

Insights into the Barriers and Motivators Impacting Chlamydia Screening Rates amongst Male Students

Matthew Wood, Julie Fowlie & Julian Reuter
Brighton Business School, University of Brighton
World Social Marketing Conference, Dublin April 2011



University of Brighton

BRIGHTON

Overview

- Background
- Recent Chlamydia Initiatives
- Social Marketing & Behaviour Change Theory
- Research Methods
- Quantitative Findings
- Qualitative Findings
- Conclusions
- Limitations and Further Research



University of Brighton

BRIGHTON

Background

- One in eight of the UK population aged between 16 and 24 years
- This group accounts for about half of newly diagnosed STIs (sexually transmitted infections)
- Chlamydia is growing (NHS)
- Individuals within the 16-24 years age range account for 65% of new Chlamydia cases
- Almost equal split between males and females
- 1.3 million individuals attended NHS clinics in 2009 only 140,000 were men



University of Brighton

BRIGHTON

Recent Chlamydia Screening Initiatives

- National Chlamydia Screening Programme
- Screening rates up but low amongst males
- 1 in 10 individuals tested are men
- NHS campaign: *“Sex Worth Talking About:”*
“Easy, everyday and normal to have discussions about contraception between partners, parents and health care professionals”
- Low levels of awareness amongst this sample
- The Chlamydia Outreach Advice Screening Treatment (COAST)



University of Brighton

<http://thensmc.com/resources/showcase/case-studies-home.html>

Chlamydia
worth talking about

BRIGHTON

Social Marketing & Behaviour Change Theory

- *Exchange Theory*
(Bagozzi, 1978; Maibach et al, 1993)
- *Stages of Change Model*
(Prochaska and DiClemente, 1982)
- *Social Cognitive Theory*
(Bandura, 1986; Maibach & Cotton, 1995)



University of Brighton

BRIGHTON

Research Methods

- Random sampling approach
- 147 male university undergraduate students at various campus locations were surveyed using a structured questionnaire
- 58 depth interviews with students
- 3 focus groups of students
- 4 sexual health clinic nurses interviewed



University of Brighton

BRIGHTON

Quantitative Findings

- 96% [n=141]) were sexually active
- 30% (n=29) had a STI in the past
- 62% [n=18]) said that they had found out about their infections through previous sexual partners
- 51% [n=72]) are screened less than once a year
- 16% (n=23) had never been screened
- 36% were last tested following unprotected sex
- 9% responded to advertising (health promotion)
- 71% (n=105) of students unaware of free university Chlamydia screenings



University of Brighton

BRIGHTON

Qualitative Findings (i): Myths and Barriers

- Peer perception:
 - *“Every time I go to get screened, the girls always laugh and ask what I’ve caught now. So I try to keep my visits quiet. But then if they find out I went, they definitely think I have something.”*
 - *“You tell your mates you’re going to the clinic and you’re known as ‘AIDS boy’”*
- *“I have heard that they literally stick something down you, and it kills. Why on Earth would I go through that?”*
- *“You sit there, and quite frankly, you feel quite dirty.”*
- Lack of information and advertising impact: *“They’re all the same, and none of them have made me interested in screening.”*
- Embarrassment when calling the clinics, and when waiting for appointments
- Afraid of results



University of Brighton

BRIGHTON

Qualitative Findings (ii): Logistics & Service

- *“I am unsure as to where the clinics are. But then again, even if I did know, I have no real means of transport to get there as I don’t drive.”*
- *“I do go every month. This is simply because my father took me to a clinic when I became sexually active. Ever since then I’ve gone regularly”.*
- *“Try doing third-year pharmacy, then try and find time to go during the times they give you.”*
- No weekend screening times



University of Brighton

BRIGHTON

Qualitative Findings (iii): Motivators

- A sufficient exchange (i.e. benefits & incentives)
- Parental and peer advice/encouragement
- Being able to openly discuss sexual issues within the community
- Requirement to adopt behaviour as a result of societies, course, enrolment, etc.
- Group participation



University of Brighton

BRIGHTON

Conclusions

- Chlamydia screening information and advertising has little or no impact on the behaviour of most male students
- Relationships with peers and reference groups are critical
- Perceived negative associations amongst peers
- Negative (and often inaccurate) myths about procedures at clinics
- Perceived logistical problems act as cost/barrier



University of Brighton

BRIGHTON

Limitations and Further Research

- Exploratory study: involved a small random sample of male undergraduates from one English university
- Extend research to other universities and young males from wider socio-economic backgrounds
- Recommend focussed studies to identify appropriate incentives, service design and branding/communications strategy to motivate young males to undertake regular Chlamydia screenings



University of Brighton

BRIGHTON