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A report on research
using the ONS
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behalf of the
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Contraception and Sexual Health, 2000

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1. Very small bases have been avoided wherever possible because of the relatively high sampling errors that attach to small numbers. In general, percentage distribution are shown if the base is 30 or more. Where the base is smaller than this, actual numbers are shown within square brackets.
2. 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 one percentage point from the sum of the percentages derived from the tables.
3. The row or column percentages may add to 99% or 101% because of rounding.
4. Unless otherwise stated, changes and differences mentioned in the text have been found to be statistically significant.

Summary

This report presents the results of a survey on contraception and sexual health carried out in 2000. Reports were also published with the results of three earlier surveys conducted in 1997, 1998 and 1999. This report includes an examination of any significant changes in the data between 1999 and 2000.

Contraceptive use among women aged under 50

In 2000 the most commonly used forms of contraception for women aged under 50 were:

- the contraceptive pill (used by 25% of women);
- the male condom (used by 21% of women); and
- sterilisation (11% of women had been sterilised and 11% had a partner who had had a vasectomy).

Slightly more than a quarter (27%) of women were not using any form of contraception: half of these women were not currently in a sexual relationship.

The method of contraception used by women varied by age:

- Use of the contraceptive pill and the male condom were more popular among women in their twenties than with women in the older age groups: use of the contraceptive pill fell from 53% of women aged 20–24 to 6% at age 40–44, similarly the use of the male condom fell from 32% of women aged 20–24 to 11% at age 45–49.
- The proportion of women who had been sterilised or had a partner who had had a vasectomy rose with age: less than one in twenty women aged under 30 had been sterilised or had a partner who had had a vasectomy compared with just under a half aged 45–49 (25% had been sterilised and a further 21% had a partner who had had a vasectomy).

Women 'at risk' of pregnancy

In 2000, as in previous years, three-fifths (60%) of women aged 16–49 were considered to be 'at risk' of pregnancy (i.e. they were in a sexual relationship but were neither pregnant nor protected by their own or their partner's sterilisation).

Overall the proportion of women 'at risk' of pregnancy using some kind of contraception was 86%, a further 9% wanted to be or were pregnant and the remaining 5% were neither using contraception nor were or wanted to get pregnant.

The proportion of women 'at risk' of pregnancy and using the male condom fell from 40% in 1999 to 36% in 2000.

Women 'at risk' of pregnancy were most likely to be:

- aged 20–44 (82%)
- using the contraceptive pill (42%)

Emergency contraception

Women who were not sterilised (or had been sterilised within the previous two years) were asked about their knowledge and use of emergency contraception. Of these women:

- 92% had heard of hormonal emergency contraception (the 'morning after pill');
- 49% had heard of the emergency IUD;
- 8% had used the 'morning after pill' at least once during the last year (of women who had used the 'morning after pill' in the last year 59% had obtained it from their GP and 15% said that they had experienced difficulties obtaining it);
- less than 1% had had the emergency IUD fitted during the last year;
- 52% of women who had heard of the 'morning after pill' knew that it remained effective if administered up to 72 hours after intercourse; and
- 11% of women who had heard of the emergency IUD knew that it was effective up to 5 days after intercourse.

Family Planning Services

Just under six in ten (58%) women had used family planning services in the last five years. Of these women 82% had visited their own GP for family planning advice and 35% had visited a Family Planning Clinic.

Sterilisation and vasectomies

Among women aged 16–49 11% had been sterilised and a further 4% had become sterile as a result of another operation. Nine in ten (91%) women who had been sterilised had their operation carried out by the NHS.

Among men aged 16–69 17% had had a vasectomy and a further 1% had become sterile as a result of another operation. Two-thirds (66%) of men who had had a vasectomy had had the operation carried out by the NHS. Younger men were more likely than those aged 50 and over to have had their vasectomy performed by the NHS (76% aged 35–39 compared with 56% aged 65–69).

The likelihood of having had an operation to be sterilised rose with age among both men and women (for example among men the proportion who had had a vasectomy rose from 1% aged 16–29 to 20% aged 65–69).

Sexual behaviour

One in eight (13%) men aged 16–69 and one in ten (10%) women aged 16–49 reported having more than one sexual partner in the year prior to interview. Single respondents and those aged under 30 were those most likely to have had multiple sexual partners during the last year.

Condom use

One in four (40%) men aged 16–69 and 48% of women aged 16–49 had used a condom in the last year.

Among men there was a clear association between the use of condoms and age: the proportion who had used a condom in the last twelve months fell from 91% aged 16–19 to 52% aged 30–34 and fell again to 17% aged 50–64.

During the last year, respondents who had had multiple partners were more likely than those who had had one sexual partner to have used a condom (among men: 75% compared with 35%).

Among those who had used a condom in the last twelve months:

- 54% of men and 55% of women said that they used a condom to prevent pregnancy;
- 38% of men and 37% of women said that they used a condom to prevent pregnancy and disease;

- younger men and women were more likely to say that they used condoms to prevent both pregnancy and disease than those in the older age groups (among men: 63% aged 16–19 compared with 19% aged 40–44);
- the proportion of men and women who said that they used condoms to prevent pregnancy rose with age (among men: 33% aged 20–24 compared with 66% aged 35–39); and
- over half of men and women said that they always used a condom (55% of men aged 16–69 and 60% of women aged 16–49).

Knowledge of sexually transmitted infections

Men aged 16–69 and women aged 16–49 who were either currently in a sexual relationship or had had one in the last twelve months were asked whether they felt that their behaviour had been influenced by their knowledge of HIV/AIDS and other sexually transmitted infections:

- more than a quarter (26% of men and 29% of women) said that they use a condom more often;
- 7% of both men and women said they now have fewer one night stands;
- 3% of men and 5% of women said that they now have a test for sexually transmitted infections when they change partners;
- respondents who had had more than one sexual partner during the last year were more likely to say that their behaviour had been influenced in some way than respondents who had had one partner: for example 58% of men who had had multiple sexual partners said that they now used a condom more often compared with 20% of men who had had one partner; and
- the likelihood of a respondent not having been influenced by information about AIDS/HIV or other sexually transmitted infections rose with age: for example the proportion rose from 27% aged 16–19 to 79% aged 45–49 among men.

The most commonly mentioned sources of information about HIV/AIDS and other sexually transmitted infections were:

- tv programmes (37%);
- tv advertisements (27% in 2000 compared with around 22% in the previous years of the Survey); and
- newspapers, magazines or books (22%).

Respondents were asked to identify sexually transmitted infections from a list which included: Tuberculosis, Gonorrhoea, Listeria, Chlamydia, and Diabetes. The same proportion (87%) of both men and women correctly identified Gonorrhoea as a sexually transmitted infection, however women were almost twice as likely as men to correctly identify Chlamydia (65% compared with 35%).

Respondents who knew that Chlamydia was a sexually transmitted infection were most likely to:

- be women;
- be in the younger age groups (for example, among women 72% aged 25–29 correctly identified Chlamydia as a sexually transmitted infection compared with 57% aged 45–49); and
- know that Chlamydia can cause infertility and ectopic pregnancy if untreated (75% of men and 83% of women who knew that Chlamydia was a sexually transmitted infection).

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1 Introduction

This report presents the results of the module on contraception and sexual health carried out on behalf of the Department of Health as part of the Office for National Statistics Omnibus Survey.

The two main sources of information on contraceptive use and sexual health are the General Household Survey (GHS)¹ and the Omnibus Survey. The GHS has been collecting information about contraception and condom use since 1983. When the 1997 GHS was suspended the contraception module carried on the Omnibus Survey was extended to collect information previously gathered by the GHS. The Omnibus contraception module also includes questions on sexual health and condom use, which are not covered by the GHS. In addition to presenting the results of the 2000 Survey this report will also examine any changes in the Omnibus data between 1999 and 2000.

The Omnibus Survey is a multipurpose survey based on a representative sample of adults in Great Britain. The Omnibus Survey interviewed 6,747 adults during four months between June 2000 and March 2001. Questions on contraceptive use and sexual health were asked only of women aged under 50 and men aged under 70, so the results shown in this report are based on 4,521² adults who met this age criterion. Respondents were able to answer this module using a self-completion method: the majority of respondents chose to answer using self-completion. Self-completion was used to avoid potential embarrassment on the part of the respondents and to encourage honest answers. Details about the Omnibus Survey are given in Appendix A and the questionnaire is shown in Appendix B.

Notes and references

- 1 The latest GHS figures on contraceptive use are: Bridgwood, A *et al*, (2000) *Living in Britain: Results from the 1998 General Household Survey*, TSO: London.
- 2 This is the weighted total number of respondents who met the age criterion and answered the contraception and sexual health module of questions, the unweighted total was 4,206 (see Appendix A for information about weighting omnibus survey data).

2 Contraceptive use among women aged under 50

2.1 Use of contraception

In 2000 the contraceptive pill was used by a quarter (25%) of all women aged 16–49. The male condom was the second most popular form of contraception, used by 21% of women aged 16–49. A tenth of women aged 16–49 had been sterilised (11%) and the same proportion (11%) had a partner who had had a vasectomy. Just over a quarter (27%) of women aged 16–49 were not using any method of contraception and furthermore half of these women were not currently in a sexual relationship (13% of all women aged 16–49).

2.2 Use of contraception by age and marital status

Women aged under 20 were those most likely not to be in a sexual relationship at the time of interview: slightly more than a half (53%) of all women aged 16–17 and just under a third (29%) aged 18–19 said that they were not currently in a sexual relationship compared with around one tenth of women in all other age groups.

Use of the contraceptive pill and the male condom among women fell with age. Both these methods of contraception were more popular among women in their twenties than with women in the older age groups. Around a half of women aged 18–29 were currently using the contraceptive pill (54% of women aged 18–19, 53% of those aged 20–24, and 47% of those aged 25–29) compared with one in twenty women aged 40 and over (6% and 7% of women aged 40–44 and 45–49 respectively). Similarly, the use of the male condom was more popular among women aged 18–29 than among women in the older age groups: the proportion of women using the male condom fell from around a third of women in the younger age-groups (31% aged 18–19, 32% aged 20–24, and 28% aged 25–29) to one in ten (11%) women aged 45–49.

The decline in use of the male condom and contraceptive pill as women get older can be largely explained by the corresponding rise with age in the proportion of women who have either been

sterilised or who had a partner who had had a vasectomy. Among women aged under 30 less than one in twenty had either been sterilised or had a partner who had had a vasectomy compared with just under a half of women aged 45–49 (25% of women aged 45–49 had been sterilised and a further 21% had a partner who had had a vasectomy). **Table 1 and Figure A**

The age distribution of the three marital status groups (as shown in Appendix A) was a strong influencing factor on the contraceptive practices of each group.

Given that three-quarters of single women were aged under 30 it is unsurprising that the proportion using the contraceptive pill was much higher among single women (37%) than among women who were either married or cohabiting, or widowed, divorced or separated (21% and 16% respectively). Additionally, the difference in size between the proportions of single women using the contraceptive pill (37%) and those using the male condom (26%) is again reflective of the age distribution among single women: among women as a whole the difference between the size of the proportion using the contraceptive pill and that for women using the male condom was largest amongst those aged 18–29.

The majority of widowed, divorced or separated women were in the older age groups and consequently were more likely to have been sterilised (25%) than women who were either married or cohabiting (13%) or single (4%).

Unsurprisingly, only a very small proportion (2%) of married or cohabiting women were not currently in a sexual relationship compared with 33% of single women and 28% of women who were widowed, divorced or separated. Unlike single women, married or cohabiting women were as likely to be using the contraceptive pill as they were the male condom (21% and 22% respectively). Women who were married or cohabiting were also more likely to have a partner who had had a vasectomy than women in the other marital status groups: 16% of married or cohabiting women had a partner who had had a vasectomy compared with 6% of women who were widowed, divorced or separated and only 1% of single women. **Table 2 and Figure B**

Figure A Use of the contraceptive pill, male condom and percentage who had been sterilised or had a partner who had had a vasectomy by age, among women aged 16–49

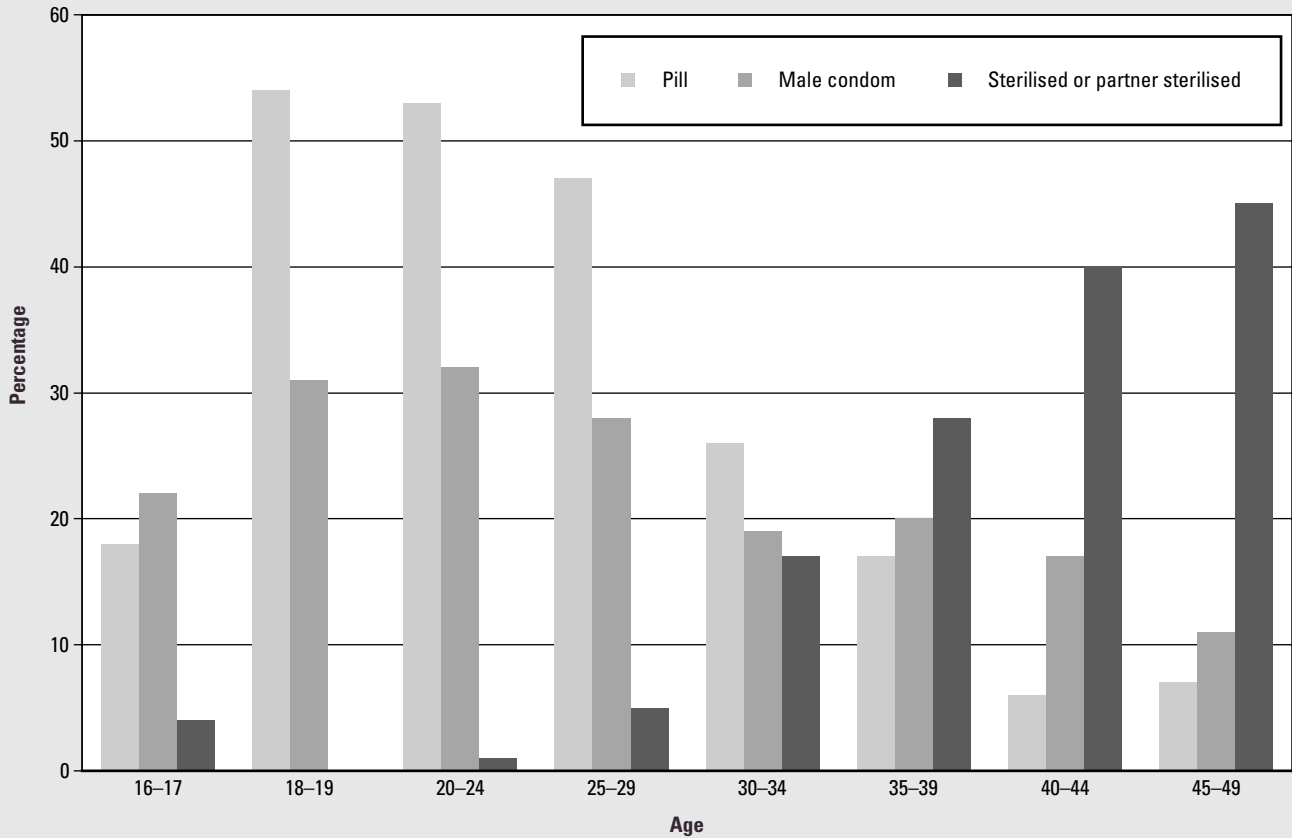
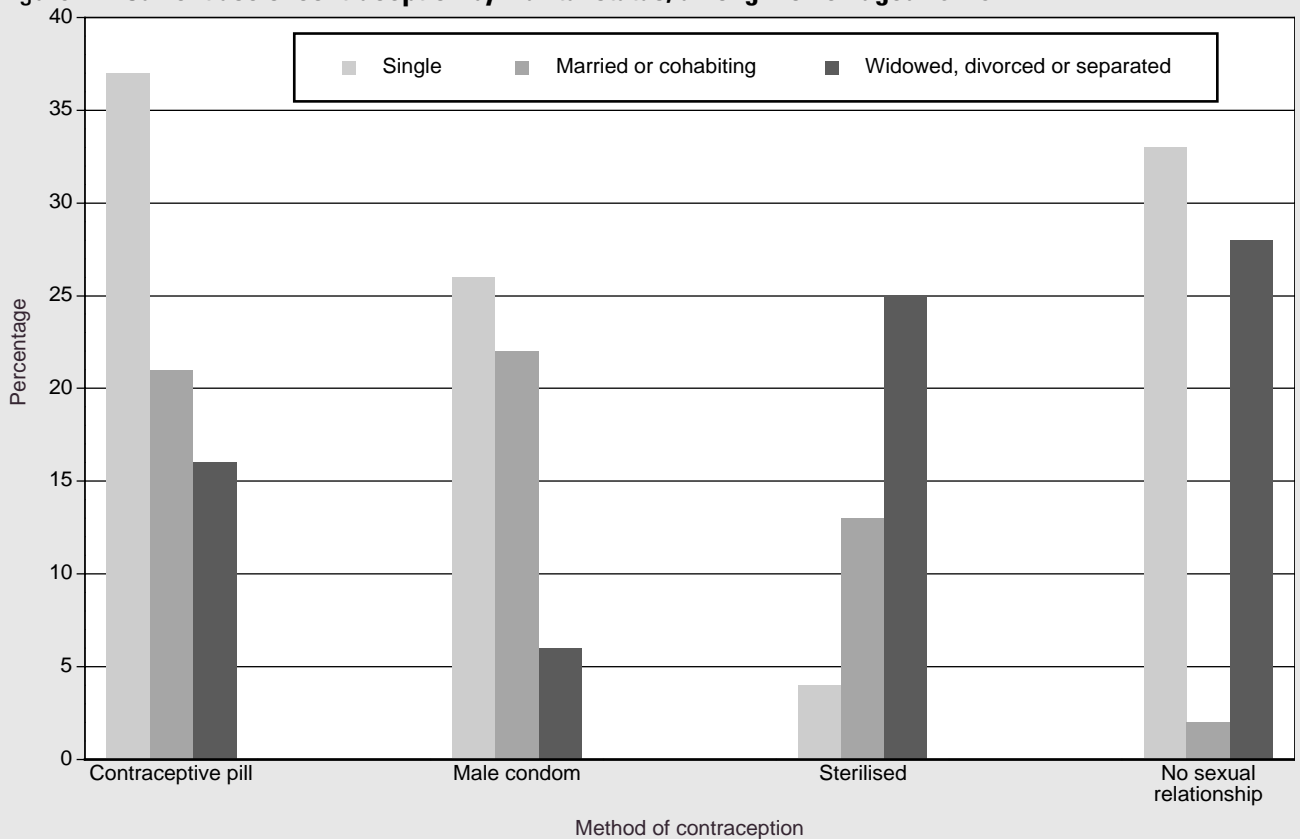


Figure B Current use of contraception by marital status, among women aged 16–49

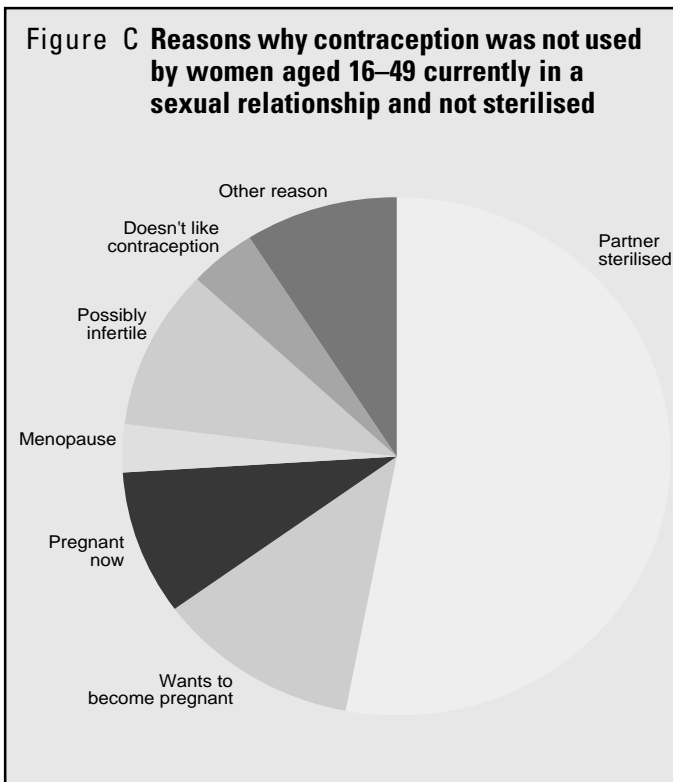


2.3 Reasons for not using contraception

Of women who were currently in a sexual relationship and were neither using contraception nor sterilised just over half (52%) had a partner who had had a vasectomy. Women aged 40 and over were more likely to have a partner who had had a vasectomy than younger women: two-thirds (68%) of women aged 40 and over had a partner who had been sterilised compared with half (49%) of women aged 30–39 and one in ten (11%) of women aged 16–29.

Wanting a baby or being pregnant was the most popular reason (after having a partner who had been sterilised) for women not to be using contraception. Women aged under 30 were more likely to be either pregnant or want to become pregnant than older women: just under a half of women aged under 30 (26% were pregnant and 21% wanted to become pregnant) compared with a third of women aged 30–39 (12% were pregnant and 17% wanted to become pregnant) and less than one in ten women aged 40–49 (1% were pregnant and 6% wanted to become pregnant).

A tenth (10%) of all women said that they did not use contraception because they were infertile (or possibly infertile). Women aged 40 and over were those most likely (6%) to have reached the menopause and therefore have no need for contraception: 3% of all women aged 16–49 gave the menopause as their reason for not using contraception. A further one in twenty (4%) women said that they did not use contraception because they did not like it. **Table 3 and Figure C**



2.4 Women 'at risk' of pregnancy

Women who are in a sexual relationship and who are neither pregnant nor sterilised and do not have a partner who has been sterilised are deemed to be 'at risk' of pregnancy. Since 1997 the proportion of women aged 16–49 considered to be 'at risk' of pregnancy has remained the same: in 2000 three-fifths of women (60%) aged 16–49 were 'at risk' of pregnancy.

One in ten (10%) women 'at risk' of pregnancy were aged under 20 and a slightly smaller proportion (8%) were aged 45 and over. The majority of women (82%) who were 'at risk' of pregnancy in 2000 were aged between 20 and 44 years.

Over two-fifths (42%) of women who were 'at risk' of pregnancy used the contraceptive pill. The proportion of women 'at risk' of pregnancy who were currently using the male condom had fallen from 40% in 1999 to 36% in 2000. Overall more than eight in ten (86%) women 'at risk' of pregnancy were currently using some form of contraception. Furthermore, the proportion of women who were not using any method of contraception because they were infertile (or possibly infertile), had passed the menopause, or wanted to become pregnant had almost doubled since the previous year: 9% of women 'at risk' of pregnancy in 2000 gave these reasons for not currently using contraception compared with 5% in 1999. The remaining 5% of women who were 'at risk' of pregnancy were neither using contraception nor wanted to get pregnant.

Of women who were considered 'not at risk' of pregnancy two-thirds (66%) were aged 35 and over. The proportion of women 'not at risk' of pregnancy who were aged 20–24 fell from 7% in 1999 to 4% in 2000. **Table 4**

Just under two-thirds (63%) of women who were 'at risk' of pregnancy and used the contraceptive pill were aged 16–29. However, women who were 'at risk' of pregnancy and used the male condom were almost as likely to be aged 16–29 as to be aged 30–49 (47% and 53% respectively). Just over three-quarters (77%) of women who were 'at risk' of pregnancy and did not use either the contraceptive pill or the male condom were aged 30–49. **Table 5**

2.5 Emergency contraception

There are two kinds of emergency contraception available to women after intercourse: hormonal emergency contraception (the 'morning after pill') which must be first administered within 72 hours of intercourse, and the emergency IUD which must be inserted within five days of intercourse.

Women who were not sterilised (or who had been sterilised within the last two years) were asked whether they had heard of these two methods. The proportion of women who had heard of the 'morning after pill' or the emergency IUD had remained constant since 1997. In 2000 over nine out of ten women (92%) had heard of the 'morning after pill' and slightly fewer than a half (49%) had heard of the emergency IUD.

On the whole there did not appear to be a relationship between age and the likelihood of a woman having heard of either method of emergency contraception. However, women aged 40–44 were slightly less likely to have heard of the 'morning after pill' than women aged 25–39 and 45–49: for example 94% of women aged 25–29 had heard of the 'morning after pill' compared with 87% aged 40–44 (the differences between the proportions of women aged under 25 and those aged 40–44 who had heard of the 'morning after pill' were not statistically significant). **Table 6**

Women who had heard of either of the two forms of emergency contraception were then asked how long after sexual intercourse the method of emergency contraception remained effective. In 2000 just over a half (52%) of women correctly answered that the 'morning after pill' was effective if administered up to 72 hours after intercourse. This proportion had increased from 42% in 1999 (however, the answer categories shown to the respondent were altered slightly in 2000 and this may account for part of the increase¹). After much media coverage during 2000, including information about safety and effectiveness, the 'morning after pill' became available over the counter at pharmacies in January 2001. It is likely that this helped increase awareness of the 'morning after pill' and the length of time it can be taken after intercourse. Two out of five (41%) women underestimated the length of period that the 'morning after pill' was effective: 14% of women thought the 'morning after pill' was effective only up to 12 hours after intercourse and a further 26% thought its effectiveness lasted up to 24 hours after intercourse. Only 1% of women over estimated the length of time after intercourse the 'morning after pill' remained effective (these women thought the 'morning after pill' could be taken up to 5 days after intercourse).

Consistent with findings in previous years slightly more than one in ten (11%) women who had heard of the IUD method of emergency contraception correctly identified that this form of contraception was effective up to 5 days after intercourse. More than two out of five (44%) women who had heard of the IUD method of emergency contraception underestimated the period in which it was effective (13% thought it was effective up to 12 hours, 16% thought it was effective up to 24 hours, and a further 15% thought it was effective up to 72 hours after intercourse). Again, only a very small proportion of women (2%) over estimated the period of effectiveness of the

emergency IUD (these women thought that the emergency IUD would be effective if fitted over 5 days after intercourse). Over four out of ten (43%) women who had heard of the emergency IUD answered "Don't know" when asked how long this method of emergency contraception is effective after intercourse, this proportion was over eight times larger than that for women who had heard of the 'morning after pill' and answered "Don't know" (7%) when asked how long after intercourse it could be taken.

Table 7

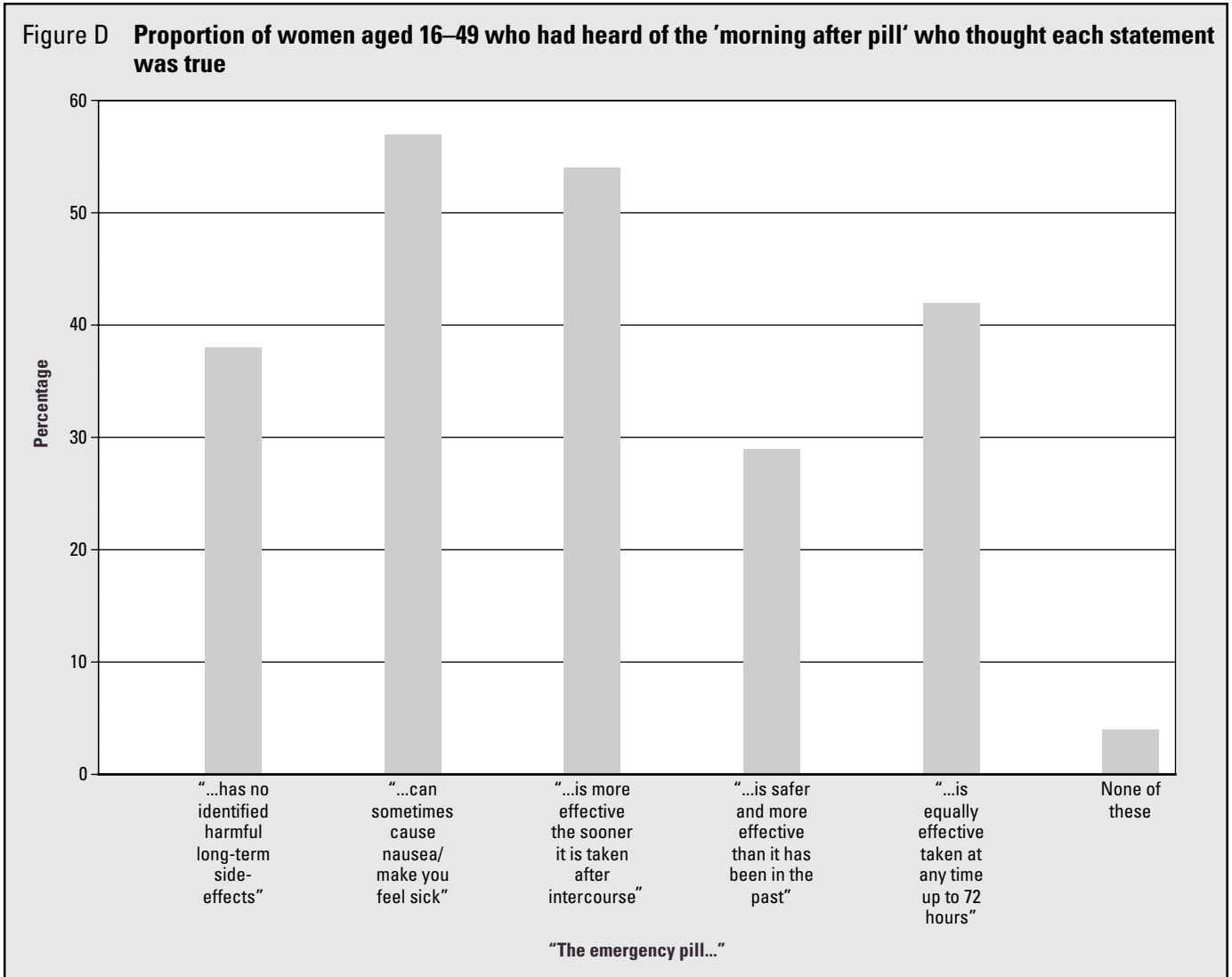
Respondents who had heard of the 'morning after pill' were asked (for the first time in 2000) which of the following list of statements about the 'morning after pill' they thought were true: *"The emergency pill..."*

1. ...has no identified harmful long-term side-effects
2. ...is equally effective taken at any time up to 72 hours after intercourse
3. ...can sometimes cause nausea/make you feel sick
4. ...is more effective the sooner it is taken after intercourse
5. ...is safer and more effective than it has been in the past

Of the five statements only one, *"the emergency pill is equally effective taken up to 72 hours after intercourse"*, was not true.

Over half of women who had heard of the 'morning after pill' thought that it can cause nausea (57%) and that it is more effective the sooner it is taken after intercourse (54%). Slightly more than a third (38%) thought that the 'morning after pill' has no identified harmful long-term side-effects and 29% thought that the 'morning after pill' is safer and more effective than it has been in the past. Just over two out of five (42%) women thought the incorrect statement ('the emergency pill is equally effective taken at any time up to 72 hours after intercourse') was true. Only 4% of women who had heard of the 'morning after pill' thought that none of the statements were true. **Figure D**

For two of the statements, "the emergency pill is equally effective taken at any time up to 72 hours after intercourse" and "the emergency pill can sometimes cause nausea/make you feel sick", there would appear to be a relationship between the respondents age and the likelihood of them believing the statement to be true. In both instances the proportion of women that thought these statements were true fell with age: 49% of women aged 16–29, 41% aged 30–39 and 32% aged 40–49 said that they thought the emergency pill is equally effective taken at any time up to 72 hours after intercourse. Similarly the proportion of women agreeing that the emergency pill can cause nausea fell with age from 69% of women aged 16–29 to 56% aged 30–39 and 40% aged 40–49. Whilst there was little difference between the proportions in the three marital status groups agreeing with the different statements, single women were more likely than women who were married or cohabiting



or women who were widowed, divorced or separated to think that the emergency pill can cause nausea (67%, 52% and 55% respectively). However this difference may be more reflective of the age distribution of the three marital status groups than of a real difference between the groups.

Women who had used the ‘morning after pill’ at least once during the last year were more likely than those who had not to think: that the emergency pill can cause nausea/make you feel sick (78% compared with 55%); is safer and more effective than it has been in the past (41% compared with 28%); and is equally effective taken at any time up to 72 hours after intercourse (60% compared with 40%). **Table 8**

In 2000 8% of women aged 16–49 who were not sterilised (or who had been sterilised within the last two years) had used hormonal emergency contraception at least once and less than

1% had had the emergency IUD fitted in the year prior to interview.² Six per cent of women had used the ‘morning after pill’ once during the last year, 1% had used it twice and a further 1% had used it more than twice.

On the whole women aged under 30 were more likely than those aged 35 and over to have used the ‘morning after pill’ at least once during the last year (not all differences between age groups were statistically significant): for example 16% of women aged 20–24 had used the ‘morning after pill’ at least once during the last year compared with 5% aged 35–39 and 1% aged 45–49. Single women were five times more likely than married or cohabiting women to have used the ‘morning after pill’ (15% compared with 3%). Slightly less than one in ten (9%) women who were widowed, divorced or separated said that they had used the ‘morning after pill’ at least once during the last year.

Women who were currently using some form of contraception were more likely to have used the ‘morning after pill’ than those who were not (9% compared with 4%). **Table 9**

Slightly fewer than six in ten (59%) women who had used the ‘morning after pill’ during the year prior to interview obtained it from their own GP, a third (33%) obtained it from a family planning clinic, the same percentage (3%) had obtained it from some other GP or a hospital Accident and Emergency department, and a further 5% had obtained it from somewhere else. Women aged 30–49 were more likely to visit their own GP to obtain the ‘morning after pill’ than women aged under 30 (73% compared with 52%). Single women were almost twice as likely than women who were married or cohabited to have obtained the ‘morning after pill’ from a family planning clinic (41% and 22% respectively). **Table 10**

Women who had used the ‘morning after pill’ at least once during the year prior to interview were asked for the first time in 2000 whether they had experienced any difficulty in obtaining the ‘morning after pill’: 15% of women who had used the ‘morning after pill’ during the last year said that they had had problems obtaining it. **Table 11**

2.6 Family planning services

All women aged 16–49 were asked which, if any, of the following sources of family planning they had used during the last five years:

1. Own GP
2. Family planning clinic
3. Other GP
4. Somewhere else
5. Not visited anyone

Slightly fewer than six in ten (58%) women had used at least one of these sources of family planning in the last five years. Of women that had used one of these sources the majority (82%) had visited their own GP for this purpose and just over a third (35%) had visited a family planning clinic. Just over one in ten (12%) women had visited both their own GP and a family planning clinic for family planning advice. The same proportion (4%) had visited a GP who was not their own GP or had gone somewhere else.

Women in their twenties³ were those most likely and women in their forties those least likely to have visited a source of family planning during the last five years: 80% and 83% of women aged 20–24 and 25–29 respectively had visited somewhere for family planning advice compared with 40% of women aged 40–44 and 24% aged 45–49. **Table 12**

Notes and references

- 1 The question “If no other method of contraception has been used, how long after sexual intercourse has taken place do you think that the pill method/IUD method of emergency contraception can be used successfully?” has not changed since 1997, however the answer categories have changed. Between 1997–1999 the answer categories were:
 - 1 ‘Up to 12 hours’
 - 2 ‘Over 12 hours, up to 24 hours’
 - 3 ‘Over 24 hours, up to 72 hours’
 - 4 ‘Over 72 hours, up to 5 days’
 - 5 ‘Over 5 days’
 - 6 ‘Don’t know’
 In 2000 codes 2–4 were changed to read:
 - 2 ‘Up to 24 hours’
 - 3 ‘Up to 72 hours’
 - 4 ‘Up to 5 days’
- 2 In previous years respondents were asked whether they had used emergency contraception during the two years prior to interview.
- 3 The difference between the proportion of women aged 18–19 and those aged 20–24 who had visited somewhere for family planning purposes during the five years prior to interview was not statistically significant.

Table 1 **Current use of contraception by age**

<i>Women aged 16-49</i>										<i>Great Britain: 2000</i>		
Current use of contraception	Age	18-19	20-24	25-29	30-34	35-39	40-44	45-49	All	1999	1998	1997
	16-17	%	%	%	%	%	%	%	%	%	%	%
Non-surgical												
Pill*	18	54	53	47	26	17	6	7	25	26	26	26
<i>Minipill</i>	8	9	3	8	7	6	3	2	5	5	5	5
<i>Combined pill</i>	8	35	45	34	18	9	2	4	17	18	19	19
Male condom	22	31	32	28	19	20	17	11	21	23	21	21
Withdrawal	3	1	4	3	5	4	2	2	3	5	6	4
IUD	2	-	2	4	6	6	7	6	5	4	4	4
Injection/implant	9	5	4	4	3	1	2	1	3	3	2	2
Safe period/ rhythm method/ Persona	1	-	1	1	2	1	2	1	1	2	2	2
Cap/ diaphragm	-	-	-	1	1	1	2	1	1	1	1	2
Foams/ gels	-	-	-	-	-	-	1	-	0	0	1	0
Hormonal IUD	-	1	0	1	2	2	1	-	1	1	0	0
Female condom	-	-	0	0	0	0	-	-	0	0	0	0
Emergency Contraception**	6	4	1	2	-	-	-	-	1			
Total at least one method non-surgical	39	68	77	71	57	47	36	26	51	54	50	52
Surgical												
Sterilised	2	-	1	3	8	13	20	25	11	12	12	11
Partner sterilised	2	-	-	2	9	14	20	21	11	11	12	10
Total at least one method surgical	43	68	78	77	75	75	77	71	73	76	75	74
Not using a method												
No sexual relationship	53	29	13	11	9	10	8	8	13	15	13	14
Sterile after another operation	1	-	-	2	1	4	6	11	4	3	4	4
Wants to get pregnant	2	1	2	3	7	2	2	1	3	1	2	2
Pregnant now	-	1	2	4	4	2	0	-	2	1	1	2
Just doesn't use contraception†										0	1	2
Going without sex to avoid pregnancy	3	-	1	2	1	1	0	-	1	1	1	1
Unlikely to conceive because of menopause	-	-	-	-	-	1	1	3	1	1	1	1
Possibly infertile	-	-	1	2	2	4	3	2	2	1	1	1
Doesn't like contraception	1	1	0	0	2	1	1	1	1	1	0	0
Other reason	-	2	4	2	0	2	2	2	2	1	0	0
Total not using a method	57	32	22	23	25	25	23	29	27	24	25	26
<i>Base††</i>	<i>99</i>	<i>112</i>	<i>206</i>	<i>256</i>	<i>302</i>	<i>370</i>	<i>366</i>	<i>255</i>	<i>1967</i>	<i>2179</i>	<i>1601</i>	<i>3357</i>

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

** Category included for the first time in the 2000 questionnaire.

† Category not included in the 2000 questionnaire.

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

Table 2 **Current use of contraception by marital status**

Women aged 16–49

Great Britain: 2000

Current use of contraception	Marital status			All*
	Single	Married or cohabiting	Widowed, divorced or separated	
	%	%	%	%
Non-surgical				
Pill	37	21	16	25
Male condom	26	22	6	21
Withdrawal	3	3	2	3
IUD	2	6	9	5
Injection/implant	4	2	2	3
Safe period/ rhythm method/ Persona	1	2	1	1
Cap/ diaphragm	0	1	1	1
Foams/ gels	0	0	-	0
Hormonal IUD	1	1	0	1
Female condom	0	0	-	0
Emergency Contraception**	2	0	0	1
Surgical				
Sterilised	4	13	25	11
Partner sterilised	1	16	6	11
Total at least one method	62	80	65	73
Not using a method				
No sexual relationship	33	2	28	13
Sterile after another operation	1	5	6	4
Wants to get pregnant	1	4	0	3
Pregnant now	0	3	-	2
Going without sex to avoid pregnancy	2	1	1	1
Unlikely to conceive because of menopause	0	1	1	1
Possibly infertile	1	3	1	2
Doesn't like contraception	1	1	-	1
Other reason	2	2	0	2
Total not using a method	38	20	35	27
<i>Base†</i>	<i>544</i>	<i>1231</i>	<i>192</i>	<i>1967</i>

* Total column includes women whose marital status is not known.

** Category included for the first time in the 2000 questionnaire.

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

Table 3 Main reason for not using contraception by age

Women aged 16-49 in a sexual relationship, not using contraception and not sterilised

Great Britain: 2000

Main reason for not using contraception	Age 16-29	30-39	40-49	All	1999 Omnibus	1998 Omnibus	1997 Omnibus	1998 GHS
	%	%	%	%	%	%	%	%
Partner sterilised	11	49	68	52	69	67	58	49
Wants to become pregnant	21	17	6	12	9	10	10	10
Pregnant now	26	12	1	9	6	6	9	16
Menopause	-	1	6	3	3	6	4	6
Possibly infertile	11	11	10	10	7	4	5	6
Doesn't like contraception	5	4	3	4	4	2	2	6
Other reason	26	5	7	9	1	4	11	8
Total	100	100	100	100	100	100	100	100
<i>Base</i>	<i>57</i>	<i>166</i>	<i>187</i>	<i>410</i>	<i>338</i>	<i>291</i>	<i>576</i>	<i>1036</i>

Table 4 Selected characteristics of women 'at risk' and 'not at risk' of pregnancy

Women aged 16-49

Great Britain: 2000

	At risk* 2000	1999	1998	Not at risk 2000	1999	1998
	%	%	%	%	%	%
Age						
16-19	10	9	9	11	12	10
20-24	15	16	13	4	7	3
25-29	17	20	19	7	5	8
30-34	18	20	19	12	14	13
35-39	18	16	18	20	19	18
40-44	14	12	12	25	23	21
45-49	8	7	9	20	19	28
<i>Base</i>	<i>1169</i>	<i>1275</i>	<i>923</i>	<i>798</i>	<i>907</i>	<i>683</i>
Current use of contraception†						
Pill	42	44	46	-	-	-
Condom	36	40	38	-	-	-
IUD	8	6	8	-	-	-
Other methods	19	20	20	-	-	-
Not using contraception because of infertility, menopause or wants to become pregnant	9	5	7	-	-	-
Not using contraception because of other reasons	5	4	4	-	-	-
<i>Base</i>	<i>1169</i>	<i>1272</i>	<i>923</i>	<i>-</i>	<i>-</i>	<i>-</i>

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

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

Table 5 Age of women 'at risk' of pregnancy by type of contraception

Women aged 16–49 (excluded if pregnant, self or partner* sterilised or no sexual relationship) Great Britain: 2000

	Pill user†	Partner of Condom user†	Neither
	%	%	%
Age			
16–29	63	47	23
30–49	37	53	77
Base	489	415	378

* 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 columns.

Table 6 Knowledge of emergency contraception by age

Women aged 16–49 (excluded if sterilised at least two years ago)

Great Britain: 2000

Emergency contraception	Age									1999	1998	1997
	16–17	18–19	20–24	25–29	30–34	35–39	40–44	45–49	All			
	Percentage who had heard of emergency contraception											
Hormonal emergency contraception	90	92	92	94	94	93	87	94	92	91	93	91
Emergency IUD	45	45	54	44	46	48	54	53	49	48	51	47
Base	99	112	206	246	284	321	283	171	1722	1914	1396	2629

Table 7 Knowledge of how long after intercourse emergency contraception is effective

Women who had heard of emergency contraception

Great Britain: 2000

How long after intercourse respondent thought it is effective*	Hormonal emergency contraception ('Morning after pill')			Emergency IUD		
	2000	1999	1998	2000	1999	1998
	%	%	%	%	%	%
Up to 12 hours	14	18	16	13	14	14
Up to 24 hours	26	27	26	16	17	20
Up to 72 hours	52	42	45	15	13	13
Up to 5 days	1	7	6	11	12	10
Over 5 days	0	0	0	2	3	4
Don't know	7	5	6	43	41	38
Total	100	100	100	100	100	100
Base	1585	1733	1297	839	921	718

* Prior to 2000 the answer categories for this question read 1 'Up to 12 hours'; 2 'Over 12 hours, up to 24 hours'; 3 'Over 24 hours, up to 72 hours'; 4 'Over 72 hours, up to 5 days'; 5 'Over 5 days'; and 6 'Don't know'.

Table 8 **Whether respondents could identify which of the statements about hormonal emergency contraception ('morning after pill') were true by (a) age, (b) marital status, and (c) whether used hormonal emergency contraception during the last year**

Women aged 16–49 who had heard of the 'morning after pill'

Great Britain: 2000

Statements about hormonal contraception	Age			Marital status			Used 'Morning after pill'		All
	16–29	30–39	40–49	Single	Married or Cohabiting	Widowed, divorced or separated	Yes	No	
	%	%	%	%	%	%	%	%	%
"The emergency pill ...									
...has no identified harmful long-term side-effects"	37	38	37	39	36	40	42	37	38
...can sometimes cause nausea/make you feel sick"	69	56	40	67	52	55	78	55	57
...is more effective the sooner it is taken after intercourse"	50	56	56	52	55	56	59	53	54
...is safer and more effective than it has been in the past"	29	30	29	30	29	29	41	28	29
...is equally effective taken at any time up to 72 hours after intercourse"	49	41	32	46	38	43	60	40	42
None of these	3	4	7	3	4	5	1	4	4
<i>Base*</i>	<i>531</i>	<i>593</i>	<i>362</i>	<i>474</i>	<i>818</i>	<i>194</i>	<i>130</i>	<i>1356</i>	<i>1486</i>

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

Table 9 **Use of emergency contraception during the year prior to interview, by (a) age, (b) marital status, and (c) whether currently using a method of contraception**

Women aged 16–49 (excluded if sterilised at least two years ago)

Great Britain: 2000

Emergency contraception	Age								Marital status				Use of contraception		All
	16–17	18–19	20–24	25–29	30–34	35–39	40–44	45–49	Single	Married	Co-habiting	Widowed, divorced or Separated	Currently using a method	Currently not using a method	
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Hormonal emergency contraception ('Morning after pill')															
used once	14	7	12	8	6	4	2	1	11	2	7	6	7	4	6
used twice	3	2	3	1	1	1	1	1	3	0	1	1	2	0	1
used more than twice	2	1	0	1	1	0	-	-	1	-	0	2	1	0	1
not used	81	90	84	90	92	95	96	99	85	97	92	90	91	95	92
Emergency IUD															
used	2	1	1	-	0	-	-	1	0	0	0	-	1	-	0
not used	98	99	99	100	100	100	100	99	100	100	100	100	99	100	100
<i>Base</i>	<i>99</i>	<i>112</i>	<i>205</i>	<i>248</i>	<i>285</i>	<i>322</i>	<i>283</i>	<i>172</i>	<i>530</i>	<i>811</i>	<i>237</i>	<i>147</i>	<i>1243</i>	<i>473</i>	<i>1726</i>

Table 10 Where hormonal emergency contraception ('morning after pill') obtained by (a) age and (b) marital status

Women aged 16–49 who had used the 'morning after pill' in the year prior to interview

Great Britain: 2000

Where obtained	Age		Marital Status			All
	16–29	30–49	Single	Married or Cohabiting	Widowed, divorced or separated	
	%	%	%	%	%	%
Own GP	52	73	54	68	[8]	59
Family planning clinic	38	24	41	22	[3]	33
Other GP	4	-	2	5	[-]	3
Hospital Accident and Emergency	2	6	1	2	[2]	3
Other	8	-	7	2	[1]	5
<i>Base*</i>	<i>86</i>	<i>48</i>	<i>77</i>	<i>44</i>	<i>13</i>	<i>134</i>

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

Table 11 Percentage of respondents who had experienced difficulty in obtaining hormonal emergency contraception ('morning after pill') by (a) age, (b) marital status, and (c) number of times respondent had used hormonal emergency contraception during the last year

Women who had used the 'morning after pill' during the past year

Great Britain: 2000

	Age		Marital status			Number of times respondent used the 'morning after pill'		All
	16–29	30–49	Single	Married or Cohabiting	Widowed, divorced or separated	Once	Twice or more	
	<i>Percentage</i>							
Respondents who had experienced difficulty obtaining the 'morning after pill'	13	19	14	9	[5]	16	12	15
<i>Base</i>	<i>85</i>	<i>48</i>	<i>77</i>	<i>43</i>	<i>14</i>	<i>102</i>	<i>32</i>	<i>134</i>

Table 12 Use of family planning services during the five years prior to interview by age

<i>Women aged 16–49</i>										<i>Great Britain: 2000</i>			
Use of family planning services	Age									Respondents who had used Family Planning Services	1999	1998	1997
	16–17	18–19	20–24	25–29	30–34	35–39	40–44	45–49	All		All	All	All
	%	%	%	%	%	%	%	%	%	%	%	%	%
Own GP	30	52	63	72	64	51	30	20	48	82	45	45	45
Family planning clinic	26	37	31	35	19	15	13	6	20	35	18	18	16
Other GP	-	4	8	3	2	1	1	0	2	4	2	2	1
Somewhere else	6	4	4	2	2	2	1	-	2	4	2	1	2
Not visited anyone	52	30	20	17	28	43	60	76	42		44	45	44
<i>Base*</i>	<i>101</i>	<i>112</i>	<i>207</i>	<i>258</i>	<i>304</i>	<i>370</i>	<i>369</i>	<i>255</i>	<i>1975</i>	<i>1146</i>	<i>2189</i>	<i>1604</i>	<i>3355</i>

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

3 Sterilisation and vasectomies

3.1 Women who had been sterilised

The proportion of women who had been sterilised remained constant since 1997: in 2000 11% of women aged 16–49 had been sterilised and a further 4% had become sterile as a result of another operation.

The proportion of women who had been sterilised rose with age: only 2% of women aged 16–29 had had an operation to make them sterile compared with one in five (20%) aged 40–44 and one in four (25%) aged 45–49. Similarly the proportion of women who had become sterile as a result of another operation also increased with age (1% of women aged 16–29 compared with 11% aged 45–49).

Nine in ten (91%) women who had been sterilised had their operation carried out by the NHS and 9% of women were sterilised in a private hospital. These proportions were similar to those found in previous years (however, in 1999 the proportion

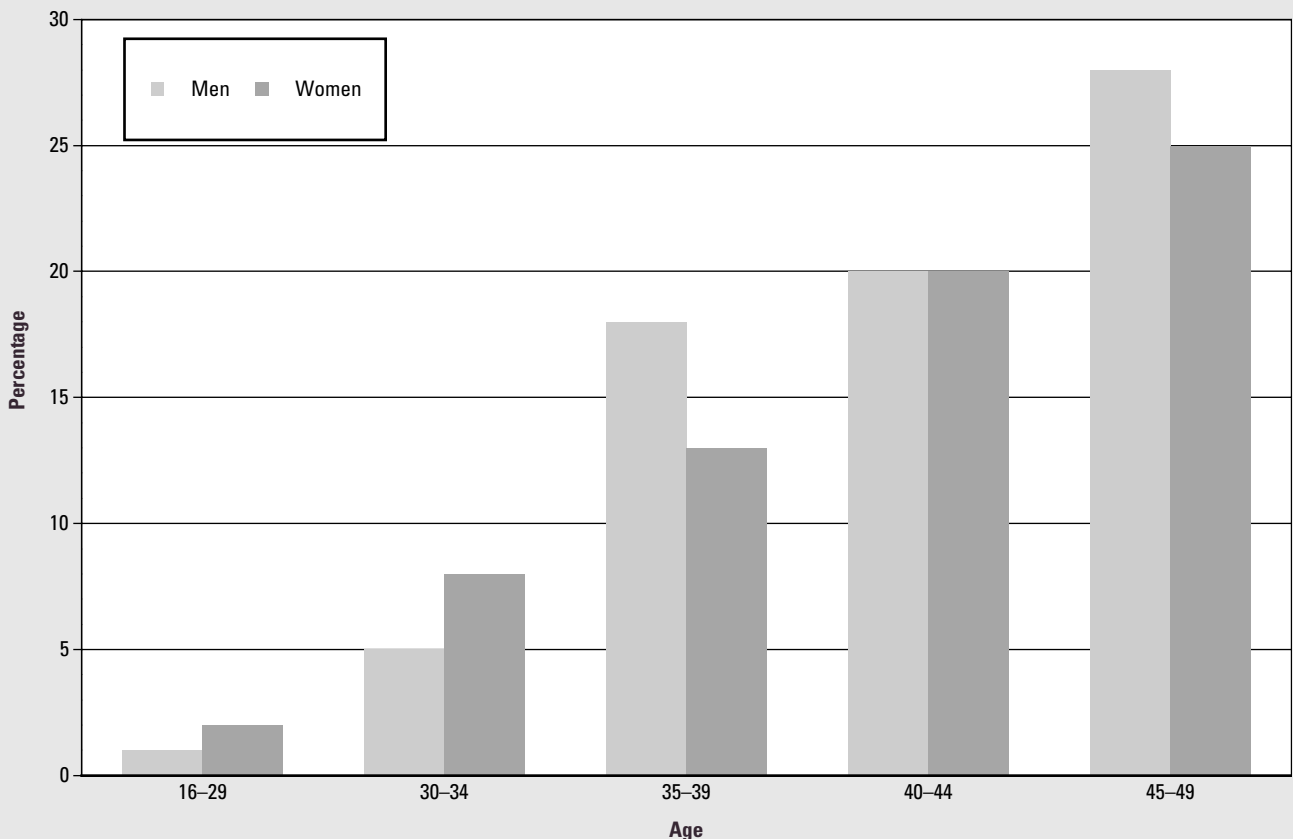
of women who had been sterilised by the NHS was higher than in 2000 and in 1997 and 1998). **Table 13**

3.2 Men who had had a vasectomy

As for women who had been sterilised, the proportion of men who had had a vasectomy remained constant since 1997: in 2000 17% of men aged 16–69 had had a vasectomy and a further 1% had become sterile as a result of another operation.

In 2000 the likelihood of a man having had a vasectomy increased with age up to the age of 50–54 and then began to fall among those aged 55 and over (not all the differences between the age groups were found to be statistically significant). For example over a third (35%) of men aged 50–54 had had a vasectomy compared with only 1% of men aged 16–29 and 20% aged 65–69. Additionally when men aged 16–49 are compared with women of the same age there is little difference between the

Figure E Proportion of men aged 16–49 who had had a vasectomy and women aged 16–49 who had been sterilised by age



sexes in terms of which is more likely to have had an operation to make them sterile: women were as likely as men in each age group to have had an operation to make them sterile. **Figure E**

Overall two-thirds (66%) of men who had had a vasectomy had had the operation carried out by the NHS. Younger men were

more likely than older men to have had their vasectomy carried out by the NHS: around three-quarters (76%) of men aged 35–39 who had had a vasectomy had the operation carried out by the NHS compared with six in ten or fewer aged 50 and over (58% aged 50–54, 60% aged 55–64, and 56% aged 65–69).

Table 14

Table 13 Female sterilisation by age

<i>Women aged 16–49</i>							<i>Great Britain: 2000</i>		
Use of family planning services	Age						1999	1998	1997
	16–29	30–34	35–39	40–44	45–49	All			
	%	%	%	%	%	%	%	%	%
Whether been sterilised	2	8	13	20	25	11	12	12	11
Organisation that carried out the sterilisation...*									
...NHS	[6]	100	92	96	90	91	96	92	91
...not NHS	[6]	-	8	4	10	9	4	8	9
Had another operation causing sterility	1	1	4	6	11	4	3	4	4
<i>Bases</i>									
<i>All women</i>	<i>678</i>	<i>304</i>	<i>371</i>	<i>371</i>	<i>255</i>	<i>1979</i>	<i>2194</i>	<i>1605</i>	<i>3357</i>
<i>Women who had been sterilised</i>	<i>12</i>	<i>25</i>	<i>48</i>	<i>73</i>	<i>62</i>	<i>220</i>	<i>262</i>	<i>193</i>	<i>369</i>

* Percentages based on those respondents who had been sterilised.

Table 14 Male vasectomy by age

<i>Men aged 16–69</i>										<i>Great Britain: 2000</i>		
	Age									1999	1998	1997
	16–29	30–34	35–39	40–44	45–49	50–54	55–64	65–69	All			
	%	%	%	%	%	%	%	%	%	%	%	%
Whether had vasectomy	1	5	18	20	28	35	25	20	17	17	16	17
Organisation that carried out the vasectomy...*												
....NHS	[5]	[12]	76	76	69	58	60	56	66	68	59	63
....not NHS	[1]	-	24	24	31	42	40	44	34	32	41	37
Had another operation causing sterility	0	-	0	1	-	-	1	3	1	1	1	1
<i>Bases</i>												
<i>All men</i>	<i>604</i>	<i>257</i>	<i>285</i>	<i>269</i>	<i>204</i>	<i>279</i>	<i>450</i>	<i>195</i>	<i>2543</i>	<i>2740</i>	<i>2079</i>	<i>4027</i>
<i>Men who had had a vasectomy</i>	<i>6</i>	<i>12</i>	<i>50</i>	<i>54</i>	<i>58</i>	<i>97</i>	<i>111</i>	<i>39</i>	<i>427</i>	<i>469</i>	<i>333</i>	<i>715</i>

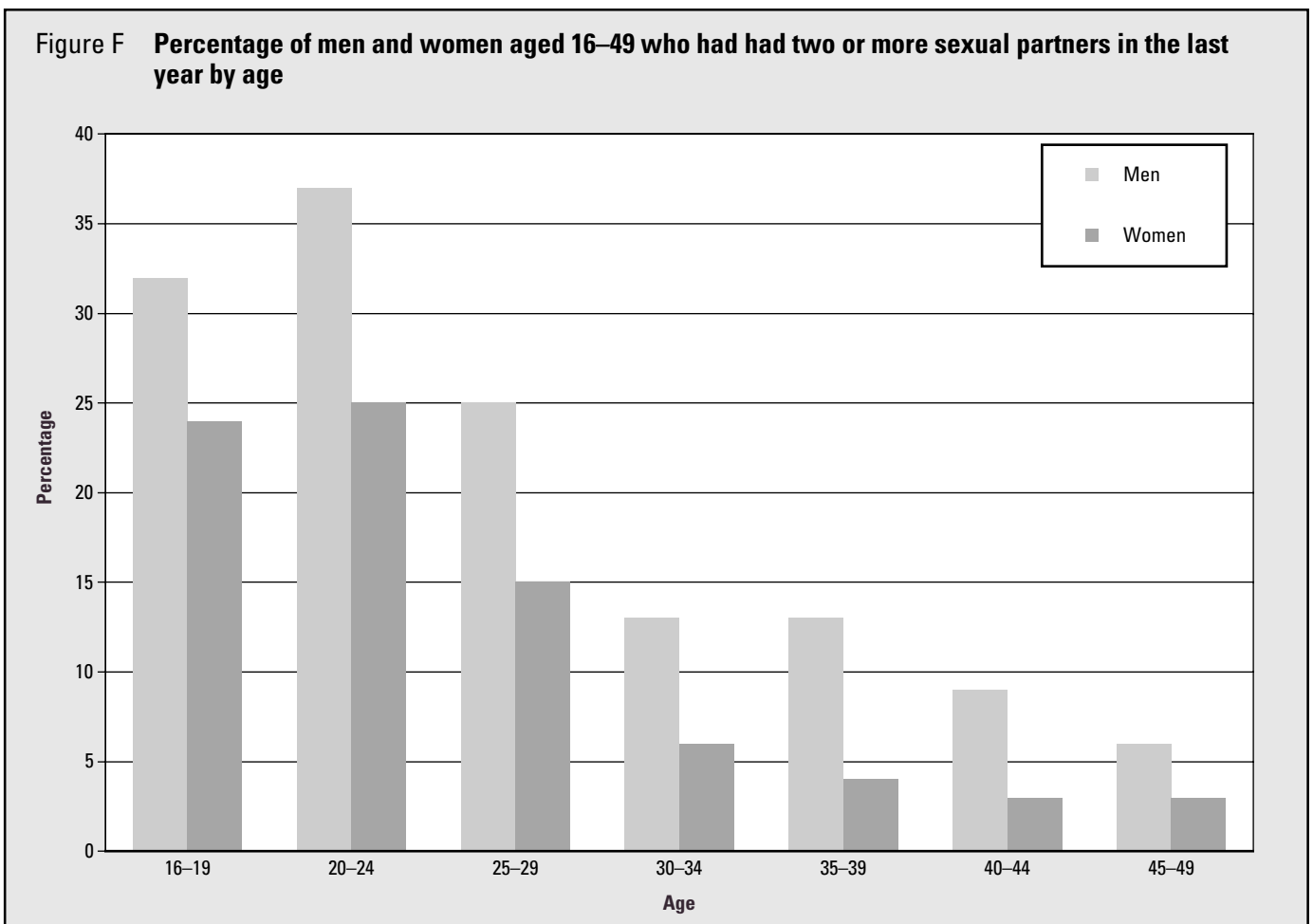
* Percentage based on those respondents who had had a vasectomy.

4 Sexual health and condom use

4.1 Sexual behaviour

The 2000 Omnibus Survey, as in previous years, included questions about sexual health in relation to HIV/Aids and other sexually transmitted infections. Although detailed questions were thought to be inappropriate to this type of survey, more general questions on sexual behaviour were included to provide background information for the interpretation of the data on condom use. In particular, it is possible to estimate the proportion of men in this survey who reported having sex with men and also the number of individuals with multiple partners. These two groups are the main ones at risk of transmitting the HIV virus through unprotected sex.

All men aged 16–69 were asked whether they had had sex only or mainly with women, or only with other men. Overall the proportions of men in each category were very similar in 2000 to those for previous years. Over nine in ten (93%) men said that they had only had sex with women and a further 3% had had sex at least once with a man. The proportion of men who had not yet had a sexual relationship fell from 5% in 1999 to 3% in 2000. Men in the youngest age group were more likely than men in any other age group not to have had a sexual relationship: men aged 16–19 were four times more likely than men aged 20–24 not to have had a sexual relationship (28% compared with 7%). **Table 15**



Men and women were asked how many sexual partners they had had during the previous year. In general the proportions for both men and women were similar to those found by previous Omnibus Surveys. However, the proportion of men aged 16–69 who had had no partners in the last year had fallen from 14% in 1999 to 12% in 2000. Amongst men aged 16–69 three-quarters (75%) said that they had had one sexual partner during the last year, just under one in ten (9%) had had two or three sexual partners, and a further 4% had had four or more sexual partners. A similar pattern was found among women aged 16–49: slightly more than three-quarters (79%) had had one sexual partner in the last year, 8% had had two or three sexual partners, 2% had had four or more sexual partners, and 11% had not yet had a sexual relationship.

Among both men and women those aged under 20 were less likely than respondents in the older age groups to have had a sexual partner during the last year: a third of men and women aged 16–19 had not had a sexual partner during the last year (31% of men and 33% of women, aged 16–19). Compared with respondents in all other age groups respondents aged under 30 were those most likely to have had multiple sexual partners during the last year. However, among men and women in their twenties there were large differences between the proportions

who had had one sexual partner and among those who had had two or more sexual partners: for example amongst men and women aged 20–24, women were more likely than men to have had only one sexual partner (71% and 53% respectively) and men were more likely than women to have had two or more partners (37% compared with 25%). **Figure F**

Unsurprisingly married men and women were the group most likely to have had only one sexual partner during the last year (92% of married men and 96% of married women). Reflecting the age distribution of the marital status groups, single men and women were more likely than those who were widowed, divorced, or separated to have had multiple sexual partners during the last year: for example, 26% of women who were single said that they had had two or more sexual partners during the last year compared with 16% of widowed, divorced or separated women. **Table 16**

4.2 Condom use

The data in this section were not comparable to previous years because the questions asked in the Omnibus Survey in 2000 were asked of all respondents who were either currently in a

Figure G Use of condoms in the last year by age and sex among men and women aged 16–49

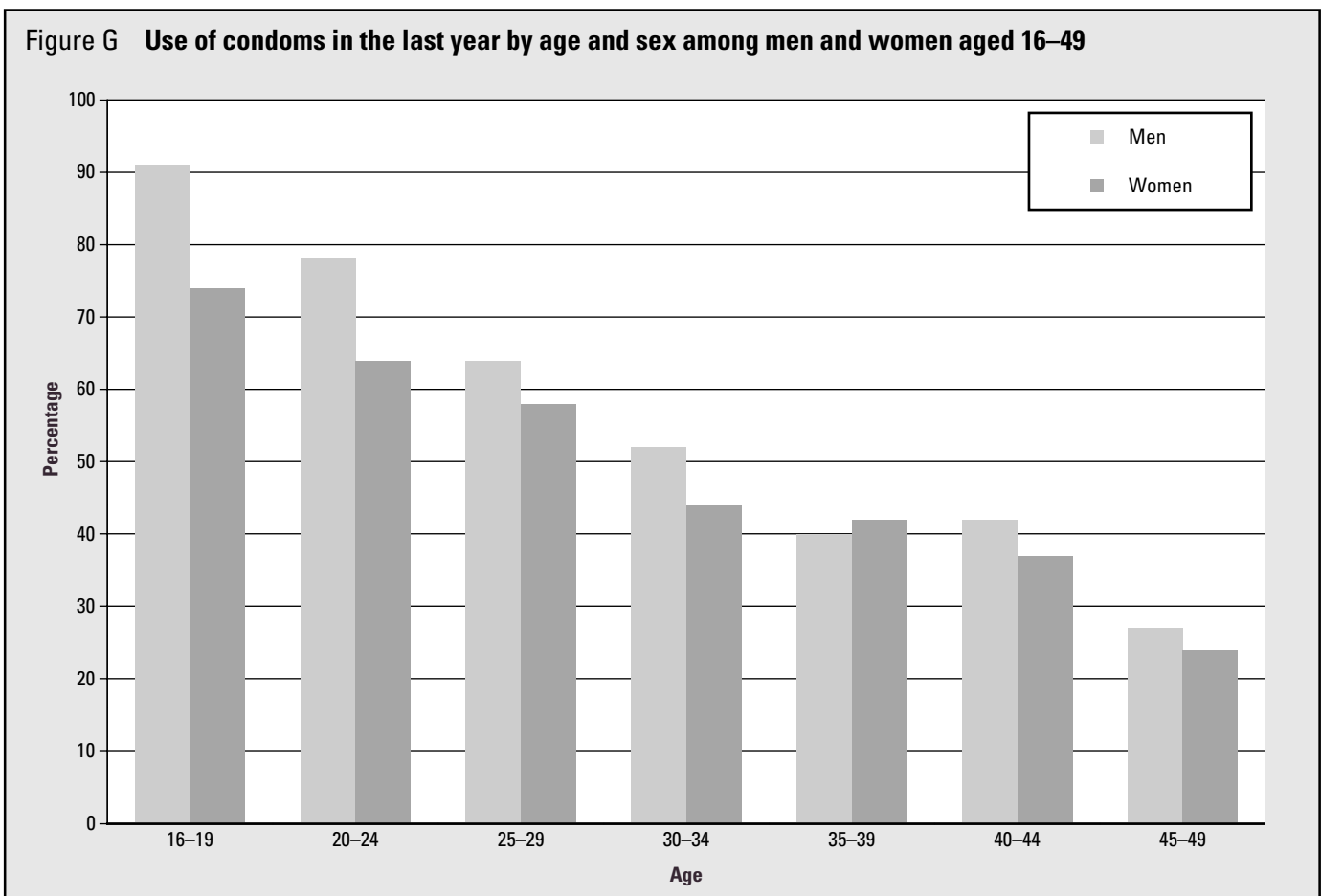
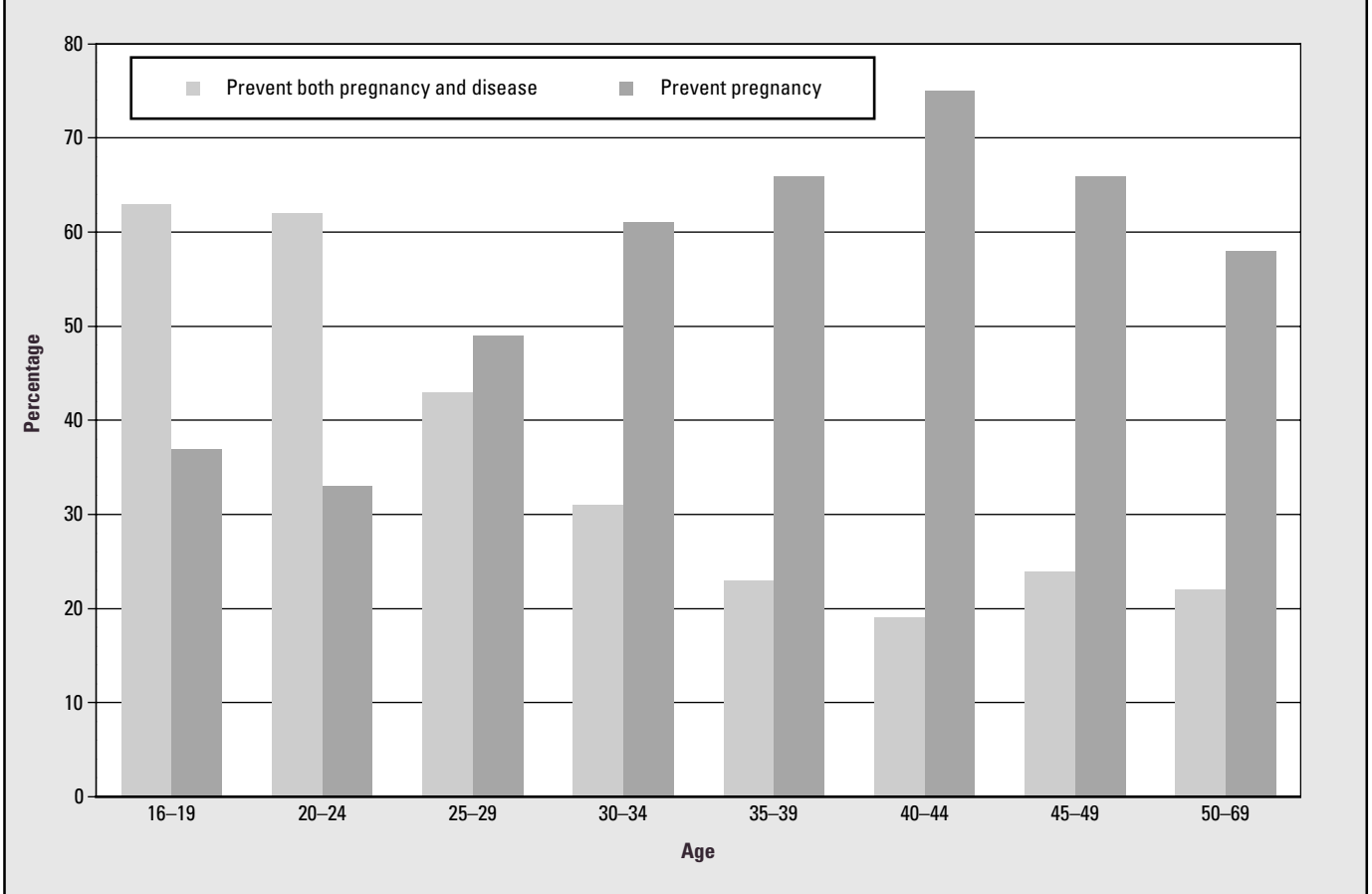


Figure H Percentage of men aged 16–69 who said that they had used a condom in the last year to either prevent pregnancy or to prevent both pregnancy and disease by age



sexual relationship or who had had a sexual relationship during the last year. Prior to 2000 these questions were asked only of respondents who were currently in a sexual relationship.

One in four (40%) men aged 16–69 and 48% of women aged 16–49 said that they had used condoms in the previous year. However, when men aged 16–49 are compared with women of the same age it appears that men were more likely than women to have used a condom during the last twelve months (53% compared with 48%). Furthermore, the percentage of men who had used a condom was higher than that for women in all age groups (the difference was statistically significant only for those aged 16–19 and 20–24).

Amongst men there was a clear association between the use of condoms and age: the proportion who had used a condom in the last twelve months fell from nine in ten (91%) aged 16–19, to half (52%) of those aged 30–34, to fewer than one in five (17%) aged 50–64. A similar pattern occurred for women although not all differences between age groups were statistically significant: the proportion of women who had used a condom during the last year fell from three-quarters (74%) aged 16–19 to a quarter (24%) aged 45–49. **Figure G**

Respondents who had had multiple sexual partners during the last year were more likely to have used condoms than those who had had one sexual partner. Men who had had more than one sexual partner during the last year were more than twice as likely as those who had had one sexual partner to have used a condom (75% compared with 35%). Slightly more than three-quarters (77%) of women who had had multiple partners said that they had used a condom in the last year compared with 46% of women who had had one partner. **Table 17**

Respondents who had used a condom during the last year were asked whether they had done so to:

1. prevent pregnancy
2. prevent disease
3. both prevent pregnancy and prevent disease
4. or for some other reason

Slightly more than a half (54% and 55% respectively) of men and women said that they had used a condom to prevent pregnancy, just over a third (38% of men and 37% of women) said that they had used a condom to prevent pregnancy and disease, around one in twenty (5% of men and 4% of women) had used a condom only to prevent disease and a further 3% of

men and 5% of women said that they had used a condom for some other reason.

Younger men and women were more likely to say that they had used condoms in the previous year to prevent both pregnancy and disease and older respondents more likely to say that they had used condoms for the prevention of pregnancy only. For example, among men the proportion who said that they had used a condom both to prevent pregnancy and disease fell with age: men aged 24 and under were more than twice as likely as those aged 30–34 and three times as likely as those aged 40–44 to have used condoms to prevent both pregnancy and disease (63% of men aged 16–19 and 62% aged 20–24, compared with 31% aged 30–34 and 19% aged 40–44). Conversely the proportion of men who said that they used condoms to prevent

pregnancy rose with age (although not all differences between the age groups were statistically significant) from around a third aged under 25 (37% aged 16–19 and 33% aged 20–24) to half (49%) aged 25–29 and around six in ten aged 30 and over (for example 66% aged 35–39). Similar patterns were found for women. **Table 18 and Figure H**

Respondents who had used a condom in the last year were asked whether they always, usually or sometimes used a condom when they had sexual intercourse. Over half of men aged 16–69 and women aged 16–49 (55% and 60% respectively) said that they always used a condom when they have sexual intercourse, 20% of men and 15% of women said that they usually use a condom, and a further quarter (25% of both men and women) said they sometimes use a condom. **Table 19**

Table 15 Sexual partners of men by age

Which of the following best describes your situation?	Men aged 16–69									Great Britain: 2000		
	Age									1999	1998	1997
	16–19	20–24	25–29	30–34	35–39	40–44	45–49	50–69	All			
	%	%	%	%	%	%	%	%	%	%	%	%
Sex only with women	69	90	95	93	96	96	94	97	93	93	91	92
Sex only with men	1	0	3	4	2	2	3	1	2	1	1	2
Usually with women but at least once with a man	2	2	0	1	1	0	1	0	1	1	1	1
Usually with men but at least once with a woman	-	1	0	0	1	1	0	0	1	0	1	1
No sexual relationship yet	28	7	1	2	0	0	1	1	3	5	6	5
Total	100	100	100	100	100	100	100	100	100	100	100	100
Base	168	222	214	257	285	267	204	916	2533	2732	2074	4192

Table 16 Number of sexual partners in previous year by (a) age and sex and (b) marital status and sex

Men aged 16–69 and women aged 16–49

Great Britain: 2000

Number of sexual partners	Age									Marital status			All	1999	1998	1997
	16–19	20–24	25–29	30–34	35–39	40–44	45–49	50–64	65–69	Single	Married/ co-habiting	Widowed, divorced or separated				
	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%	%
Men																
None	31	10	6	6	6	7	10	14	22	25	5	31	12	14	15	14
One	38	53	69	81	82	83	84	82	76	40	92	42	75	74	73	75
Two or three	22	23	13	10	9	7	4	3	2	22	3	19	9	9	9	8
Four or more	9	14	13	3	3	2	2	1	-	13	1	8	4	3	4	3
Total	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100	100
Women																
None	33	5	7	6	8	10	14	nc	nc	24	2	27	11	13	12	12
One	44	71	79	87	88	86	83	nc	nc	50	96	58	79	78	80	80
Two or three	20	18	12	5	3	3	2	nc	nc	21	1	13	8	7	7	6
Four or more	4	6	2	1	1	0	1	nc	nc	5	0	2	2	2	2	1
Total	100	100	100	100	100	100	100	nc	nc	100	100	100	100	100	100	100
Bases																
Men	167	213	213	253	272	254	193	672	178	636	1622	156	2415	2731	2077	4205
Women	206	204	247	280	330	325	211	nc	nc	531	1098	175	1803	2181	1601	3357

nc: Not collected.

Table 17 Use of condoms in the previous year by (a) age and sex and (b) number of partners and sex

Men aged 16–69 and women aged 16–49 and currently in a sexual relationship or had one in the last 12 months Great Britain: 2000

	Age									Number of partners		
	16–19	20–24	25–29	30–34	35–39	40–44	45–49	50–64	65–69	One	Two or more	All
<i>Percentage using a condom in the previous year</i>												
Men	91	78	64	52	40	42	27	17	10	35	75	40
Women	74	64	58	44	42	37	24	nc	nc	46	77	48
<i>Bases</i>												
Men	117	201	202	241	268	248	184	632	155	1813	317	2248
Women	136	183	222	242	262	230	154	nc	nc	1173	174	1429

nc Not collected.

Table 18 Reasons for using a condom by age and sex

Men aged 16–69 and women aged 16–49 and currently in a sexual relationship or had one in the last 12 months Great Britain: 2000

Why do you use a condom?	Age									
	16–19	20–24	25–29	30–34	35–39	40–44	45–49	50–69	All	
	%	%	%	%	%	%	%	%	%	
Men										
Prevent pregnancy	37	33	49	61	66	75	66	58	54	
Prevent disease	-	4	5	5	8	5	4	11	5	
Both reasons	63	62	43	31	23	19	24	22	38	
Other reason	-	-	3	2	3	1	6	10	3	
Total	100	100	100	100	100	100	100	100	100	
Women										
Prevent pregnancy	22	44	42	71	75	76	63	nc	55	
Prevent disease	3	3	4	4	5	4	3	nc	4	
Both reasons	71	50	46	20	14	18	26	nc	37	
Other reason	4	3	8	6	6	2	8	nc	5	
Total	100	100	100	100	100	100	100	nc	100	
<i>Bases</i>										
Men	105	156	130	127	106	103	50	120	897	
Women	101	117	128	106	109	83	38	nc	682	

nc Not collected.

Table 19 **Regularity of condom use by age and sex**

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

Great Britain: 2000

How regularly do you use a condom?	Age								
	16–19	20–24	25–29	30–34	35–39	40–44	45–49	50–69	All
	%	%	%	%	%	%	%	%	%
Men									
Always	60	60	40	46	56	61	74	56	55
Usually	22	23	21	25	9	20	10	20	20
Sometimes	18	17	39	28	35	18	16	25	25
Total	100	100	100	100	100	100	100	100	100
Women									
Always	58	50	52	59	70	74	69	nc	60
Usually	23	14	14	18	8	10	17	nc	15
Sometimes	18	36	34	23	21	17	14	nc	25
Total	100	100	100	100	100	100	100	nc	100
<i>Bases</i>									
<i>Men</i>	<i>106</i>	<i>155</i>	<i>130</i>	<i>127</i>	<i>107</i>	<i>103</i>	<i>50</i>	<i>117</i>	<i>895</i>
<i>Women</i>	<i>98</i>	<i>118</i>	<i>128</i>	<i>105</i>	<i>108</i>	<i>84</i>	<i>36</i>	<i>nc</i>	<i>677</i>

nc Not collected.

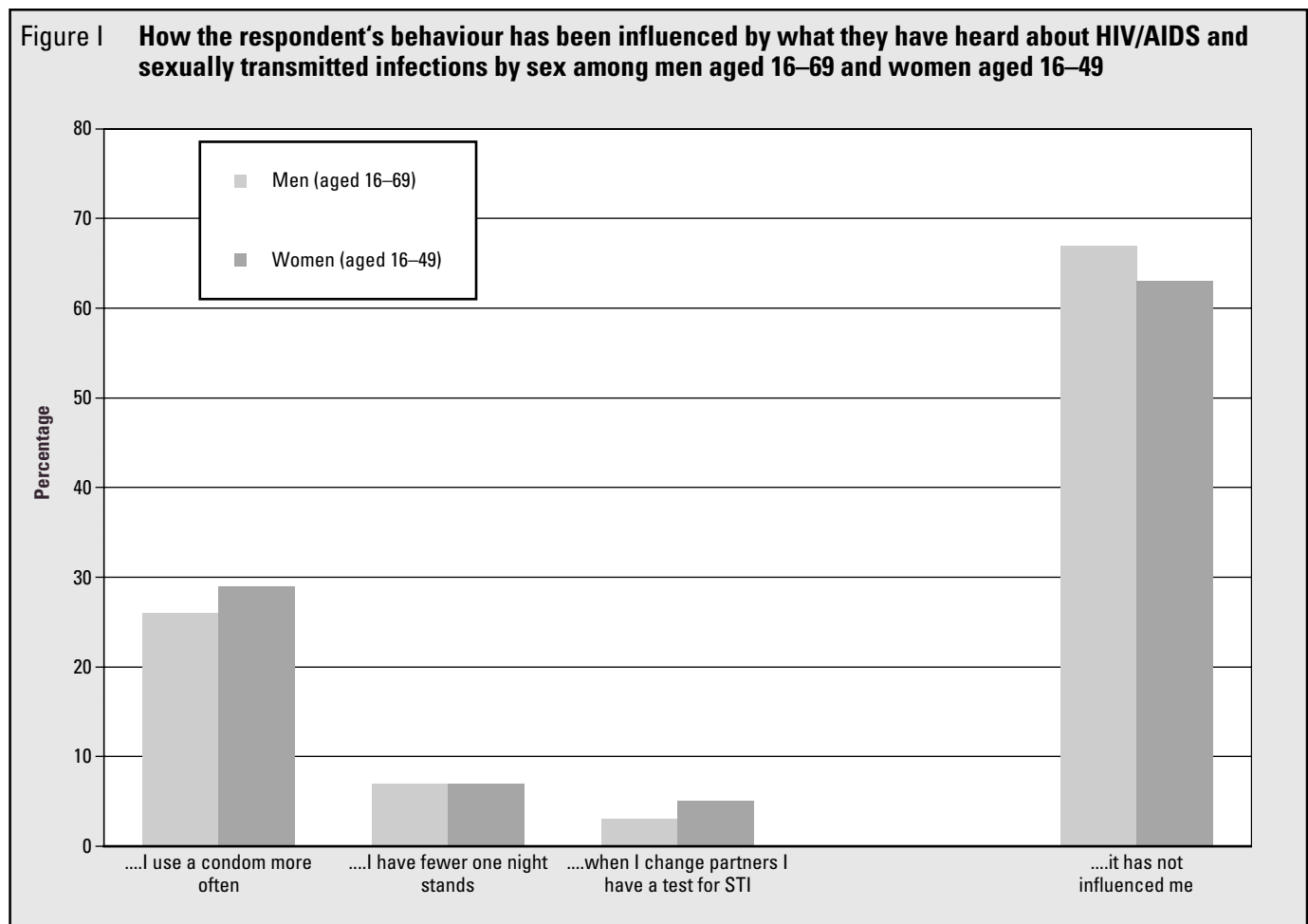
5 Knowledge of sexually transmitted infections

A new question was included in the 2000 Omnibus Survey to find out whether respondents who were either currently in a sexual relationship or had had one in the last twelve months felt that their behaviour had been influenced by their knowledge of HIV and AIDS and other sexually transmitted infections (STIs). Respondents were asked to answer in terms of the following categories (respondents could give more than one answer):

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. *it has not influenced me at all*

Overall, there was little difference between men and women in the proportion responding positively to each category: over a quarter of respondents (26% of men and 29% of women) said that they had been influenced to use a condom more often, 7% of both men and women said that they now have fewer one night stands, and 3% of men and 5% of women said that they now have a test for STIs when they change partners. **Figure I**

Men aged 16–69 were slightly more likely than women aged 16–49 to say that their knowledge of HIV/AIDS and other STIs had not influenced their behaviour (67% compared with 63%). Furthermore, the likelihood of a respondent not having been influenced by information about HIV/AIDS or other STIs rose



with age. For example among men the proportion who said that their behaviour had not been influenced by information about HIV/AIDS or other STIs increased from 27% aged 16–19 to 79% aged 45–49, a similar pattern was found for women.

The proportion of respondents who said that they use a condom more often than they used to because of their knowledge of HIV/AIDS and other STIs fell with age. Over half of men aged under 25 (55% aged 16–19 and 58% aged 20–24) said that they now used a condom more often compared with fewer than one in five aged 40 and over (for example, 19% aged 40–44 and 17% aged 45–49). Again a similar pattern was found for women.

Respondents who had had more than one partner during the previous year were more likely than those who had only had one partner, to say that their behaviour had been influenced in some way by their knowledge of HIV/AIDS and other STIs. Consequently less than a quarter (23% of men and 21% of women) of respondents who had had multiple partners, compared with three-quarters (74%) of men and 68% of women who had only had one partner, said that their behaviour had not been influenced by their knowledge of HIV/AIDS and other STIs. Respondents who had had multiple partners were more than twice

as likely as respondents who had had one partner in the last year to have used a condom more often than they used to (among men: 58% compared with 20%), four times more likely to have reduced the number of one night stands (among men: 21% compared with 5%), and three times more likely to say that they would have a test for sexually transmitted infections when they change partners (among men: 6% compared with 2%).

Table 20 and Figure J

A question has been included on the Omnibus Survey since 1997, asking men aged under 70 and women aged under 50 the source from which they had learnt most about HIV/AIDS and other STIs. The proportions giving each of the sources as their main source of information has remained similar since 1997. However the proportion of respondents who said that TV advertisements were their main source of information about HIV/AIDS and other STIs rose in 2000 to 27% of all respondents compared with around 22% in the previous years. This rise may in part be due to the limited advertising about chlamydia and other STIs run by the Department of Health during 2000. TV programmes remained the most popular main source of information about HIV/AIDS and other STIs (37%). A further fifth (22%) of respondents said that their main source of

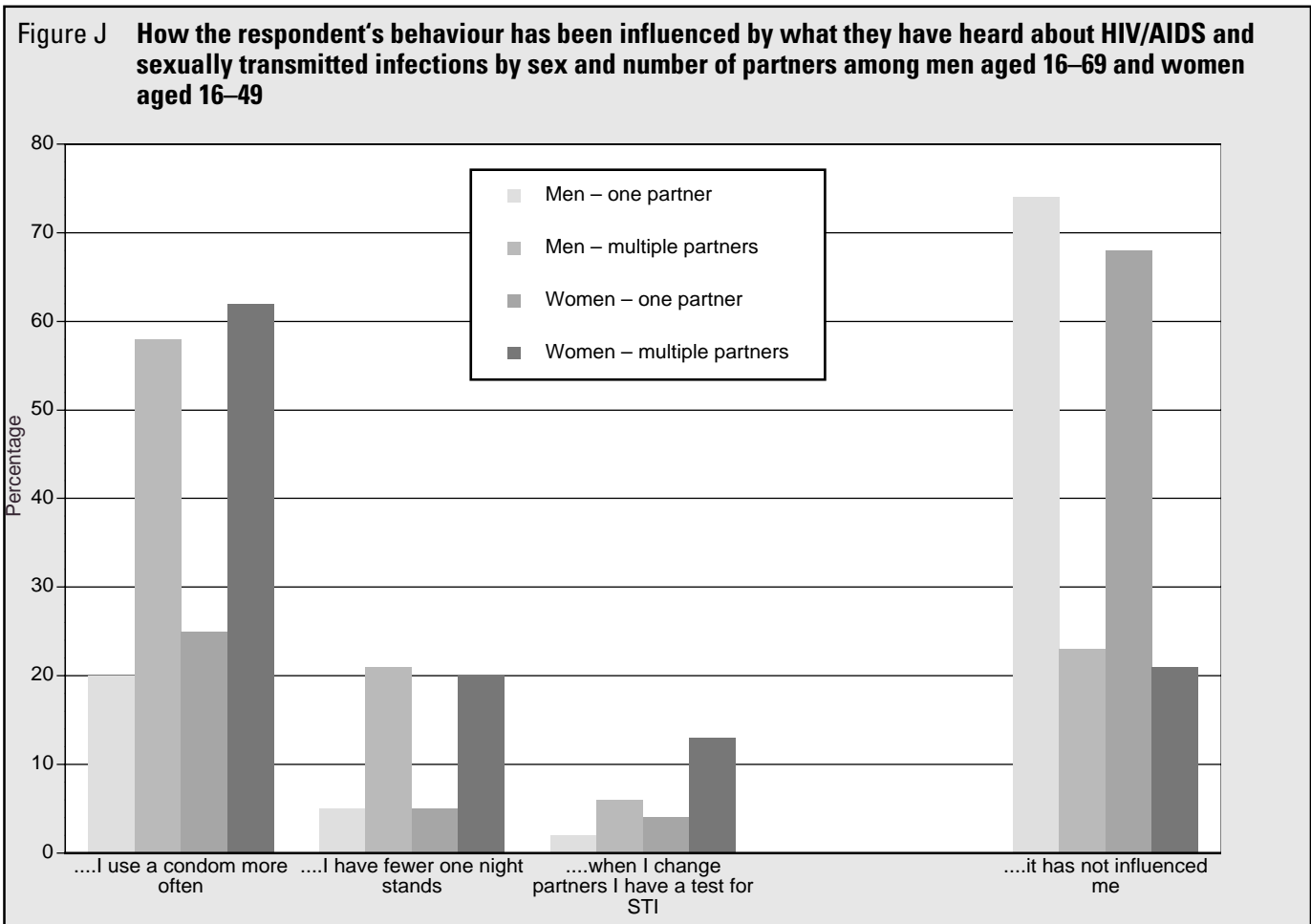
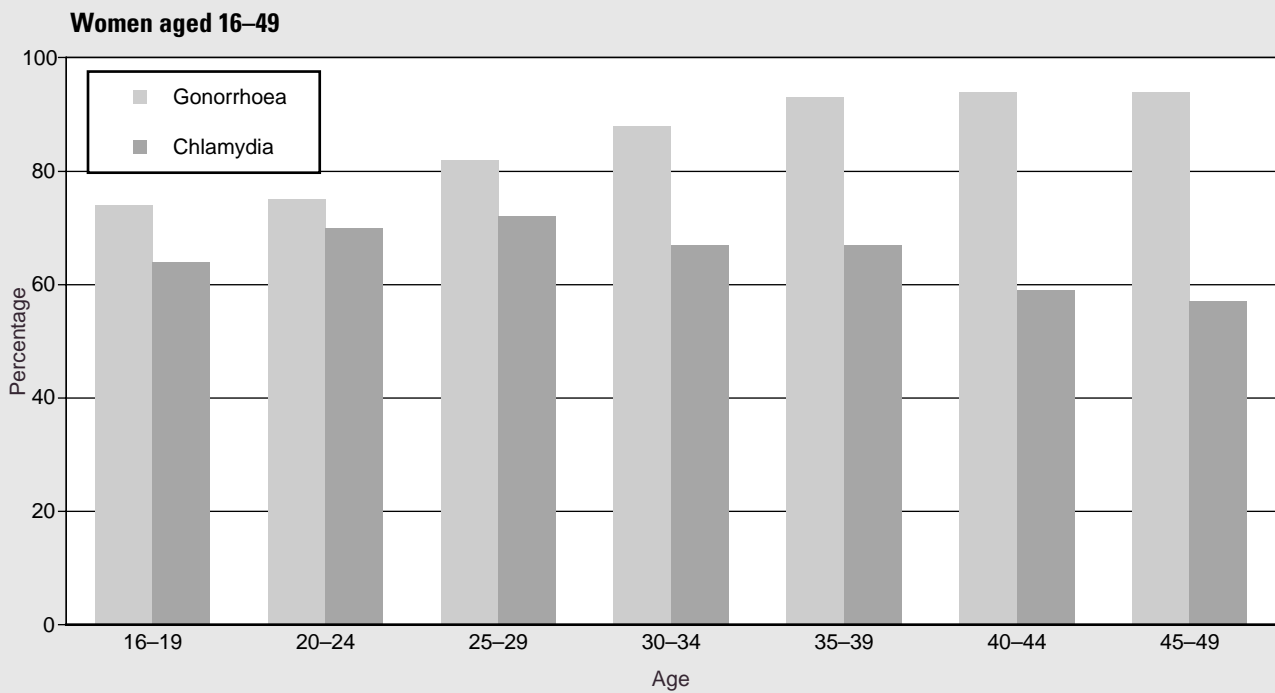
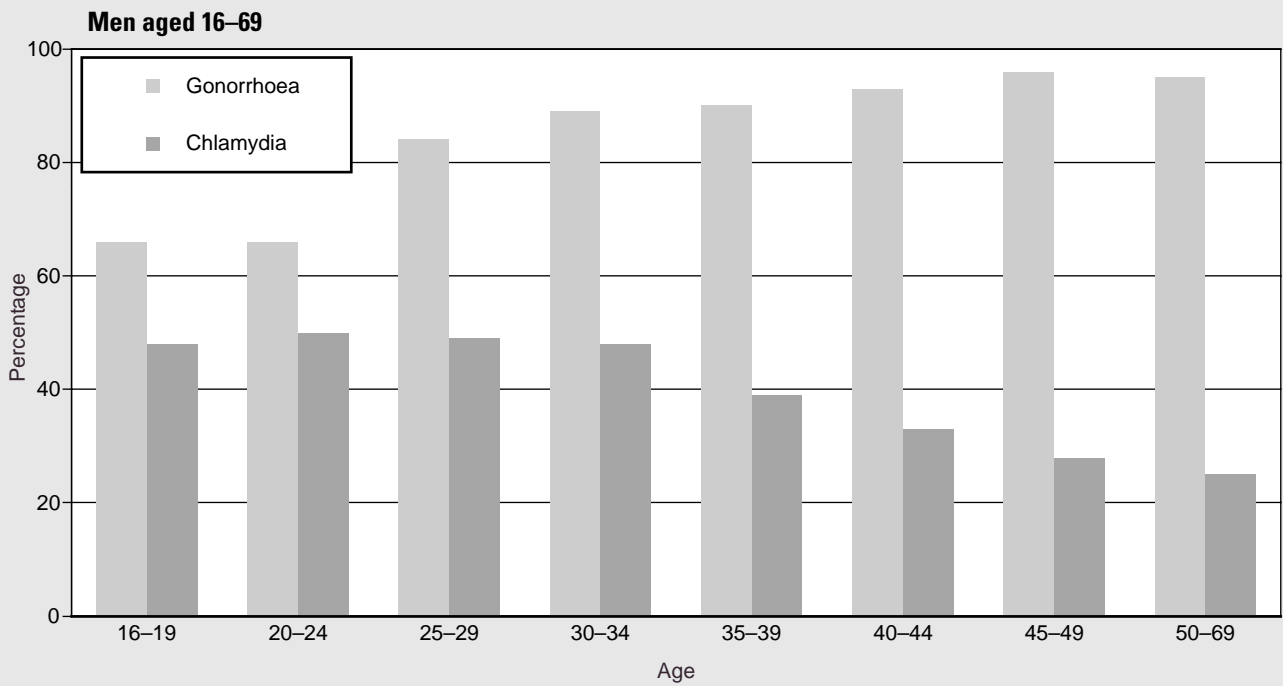


Figure K Percentage of men aged 16–69 and women aged 16–49 who correctly identified Gonorrhoea and Chlamydia as sexually transmitted infections by age



information about HIV/AIDS and other STIs had come from newspapers, magazines or books and only 2% of respondents said that their main source of information came from Government information leaflets. Older respondents were more likely than younger respondents to have said that their main source of information was TV programmes (28% aged 16–24 years compared with 38% aged 25–49 years). Younger respondents were twice as likely as older respondents to say that their main source of information about HIV/AIDS and other STIs came from “somewhere else” (13% aged 16–24 years compared with 6% aged 25–49 years). It is likely that having only recently left the education system or being still in it the main source of information for this age group may have been school. **Table 21**

A new question was introduced in 2000, which asked respondents to identify which, if any, of the following infections were STIs:¹

1. *Tuberculosis*
2. *Gonorrhoea*
3. *Listeria*
4. *Chlamydia*
5. *Diabetes*
6. *None of these*

The same proportion of men aged 16–69 and women aged 16–49 (87%) correctly identified Gonorrhoea as a STI. However, considerably fewer respondents recognised Chlamydia as being a STI. Women were almost twice as likely as men to identify Chlamydia as a STI (65% of women compared with 35% of men). Three per cent and fewer men and women incorrectly thought that Tuberculosis, Listeria or Diabetes were STIs and around one in twelve men and women (8% of both men and women) thought none of the listed infections were STIs.

Among both men and women the proportion correctly identifying Chlamydia as a STI fell with age. Whilst over half of women in each of the age groups recognised Chlamydia as being a STI, a larger proportion of women aged 20–39 correctly identified Chlamydia as a STI than those aged over 40 (for example, 72% of women aged 25–29 compared with 57% aged 45–49).

Amongst men the proportion who recognised Chlamydia as a STI fell more sharply with age from around half of men aged 16–34 (for example, 49% aged 25–29), to a third (33%) aged 40–44, and fell again to a quarter (25%) aged 50–69. Conversely, the likelihood of both men and women correctly identifying Gonorrhoea as a STI rose with age: among women the proportion who recognised Gonorrhoea as a STI rose from 74% aged 16–19 to 94% aged 45–49, similarly among men the proportion rose from 66% aged 16–19 to 95% aged 50–69.

Table 22 and Figure K

Respondents who had correctly identified Chlamydia as a STI were asked which if any of the following statements about Chlamydia were true:

- | | |
|--------------|--|
| True | <ol style="list-style-type: none"> 1. <i>Chlamydia does not always cause symptoms</i> 2. <i>Chlamydia is easily treated with antibiotics</i> 3. <i>Chlamydia can cause infertility and ectopic pregnancy if untreated</i> |
| False | <ol style="list-style-type: none"> 4. <i>Chlamydia has no serious side effects</i> 5. <i>Chlamydia only affects men</i> 6. <i>None of these</i> |

Women aged 16–49 were more likely than men aged 16–69 to identify the three correct statements, however the proportions agreeing that “Chlamydia is easily treated by antibiotics” was very similar for men and women (56% of men and 59% of women). The statement that the largest proportion of both men and women identified as true was that “Chlamydia can cause infertility and ectopic pregnancy if untreated” (75% of men and 83% of women). Seven in ten (71%) women who recognised Chlamydia as a STI, said that Chlamydia does not always cause symptoms compared with just under six in ten (58%) men. One in twenty (5%) both of men and women thought that the incorrect statement “Chlamydia has no side effects” was true, and a further 3% of men and 1% of women thought that the statement “Chlamydia only affects men” was true. Men were almost twice as likely than women to think that none of the statements were true (7% compared with 4%). **Table 23**

Notes and references

1. This question and the subsequent question about Chlamydia were asked of all respondents irrespective of age. However, to maintain consistency with the other questions, the results shown in Tables 22 and 23 are based only on men aged under 70 and women aged under 50.

Table 20 **Whether what the respondent has heard about HIV/AIDS and other sexually transmitted infections influenced their behaviour by (a) age and sex, and (b) number of partners in the past year and sex**

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

Great Britain: 2000

	Age								Number of partners		All
	16–19	20–24	25–29	30–34	35–39	40–44	45–49	50–69	One	Two or more	
	%	%	%	%	%	%	%	%	%	%	%
Men											
When I have sexual intercourse I use a condom more often than I used to	55	58	41	39	22	19	17	10	20	58	26
I have fewer one night stands	20	12	14	8	7	9	2	3	5	21	7
When I change partners I have a test for sexually transmitted infections	5	6	4	5	3	0	3	1	2	6	3
It has not influenced me at all	27	32	46	53	69	73	79	86	74	23	67
Women											
When I have sexual intercourse I use a condom more often than I used to	52	51	44	25	19	14	12	nc	25	62	29
I have fewer one night stands	8	9	11	7	7	6	1	nc	5	20	7
When I change partners I have a test for sexually transmitted infections	10	12	5	6	3	3	2	nc	4	13	5
It has not influenced me at all	35	36	49	65	72	78	85	nc	68	21	63
<i>Bases*</i>											
<i>Men</i>	116	201	199	240	268	239	181	774	1789	318	2217
<i>Women</i>	137	193	231	269	304	298	197	nc	1369	183	1627

nc Not collected.

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

Table 21 **Source of information about HIV/AIDS and other sexually transmitted infections by (a) sex and (b) age**

Men aged 16–69 and women aged 16–49

Great Britain: 2000

Main source of information about HIV/AIDS and other STIs	Sex		Age				1999	1998	1997
	Men	Women	16–24	25–49	50 and over*	All			
	%	%	%	%	%	%	%	%	%
TV programmes	37	37	28	38	40	37	38	39	40
TV advertisements	29	24	23	29	24	27	22	23	22
Newspapers, magazines, books	22	22	19	20	28	22	23	22	24
Government information leaflet	2	3	3	3	1	2	4	4	4
Friends/relations	3	3	7	2	1	3	3	3	2
GP	1	1	3	1	1	1	1	1	1
Family planning clinic	1	2	3	1	-	1	1	1	1
Hospital clinic	1	1	1	1	1	1	1	0	1
Somewhere else	6	7	13	6	4	7	8	7	7
Total	100	100	100	100	100	100	100	100	100
Base	2531	1975	808	2782	915	4505	4913	3684	7552

* Data in this age group was collected for men only.

Table 22 Diseases respondents thought were sexually transmitted infections by age and sex

<i>Men aged 16–69 and women aged 16–49</i>										<i>Great Britain: 2000</i>
Diseases	Age 16–19	20–24	25–29	30–34	35–39	40–44	45–49	50–69	All	
	%	%	%	%	%	%	%	%	%	
Men										
<i>Sexually transmitted infections</i>										
Gonorrhoea	66	66	84	89	90	93	96	95	87	
Chlamydia	48	50	49	48	39	33	28	25	35	
<i>Not sexually transmitted infections</i>										
Tuberculosis	4	4	2	1	2	1	2	2	2	
Listeria	6	3	1	3	3	2	2	2	3	
Diabetes	-	2	0	-	1	0	0	0	0	
<i>None of these</i>	21	20	12	9	8	6	3	4	8	
Women										
<i>Sexually transmitted infections</i>										
Gonorrhoea	74	75	82	88	93	94	94	nc	87	
Chlamydia	64	70	72	67	67	59	57	nc	65	
<i>Not sexually transmitted infections</i>										
Tuberculosis	7	2	2	2	0	1	1	nc	2	
Listeria	4	5	2	2	1	1	2	nc	2	
Diabetes	-	0	1	0	-	0	1	nc	0	
<i>None of these</i>	16	14	10	7	5	5	4	nc	8	
Bases*										
<i>Men</i>	157	212	210	250	278	267	201	918	2494	
<i>Women</i>	196	202	249	297	362	364	251	nc	1922	

nc Not collected.

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

Table 23 Knowledge of Chlamydia by age and sex

Knowledge of Chlamydia	Age									Great Britain: 2000		
										1999	1998	1997
	16-19	20-24	25-29	30-34	35-39	40-44	45-49	50-69	All	%	%	%
	%	%	%	%	%	%	%	%	%	%	%	%
Men												
Did not recognise Chlamydia as a sexually transmitted infection*	52	50	51	52	61	67	72	75	65			
Men who knew Chlamydia was a sexually transmitted infection and agreed that Chlamydia:†												
....does not always cause symptoms	43	64	60	55	65	60	77	50	58	62	69	46
....is easily treated by antibiotics	40	43	69	53	71	60	42	57	56	60	61	46
....can cause infertility and ectopic pregnancy	81	82	81	75	71	78	70	71	75	79	77	62
....has no serious side effects	4	4	7	4	4	7	6	4	5	5	8	8
....only affects men	11	4	5	1	-	5	-	1	3	0	0	0
None of these**	3	7	5	8	8	5	10	7	7			
Women												
Did not recognise Chlamydia as a sexually transmitted infection*	36	30	28	33	33	41	43	nc	35			
Women who knew Chlamydia was a sexually transmitted infection and agreed that Chlamydia:†												
....does not always cause symptoms	68	70	77	71	70	73	68	nc	71	75	71	56
....is easily treated by antibiotics	49	53	54	62	65	65	60	nc	59	68	74	62
....can cause infertility and ectopic pregnancy	80	87	82	82	83	84	83	nc	83	87	89	71
....has no serious side effects	5	3	2	7	5	8	6	nc	5	6	6	6
....only affects men	2	1	1	1	1	1	1	nc	1	1	0	6
None of these**	7	3	5	3	4	2	3	nc	4			
Bases												
All men aged 16-69	157	213	209	250	278	267	201	918	2493			
All women aged 16-49	196	202	249	297	362	364	252	nc	1922			
Respondents who knew Chlamydia was a sexually transmitted infection:												
Men	72	97	93	113	93	81	55	201	804	437	264	547
Women	117	136	175	191	226	202	142	nc	1189	916	540	1141

nc Not collected.

* This question, in 2000, was not comparable with previous years data.

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

** 'None of these' code was not included prior to 2000.

Appendix A:

The ONS 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 during eight months of the year (two months every quarter) and each month's questionnaire covers a variety of topics, reflecting different user's requirements.

The sample

A random probability sample of 3,000 private households in Great Britain is selected each month using the Postcode Address File as a sampling frame. One hundred new postal sectors are selected and are stratified by region, the proportion of households renting from the local authorities and the proportion in which the head of household is in Socio-Economic Groups 1–5 or 13 (that is professional employer or manager). The postal sectors are selected with probability proportional to size and within each sector 30 addresses are selected randomly.

Within households with more than one adult, one person aged 16 and over is randomly selected for interview. No proxy interviews are 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.

Fieldwork

Interviews are carried out face-to-face by interviewers trained to carry out a range of ONS surveys. The Omnibus Survey uses computer assisted interviewing which has well documented effects on the quality of the data.

Response Rates

The small users' Postal 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 11–12%. This figure is removed before the response rate is calculated.

The response rate for the Survey for the four months in which the contraception and sexual health questions were asked was 62% as shown in Table A.1.

Table A.1 Household level response of the Omnibus Survey for the months in which the contraception and sexual health questions were asked

Set sample	12,000	100%
Ineligible addresses	1,054	9%
Eligible addresses	10,946	100%
Refusals	3,054	28%
Non-contacts	1,138	10%
Respondents	6,814	62%

Questions on contraception and sexual health were only asked of women aged under 50 and men aged under 70. Table A.2 shows that 95% of eligible respondents answered these questions.

Table A.2 Response to the contraception and sexual health questions

	All		Men		Women	
Respondents who met the age criteria	4,423	100%	2,492	100%	1,931	100%
Respondents who refused the section	217	5%	150	6%	67	3%
Respondents to the section	4,206	95%	2,342	94%	1,864	97%
Respondents to the section after weighting	4,521		2,543		1,978	

Distribution of key respondent characteristics

Figure A.1 Age of respondent by sex

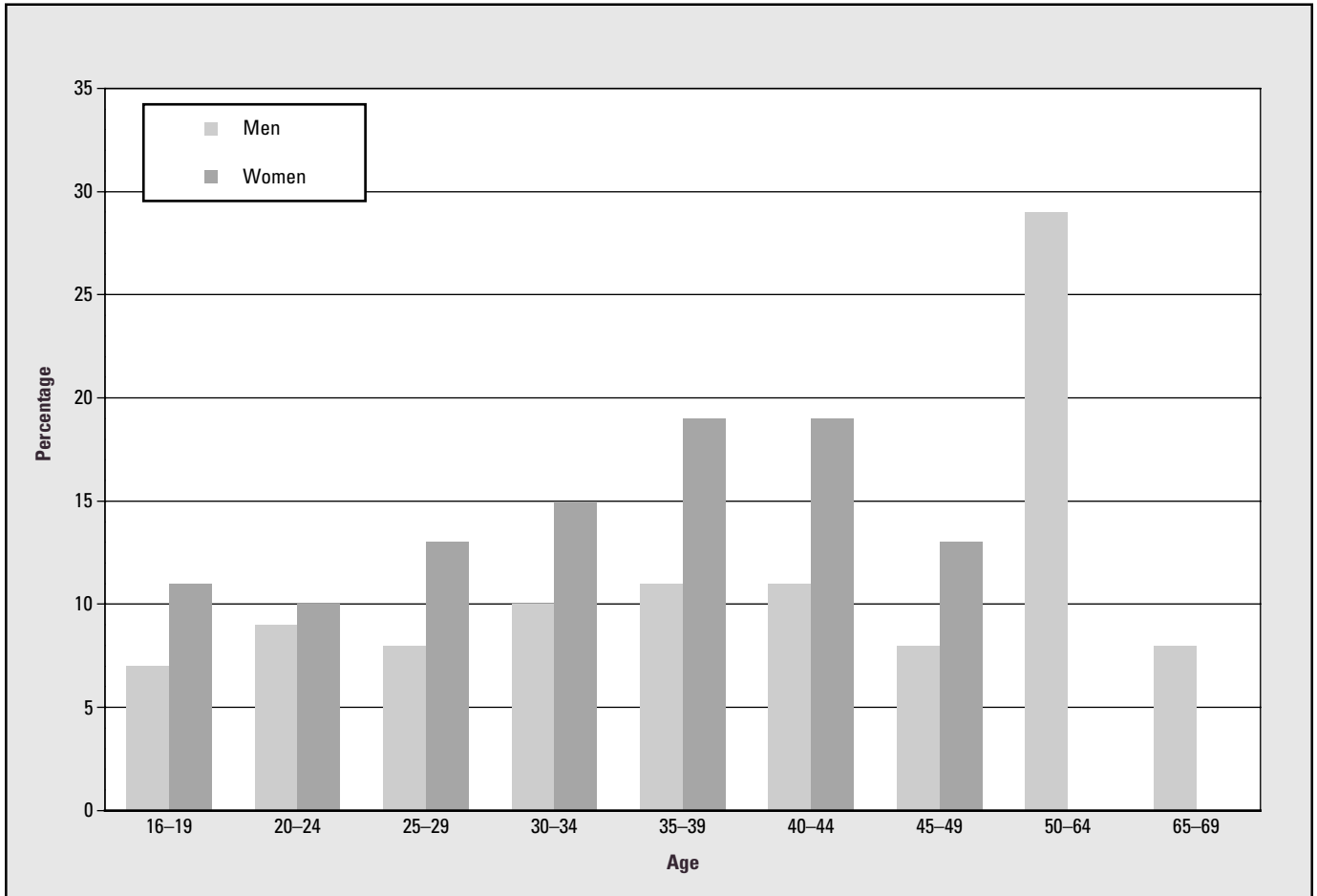
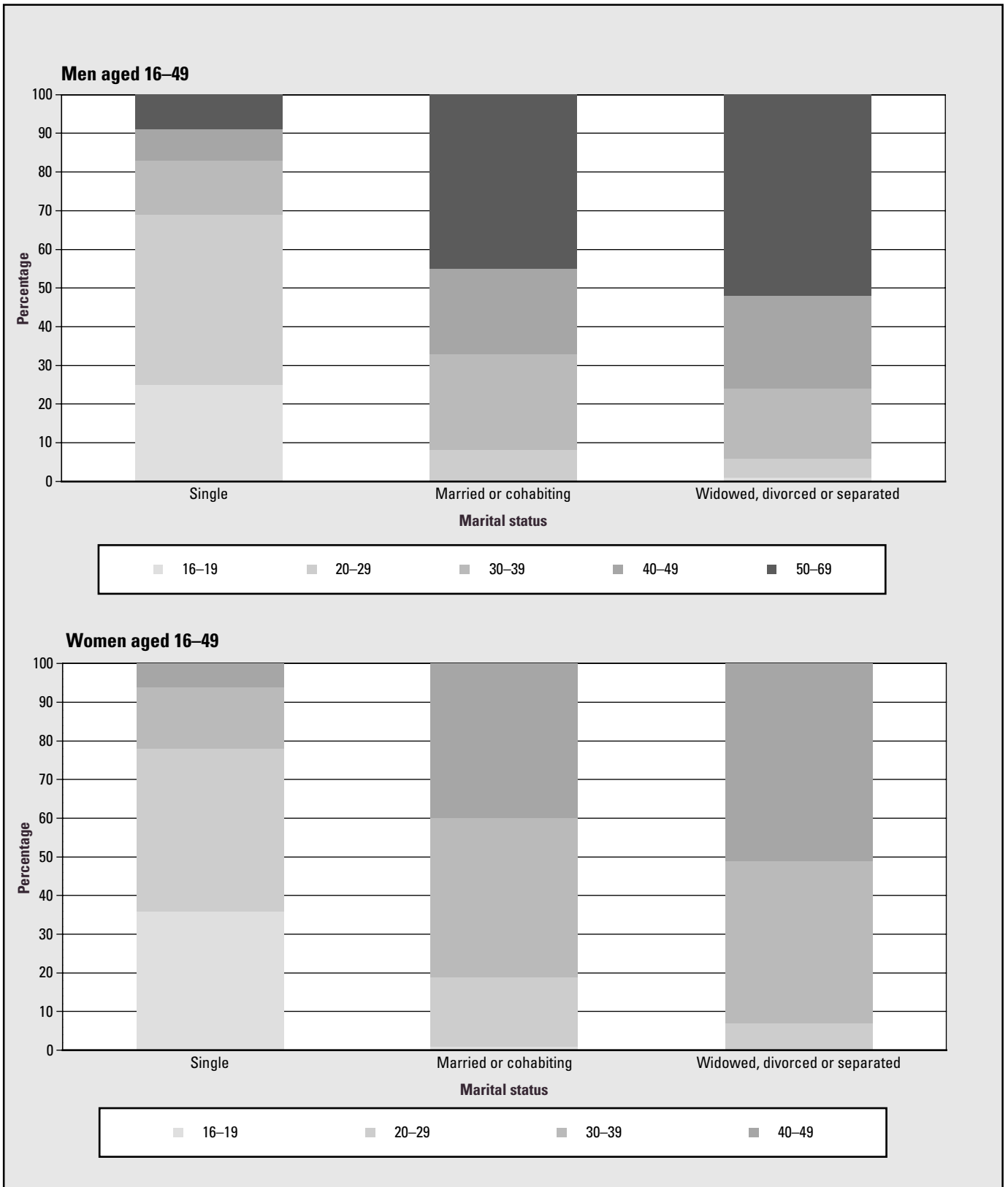


Figure A.2 Age distribution within marital status groups by sex



Appendix B:

The questions

Select the **HAND** tool and click in the first column to enlarge the view.
Continue clicking to scroll throughout the questionnaire.

ASK IF: **Men under 70 OR women under 50**

IntIntro

The next set of questions are for you to fill in yourself on the computer. I will show you how to answer the first two questions and then be here if you need any help.

This section is being asked on behalf of the Department of Health and begins with ways of preventing pregnancy.

EXPLAIN THAT INSTRUCTIONS WILL APPEAR ON THE SCREEN AND THEN WORK THROUGH THE FIRST 2 QUESTIONS WITH THE INFORMANT. IF THE INFORMANT MAKES A MISTAKE TAKE HIM/HER BACK TO THE QUESTION AND ALLOW HIM/HER TO KEY IN THE RIGHT ANSWER. 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 under 70 OR women under 50**

AND: **Elected self-completion**

Pract1

This is the first time I have used a computer

- (1) Yes
- (2) No

ASK IF: **Men under 70 OR women under 50**

AND: **Elected self-completion**

Pract2

On which days of the week do you watch television?

SET [9] OF

- (1) Monday
- (2) Tuesday
- (3) Wednesday
- (4) Thursday
- (5) Friday
- (6) Saturday
- (7) Sunday
- (8) I do not have a television/Don't watch the television
- (9) I mostly only listen to the radio

ASK IF: **Men under 70 OR women under 50**

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?

(DO NOT INCLUDE HYSTERECTOMIES)

- (1) Yes
- (2) No

ASK IF: **Men under 70 OR women under 50**

AND: **Has had an operation to prevent pregnancy**

M170_2

Was that operation carried out under the NHS or not?

- (1) Yes
- (2) No

ASK IF: **Men under 70 OR women under 50**

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 June 1998?

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

ASK IF: **Men under 70 OR women under 50**

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 under 70 or women under 50**

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 June 1998?

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

ASK IF: **Women under 50**

AND: **No operation**

M170_6M

SHOWCARD C170.6

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
- (2) No method used – partner sterilised / had a vasectomy
- (3) No method used – other reasons
- (4) Withdrawal
- (5) Male sheath/condom

- (6) Safe period/rhythm method/Persona
- (7) Cap/Diaphragm
- (8) Pill
- (9) IUD/coil/intra-uterine device
- (10) Hormonal IUD – MIRENA
- (11) Foams/gels/sprays/pessaries (spermicides)
- (12) Going without sexual intercourse to avoid pregnancy
- (13) Female condom
- (14) Injections/implants
- (15) Emergency contraception (morning after pill)
- (16) Another method

ASK IF: Women under 50

AND: No operation

AND: Used another method

SPEC6

What other method is used?

ASK IF: Women under 50

AND: No operation

AND: Used the pill

M170_7

SHOWCARD C170.7

Is the pill you take one of the brands listed here: (Micronor, Noriday, Femulem, Microval, Norgesten, Neogest?)

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

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

ASK IF: Women under 50

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 under 50

AND: No operation

AND: More than one method used

AND: Sometimes one, sometimes other

M170_9

SHOWCARD C170.9

Which one do you use most often?

- (4) Withdrawal
- (5) Male sheath/condom
- (6) Safe period/rhythm method/Persona
- (7) Cap/Diaphragm
- (8) Pill
- (9) IUD/coil/intra-uterine device
- (10) Hormonal IUD – MIRENA
- (11) Foams/gels/sprays/pessaries (spermicides)
- (12) Going without sexual intercourse to avoid pregnancy
- (13) Female condom
- (14) Injections/implants
- (15) Emergency contraception (morning after pill)
- (16) Another method

ASK IF: Women under 50

AND: No operation

AND: Have a sexual 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 under 50

AND: No operation

AND: Have a sexual relationship

AND: No method used

M170_11

SHOWCARD C170.11

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) Don't know where to obtain contraceptives / advice
- (7) Find access to contraceptive services difficult
- (8) Some other reason

ASK IF: Women under 50

AND: No operation

AND: Have a sexual relationship

AND: No method used

AND: Some other reason in M170_11

SPEC11

RECORD OTHER REASON

ASK IF: Women under 50

AND: No operation

AND: No method used or no sexual relationship

M170_12

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

- (1) Yes
- (2) No

ASK IF: Women under 50

AND: No operation

AND: No method used or no sexual relationship

AND: Has used methods in last 2 years

M170_13M

SHOWCARD C170.13

Which method(s) did you usually use?

SET [3] OF

- (4) Withdrawal
- (5) Male sheath/condom
- (6) Safe period/rhythm method/Persona
- (7) Cap/Diaphragm

- (8) Pill
- (9) IUD/coil/intra-uterine device
- (10) Hormonal IUD – MIRENA
- (11) Foams/gels/sprays/pessaries (spermicides)
- (12) Going without sexual intercourse to avoid pregnancy
- (13) Female condom
- (14) Injections/implants
- (15) Emergency contraception (morning after pill)
- (16) Another method

ASK IF: Women under 50

AND: Usual method less than 5 years or operation less than 2 years ago and uses a method now

M170_14M

SHOWCARD C170.14

Which method(s) of contraception / if any did you use immediately before that?

SET [3] OF

- (1) No method used – no sexual relationship
- (2) No method used – partner sterilised / had a vasectomy
- (3) No method used – other reasons
- (4) Withdrawal
- (5) Male sheath/condom
- (6) Safe period/rhythm method/Persona
- (7) Cap/Diaphragm
- (8) Pill
- (9) IUD/coil/intra-uterine device
- (10) Hormonal IUD – MIRENA
- (11) Foams/gels/sprays/pessaries (spermicides)
- (12) Going without sexual intercourse to avoid pregnancy
- (13) Female condom
- (14) Injections/implants
- (15) Emergency contraception (morning after pill)
- (16) Another method

ASK IF: Women under 50

AND: Usual method less than 5 years or operation less than 2 years ago and uses a method now

AND: Used the pill

M170_15

SHOWCARD C170.15

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 under 50

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 under 50

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 is/are: ...more reliable in preventing pregnancy?

- (1) Yes
- (2) No

ASK IF: Women under 50

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 is/are:) ...more convenient to use?

- (1) Yes
- (2) No

ASK IF: Women under 50

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 is/are:) ...better for your long-term health?

- (1) Yes
- (2) No

ASK IF: Women under 50

AND: No operation and method used

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

M170_20

[*] (Compared with the method(s) you used before, do you think the method(s) you are using now is/are:) ...better for protecting against sexually transmitted infections (including HIV/AIDS)?

- (1) Yes
- (2) No

ASK IF: Women under 50

AND: No operation and method used

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

M170_21

SHOWCARD C170.21

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 under 50

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 under 50 who have not had operation or had operation less than 2 years ago

M170_23

Some of the previous questions referred to emergency contraception. 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 reading 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 under 50 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency pill

M170_24

SHOWCARD C170.24

[*] 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 successfully?

- (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

ASK IF: Women under 50 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency pill

M170_24M

SHOWCARD C170.24M

[*] Which of the following statements about emergency contraception do you think is true?

SET [6] OF

- (1) The emergency pill has no identified harmful long-term side-effects
- (2) The emergency pill is equally effective taken at any time up to 72 hours after intercourse
- (3) The emergency pill can sometimes cause nausea / make you feel sick
- (4) The emergency pill is more effective the sooner it is taken after intercourse
- (5) The emergency pill is safer and more effective than it has been in the past
- (6) None of these

ASK IF: Women under 50 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency pill

M170_25

SHOWCARD C170.25

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

- (1) Yes
- (2) No

ASK IF: Women under 50 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency pill

AND: Has used emergency pill

M170_26

SHOWCARD C170.26

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

1..50

ASK IF: Women under 50 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency pill

AND: Has used emergency pill

M170_27M

SHOWCARD C170.27

Where did you go for this?

SET [5] OF

- (1) Your own GP
- (2) Another GP
- (3) Family Planning Clinic, (including Brook Clinics and Margaret Pyke centres)
- (4) Hospital Accident & Emergency Department
- (5) Somewhere else

ASK IF: Women under 50 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency pill

AND: Has used emergency pill

M170_27A

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

- (1) Yes
- (2) No

ASK IF: Women under 50 who have not had operation or had operation less than 2 years ago

AND: Has heard of emergency pill

AND: Has not used emergency pill

M170_28M

SHOWCARD C170.28

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

SET [5] OF

- (1) Your own GP
- (2) Another GP
- (3) Family Planning Clinic, (including Brook Clinics and Margaret Pyke centres)
- (4) Hospital Accident & Emergency Department
- (5) Somewhere else
- (6) Would not use

ASK IF: Women under 50 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 under 50 who have not had operation or had operation less than 2 years ago**

AND: **Has heard of emergency IUD**

M170_30

SHOWCARD C170.24

[*] 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 successfully 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

ASK IF: **Women under 50 who have not had operation or had operation less than 2 years ago**

AND: **Has heard of emergency IUD**

M170_31

SHOWCARD C170.31

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

- (1) Yes
- (2) No

ASK IF: **Women under 50 who have not had operation or had operation less than 2 years ago**

AND: **Has heard of emergency IUD**

M170_35M

SHOWCARD C170.35

Where did you go for this?

SET [6] OF

- (1) Your own GP
- (2) Another GP
- (3) Family Planning Clinic, (including Brook Clinics and Margaret Pyke centres)
- (4) Hospital Accident & Emergency Department
- (5) Somewhere else
- (6) Would not use

ASK IF: **Men under 70**

AND: **Not had operation which prevents pregnancy**

M170_36M

SHOWCARD C170.36

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 under 70**

M170_37

SHOWCARD C170.37

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 under 70 or women under 50**

M170_38M

SHOWCARD C170.38

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 [4] OF

- (1) Family planning clinic (including Brook Clinics and Margaret Pyke centres)
- (2) Your own GP
- (3) Another local GP
- (4) Somewhere else
- (5) None of these

ASK IF: **Men under 70 or women under 50**

AND: **Has been somewhere for family planning last 5 years**

AND: **More than one place visited**

M170_39

Which did you visit most recently for these purposes?

- (1) Family planning clinic (including Brook Clinics and Margaret Pyke centres)
- (2) Your own GP
- (3) Another local GP
- (4) Somewhere else

ASK IF: **Men under 70 or women under 50**

AND: **Has been somewhere for family planning last 5 years**

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 under 70 or women under 50**

AND: **Not currently in a sexual relationship**

M170_50

SHOWCARD C170.50

Have you had any sexual partners in the last year?

- (1) Yes
- (2) No

ASK IF: **Men under 70 or women under 50**

AND: **Currently in a sexual relationship/ had a sexual relationship in last 12 months**

AND: **Has not said uses condoms**

M170_51

SHOWCARD C170.51

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 under 70 or women under 50

AND: Currently in a sexual relationship/ had a sexual relationship in last 12 months

AND: Uses a condom

M170_52

SHOWCARD C170.52

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 under 70 or women under 50

AND: Currently in a sexual relationship/ had a sexual relationship in last 12 months

AND: Uses a condom

M170_53

SHOWCARD C170.53

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 under 70 or women under 50

AND: Currently in a sexual relationship/ had a sexual relationship in last 12 months

M170_54M

SHOWCARD C170.54

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) It has not influenced me at all

ASK IF: Men under 70 or women under 50

AND: Currently in a sexual relationship/ had a sexual relationship in last 12 months

M170_55

SHOWCARD C170.55

(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

ASK IF: Men under 70 or women under 50

AND: Currently in a sexual relationship/ had a sexual relationship in last 12 months

AND: Had 2 or more sexual partners in last year

M170_56

SHOWCARD C170.56

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

- (1) 1
- (2) 2
- (3) 3
- (4) 4 or more

ASK IF: Men under 70 or women under 50

AND: Currently in a sexual relationship/ had a sexual relationship in last 12 months

AND: Has had 2 or more sexual partners in past 12 months and uses condom

M170_57

SHOWCARD C170.57

(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 under 70 or women under 50

M170_41

SHOWCARD C170.41

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) Family Planning Clinic (including Brook Clinics and Margaret Pyke centres)
- (6) Clinic in a hospital
- (7) Friends or relations
- (8) Government information leaflet
- (9) Somewhere else

ASK IF: Men under 70 or women under 50

M170_58

Please hand the computer back to the interviewer now.

THANK YOU FOR COMPLETING THIS MODULE

ASK ALWAYS:

M170_60M

SHOWCARD C170.60

Which of the following are sexually transmitted infections?

CODE ALL THAT APPLY

SET [6] OF

- (1) Tuberculosis
- (2) Gonorrhoea
- (3) Listeria
- (4) Chlamydia
- (5) Diabetes

- (6) None of these

ASK IF: Recognised Chlamydia as STI at M170_60M

M170_49M

SHOWCARD C170.49

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

CODE ALL THAT APPLY

SET [6] 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

Appendix C: Reports in the Omnibus Series

The prevalence of back pain in Great Britain. Val Mason. HMSO (1994)

National fire safety week and domestic fire safety. Amanda Wilmot and Joy Dobbs. HMSO (1994)

Cooking: attitudes and behaviour. Gerry Nicolaas. HMSO (1995)

Food Safety in the Home. Alison Walker. HMSO (1996)

Residual Medicines. Myra Woolf. HMSO (1996)

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