown in Table A.2.

Table A.1 and Table A.2

Table A.1 Household level response to the Omnibus Survey for the months in which the contraception and sexual health questions were asked (August, October and December, 2007 and March, 2008)

Set sample of addresses	8040	100%
††Ineligible addresses	702	9%
Eligible addresses	7333	91%
Eligible Households	7359	100%
No interview – refusal	2147	29%
†Unknown eligibility	50	1%
No interview – non-contact	661	9%
Interviews	4500	61%

† Unknown eligibility also includes a proportion of unallocated cases.

†† Ineligible addresses also include a proportion of unallocated cases

Table A.2 Response to the contraception and sexual health questions: 2007/08

	All		Men		Women	
Respondents who met the criteria	2910	100%	1663	100%	1247	100%
Respondents who refused the section	203	7%	120	7%	83	7%
Respondents to the section	2707	93%	1543	93%	1164	93%
Respondents to the section after weighting (,000s)	31,003		18,422		12,581	

Appendix B: The questions

MODDOC.QInter.M170

NATIONAL STATISTICS OPINIONS SURVEY – March 2008 Module 170 Contraception

ASK IF: Men aged 16-69 or women aged 16-49

IntCheck

The next section contains questions about contraception. As men and women are asked different questions, it is essential that the gender of the respondent is accurate.

What sex is the respondent?

- (1) Male
 - (2) Female
-

ASK IF: Men aged 16-69 or women aged 16-49

IntIntro

The next set of questions are for you to fill in yourself on the computer.
This section is being asked on behalf of The Information Centre for Health and Social Care for the Department of Health and begins with ways of preventing pregnancy.

If resistance/distress about using the computer then you can suggest that you carry on asking the questions.

- (1) Self-completion accepted and completed
 - (2) Completed by interviewer
 - (3) Section refused
-

ASK IF: Men aged 16-69 or women aged 16-49

M170_1

Have you had a vasectomy/Have you ever been sterilised - I mean have you ever had an operation intended to prevent you getting pregnant?

- (1) Yes
- (2) No

ASK IF: Men aged 16-69 or women aged 16-49

AND: has had an operation to prevent pregnancy

M170_2

Was that operation carried out under the NHS?

- (1) Yes
 - (2) No
-

ASK IF: Men aged 16-69 or women aged 16-49

AND: has had an operation to prevent pregnancy

M170_3

Was the operation more or less than two years ago, that is before or after MTH/YEAR?

- (1) More than 2 years ago
 - (2) Less than 2 years ago
-

ASK IF: Men aged 16-69 or women aged 16-49

AND: NOT (has had an operation to prevent pregnancy)

M170_4

Have you had any other operation which prevents you getting someone pregnant/becoming pregnant?

- (1) Yes
- (2) No

ASK IF: Men aged 16-69 or women aged 16-49

AND: NOT (has had an operation to prevent pregnancy)

AND: Had other operation preventing pregnancy

M170_5

Was the operation more or less than two years ago, that is before or after MTH/YEAR?

- (1) More than 2 years ago
- (2) Less than 2 years ago

ASK IF: Women aged 16-49

AND: No operation

M170_6M

Here is a list of possible ways of preventing pregnancy. Which, if any, do you (and your partner) usually use at present?

SET [3] OF

- (1) No method used - no sexual relationship with someone of the opposite sex
- (2) No method used - partner sterilised / had a vasectomy
- (3) No method used - other reasons
- (4) Withdrawal
- (5) Male condom

- (6) Natural Family Planning (safe period/rhythm method/Persona)
- (7) Cap/Diaphragm
- (8) Pill
- (9) IUD/coil/intra-uterine device
- (10) Hormonal IUS - MIRENA
- (11) Spermicides (foams/gels/sprays/pessaries)

- (12) Going without sexual intercourse to avoid pregnancy
- (13) Female condom
- (14) Injections
- (15) Implants
- (16) Contraceptive patch
- (17) Morning after pill
- (18) Emergency IUD
- (19) Another method

ASK IF: Women aged 16-49

AND: No operation

AND: Use another method

SPEC6

What other method is used?

STRING[200]

ASK IF: Women aged 16-49

AND: No operation

AND: Uses the pill

M170_7

Is the pill you take one of the brands listed on this card ?

These are progestogen only pills (sometimes known as the mini- pill) as opposed to combined pills.

- (1) Yes
- (2) No
- (3) Not sure

ASK IF: Women aged 16-49

AND: No operation

AND: More than one method used

M170_8

You have mentioned that you usually use more than one method. Do you use them in combination or do you sometimes use one and sometimes the other?

- (1) In combination
- (2) Sometimes one, sometimes other

ASK IF: Women aged 16-49

AND: No operation

AND: More than one method used

AND: Sometimes one, sometimes other

M170_9

Which one do you use most often?

- (1) ^Ttnosex
- (2) ^Ttnometh
- (3) ^Ttnomth
- (4) ^TtxWith
- (5) ^TtxMCon
- (6) ^TtxNat
- (7) ^TtxCapD
- (8) ^TtxPill
- (9) ^TtxCoil
- (10) ^TtxMir
- (11) ^TtxFoam
- (12) ^TtxWout
- (13) ^TtxFCon
- (14) ^TtxInj
- (15) ^TtxImp
- (16) ^TtxPat
- (17) ^TtxEmer
- (18) ^TtxIUDEmr
- (19) ^TtxOth

ASK IF: Women aged 16-49

AND: No operation

AND: Have a heterosexual relationship

M170_10

How long have you not been using a method/ has this method been your usual one/have these methods been your usual ones?

- (1) Less than 3 months
- (2) At least 3 months, less than 6 months
- (3) At least 6 months, less than 1 year
- (4) At least 1 year, less than 2 years
- (5) At least 2 years, less than 5 years
- (6) 5 years or more

ASK IF: *Women aged 16-49*

AND: *No operation*

AND: *Have a heterosexual relationship*

AND: *No method used - other*

M170_11

Here is a list of reasons why people do not use any method for preventing pregnancy. Which of these reasons applies to you?

Code main reason only

- (1) I am pregnant
- (2) I want to become pregnant
- (3) Unlikely to conceive because of the menopause
- (4) Unlikely to conceive because possibly infertile
- (5) Don't like contraception/Find methods unsatisfactory
- (6) My partner doesn't like - or won't use - contraception
- (7) Don't know where to obtain contraceptives / advice
- (8) Find access to contraceptive services difficult
- (9) Some other reason

ASK IF: *Women aged 16-49*

AND: *No operation*

AND: *Have a heterosexual relationship*

AND: *No method used - other*

AND: *M170_11 = Q110th*

SPEC11

RECORD OTHER REASON

STRING[200]

ASK IF: *Women aged 16-49*

AND: *No operation*

AND: *No method used, or no heterosexual relationship*

M170_12

Have you used any method of contraception in the last 2 years?

- (1) Yes
- (2) No

ASK IF: *Women aged 16-49*

AND: *No operation*

AND: *No method used, or no heterosexual relationship*

AND: *Has used methods in last 2 years*

M170_13M

Which method(s) did you usually use?

SET [3] OF

- (1) No method used - no sexual relationship with someone of the opposite sex
- (2) No method used - partner sterilised / had a vasectomy
- (3) No method used - other reasons
- (4) Withdrawal
- (5) Male condom
- (6) Natural Family Planning (safe period/rhythm method/Persona)
- (7) Cap/Diaphragm
- (8) Pill
- (9) IUD/coil/intra-uterine device
- (10) Hormonal IUS - MIRENA
- (11) Spermicides (foams/gels/sprays/pessaries)
- (12) Going without sexual intercourse to avoid pregnancy
- (13) Female condom
- (14) Injections
- (15) Implants
- (16) Contraceptive patch
- (17) Morning after pill
- (18) Emergency IUD
- (19) Another method

ASK IF *Women aged 16-49*

AND: *Operation less than 2 years ago or heterosexual relationship now and usual method less than 5 years*

M170_14M

Which method(s) did you use immediately before that?

SET [3] OF

- (1) No method used - no sexual relationship with someone of the opposite sex
- (2) No method used - partner sterilised / had a vasectomy
- (3) No method used - other reasons
- (4) Withdrawal
- (5) Male condom

- (6) Natural Family Planning (safe period/rhythm method/Persona)
- (7) Cap/Diaphragm
- (8) Pill
- (9) IUD/coil/intra-uterine device
- (10) Hormonal IUS - MIRENA
- (11) Spermicides (foams/gels/sprays/pessaries)

- (12) Going without sexual intercourse to avoid pregnancy
- (13) Female condom
- (14) Injections
- (15) Implants
- (16) Contraceptive patch
- (17) Morning after pill
- (18) Emergency IUD
- (19) Another method

ASK IF: *Women aged 16-49*

AND: *Operation less than 2 years ago or heterosexual relationship now and usual method less than 5 years*

AND: *nomthoth IN M170_14M*

M170_14a

Here is a list of reasons why people do not use any method for preventing pregnancy. Which of these reasons applied to you at the time when you were not using contraception?

Code main reason only

- (1) I was pregnant
- (2) I wanted to become pregnant
- (3) Unlikely to conceive because of the menopause
- (4) Unlikely to conceive because possibly infertile
- (5) Didn't like contraception/ Found methods unsatisfactory
- (6) My partner didn't like - or wouldn't use - contraception
- (7) Didn't know where to obtain contraceptives / advice
- (8) Found access to contraceptive services difficult
- (9) Some other reason

ASK IF: *Women aged 16-49*

AND: *Operation less than 2 years ago or heterosexual relationship now and usual method less than 5 years*

AND: *Used the pill*

M170_15

Is the pill you took one of the brands listed on this card? These are progestogen only pills (sometimes known as the mini- pill) as opposed to combined pills?

- (1) Yes
- (2) No
- (3) Not sure

ASK IF: *Women aged 16-49*

AND: *No operation and method used*

AND: *Method at 6 not the same as method at 14*

M170_16

Did the change in method happen because you began a relationship with a different partner?

- (1) Yes
- (2) No

ASK IF: *Women aged 16-49*

AND: *No operation and method used*

AND: *Method at 6 not the same as method at 14*

M170_17

Compared with the method(s) you used before, do you think the method(s) you are using now are more reliable in preventing pregnancy?

- (1) Yes
 - (2) No
-

ASK IF: Women aged 16-49

AND: No operation and method used

AND: Method at 6 not the same as method at 14

M170_18

Compared with the method(s) you used before, do you think the method(s) you are using now are more convenient to use?

- (1) Yes
 - (2) No
-

ASK IF Women aged 16-49

AND: No operation and method used

AND: Method at 6 not the same as method at 14

M170_19

Compared with the method(s) you used before, do you think the method(s) you are using now are better for your long-term health?

- (1) Yes
 - (2) No
-

ASK IF: Women aged 16-49

AND: No operation and method used

AND: Method at 6 not the same as method at 14

M170_20

Compared with the methods you used before, do you think the methods you are using now are better for protecting against sexually transmitted infections (including HIV/AIDS)?

- (1) Yes
 - (2) No
-

ASK IF Women aged 16-49

AND: No operation and method used

AND: Method at 6 not the same as method at 14

M170_21

Which was the main reason for changing your method of contraception?

- (1) Different partner
 - (2) More reliable in preventing pregnancy
 - (3) More convenient to use
 - (4) Better for long-term health
 - (5) Better for protecting against infections
 - (6) Some other reason
-

ASK IF: Women aged 16-49

AND: No operation and method used

AND: Method at 6 not the same as method at 14

M170_22

Were you at all influenced to make the change by advice from a GP or Family Planning Clinic?

- (1) Yes
 - (2) No
-

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago

M170_23

Some of the previous questions referred to emergency contraception after unprotected sex. There are two kinds of emergency contraception. One is a pill based method, sometimes known as the 'morning after' pill. The other is an IUD (intra-uterine device) method. Before I mentioned it/ you read about it here, had you heard of the pill method of emergency contraception after intercourse?

- (1) Yes
 - (2) No
 - (3) Don't know
-

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago

AND: Has heard of the morning after pill

M170_24

If no other method of contraception has been used, how long after sexual intercourse has taken place do you think that the pill method of emergency contraception can be used?

- (1) Up to 12 hours
 - (2) Up to 24 hours
 - (3) Up to 72 hours
 - (4) Up to 5 days
 - (5) Over 5 days
 - (6) Don't know (spontaneous only)
-

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago

AND: Has heard of the morning after pill

M170_24M

Which of the following statements about emergency contraception do you think are true?

SET [7] OF

- (1) The morning after pill has no identified harmful long-term side-effects
- (2) The morning after pill can still be effective taken at any time up to 72 hours after intercourse
- (3) The morning after pill can sometimes cause nausea / make you feel sick
- (4) The morning after pill is more effective the sooner it is taken after intercourse
- (5) The morning after pill is safer and more effective than it has been in the past
- (6) The morning after pill protects against sexually transmitted infections (STIs)
- (7) The morning after pill protects against pregnancy until the next period

- (8) None of these (Spontaneous only)

ASK IF: *Women aged 16 to 49 who have not had operation or had operation less than 2 years ago*
AND: *Has heard of the morning after pill*

M170_25

Have you used the emergency contraception pill in the last year?

- (1) Yes
- (2) No

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago
AND: Has heard of the morning after pill
AND: Has used morning after pill

M170_26

On how many occasions in the last year have you used the emergency contraception pill?

1..50

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago
AND: Has heard of the morning after pill
AND: Has used morning after pill

M170_27M

Where did you go for this?

SET [7] OF

- (1) Your own GP or practice nurse
 - (2) Another GP or practice nurse
 - (3) Community Contraception Clinic (Family Planning Clinic) including Brook Clinics
 - (4) Hospital Accident & Emergency Department
 - (5) Directly to a chemist or pharmacy
 - (6) A walk-in centre or minor injuries unit
 - (7) Somewhere else
-

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago
AND: Has heard of the morning after pill
AND: Has used morning after pill

M170_27A

On the most recent occasion, did you have any difficulty in obtaining the morning after pill when you needed it?

- (1) Yes
 - (2) No
-

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago
AND: Has heard of the morning after pill
AND: Has used morning after pill
AND: Pharm IN M170_27M

M170_27B

Did you buy the morning after pill yourself or did the pharmacist supply it to you free of charge under NHS arrangements?

- (1) Bought morning after pill
- (2) Supplied free of charge under NHS arrangements

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago

AND: Has heard of the morning after pill

AND: Has not used morning after pill

M170_28M

If someone were to need the emergency contraception pill where do you think they would be able to obtain it?

SET [7] OF

- (1) Your own GP or practice nurse
- (2) Another GP or practice nurse
- (3) Community Contraception Clinic (Family Planning Clinic) including Brook Clinics
- (4) Hospital Accident & Emergency Department
- (5) Directly from a chemist or pharmacy
- (6) A walk-in centre or minor injuries unit
- (7) Somewhere else
- (8) Would not use

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago

M170_29

Before I mentioned it/you read about it here, had you heard of the IUD method of emergency contraception after intercourse?

- (1) Yes
- (2) No

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency IUD

M170_30

If no other method of contraception has been used, how long after sexual intercourse has taken place do you think that an IUD can be fitted as an emergency method of contraception?

- (1) Up to 12 hours
- (2) Up to 24 hours
- (3) Up to 72 hours
- (4) Up to 5 days
- (5) Over 5 days

- (6) Don't know (spontaneous only)

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency IUD

M170_31

Have you had an IUD fitted for emergency contraception in the last year?

- (1) Yes
- (2) No

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago
AND: Has heard of emergency IUD

M170_35M

If someone were to need to have an IUD fitted for emergency contraception, where do you think they would be able to go for this? OR
Where did you go for this?

SET [6] OF

- (1) Your own GP
- (2) Another GP
- (3) Community Contraception Clinic (Family Planning Clinic) including Brook Clinics
- (4) Hospital Accident & Emergency department
- (5) Somewhere else
- (6) Would not use

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago
AND: Has used the morning after pill or had emergency IUD fitted

M170_35B

On the most recent occasion, what was your main reason for using emergency contraception?

- (1) Condom failure
- (2) Missed pill/ forgot to take the pill
- (3) Other routine contraceptive failure
- (4) Condom not available
- (5) I or my partner did not want to use a condom
- (6) Other reason

ASK IF: Women aged 16 to 49 who have not had operation or had operation less than 2 years ago
AND: Has used the morning after pill or had emergency IUD fitted
AND: M170_35B = OthRe

SPEC35B

RECORD OTHER REASON

STRING[200]

ASK IF: Men aged 16 to 69
AND: Not had operation which prevents pregnancy

M170_36M

Here is a list of possible ways of preventing pregnancy. Which, if any, do you (and your partner) use at present?

SET [4] OF

- (1) The contraceptive pill
 - (2) Male condom
 - (3) The Female condom
 - (4) Emergency contraception (morning after pill)
 - (5) Another method of protection
 - (6) No method
 - (7) No sexual relations with a woman currently
-

ASK IF: Men aged 16 to 69

M170_37

Which of the following best describes your situation?

- (1) I have had sex only with women
- (2) I have had sex only with men
- (3) I have usually had sex only with women but have had sex at least once with a man
- (4) I have usually had sex only with men but have had sex at least once with a woman
- (5) I have not (yet) had a sexual relationship

ASK IF: Men aged 16-69 or women aged 16-49

AND: M170_37 <> NotYet

M170_38M

Have you been to any of the following to obtain contraception, for advice on contraception or preventing pregnancy, or for family planning purposes within the last 5 years?

SET [6] OF

- (1) Community Contraception Clinic (Family Planning Clinic) including Brook Clinics
- (2) Your own GP or practice nurse
- (3) Another local GP or practice nurse
- (4) Directly to a chemist or pharmacy
- (5) A walk-in centre or minor injuries unit
- (6) Somewhere else
- (7) None of these

ASK IF: Men aged 16-69 or women aged 16-49

AND: Has been somewhere for family planning last 5 years

AND: NOT (Only one place visited)

M170_39

Which did you visit most recently for these purposes?

- (1) Community Contraception Clinic (Family Planning Clinic) including Brook Clinics
- (2) Your own GP or practice nurse
- (3) Another local GP or practice nurse
- (4) Went directly to a chemist or pharmacy
- (5) A walk-in centre or minor injuries unit
- (6) Somewhere else

ASK IF: Men aged 16-69 or women aged 16-49

AND: M170_39 = RESPONSE

M170_40

When did you last go there for these purposes?

- (1) Less than 3 months ago
- (2) at least 3 months but less than 6 months ago
- (3) at least 6 months but less than 1 year ago
- (4) or at least 1 year but less than 5 years ago

ASK IF: Men aged 16-69 or women aged 16-49

AND: Not currently in a sexual relationship or has had an operation

M170_50

Have you had any sexual partners in the last year?

- (1) Yes
- (2) No

ASK IF: Men aged 16-69 or women aged 16-49
AND: Sexual relationship
AND: Has not said uses condoms

M170_51

May I just check, do/did you (and/or your partner) use a condom in the last 12 months?

Please include either male or female condoms.

- (1) Yes
- (2) No

ASK IF: Men aged 16-69 or women aged 16-49
AND: Sexual relationship
AND: Uses a condom
AND: M170_37 <> NotYet

M170_52

Why do/did you use a condom?

- (1) To prevent pregnancy
- (2) To prevent infection
- (3) Both to prevent pregnancy and infection
- (4) Some other reason

ASK IF: Men aged 16-69 or women aged 16-49
AND: Sexual relationship
AND: Uses a condom
AND: M170_37 <> NotYet

M170_53

How regularly do/did you use a condom?

- (1) Whenever I have sexual intercourse
- (2) Usually when I have sexual intercourse
- (3) Sometimes when I have sexual intercourse

ASK IF: Men aged 16-69 or women aged 16-49
AND: Has had a sexual partner in the last year OR Woman - no op - not said no sex as reason for no contraception OR Man - no op -not said never had sexual relationship
AND: M170_37 <> NotYet

M170_54M

Has what you have heard about HIV and AIDS and other sexually transmitted infections influenced your behaviour?

SET [3] OF

- (1) When I have sexual intercourse I use a condom more often than I used to
 - (2) I have fewer one-night stands
 - (3) When I change partners I have a test for sexually transmitted infections
 - (4) I do not change partners as I am in a long-term exclusive relationship, so it has not influenced me
 - (5) It has not influenced me at all
-

ASK IF: Men aged 16-69 or women aged 16-49

AND: Has had a sexual partner in the last year OR Woman - no op - not said no sex as reason for no contraception OR Man - no op -not said never had sexual relationship

AND: M170_37 <> NotYet

M170_55

May I just check, How many sexual partners have you had in the last year?

- (1) 1
 - (2) 2 or 3
 - (4) 4 or more
 - (5) I have not had any sexual partners in the last year
-

ASK IF: Men aged 16-69 or women aged 16-49

AND: Has had a sexual partner in the last year OR Woman - no op - not said no sex as reason for no contraception OR Man - no op -not said never had sexual relationship

AND: Currently in a sexual relationship

AND: NOT (M170_55 = P1)

AND: M170_37 <> NotYet

M170_56

May I just check, How many sexual partners do you currently have?

- (1) 1
 - (2) 2
 - (3) 3
 - (4) 4 or more
 - (5) I do not have any sexual partners currently
-

ASK IF: Men aged 16-69 or women aged 16-49

AND: Has had a sexual partner in the last year OR Woman - no op - not said no sex as reason for no contraception OR Man - no op -not said never had sexual relationship

AND: More than one sexual partner in past 12 months and uses condom

M170_57

And may I just check, Do/did you use condoms with all your sexual partners, or with only one/some of them?

Please include either male or female condoms.

- (1) Used condoms with all partners
 - (2) Used condoms with only one/some partners
-

ASK IF: Men aged 16-69 or women aged 16-49

M170_41

There has been a lot of information in recent years about HIV/AIDS and about other sexually transmitted infections. From which source would you say you have learnt most about these?

- (1) TV advertisements
 - (2) TV programmes
 - (3) Newspapers, magazines or books
 - (4) Your GP
 - (5) Community Contraception Clinic (Family Planning Clinic) including Brook Clinics
 - (6) GUM or sexual health clinic in a hospital
 - (7) Friends or family
 - (8) Government information leaflet
 - (9) Internet
 - (10) School or college
 - (11) Somewhere else
-

ASK ALWAYS:

M170_60a

The next few questions are asking about whether you think various conditions are sexually transmitted. Please answer yes or no.

Is Tuberculosis a sexually transmitted infection?

- (1) Yes
 - (2) No
 - (3) Dont know (Spontaneous only)
-

ASK ALWAYS:

M170_60b

Is Gonorrhoea a sexually transmitted infection?

- (1) Yes
 - (2) No
 - (3) Dont know (Spontaneous only)
-

ASK ALWAYS:

M170_60c

Is Listeria a sexually transmitted infection?

- (1) Yes
 - (2) No
 - (3) Dont know (Spontaneous only)
-

ASK ALWAYS:

M170_60d

Is Chlamydia a sexually transmitted infection?

- (1) Yes
 - (2) No
 - (3) Dont know (Spontaneous only)
-

ASK ALWAYS:

M170_60e

Is Diabetes a sexually transmitted infection?

- (1) Yes
 - (2) No
 - (3) Dont know (Spontaneous only)
-

ASK IF: *Recognised Chlamydia as STI at M170_60d*

M170_49M

Which of the following statements about Chlamydia do you think are true?

Code all that apply

SET [5] OF

- (1) Chlamydia does not always cause symptoms
 - (2) Chlamydia is easily treated with antibiotics
 - (3) Chlamydia has no serious effects
 - (4) Chlamydia can cause infertility and ectopic pregnancy if untreated
 - (5) Chlamydia only affects men
 - (6) None of these
-

ASK IF: *Women aged 16-49*

M170_61

Have you ever had a test or screen for Chlamydia?

- (1) Yes
 - (2) No
 - (3) Don't know
-

ASK IF: *Women aged 16-49*
AND: *M170_61 = Yes*

M170_62

Have you had a test or screen for Chlamydia in the last year?

- (1) Yes
- (2) No
- (3) Don't know

Appendix C: Contraception and Sexual Health reports in the Omnibus series

Contraception and Sexual Health, 1997. Tricia Dodd and Stephanie Freeth. Office for National Statistics (1999)

Contraception and Sexual Health, 1998. Laura Rainford and Howard Meltzer. Office for National Statistics (2000)

Contraception and Sexual Health, 1999. Fiona Dawe and Howard Meltzer. Office for National Statistics (2001)

Contraception and Sexual Health, 2000. Fiona Dawe and Howard Meltzer. Office for National Statistics (2002)

Contraception and Sexual Health, 2001. Fiona Dawe and Howard Meltzer. Office for National Statistics (2003)

Contraception and Sexual Health, 2002. Fiona Dawe and Howard Meltzer. Office for National Statistics (2003)

Contraception and Sexual Health, 2003. Fiona Dawe and Laura Rainford. Office for National Statistics (2004)

Contraception and Sexual Health, 2004/05. Ian O'Sullivan, Laura Keyse, Neil Park, Alison Diaper and Sandra Short. Office for National Statistics (2005)

Contraception and Sexual Health, 2005/06. Tamara Taylor, Laura Keyse and Aimee Bryant. Office for National Statistics (2006)

Contraception and Sexual Health, 2006/07. Deborah Lader. Office for National Statistics (2007)