



DIGITAL CONDOM DISTRIBUTION

Our research into how digital can deliver a better condom distribution scheme

February 2024





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INTRODUCTION

Condom Distribution Schemes (CDS), widely known as C-card schemes, are commissioned by local authorities across the UK to provide young people with free condoms to promote safe sex and reduce unplanned pregnancies and STI rates.

The first C-card scheme was developed in 1989 and the original model of delivery has changed little in the past 35 years. In that time, technology has advanced rapidly, and young people's lives, behaviours and habits have changed. Brook sees a huge opportunity for innovation in CDS to better meet the needs of young people and increase habitual usage of condoms. To explore this, they conducted some research, in partnership with Reason Digital, to see what a new digital c-card scheme could look like.



WHY ARE CONDOMS SO IMPORTANT?

The 2022 national data for sexually transmitted infections is showing a worrying and rapid rise.

Overall, the impact of STIs remains greatest in young people aged 15 to 24 years, gay, bisexual and men who have sex with men, and some black ethnic groups.

As the **only method that protects against STIs and unplanned pregnancy**, it's essential that we start to really drive condom use if we're to turn the tide against STIs.

As well as the national picture being bleak when it comes to STIs, we've also seen a worrying, **growing trend in the rejection of hormonal contraception** which is likely to be contributing to rising unplanned pregnancy rates.

Educating young people on contraception and their sexual health, and giving them easy access to condoms is an **important step in helping young people live healthier lives**.

24.3%

increase in Chlamydia diagnoses
from 2021 to 2022

50%

increase in Gonorrhoea incidences
between 2021 and 2022

75 years

since Syphilis was at the rate it
was in 2022

52.8%

Don't discuss if a sexual partner
has recently had an STI test

ABOUT BROOK

Brook is a national charity supporting people with their sexual health and wellbeing.

We offer a range of services to support our mission of helping people to live healthier lives.

Brook fights for everyone's right to safe, confidential, accessible healthcare, no matter who they are. We challenge stigma, amplify voices and provide lifelong support so that meets the diverse needs of our communities.

Our unique offer combines clinical services, relationships and sex education, outreach in community settings, wellbeing programmes and counselling. Our life-course approach to sexual health and wellbeing means that people can benefit from our holistic services at any stage of their life.



ABOUT REASON DIGITAL

Reason Digital is a Social Enterprise and 50+ strong team of digital innovators.

Since being founded in 2008 we've chosen to work solely with organizations that do social good. We see digital as a force for social good and technology as a way to have the most scalable, positive impact on the world we live in.

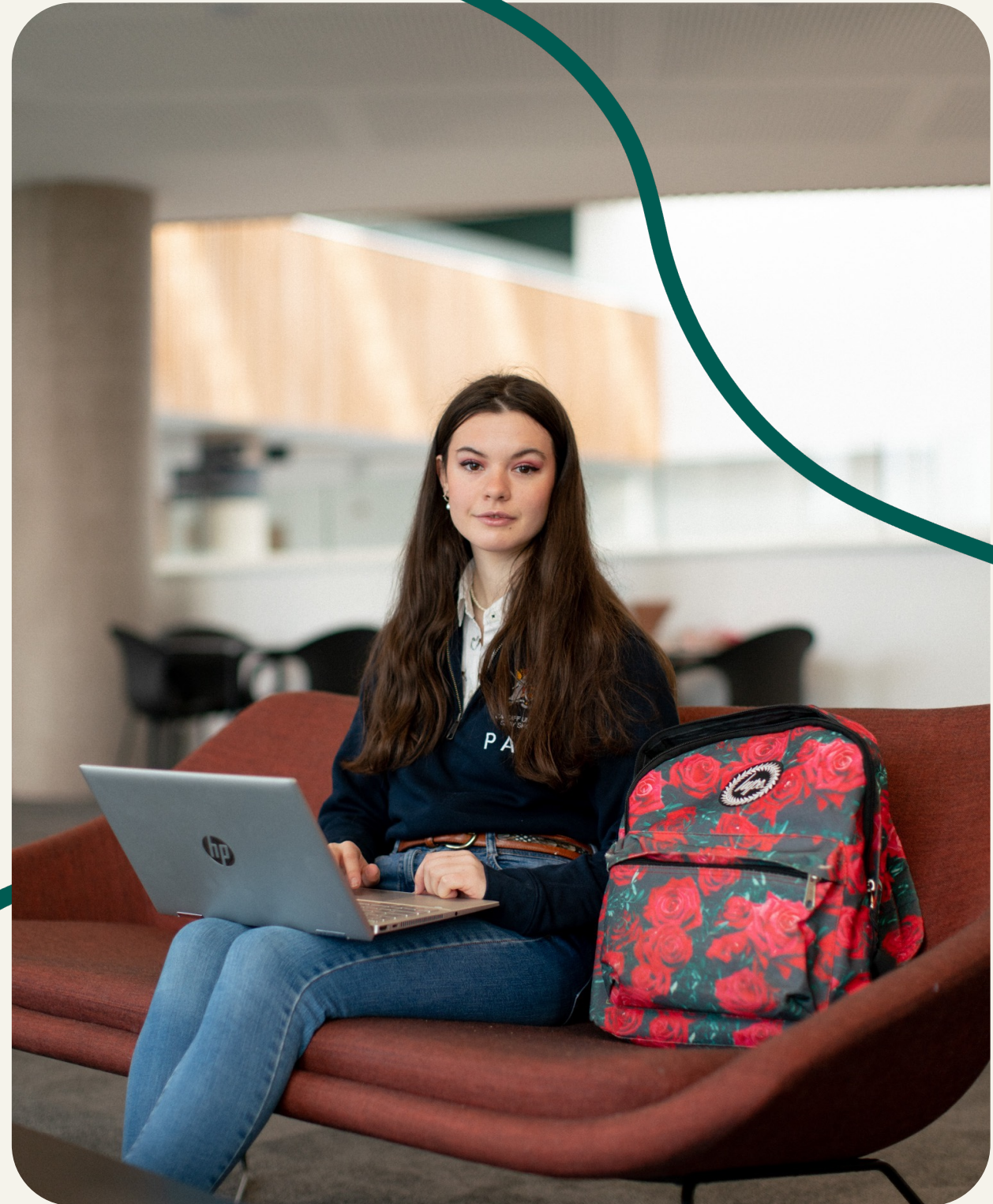
Everyone who works here chose us so they could use their powers for good. Our team are driven by our mission to use digital to solve the problems that actually matter.

We've been working with Brook for over 4 years, helping to enhance their clinical and educational offerings through design thinking and digital innovation.



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TERMINOLOGY

Throughout the report we reference terminology associated with condom distribution schemes. This is what we mean by the following terms:

Provider

An organisation who is contracted to deliver a condom distribution scheme

Distribution outlet

Somewhere where young people can collect condoms from for free with a c-card

Registration outlet

Somewhere where young people can register for a c-card

Commissioner

The authority who commissions health and wellbeing services in a local area

Encounter

Each time condoms are given out to an individual young person



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01. **EXECUTIVE SUMMARY**

EXECUTIVE SUMMARY

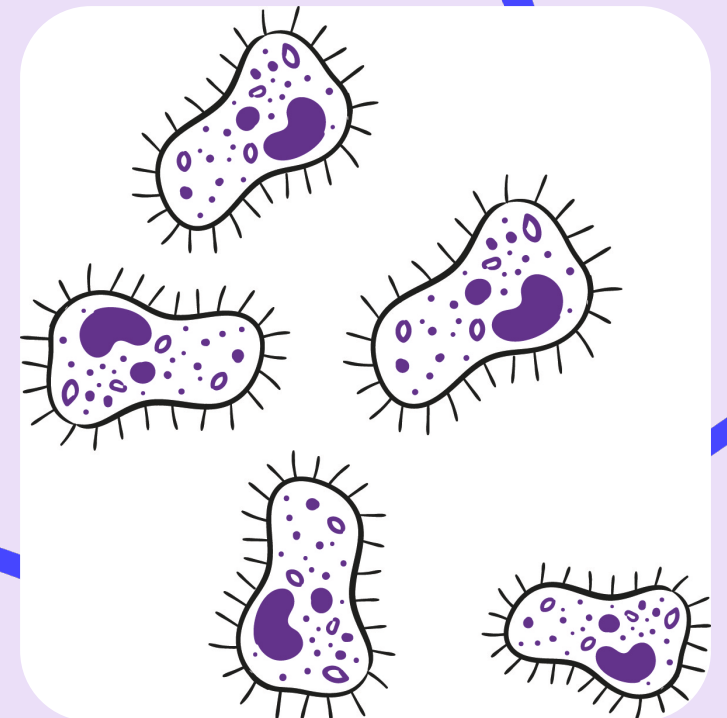
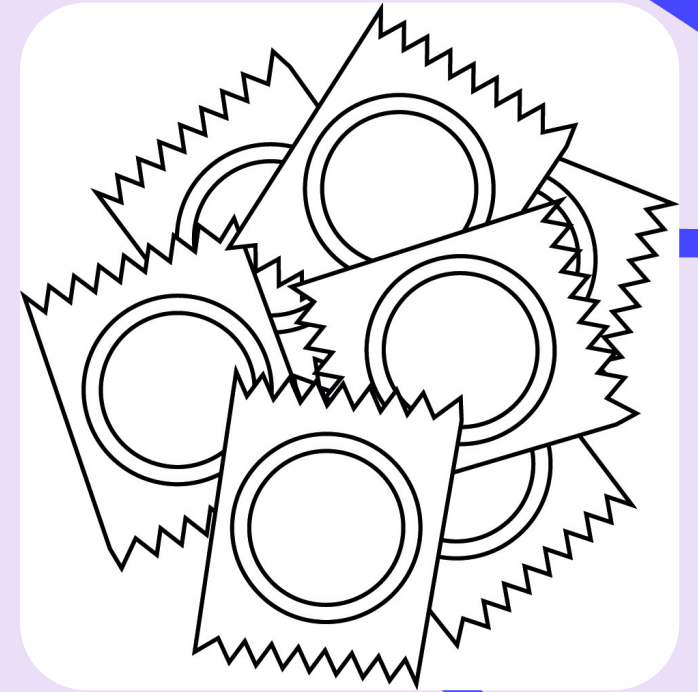
Free condom schemes still provide huge value to young people, but they have not evolved to meet modern expectations.

Our research has shown that there's a lack of awareness of the schemes and many young people are confused and frustrated by the processes of signing up and finding outlets to visit.

The outlet-based model is also not easy to govern or manage for providers and alternative distribution models could increase efficiency and improve data quality and reporting.

The priorities for young people are anonymity, convenience and choice, and they are keen to be able to order online and have condoms delivered to them. This unlocks more opportunities for re-engagement and signposting.

Modernisation of these schemes is going to be crucial to encourage young people to regularly use condoms and address the rapid rise in STI rates.



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02. RESEARCH METHODS

RESEARCH METHODS

To thoroughly explore how condom distribution worked at Brook, we used a mix of methods to get a broad perspective.

Starting with some collaborative sessions with staff who run or manage the CDSs across Brook, we mapped out a blueprint of how the model currently works and the variations between areas. This gave us some hypotheses and potential solutions to investigate further through research with young people, commissioners and partners.

Alongside this, we tested the financial and technical feasibility of the new solutions by reviewing contracts and gathering quotes from potential suppliers.



4

exploration workshops with Brook staff

263

responses to a survey from young people aged 18-25

5

young people engaged with in a focus group session

2

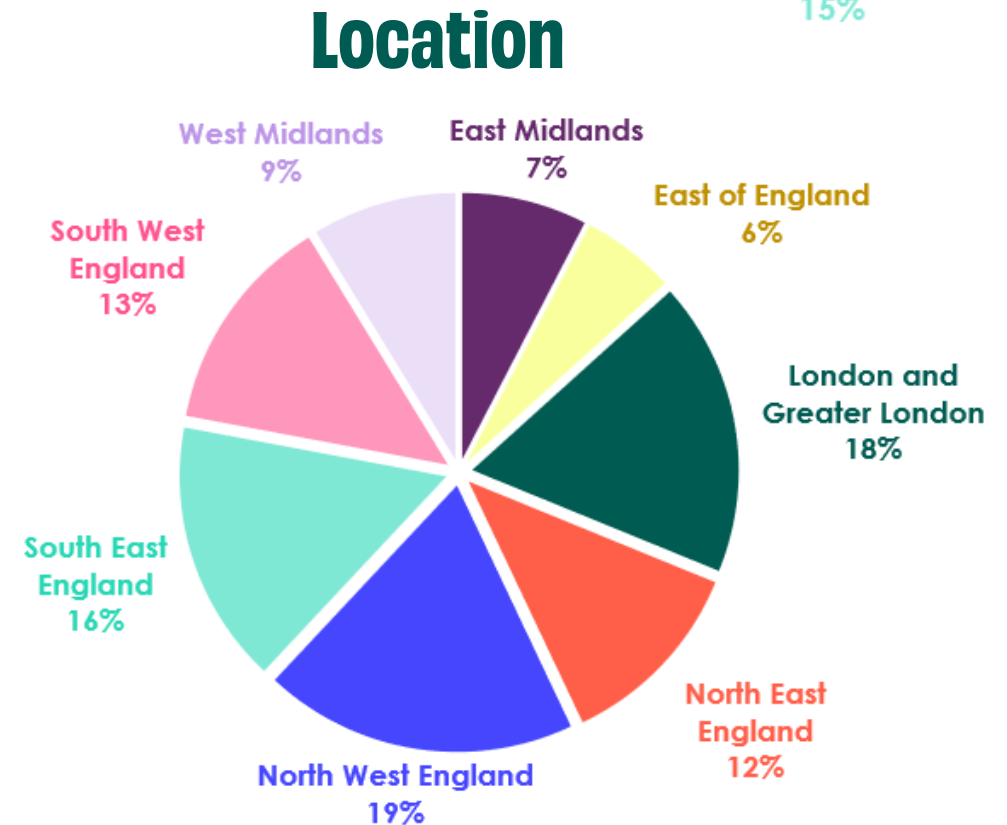
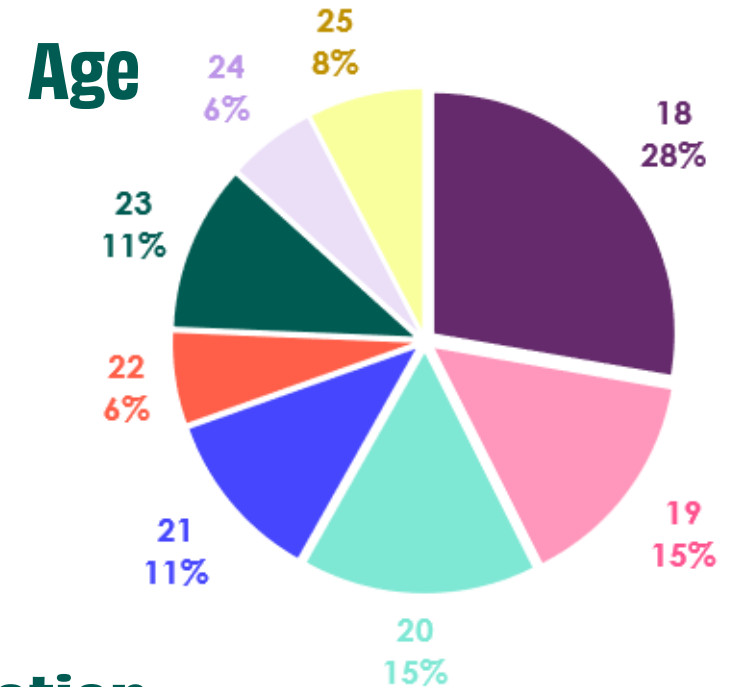
Commissioners interviewed

WHO RESPONDED TO THE SURVEY?

The survey was circulated through Brook's social media channels and received 263 responses from people aged between 18 and 25. Basic demographic data was collected to understand the representation of the sample. The respondents may not be accessing services from Brook and their experience of CDS may relate to other providers.

Representation overview

- Good spread of ages, although over a quarter (28%) were 18
- Heavy skew towards female respondents (72%)
- Good coverage of all areas of the UK, with the most respondents from the North West (19%) and London (18%)
- 22 respondents were men who have sex with men
- 17% of respondents were transgender
- The most common sexuality was bisexual (44%)



RESEARCH METHODS

We have also gathered supplementary data following our initial research and have updated our report with findings from:

- Condoms and Contraception Survey 2024, and
- Brook's online contraception tool data

We have used this data to add important depth to our findings on young people's experiences with contraception, with a specific emphasis on the importance of choice and agency.

2

Additional sources of national survey data provided by Brook

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03.

INSIGHTS AND FINDINGS

SUMMARY OF OUR FINDINGS

- There are **variations** in the way c-card schemes are run across the UK which means a young person's experience depends on where they live
- The current model of relying on distribution outlets is **difficult to manage** and govern for providers
- There's a **lack of awareness** of free condom schemes, only 43% of young people surveyed knew about them
- Among those who **are aware** of free condom schemes, a majority of them are too embarrassed to directly speak to someone about getting free condoms
- **Commissioners are supportive** of innovations in CDS, as long as safeguarding and inclusion are prioritised
- Where **online** registration and ordering has been implemented, it has been **well received** by young people
- Common complaints from young people about CDS centre around processes being **long-winded, confusing** and **invasive**
- Young people want more **convenience, choice** and **anonymity**
- More needs to be done to help those with **specific access needs** to use c-card schemes

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04. CHALLENGES WITH THE CURRENT MODEL

THE CURRENT MODEL

Step 1

Finding out

A young person might find out about the schemes through:

- education sessions in schools
- social media
- Google
- word of mouth
- visiting a sexual health clinic, doctor or pharmacy

Step 2

Registration

A young person must register to access the scheme and get a c-card.

This often happens in person at a registration outlet, but some areas offer online registration for over 16-year-olds.

Extra safeguarding questions need to be asked for younger and more vulnerable people.

All young people are also told how the scheme works and how to use condom safely.

C-cards are usually a physical card (like a store card) but some areas offer online cards.

Step 3

Accessing supplies

In most areas, young people get condoms from outlets which might be pharmacies, student unions, clinics, school nurses or youth clubs.

Details of local outlets are usually found online.

Outlets usually provide a set number of condoms and lube each time, but this varies.

In a few areas, young people can order condoms online or over the phone for delivery.

Step 4

Repeat use

Young people can get supplies as and when they need them.

Outlets should record each time they give out supplies in a central system for reporting.

Reviews may need to be held every few visits if they young person is under 16 or vulnerable.

Ad hoc signposting to other services may be done.

CHALLENGES FOR YOUNG PEOPLE

Variation

As illustrated, there are many variations in how CDS is delivered which means young people's experiences are inconsistent. This can be particularly frustrating if they move to a new area or are living in two locations such as university students.

Lack of awareness

Our survey demonstrated that many young people don't know that free condom schemes exist (only 38% know about them). This means that many young people could be missing out on accessing a service they need.

Access

Many young people find it difficult to visit outlets in person, due to physical access needs, living in remote locations, being neurodivergent or facing cultural barriers. Our research shows that many young people would rather not collect condoms from outlets such as local pharmacies.



CHALLENGES FOR PROVIDERS AND COMMISSIONERS

Managing and training outlets

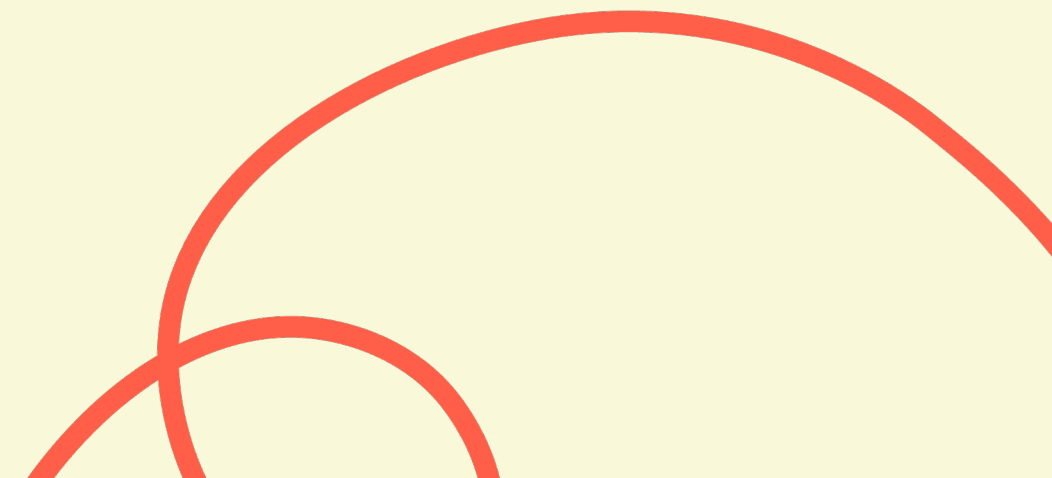
The outlet model is difficult for providers to manage. It relies on individuals within healthcare (such as pharmacies) and education settings to sign up for the scheme and providers to train and support these individuals to act on their behalf. This requires huge investment, co-ordination and governance to ensure processes and standards are adhered to.

Data quality

Providers rely on outlets accurately recording the number of condoms they've distributed to know how a service is running. This is an administration burden on outlets who are often extremely busy and providing many other services.

Reporting

Commissioning of CDS varies across the UK, with some areas including it as part of a wider sexual health provision and others commissioning it separately. There are also differences in reporting metrics between contracts, and it can be difficult to understand the wider impact CDS has on key sexual health indicators such as STI rates and unplanned pregnancies.



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05. YOUNG PEOPLE'S EXPERIENCES

POSITIVE EXPERIENCES

Our research highlighted many examples of c-card schemes working well for young people.

- People particularly appreciated it when the professionals involved didn't ask too many questions and didn't make the young person feel judged.
- C-card seems to be working well in universities where discrete packages are freely available to pick up in the student union.
- Young people who have the option to order online and get supplies delivered in plain packaging praised the convenience of the service.
- Getting the type and size of condom they wanted was important.

This demonstrates that convenience, discretion and a non-judgemental service are all key to delivering a c-card scheme which young people will use.

“

I have used it to get condoms delivered and been very happy with it.

“

I think it's brilliant! I get free condoms as and when I need them and I'm able to get the ones I need (latex free)

“

Very useful, they get delivered to my house in plain packaging, usually within a week.

“

I have received free condoms from a young people's sexual health clinic, the nurses were very friendly and non-judgemental



“

I think [CDS schemes] are hugely beneficial but are for the most part unknown or with little information about how young people can access them.

COMMON FRUSTRATIONS

There were also many stories of young people having frustrating experiences of c-card schemes.

- Many young people found the registration process long-winded and, for some people, this put them off using the scheme altogether. Registering in-person was also a common barrier, as they found it embarrassing.
- Another common problem was information about outlets being out of date or incorrect. This meant young people would go to outlets when they were closed or find that they were no longer participating in the scheme.
- Some young people felt too many invasive and personal questions were asked about their sexual history.

“

The service can be there but then there's just so many things that make it unreliable, and that can be really frustrating.

“

It feels like talking to parents about something you don't want to talk to parents about.

“

You have to register in person and that's always been the biggest inhibitor to me, seems like it will take a while.

“

Multiple chemists registered for the c-card have told me they don't do them. It took confidence to walk in only to get turned down.



“

I had heard of a c-card years ago and remember thinking that it sounded like hassle to get one and use it, so I never looked into it further.

SPECIFIC ACCESS NEEDS

Some young people face specific access needs which were going unmet in certain scenarios, including:

- Those living in rural households who were not able to visit outlets without asking their parents to take them.
- Neurodivergent people and those with anxiety wanted more clarity and detail on the process before using the scheme so that they knew what to expect.
- Some LGBT+ young people were not able to access the types of condoms they wanted, such as femidoms and dental dams.
- Not all outlets had disabled access, and this information was not always available online.
- People from religious communities who need extra discretion

“

If they have availability to add alternatives like a femi-dom or dental dams as my local clinic don't do these.

“

When you don't know the process... it's a real barrier for neurodivergent people and people with anxiety.

“

There are some spaces where it's not accessible for disabled people (i.e. steps to access).

“

I lived on a farm in the middle of absolutely nowhere. If I want condoms, I'd have to ask my mum to drive me to town. That's not gonna happen.



“

As an autistic person, I'm very anxious to get condoms for free as I can't find information available online about the process of getting them.

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06. YOUNG PEOPLE'S THOUGHTS ON CONTRACEPTION

TRUST, AGENCY, AND ACCOUNTABILITY WHEN SEEKING CONTRACEPTION

Brook's data from the Condoms and Contraception Survey 2024 highlighted many examples of young people feeling disempowered and disregarded by healthcare professionals when they sought information regarding safer sex practices, which may affect uptake of CDS offerings

- While doctors and nurses are still the most trusted sources of contraceptive information, a general understanding among young people is that time-poor healthcare providers can't provide the consideration and information needed to consult on tailored contraceptive methods
- Experiences of seeking information from healthcare workers with little knowledge of trans- and disability-inclusive sexual health knowledge reduces young peoples' trust in sexual health schemes
- There's a sex-based difference in responsibility when it comes to condoms and contraception; those assigned female at birth (AFAB) are generally deemed responsible for understanding contraception and taking an active role in seeking it.

This demonstrates that an empathetic, inclusive, and educational service are all key to delivering a c-card scheme which young people will use.

“

I have always been told I can only take the pill or no contraception because of being trans by many doctors due to hormone reasons because they didn't understand how this would affect me so instead of seeking guidance, they just said it wasn't possible

“

I have suspected endometriosis and have tried multiple methods, however the IUS failed as it had to be removed immediately after insertion. I was not properly educated about the procedures

“

I wish the responsibility of contraception fell equally to heterosexual men and women, but it doesn't

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07. YOUNG PEOPLE'S CONTRACEPTION EXPERIENCES IN GENERAL

HORMONAL CONTRACEPTION AND CDS

According to data from Brook's online contraception tool, more people use the combined pill (24%) than condoms (19%). However, **many respondents noted that taking hormonal contraception came with difficult side effects** that they weren't fully prepared to expect.

Side effects

Many young people do not feel that medical professionals explain the potential side effects, nor are they always available to have a discussion with young people about their options, which can lead to negative experiences.

Choice

Young people feel that medical professionals do not listen to their needs, and often push the pill as their only option. Additionally, young people expressed a lack of autonomy in decision making, particularly related to accessing non-hormonal contraception options.

An Opportunity

Greater visibility of free Condom Distribution Schemes provides an additional choice of safe contraception to both those who are unable to find contraception that works for them and those who cannot afford to purchase condoms over the counter.

26%

Of the respondents from Brook's survey that have not (or never) used contraception have concerns about the potential negative side effects of hormonal contraception

12%

of young people surveyed don't use condoms because they think they are too expensive

CONVENIENCE, CHOICE AND DISCRETION

Our survey showed that young people do value being able to access condoms for free, but there are other factors which are also important to them.

Convenience

Young people shouldn't have to go out of their way to access condoms. They should be able to easily pick them up from somewhere nearby if they need them immediately and be able to order online for them to be delivered as well.

Choice

Choice is not only important in terms of how young people access condoms, but also in terms of the type of condoms they need, including size and variety.

Discretion

Sexual health can be embarrassing for young people to discuss with adults and professionals, so young people want to be able to access condoms without having to interact with anyone. Self-checkouts are extremely popular for buying condoms this reason.

“

Anything that doesn't involve another person

83%

of young people surveyed voted condoms being free or cheap a top priority for them to access them

92%

of young people surveyed would feel comfortable ordering condoms online for postal delivery in plain packaging

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08. RECOMMENDATIONS

RECOMMENDATIONS

Based on the findings from this research we'd recommend all providers of c-card schemes look to use digital in the following ways to improve the experience for young people and drive-up condom use:

- Improve **awareness** of the scheme using social media campaigns on channels young people use most
- Create engaging **educational content** about how to use condoms for social media and website
- Provide a simple **online registration** form which integrates with your back-end system and collects the data needed for commissioner reporting
- **Engage** with prospective service users to understand specific local challenges and concerns
- Offer **digital c-cards** which can be sent via email, SMS or stored in a phone wallet
- Clearly **explain** the process online to help people know what to expect
- Ensure key **information** online about outlets is **accurate** and **easy to find**
- Implement **online ordering** and **postal delivery**
- Offer **reminders** and **follow-ups** via SMS, WhatsApp or email to drive habitual use and signposting to other services

Alongside this, it's important to ensure there's always a face-to-face option available for those who need it, and safeguarding procedures are embedded for more vulnerable groups.



**TAKE CHARGE.
TAKE A TEST. ☒**

SEXUAL HEALTH & WELLBEING EXPERTS



brook.org.uk

CONSENT:
DO YOU GET IT?