

**REPORT ON SURVEY OF
WINNIPEG YOUTH REGARDING
THE *HEADS UP?! CAMPAIGN*:**

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Prepared for:
ChangeMakers and the Winnipeg Regional Health Authority

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Appendix A – Questionnaire

1.0 Introduction

In the fall of 2011, the Winnipeg Regional Health Authority (WRHA) launched the *Heads Up?!* campaign, which attempts to reduce sexually transmitted infections (STI) among Winnipeggers 15 to 19 years old. The 2011 campaign had a brief relaunch in July and August 2012. The campaign was launched again in the fall of 2012.

To assess the impact of the campaign and establish a baseline of youth behaviours, the WRHA and ChangeMakers hired PRA to conduct a survey with Winnipeggers 15 to 19 years of age. PRA surveyed 523 Winnipeggers in this age group between December 2011 and March 2012.

A similar survey was attempted in 2013 with these 523 youth, along with a new sample of 100 15-year-olds. The purpose of the current survey was to determine changes in respondents' attitudes and behaviours relative to baseline information.

1.1 Questionnaire revision

In consultation with ChangeMakers and the WRHA, PRA updated the previous questionnaire to collect information related to the desired outcomes of the research. New questions were added to determine the age at which respondents became sexually active. The final version of the current questionnaire can be found in Appendix A.

1.2 Follow-up survey methodology

To survey the 523 youth who participated in the previous survey, PRA took the following steps:

- ▶ PRA sent a letter to all participants in November 2012 reminding them about their participation in the study and asking them to update their contact information if it had changed.
- ▶ PRA began calling participants to complete the survey on December 19, 2012, offering them the opportunity to complete the survey by telephone or online. PRA completed calls on April 2, 2013.
- ▶ For those respondents who PRA could not reach by telephone, either because their number was no longer in service or the person was no longer living with or using this phone number, PRA sent emails asking them to update their contact information or complete the survey online (by clicking on the link embedded in the email).
- ▶ In total, PRA surveyed 387 of the 523 participants from the first survey, yielding a 74% response rate.

Outcomes of calls with respondents to the previous survey are shown in Table 1.

	Participants (n = 523)	%
Completed surveys	387	74%
Refusals	49	9%
Unreachable*	43	8%
No answer/callbacks	44	8%

Note: Percent column may not sum to 100% due to rounding.
* "Unreachable" includes such outcomes as phone number no longer in service, person no longer lives or connected to phone number on file, or respondent out of the province/country for extended period.

Comparing the profile of respondents who completed the survey in 2012 to those who completed in 2013 shows that no single group appeared to be more prone to discontinue with the study. The only exception might be among male participants, who are slightly under-represented in 2013 compared to 2012 (42% versus 47%), indicating that it was more difficult to reach male respondents in 2013 than female respondents.

The change in sexual orientation, with a higher proportion of respondents identifying as gay (or being attracted to the same gender, as defined in the survey), is due to changes in sexual preference or admitting to a change on the survey, as many of those who identified as being straight (or attracted to the opposite gender) in 2012 identified as being attracted to the same gender in 2013.

Table 2: Profile of respondents: 2012 to 2013		
	2012 % (n = 523)	2013 % (n = 387)
Age (in 2012)		
15	16%	19%
16	21%	23%
17	23%	21%
18	23%	23%
19	16%	14%
No response	<1%	<1%
Gender		
Male	47%	42%
Female	53%	58%
Other	<1%	<1%
Aboriginal descent		
Aboriginal	13%	12%
Visible minority (other than Aboriginal)		
Visible minority	23%	22%
Sexual orientation		
Straight	95%	92%
Bisexual	3%	3%
Gay	1%	4%
Don't know/no response	1%	<1%

1.3 Survey of new 15-year-old cohort

1.3.1 Sample objectives for new group of 15-year-olds

To survey the new cohort of 15-year-olds, PRA followed the same procedures used for the 2012 survey. Specifically, PRA ensured the sample was representative of Winnipeggers based on area, cultural background, gender, and age.

- ▶ There was proportional representation from each of the 12 communities serviced by the WRHA.¹ Regional representation was chosen as a pivotal marker to ensure a mix of respondents across the city that would be a proxy for various socio-demographic characteristics (income, family status, education, etc.).
- ▶ At least 10% of the sample included those who self-identified as Aboriginal.
- ▶ No more than 55% of the sample could be from one gender (i.e., male or female).
- ▶ There would be a representative sample of those who self-identify as being from a cultural background that would be classified as a visible minority.

Table 3 shows the representativeness of the sample relative to the Winnipeg population.

Table 3: Profile of new 15-year-old respondents (unweighted)		
	15-year-olds (n = 100)	Population
Gender		
Male	46%	51%
Female	54%	49%
Aboriginal descent		
Aboriginal	10%	15%
Visible minority (other than Aboriginal)		
Visible minority	16%	16%
Sexual orientation		
Straight	98%	-
Bisexual	1%	-
Gay	1%	-
<small>Note: Gender population calculated according to information from the WRHA based on estimates as of 2005 http://www.wrha.mb.ca/research/cha2009/files/Demographics.pdf. Note: Aboriginal population based on estimates from the WRHA http://www.wrha.mb.ca/research/cha/files/CommunityProfile_Part1.pdf and Statistics Canada (http://www.statcan.gc.ca/pub/89-638-x/2010003/article/11082-eng.htm) Note: Visible minority information estimated based on total Winnipeg visible minority population retrieved from the City of Winnipeg at http://winnipeg.ca/Census/2006/Selected%20Topics/Data%20Tables/Visible%20Minorities/2006%20Visible%20Minorities%20by%20Neighbourhood.pdf. The largest visible minority groups in the survey include respondents who identify themselves as Filipino (5%), East Indian (3), or black or African (2%).</small>		

¹ Winnipeg Regional Health Authority. Community Profiles. Retrieved from http://www.wrha.mb.ca/research/cha/files/CommunityProfile_Part1.pdf.

1.3.2 Surveying

PRA began the survey process by randomly calling households in Winnipeg with a home telephone to recruit 15-year-olds to complete the survey. Respondents who completed the survey were able to give the name and telephone number of friends 15 years of age who they believed would be interested in completing the survey. Because respondents were able to give any telephone number for the people they referred, this helped to reach respondents who may not have a landline (i.e., cellphone-only households). Participants who completed the survey received a \$10 gift certificate for completing it, plus an additional \$5 for every person they referred who completed the survey.

When recruited, respondents were given the option of completing the survey by telephone or online. If they chose to complete the survey by telephone, participants could choose to complete it at the time of the initial contact, or at a time that was more convenient for them. If they chose the online survey, PRA collected their email address, and respondents were emailed a link to the online survey. PRA followed up by email several times for those who did not complete the survey online.

In total, PRA surveyed 100 15-year-olds. Among those, 49 were recruited using random digit dialling, while 51 were referred by another respondent. Of the surveys, 90 were completed by telephone and 10 were completed online. Table 4 provides a summary of these outcomes.

Table 4: Summary of methodology for survey of 15-year-olds	
Survey dates	January 15 – April 8, 2013
Survey method	Telephone and online
Completed surveys	100
- Random digit completes	49
- Referrals	51
- Completed by telephone	90
- Completed online	10

Table 5 shows a summary of call outcomes. Amongst the random sample, PRA dialled 13,202 numbers and was able to establish that there was at least one 15-year-old living at 258 of those dialled numbers. From these numbers, PRA achieved a 24% response rate and a 69% refusal rate. Among the referral sample, PRA was able to establish that 250 of the 363 referred names and numbers had a 15-year-old living there. Among this sample, PRA achieved a 43% response rate.

Outcome	Random	Referrals
Active telephone numbers	13,202	363
Established households with 15-year-old	258	250
Ineligible (e.g., live outside Winnipeg, region full)	53	130
Final outcome (A)	205	120
- Completes (B)	49	51
- Respondent refusal (C)	142	51
- To be called back (D)	14	18
Refusal rate (C/A)	69.3%	42.5%
Response rate (B/A)	23.9%	42.5%

1.4 Profile of respondents and weighting

Table 6 shows a profile of respondents by where they were living at the time they completed the survey. For the respondents who completed the survey in 2012, the area shown is where they were living in 2012. Generally, the sample proportions are in line with the population of 15- to 19-year olds in Winnipeg, with the overall sample slightly overrepresenting those living in St. Boniface and Transcona, and slightly under-representing those living in Point Douglas.

Table 6: Profile by area (unweighted)				
	Overall % (n = 487)	2013 participants % (n = 387)	15-year olds % (n = 100)	Population of 15–19 year-old Winnipeg
Assiniboine South	6%	7%	6%	7%
Downtown	10%	10%	11%	10%
Fort Garry	10%	11%	8%	10%
Inkster	5%	5%	3%	6%
Point Douglas	4%	4%	2%	7%
River East	13%	13%	11%	15%
River Heights	7%	7%	8%	6%
Seven Oaks	9%	10%	7%	10%
St. Boniface	10%	9%	13%	7%
St. James	7%	8%	6%	8%
St. Vital	11%	9%	18%	10%
Transcona	8%	8%	7%	5%

Note: Area population based on estimates from the WRHA (http://www.wrha.mb.ca/research/cha/files/CommunityProfile_Part1.pdf).
Note: Columns may not sum to 100% due to rounding.

Examining the demographic profile of respondents by area in Table 7 shows the following:

- ▶ Overall, the average age of respondents in the current year is 18.4 years. The average age for all areas is between 18 and 19 with the exception of Transcona where the average age is just under 18 years (17.9).
- ▶ More than half of respondents in each area are female, with the exception of River East, where there are slightly fewer females than males (49% versus 51%).
- ▶ Respondents in Point Douglas (27%) were much more likely to self-identify as Aboriginal, while there were not Aboriginal respondents who were initially living in Assiniboine South.
- ▶ The proportion of visible minority ranges from 3% in Transcona to 47% in Seven Oaks.

Table 7: Profile of demographics by area for initial cohort (unweighted)				
	Initial cohort (n = 387)			
	Average age (in years)	Female	Aboriginal	Visible minority
Overall	18.4	58%	12%	22%
Area				
Assiniboine South	18.6	60%	0%	4%
Downtown	18.6	51%	11%	41%
Fort Garry	18.1	59%	7%	22%
Inkster	18.4	58%	11%	32%
Point Douglas	18.8	60%	27%	40%
River East	18.4	49%	16%	16%
River Heights	19.2	63%	15%	30%
Seven Oaks	18.7	58%	8%	47%
St. Boniface	18.6	61%	8%	14%
St. James	18.1	60%	17%	17%
St. Vital	18.3	61%	17%	8%
Transcona	17.9	59%	16%	3%

Note: Columns may not sum to 100% due to rounding.

Table 8 shows the demographic profile of the new sample of 100 15-year olds. It should be noted that sample sizes for regions are very small (ranging from 2 to 18 respondents per area) and should be interpreted with caution.

Table 8: Profile of demographics by area for new cohort of 15-year olds (unweighted)			
	New 15-year old cohort (n = 100)		
	Female	Aboriginal	Visible minority
Overall	54%	12%	22%
Area			
Assiniboine South	50%	0%	17%
Downtown	27%	9%	27%
Fort Garry	13%	0%	25%
Inkster	100%	33%	67%
Point Douglas	0%	0%	0%
River East	36%	18%	27%
River Heights	50%	0%	0%
Seven Oaks	57%	29%	29%
St. Boniface	77%	15%	0%
St. James	50%	0%	17%
St. Vital	83%	0%	11%
Transcona	57%	29%	0%

Note: Columns may not sum to 100% due to rounding.

1.5 Weighting

The following have been applied to the samples to correct for discrepancies between the sample and known populations:

- ▶ For the initial cohorts, weights were applied by area to account for over- and under-representation of respondents based on where they were living when they completed the first survey. To account for slight changes in the demographic profile of respondents, weights were applied for ethnicity (i.e., Aboriginal) and gender.
- ▶ The new cohort was weighted by area to conform more closely to WRHA's information.

Tables presented in this report show weighted outcomes, unless otherwise stated.

1.6 Crosstabulation and statistical significance

Large sample sizes may inflate measures of statistical significance and may lead to false conclusions about the strength of association. The chi-square measure of association, in particular, is susceptible to this possibility.² Therefore, the standards for designating whether a relationship is statistically significant were increased. For a difference to be deemed *statistically significant*, the Pearson's chi-square must have probability of a Type 1 error of less than .001. Throughout this document, any differences reported meet this criterion, unless otherwise stated.

In most cases, crosstabulated results are shown by key demographic groups, primarily age, gender, ethnicity, and area. However, in questions that were not asked of the full population of respondents, crosstabulated results are not shown by area since the sample sizes by area can be very small (e.g., 1 or 2 respondents). Crosstabulated results for area are only shown for questions reported out of the full sample, either the full initial cohort sample or the combined cohorts (i.e., initial cohort and new 15-year-old cohort).

1.7 Age comparisons over time

Throughout the report, comparisons are made by age on two levels described below.

- ▶ **Longitudinal comparison.** The longitudinal comparison is the primary focus of this report, as it compares a single cohort against itself over time. For example, responses for respondents who were 15 in 2012 are compared against their responses in 2013. This allows to see the change occurring within a given age group.
- ▶ **Year-to-year comparison.** This comparison compares to different cohorts over time on the same variable, in this case age. For example, respondents who were 15 in 2012 are compared against the new cohort of 15 year olds in 2013, while those who were 15 in 2012 (and subsequently 16 in this survey) are compared against 16 year olds from 2012. These comparisons allow to determine changes related to respondents current age, taking out potential maturation affects that occur in the longitudinal comparison.

² Pearson's chi-square tests whether the observed frequency distribution differs from a theoretical distribution.

2.0 Advertising awareness

This section reports on respondents' awareness of the *Heads Up?!* campaign.

2.1 Unaided awareness

Unaided, approximately 1 in 3 respondents (31%) mention recently seeing or hearing something that can be specifically tied to the *Heads Up?!* campaign in 2013. This is up from 23% in 2012. Although participating in this study may make respondents more likely to be aware of or look out for this campaign, the results are encouraging.

See Table 9 for a complete breakdown of responses.

Table 9: Unaided awareness		
Q1. Do you remember recently seeing or hearing any advertising about using condoms?		
Q2. What do you remember about the ad? What did it show? What did it talk about?		
	2012 (n = 523)	2013 (n = 387)
Recall seeing/hearing any advertising	73%	66%
Aware of "Heads Up" campaign (net)	23%	31%
"Heads up!"	17%	24%
People holding/getting hit with balls	-	6%
Condom with a smiley face	2%	4%
People holding signs	3%	1%
Free t-shirt	1%	1%
Video about teens in school talking about condoms	1%	1%
Get some condoms	2%	-
Radio: "We're all thinking about sex"	<1%	-
Other information		
Use a condom / reasons to use a condom	33%	26%
Location of ad	28%	15%
Ad for condom company	7%	5%
Condoms (general)	3%	2%
Website to get condoms	<1%	2%
Free condoms	2%	1%
Other ads or information	2%	1%
Outcomes from not using a condom	4%	<1%
Condoms aren't 100% effective	1%	-
Buy condoms	1%	-
Thumbs up	<1%	-
Nothing	2%	5%
Other	3%	4%
Don't know/no response	3%	4%

Note: Respondents could give more than one response; therefore, columns will sum to more than 100%.

2.1.1 Profile of unaided awareness

Examining respondents who, unaided, recalled seeing the *Heads Up?!* campaign shows that there are no statistically significant differences among groups in either 2012 or 2013. However, results in Table 10 show the following:

- ▶ Respondents who were 19 in 2012 (20 in 2013) are much less likely to be aware of the *Heads Up?!* campaign in 2013 compared to other age groups.
- ▶ Female respondents continue to be more likely than male respondents to have seen the *Heads Up?!* campaign.
- ▶ Awareness of the campaign is higher among all cultural groups in 2013, especially those self-identifying as a member of a visible minority (26% in 2013, up from 15% in 2012).
- ▶ In 2013, respondents who were living in Point Douglas (47%), Downtown (41%), or Fort Garry (40%) in 2012 were most likely to recall seeing the campaign. Those living in Seven Oaks (18%) and St. Boniface (20%) were least likely.

Table 10: Profile of unaided awareness		
	2012 (n = 523)	2013 (n = 387)
Overall	23%	31%
Longitudinal age		
15	13%	28%
16	26%	38%
17	26%	33%
18	24%	36%
19	25%	17%
Year-to-year age		
15	13%	17%
16	26%	28%
17	26%	38%
18	24%	33%
19	25%	36%
20	-	17%
Gender		
Male	17%	27%
Female	28%	35%
Cultural background		
Caucasian/European	27%	34%
Aboriginal	25%	28%
Visible minority	15%	26%
Area*		
Assiniboine South	18%	30%
Downtown	33%	41%
Fort Garry	30%	40%
Inkster	21%	35%
Point Douglas	27%	47%
River East	17%	26%
River Heights	26%	26%
Seven Oaks	16%	18%
St. Boniface	17%	20%
St. James	35%	33%
St. Vital	20%	32%
Transcona	14%	27%

* Areas have very small sample sizes; results should be interpreted with caution.

2.1.2 Unaided awareness among new 15-year-old cohort

Among the new cohort of 15-year-olds, 17% recall seeing the *Heads Up?!?* campaign. Although this is lower than the proportion of the initial cohort, compared to 15-year olds in 2012 (13%), awareness of the campaign is slightly higher.

2.2 Aided awareness

When respondents were asked if they *remembered recently seeing or hearing any advertising about using condoms that included the line “Heads Up?” and promoted the website getsomecondoms.com*, about 6 in 10 (62%) in 2013 recalled the campaign. This is up from 52% in 2012. Results again show stronger awareness of the campaign among the initial cohort.

Although there were differences in unaided recall of the *Heads Up?!?* campaign among groups, there is much less difference for aided recall. The only group to have less than 50% of respondents aware of the campaign comprises those who were living in Assiniboine South (35%). Refer to Table 11 for aided awareness by demographic groups.

Table 11: Profile of aided awareness		
	2012 (n = 523)	2013 (n = 387)
Overall	52%	62%
Longitudinal age		
15	60%	69%
16	52%	67%
17	45%	56%
18	54%	62%
19	51%	56%
Year-to-year age		
15	60%	48%
16	52%	69%
17	45%	67%
18	54%	56%
19	51%	62%
20		56%
Gender		
Male	46%	60%
Female	57%	65%
Cultural background		
Caucasian/European	57%	63%
Aboriginal	53%	74%
Visible minority	40%	50%
Area*		
Assiniboine South	49%	35%
Downtown	58%	69%
Fort Garry	59%	73%
Inkster	54%	83%
Point Douglas	40%	78%
River East	44%	56%
River Heights	65%	63%
Seven Oaks	54%	63%
St. Boniface	50%	60%
St. James	57%	56%
St. Vital	58%	62%
Transcona	36%	51%

* Areas have very small sample sizes; results should be interpreted with caution.

2.2.1 Aided awareness among new 15-year-old cohort

Among the new 15-year-old cohort, aided awareness of the campaign is 48%, much lower than the initial cohort this year, although on par with the full cohort in 2012. However, in 2012, 15-year-olds were the most likely of the five age groups to remember seeing the campaign, at 60%. Compared to the 15-year-old cohort in 2013, the overall awareness is down slightly.

2.3 Campaign messaging

As shown in Table 12, respondents who recall seeing *Heads Up?!* advertising predominantly get a message related to condom use. These messages include *use a condom* (57%) or *practice safe sex* (37%). Some are more explicit, saying the ads provide a reason to use a condom, such as to *prevent STIs* (17%) or *prevent pregnancy* (11%).

Even though the campaign changed slightly in 2013, results are very similar, with a slight increase in the overall recall of messaging related to condom use and practicing safe sex. There was also an increase in messaging related to STI prevention, and almost no change in recall of messaging related to preventing pregnancy.

	% among those aware of <i>Heads Up?!</i> ad	
	2012 (n = 271)	2013 (n = 241)
Use a condom	46%	57%
Practice safe sex	24%	37%
Use a condom to prevent STIs	15%	17%
Use a condom to prevent pregnancy	12%	11%
Raise awareness of consequences of unprotected sex	5%	7%
Raise awareness of condoms	3%	4%
Get condoms	2%	4%
Use your head before having sex	-	4%
Free condoms available	2%	3%
Heads up	-	3%
Visit the website	2%	2%
Play on words	-	2%
Use a condom for safety	8%	1%
Think before having sex	2%	1%
Other	6%	4%
Nothing	1%	1%
Don't know/no response	-	4%

Note: Respondents could give more than one response; therefore, column will sum to more than 100%.

2.3.1 Messaging among new 15-year-old cohort

Messaging among the 15-year-old cohort is very similar to this cohort in 2012, with the exception that there is much less recall of messages related to *using a condom to prevent pregnancy* (2%) in this group. Perhaps this is because this group was exposed more to the 2012 campaign, which had a greater focus on STIs than pregnancy.

2.4 Where respondents saw *Heads Up?!* campaign

Table 13 demonstrates that respondents saw the ads in many different venues, most commonly in public transit, either *on bus shelters* (35%) or *in buses* (36%). These results are very similar to 2012. The most notable changes from 2012 to 2013 were a decrease in respondents recalling hearing the ad on the *radio* (22% versus 13%), but an increase in seeing it at a *movie theatre* (4% versus 13%).

Of note is that most respondents who recall the *Heads Up?!* advertising mention seeing the ad from multiple sources, which indicates that there was strong cross-collaboration of media.

Table 13: Where respondents saw or heard the *Heads Up?!* advertising
Q6. Where did you see or hear this advertising?

	% among those aware of <i>Heads Up?!</i> ad	
	2012 (n = 271)	2013 (n = 241)
In buses	35%	36%
Bus shelters	26%	35%
School	31%	32%
Radio	22%	13%
Movie theatre	4%	13%
Television	22%	12%
Billboards or posters	11%	10%
Facebook	8%	8%
Bathrooms	<1%	2%
On hats/toques	-	2%
YouTube	-	2%
Word-of-mouth/t-shirts	4%	1%
Clinic or doctor's office	1%	1%
Other	4%	4%
Don't know/no response	<1%	1%

Note: Respondents could give more than one response; therefore, columns will sum to more than 100%.

2.4.1 Ad recall medium among new 15-year-old cohort

For the new 15-year-old cohort, *schools* (41%), *bus shelters* (28%), *television* (31%), and *buses* (16%) were the most common sources, which is similar to the initial cohort.

3.0 Sexual activity and behaviours

This section summarizes respondents' sexual activity and behaviours when sexually active.

3.1 Sexually active (combined cohorts)

In the 2013 survey, respondents were asked two new questions to determine their age of sexual debut — that is, the age they had their first sexual experience (vaginal, anal, or oral sex). Amongst all respondents (initial respondents and the new 15-year-old cohort), 52% said they are sexually active.

Examining the profile in Table 14 of those who are sexually active shows that as respondents get older, they are more likely to reporting being sexually active. Otherwise, results are similar by gender and cultural background.

Table 14: Profile of sexually active	
<i>Q18A. Have you ever had vaginal, anal, or oral sex?</i>	
	All respondents % (n = 487)
Overall	52%
Current age	
15	25%
16	41%
17	46%
18	59%
19	75%
20	79%
Gender	
Male	55%
Female	50%
Cultural background	
Caucasian/European	56%
Aboriginal	57%
Visible minority	46%
Area*	
Assiniboine South	55%
Downtown	35%
Fort Garry	51%
Inkster	42%
Point Douglas	36%
River East	61%
River Heights	65%
Seven Oaks	48%
St. Boniface	57%
St. James	65%
St. Vital	47%
Transcona	68%
Note: Bolded percentages indicate a statistically significant difference between groups. v* Areas have very small sample sizes; results should be interpreted with caution.	

3.1.1 Sexual debut (combined cohorts)

The average age of sexual debut is around 16 (15.9 years), ranging from 12 years to 20 years of age. Overall, 27% of youth surveyed became sexually active at 15 or 16 years of age, accounting for 52% of those who are sexually active. Among respondents who are sexually active, 73% say they used a condom during their first sexual experience.

Examining the profile of sexual debut and whether respondents used a condom during their first sexual experience shows the following:

- ▶ The average age of sexual debut is similar across demographic groups, with males (15.8 years) debuting slightly earlier than females (16.2). Although differences are small, it is possible that there are differences in sexual debut for vaginal sex, as many respondents' first sexual experience(s) may have been oral sex.
- ▶ Respondents who are currently 15 years of age are much less likely than those 16 and older to say they used a condom during their first sexual experience. In part, this is likely because the older the respondent is, the more likely they would be to have their first sexual experience at an older age (as sexual activity increases with age). It may also be that 15-year-olds may have only had oral sex, which has lower rates of condom use.
- ▶ There is almost no difference by gender and cultural background for using a condom during their first sexual experience.

Table 15: Profile of average age of sexual debut		
<i>Q18A. Have you ever had vaginal, anal, or oral sex?</i>		
<i>Q18B. Approximately, how old were you the first time you had vaginal, anal or oral sex?</i>		
<i>Q18C. Did you use a condom the first time you had vaginal, anal, or oral sex?</i>		
	All sexually active respondents (n = 254)	
	Average age of sexual debut	Used condom for first sexual experience
Overall	15.9 years	73%
Current age		
15	N/A	48%
16	N/A	79%
17	N/A	72%
18	N/A	77%
19	N/A	75%
20	N/A	79%
Gender		
Male	15.8 years	72%
Female	16.2 years	75%
Cultural background		
Caucasian/European	16.0 years	76%
Aboriginal	15.8 years	72%
Visible minority	16.0 years	70%
Note: The average age of sexual debut is not shown by age group, as these results would be highly affected by the current age of respondents.		

3.2 Sexually active in past three months

In the current year, about half (48%) of the initial cohort was sexually active in the three months prior to taking their survey, up from about 4 in 10 (43%) last year. This is not surprising given that respondents are a year older.

Awareness of the campaign among those who are (63%) or are not (67%) sexually active is virtually the same.

Table 16: Sexually active in past three months
Q18. In the past 3 months, have you had any of the following types of sex?

	2012 (n = 523)	2013 (n = 387)
Sexually active (net)	43%	48%
- Vaginal	34%	42%
- Oral	35%	39%
- Anal	4%	5%
None	57%	52%
Don't know/no response	1%	<1%

Note: Responses may not sum to 100% due to rounding.

Results in Table 17 show the following:

- ▶ The older a respondent is, the more likely they are to have been sexually active in the past three months.
- ▶ Visible minority respondents (34%) continue to have been less sexually active in the past three months than Aboriginal (56%) or Caucasian (55%) respondents.

Table 17: Profile of those sexually active		
	2012 (n = 523)	2013 (n = 387)
Overall	43%	48%
Longitudinal age		
15	20%	33%
16	21%	38%
17	45%	51%
18	59%	62%
19	65%	59%
Year-to-year age		
15	20%	19%
16	21%	33%
17	45%	38%
18	59%	51%
19	65%	62%
20	-	59%
Gender		
Male	49%	51%
Female	37%	46%
Cultural background		
Caucasian/European	46%	55%
Aboriginal	57%	56%
Visible minority	30%	34%
Area*		
Assiniboine South	35%	51%
Downtown	37%	37%
Fort Garry	28%	50%
Inkster	35%	29%
Point Douglas	47%	38%
River East	57%	49%
River Heights	55%	58%
Seven Oaks	33%	40%
St. Boniface	48%	55%
St. James	49%	64%
St. Vital	42%	47%
Transcona	43%	72%
Note: Bolded percentages indicate a statistically significant difference between groups. * Areas have very small sample sizes; results should be interpreted with caution.		

3.2.1 Results for new 15-year-old cohort

Amongst the new 15-year old cohort, 19% report having vaginal, anal, or oral sex in the past three months, which is virtually unchanged from the 15-year-old group in 2012 (20%).

3.3 Condom use during last sexual activity

As Table 18 shows, condom use among the initial cohort in 2013 is lower for each type of sexual activity. This type of activity is not unexpected, as condom use typically decreases with age due to a number of factors (e.g., increased likelihood of having a long-term sexual partner, increased use of other forms of birth control, etc.).

Table 18: Condom use during last sexual activity			
Q19. Did you use a condom the last time you had vaginal sex?			
Q20. Did you use a condom the last time you had anal sex?			
Q21. Did you use a condom the last time you had oral sex?			
	Used condom last time you had...		
	Anal sex*	Vaginal sex	Oral sex
2012	76%	71%	12%
2013	68%	65%	8%
* Caution; sample size is very small. Interpret with caution. Sample size for anal sex: 2012 (n = 20), 2013 (n = 18) Sample size for vaginal sex: 2012 (n = 178), 2013 (n = 163) Sample size for oral sex: 2012 (n = 184), 2013 (n = 149)			

Results show very little difference for use of a condom for oral sex, but the following differences for vaginal sex:³

- ▶ Those who saw the *Heads Up?!* campaign in 2012 are less likely than those who did not see the campaign last year to report using a condom for vaginal or oral sex in the current survey.
- ▶ Male respondents continue to be more likely to report using a condom for vaginal sex than female respondents. The difference in 2013 was 77% versus 52%.
- ▶ As respondents get older, they are typically less likely to report using condoms for vaginal sex. This pattern was also evident in 2012.
- ▶ Respondents who self-identify as being a member of visible minority are most likely to report using a condom for vaginal sex, whereas Aboriginal respondents are least likely. This is a marked shift from 2012, when Aboriginal respondents were most likely to report wearing a condom.

³ Because less than 25 respondents reported having anal sex in the last three months, tests of statistical differences between groups are not warranted or practical.

Table 19: Profile of condom use during last sexual activity				
	Used condom for vaginal sex		Used condom for oral sex	
	2012 (n = 178)	2013 (n = 163)	2012 (n = 184)	2013 (n = 149)
Overall	71%	65%	12%	8%
Saw Heads Up?! campaign in 2012				
Yes	69%	59%	12%	7%
No	72%	73%	12%	11%
Saw Heads Up?! campaign in 2013				
Yes	-	61%	-	8%
No	-	73%	-	9%
Longitudinal age				
15	100%	83%	7%	4%
16	82%	74%	16%	11%
17	71%	69%	17%	7%
18	70%	54%	10%	6%
19	62%	61%	10%	12%
Year-to-year age				
15	100%	57%	7%	12%
16	82%	83%	16%	4%
17	71%	74%	17%	11%
18	70%	69%	10%	7%
19	62%	54%	10%	6%
20	-	61%	-	12%
Gender				
Male	77%	77%	10%	8%
Female	64%	52%	14%	8%
Cultural background				
Caucasian/European	72%	68%	12%	9%
Aboriginal	83%	49%	10%	8%
Visible minority	61%	82%	12%	4%

3.3.1 Results for new 15-year-old cohort

Among the new 15-year-old cohort, 57% of those who had vaginal sex in the past three months used a condom during their last sexual experience. This is down from 100% in 2012. Although this is a very large drop, it should be noted that only fifteen 15-year olds in the current year had vaginal sex in the past three months.

3.3.2 Experiences using a condom during last sexual encounter (combined cohorts)

Respondents who said they used a condom the last time they had vaginal or anal sex were asked if they experienced any problems using the condom. For vaginal sex, slightly less than 1 in 5 did not use a condom properly or experienced problems. Most often, they *started having sex before putting a condom on* (11%). Another 5% said the *condom broke*, while 3% said they *took the condom off and continued having sex* or *the condom slipped off during sex*.

For anal sex, just 1 respondent out of 12 who used a condom encountered a problem, which was that they *started having sex before putting a condom on*. See Table 20.

Table 20: Problems using condom during last sexual encounter		
Q19B. Thinking about the last time you had vaginal sex, did any of the following happen?		
Q20B. Thinking about the last time you had anal sex, did any of the following happen?		
	Used condom last time you had...	
	Vaginal sex (n = 114)	Anal sex* (n = 12)
Put on condom after starting	11%	10%
Condom broke	5%	-
Took condom off and continued having sex	3%	-
Condom slipped off	3%	-
No problems	84%	90%

* Caution; sample size is very small. Interpret with caution.
Note: Respondents could choose more than one option; therefore, columns may sum to more than 100%.

3.3.3 Reasons for not using a condom (combined cohorts)

Among those who did not use a condom the last time they had vaginal, anal, or oral sex, results in Table 21 show the following:

- ▶ For vaginal sex, the main reasons tend to be reasons they believe they or their partner would not get pregnant, including *using other forms of birth control* (31%) or *safe time of menstrual cycle* (2%). This is interesting given that respondents tend to rate STI prevention as more important than preventing pregnancy, yet reasons for not wearing condoms tend to relate to forms of pregnancy prevention. Another 19% say they did not use one because *they did not have one*, perhaps indicating that they would have if they had one available (although this did not stop them from having sex). Another common theme is being with a *long-term partner* (25%) or a *trusted partner* (6%), perhaps indicating that they have less concern about contracting an STI or getting pregnant.
- ▶ For oral sex, the main reasons tend to be related to not believing that condoms are necessary for oral sex, based on comments such as saying one is *not necessary* (17%) or it is *unnatural to use* (4%). Also, the theme of having a *long-term* (17%) or *trusted* (5%) partner comes through.
- ▶ The sample for anal sex is much too small to analyze, with just six respondents.

It is important to note that for vaginal and oral sex, about 1 in 5 who did not use a condom could not provide a response, indicating that they did not put any thought into why they did not use a condom at the time, and were not able to indicate why they did not use one retrospectively.

Table 21: Reasons for not using condom during last sexual encounter			
Q19A. Why did you not use a condom the last time you had vaginal sex?			
Q20A. Why did you not use a condom the last time you had anal sex?			
Q21A. Why did you not use a condom the last time you had oral sex?			
	Did not use condom last time you had...		
	Vaginal sex (n = 64)	Anal sex* (n = 6)	Oral sex (n = 151)
Use other forms of birth control	31%	23%	4%
With long-term partner/spouse	25%	35%	17%
Did not have one	19%	21%	8%
Did not think about it	6%	18%	6%
Partner has been tested	6%	-	10%
Trust partner	6%	-	5%
Decreases pleasure	4%	-	8%
Allergic to latex	3%	-	1%
Safe time of menstrual cycle	2%	-	-
Condoms too expensive	1%	-	-
Did not want to	1%	-	10%
Not necessary	-	-	17%
Not natural to use	-	-	4%
No risks involved	-	-	3%
Other	2%	-	2%
Don't know / no response	21%	26%	20%

* Caution; sample size is very small. Interpret with caution.
Note: Respondents could choose more than one option; therefore, columns may sum to more than 100%.

3.4 Discussed condoms during last sexual encounter

Thinking about the last time they had sex, about two in three respondents say they *talked about using or having condoms with their partner*. This is virtually unchanged from 2012, which is interesting because condom use was down for all sexual activities.

Results show very little difference among various groups, with the exception that those who used a condom were more likely to report having talked about condoms with their partner than those who did not use one. It is interesting that almost half of those who did not use one talked about using one.

Also, it should be noted that those who did not see the *Heads Up?! campaign* in 2012 were more likely to report that they talked with their partner about using or having condoms in the current survey than those who had seen the campaign last year.

Table 22: Talked about condoms last time respondents had sex		
Q23. Now thinking about the last time you had sex, did you and your partner talk about using or having condoms?		
	Sexually active	
	2012 (n = 223)	2013 (n = 230)
Overall	67%	65%
Saw Heads Up?! campaign in 2012		
Yes	67%	60%
No	67%	72%
Saw Heads Up?! campaign in 2013		
Yes	-	61%
No	-	71%
Longitudinal age		
15	67%	67%
16	50%	63%
17	66%	66%
18	73%	66%
19	67%	64%
Year-to-year age		
15	67%	57%
16	50%	67%
17	66%	63%
18	73%	66%
19	67%	66%
20	-	64%
Gender		
Male	63%	66%
Female	71%	65%
Cultural background		
Caucasian/European	67%	62%
Aboriginal	80%	73%
Visible minority	50%	69%
Used condom during vaginal sex		
Yes	77%	80%
No	49%	46%

Note: Bolded percentages indicate a statistically significant difference between groups.

3.4.1 Results for new 15-year-old cohort

Among the new 15-year-old cohort, 57% said they *talked about condoms with their partner before their last sexual experience*, which is slightly lower than the 15-year-old cohort in 2012 (67%). However, when compared to the fact that the new cohort was much less likely to use a condom the last time they had vaginal sex, this result is noteworthy given that it still appears to be on their radar, but not translating into use as much.

3.5 Most recent sexual partner

For the vast majority of respondents, their last sexual partner was a significant other, either a boyfriend/girlfriend (68%) or spouse (4%). Although respondents are a year older, and it might be expected that they are entering into more long-term relationships, the distribution of sexual partners is virtually unchanged from 2012.

Table 23: Most recent sexual partner
 Q25. Now thinking about the last time you had sex, was it with...

	% among those who are sexually active	
	2012 (n = 223)	2013 (n = 230)
Your boyfriend or girlfriend	68%	68%
A friend you've known for a long time	17%	18%
A person you met recently	8%	7%
Your spouse	1%	4%
A person you had just met	5%	3%
Don't know/no response	1%	2%

Just as in 2012, the youngest respondents (those who were 15 in 2012 and 16 in the current year) and male respondents continue to have the most risky sexual behaviours, with these respondents reporting the highest frequency of their last sexual partner being someone they just met or met recently. Compared to 2012, almost all groups in 2013 were less likely to say their most recent sexual partner was someone they just met or met recently, with the exception of those who were 15 in 2012 (up from 26% in 2012 to 30% in 2013).

Table 24: Profile of last sexual partner		
	% person just met or met recently	
	2012 (n = 223)	2013 (n = 230)
Overall	13%	9%
Saw Heads Up?! campaign in 2012		
Yes	10%	10%
No	19%	8%
Saw Heads Up?! campaign in 2013		
Yes	-	8%
No	-	10%
Longitudinal age		
15	26%	30%
16	10%	8%
17	14%	10%
18	8%	1%
19	16%	8%
Year-to-year age		
15	26%	14%
16	10%	30%
17	14%	8%
18	8%	10%
19	16%	1%
20	-	8%
Gender		
Male	19%	15%
Female	7%	3%
Cultural background		
Caucasian/European	13%	11%
Aboriginal	11%	4%
Visible minority	15%	8%
Note: Bolded percentages indicate a statistically significant difference between groups.		

3.5.1 Results for new 15-year-old cohort

Among the new 15-year-old cohort, 14% of respondents said their last sexual partner was someone they just met or met recently. This is down from 26% among 15-year-olds in 2012, but again, the sample size for both groups is very small.

3.6 Other forms of birth control used (combined cohorts)

Among those who are sexually active, about 6 in 10 use at least some type of birth control other than condoms, predominantly *birth control pills* (50%). However, about 1 in 3 admit to not using any other methods of birth control.

Table 25: Other types of birth control used	
<i>Q23A. Other than condoms, what other types of birth control do you/your partner use?</i>	
	% among those who are sexually active (n = 254)
Birth control pills	50%
Depo	3%
Patch	2%
Nuvaring	1%
IUD	1%
Birth control needle	1%
Pull out	1%
Other	1%
None	32%
Don't know/no response	10%

4.0 Attitudes towards sex and condom use

Participants were asked their level of agreement with ten statements about condoms. The following sections examine respondents' agreement with each statement. It should be noted that all questions reported in this section were asked on an anchored scale, where 1 was strongly disagree and 5 was strongly agree. Labels for ratings of 2, 3, and 4 have been used for descriptive purposes only.

4.1 Reasons for using condoms

Just as in 2012, respondents in 2013 are more likely to strongly agree that the most important reason to wear condoms is to *reduce the risk of getting an STI* (60% strongly agree) or *HIV/AIDS* (56%) than to *prevent pregnancy* (38%). When comparing results between 2012 and 2013, results show that respondents are less likely to strongly agree with each statement, indicating that wearing condoms for these reasons may be seen as less important. It also likely correlates with their behaviours, as fewer wore condoms during their last sexual experiences than in 2012, indicating that they may see condom use as being less important as a whole. See Figure 1.

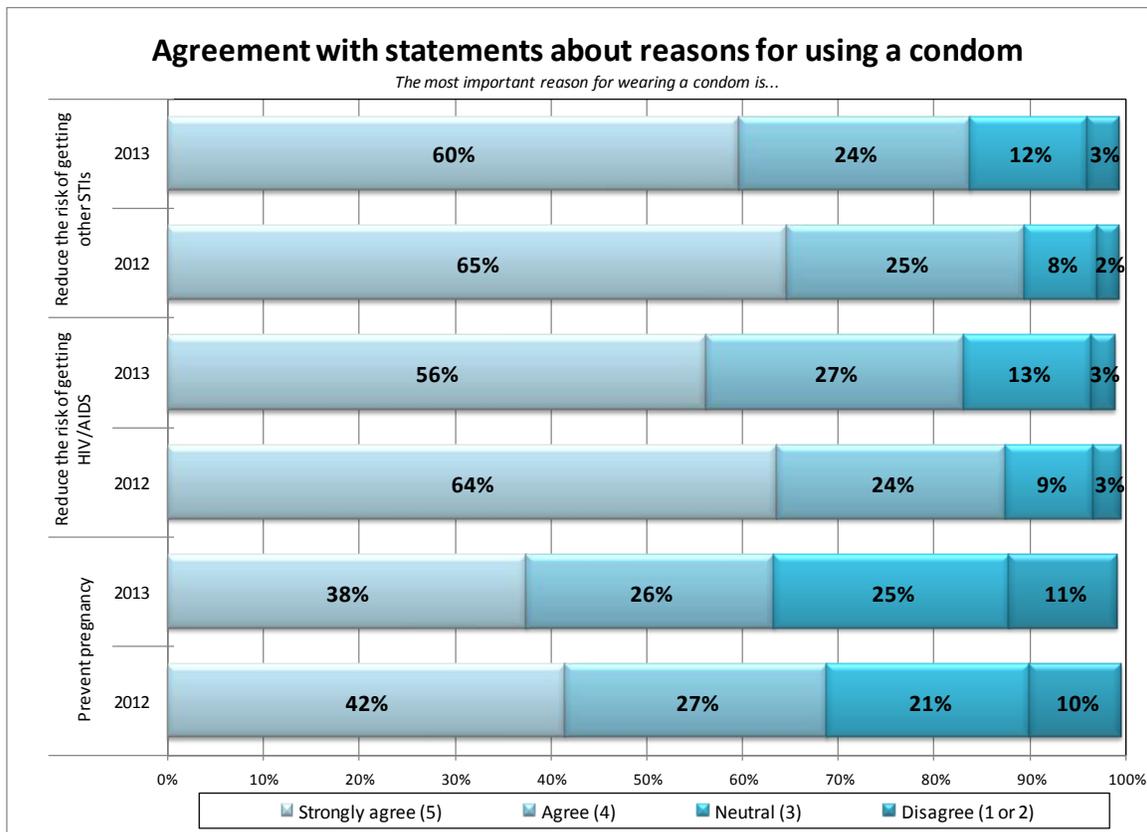


Figure 1⁴

⁴ Those who did not provide a response to this question are included in the calculations, but are not shown in Figure 1.

Examining those who strongly agree with each statement shows very little difference among demographic groups in 2013. The only consistent difference appears to be that visible minority respondents tend to be more likely to strongly agree with each statement than other ethnic groups.

Table 26: Profile of those who strongly agree with statements about reasons for using a condom						
	% who strongly agree					
	The most important reason for wearing a condom is...					
	Reduce risk of other STIs		Reduce risk of AIDS or HIV		Prevent pregnancy	
	2012	2013	2012	2013	2012	2013
Overall	65%	60%	64%	56%	42%	38%
Saw Heads Up?! campaign in 2012						
Yes	62%	57%	61%	51%	38%	34%
No	68%	64%	67%	63%	46%	43%
Saw Heads Up?! campaign in 2013						
Yes	-	58%	-	55%	-	34%
No	-	65%	-	61%	-	45%
Longitudinal age						
15	63%	57%	63%	56%	36%	34%
16	60%	57%	60%	58%	37%	39%
17	73%	61%	72%	55%	54%	45%
18	62%	59%	61%	54%	38%	33%
19	64%	65%	62%	58%	40%	36%
Year-to-year age						
15	63%	62%	63%	61%	36%	55%
16	60%	57%	60%	56%	37%	34%
17	73%	57%	72%	58%	54%	39%
18	62%	61%	61%	55%	38%	45%
19	64%	59%	62%	54%	40%	33%
20	-	65%	-	58%	-	36%
Gender						
Male	61%	55%	60%	54%	38%	39%
Female	68%	65%	67%	59%	44%	36%
Cultural background						
Caucasian/European	64%	55%	62%	50%	39%	33%
Aboriginal	59%	60%	63%	57%	46%	38%
Visible minority	70%	70%	67%	69%	46%	49%
Sexually active						
Yes	66%	58%	64%	53%	39%	34%
No	64%	60%	63%	56%	44%	39%
Area*						
Assiniboine South	56%	35%	53%	37%	29%	30%
Downtown	67%	73%	63%	63%	49%	38%
Fort Garry	60%	54%	59%	54%	45%	49%
Inkster	76%	67%	76%	67%	52%	45%
Point Douglas	70%	82%	77%	80%	43%	52%
River East	67%	57%	67%	52%	43%	40%
River Heights	74%	60%	65%	54%	36%	25%
Seven Oaks	70%	78%	63%	71%	49%	57%
St. Boniface	59%	35%	59%	41%	35%	20%
St. James	60%	47%	60%	42%	38%	30%
St. Vital	53%	63%	56%	60%	31%	26%
Transcona	71%	58%	75%	52%	46%	24%

* Areas have very small sample sizes; results should be interpreted with caution.

4.1.1 Results for new 15-year-old cohort

Among the new 15-year-old cohort, respondents rate the importance of wearing condoms to *reduce risk of getting an STI* (62% strongly agree), *reduce risk of getting AIDS/HIV* (61%), or to *prevent pregnancy* (55%) fairly equally. Results for the first two are on par with 15-year-olds in 2012, but the new cohort is much more likely to strongly agree that it is important to use condoms to *prevent pregnancy* (55% versus 36% amongst 2012 cohort of 15-year-olds).

4.2 Condoms' effect on sexual pleasure

Just as in 2012, respondents are split in whether they agree or disagree that *condoms decrease the pleasure they or their partner feels during sex*. About as many agree as disagree with this statement, indicating that there is a significant proportion who believe that condoms affect sexual pleasure. See Figure 2.

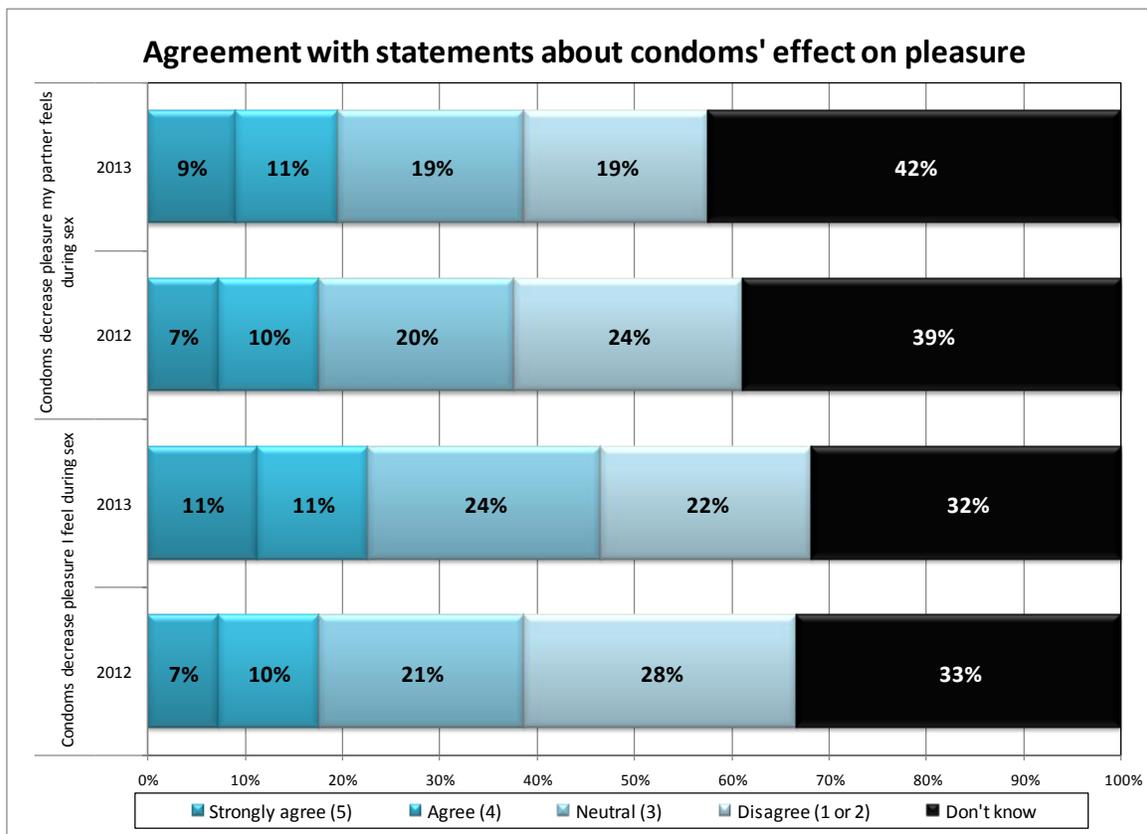


Figure 2

Examining the proportion of respondents who strongly agree that condoms decrease the pleasure they or their partner feels shows the following:

- ▶ Older respondents are generally more likely to agree with both statements, although it is not a consistent increase for each age group. The most noticeable difference is for strongly agreeing that *condoms decrease the pleasure I feel during sex*, with those who were 19-years-old (20%) in 2012 being about twice as likely to strongly agree as those in other age groups.
- ▶ Male respondents are more likely than female respondents to agree with both statements, which indicates that men overestimate how their female partners feel about condom use and pleasure, while female respondents underestimate their partners' lack of pleasure.
- ▶ The difference in the proportion of respondents who strongly agree with either statement is because those who are not sexually active are much less likely to be able to answer these questions.

Table 27: Profile of those who strongly agree with statements about condoms decreasing pleasure				
	% who strongly agree condoms decrease pleasure...			
	I feel during sex		My partner feels during sex	
	2012	2013	2012	2013
Overall	7%	11%	7%	9%
Saw Heads Up?! campaign in 2012				
Yes	6%	10%	6%	9%
No	9%	13%	9%	9%
Saw Heads Up?! campaign in 2013				
Yes	-	9%	-	8%
No	-	15%	-	11%
Longitudinal age				
15	5%	8%	6%	5%
16	6%	10%	4%	7%
17	10%	9%	10%	12%
18	6%	11%	5%	11%
19	12%	20%	12%	11%
Year-to-year age				
15	5%	4%	6%	4%
16	6%	8%	4%	5%
17	10%	10%	10%	7%
18	6%	9%	5%	12%
19	12%	11%	12%	11%
20	-	20%	-	11%
Gender				
Male	11%	17%	8%	10%
Female	4%	5%	7%	7%
Cultural background				
Caucasian/European	6%	11%	5%	10%
Aboriginal	7%	15%	6%	8%
Visible minority	9%	11%	12%	10%
Sexually active				
Yes	12%	16%	11%	13%
No	4%	6%	5%	8%
Area*				
Assiniboine South	6%	0%	9%	3%
Downtown	9%	16%	5%	16%
Fort Garry	4%	6%	8%	9%
Inkster	7%	14%	7%	6%
Point Douglas	10%	17%	10%	5%
River East	10%	12%	9%	14%
River Heights	10%	20%	3%	9%
Seven Oaks	9%	9%	14%	11%
St. Boniface	7%	6%	6%	6%
St. James	8%	18%	8%	14%
St. Vital	2%	6%	4%	0%
Transcona	5%	16%	5%	9%
Note: Bolded percentages indicate a statistically significant difference between groups.				
* Areas have very small sample sizes; results should be interpreted with caution.				

4.2.1 Results for new 15-year-old cohort

In 2013, 4% of the new 15-year-old cohort strongly agrees with each of these statements. The reason the proportion is so small is that the vast majority of respondents for each question are not able to provide a response to these questions. The results are on par with 15-year-olds in the initial cohort.

4.3 Condoms and sexual partners

The results in Figure 3 show the following:

- ▶ In 2013, about 9 in 10 strongly agree *it is okay talk with their partner about condoms*. This result is similar to 2012.
- ▶ More than 3 in 4 respondents strongly agree that *it is okay to refuse to have sex if my partner does not want to use a condom*, which is almost unchanged from 2012.

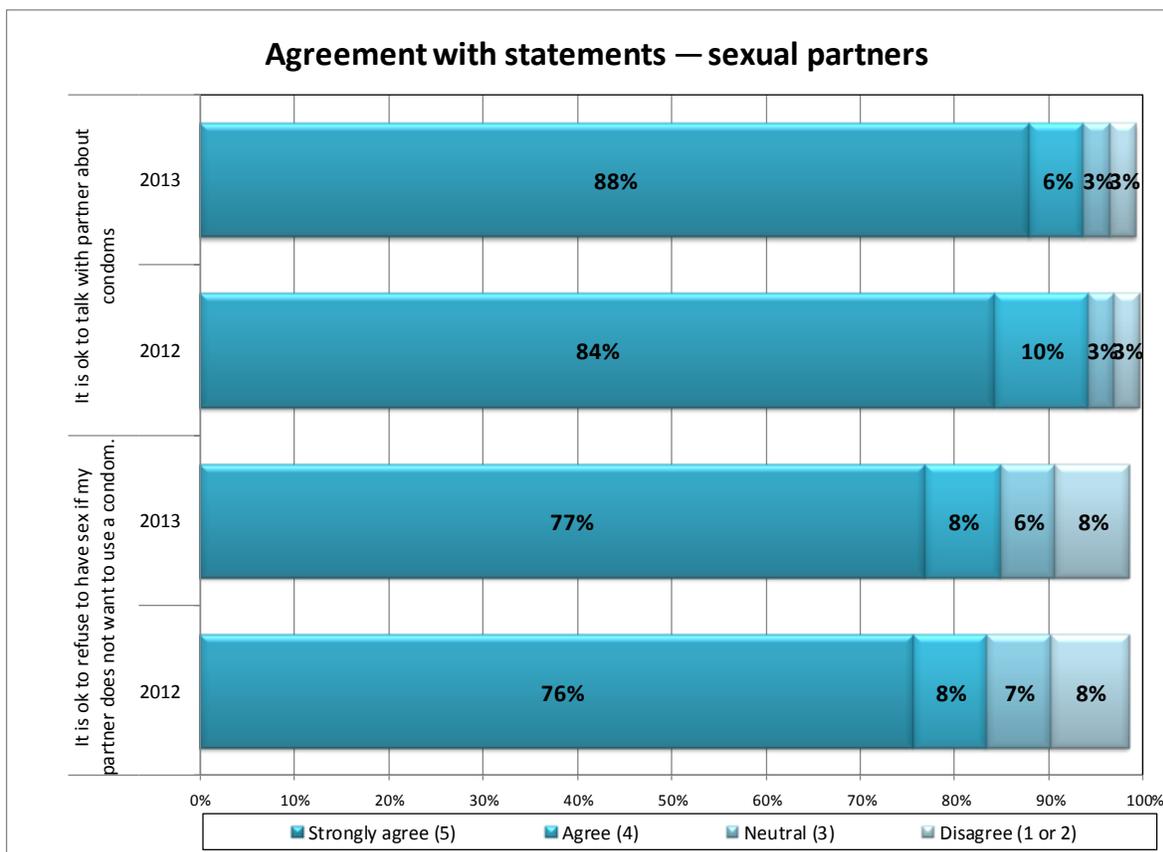


Figure 3⁵

⁵ Those who did not provide a response to this question are included in the calculations but are not shown in Figure 3.

Results in Table 28 show that visible minority respondents are less likely than their counterparts to strongly agree with either statement, indicating that they are less likely to *talk with their partners about condoms* or *refuse to have sex if their partner refuses to use a condom*.

Table 28: Profile of those who strongly agree with statements about sexual partners				
	% who strongly agree it is okay to...			
	Talk with partner about condoms		Refuse to have sex	
	2012	2013	2012	2013
Overall	84%	88%	76%	77%
Saw Heads Up?! campaign in 2012				
Yes	89%	92%	82%	81%
No	79%	83%	70%	71%
Saw Heads Up?! campaign in 2013				
Yes	-	91%	-	82%
No	-	84%	-	69%
Longitudinal age				
15	81%	88%	68%	76%
16	75%	87%	77%	79%
17	84%	84%	78%	75%
18	90%	86%	77%	72%
19	89%	97%	76%	85%
Year-to-year age				
15	81%	78%	68%	71%
16	75%	88%	77%	76%
17	84%	87%	78%	79%
18	90%	84%	77%	75%
19	89%	86%	76%	72%
20	-	97%	-	85%
Gender				
Male	77%	84%	64%	72%
Female	90%	92%	86%	82%
Cultural background				
Caucasian/European	88%	92%	79%	81%
Aboriginal	86%	91%	72%	78%
Visible minority	76%	77%	71%	65%
Sexually active				
Yes	92%	95%	74%	78%
No	79%	90%	77%	81%
Area*				
Assiniboine South	79%	97%	74%	74%
Downtown	88%	85%	77%	68%
Fort Garry	91%	92%	83%	86%
Inkster	79%	83%	76%	88%
Point Douglas	83%	83%	83%	75%
River East	81%	89%	70%	79%
River Heights	87%	90%	74%	72%
Seven Oaks	84%	81%	72%	72%
St. Boniface	91%	94%	74%	81%
St. James	81%	90%	78%	82%
St. Vital	78%	83%	78%	68%
Transcona	86%	91%	68%	82%
Note: Bolded percentages indicate a statistically significant difference between groups.				
* Areas have very small sample sizes; results should be interpreted with caution.				

4.3.1 Results for new 15-year-old cohort

In 2013, 78% of the new 15-year-old cohort strongly agrees that *it is okay talk with their partner about condoms* and 71% strongly agree that *it is okay to refuse to have sex if my partner does not want to use a condom*. These results are very similar to those of 15-year-olds in the initial cohort in 2012.

4.4 Access to condoms

Results in Figure 4 show the following:

- ▶ About 7 in 10 strongly agree that *it is okay to carry condoms with you*, which is up from less than 6 in 10 in 2012.
- ▶ About 6 in 10 strongly agree that *it is easy to get condoms when they need them* in 2013, which is similar to responses in 2012.

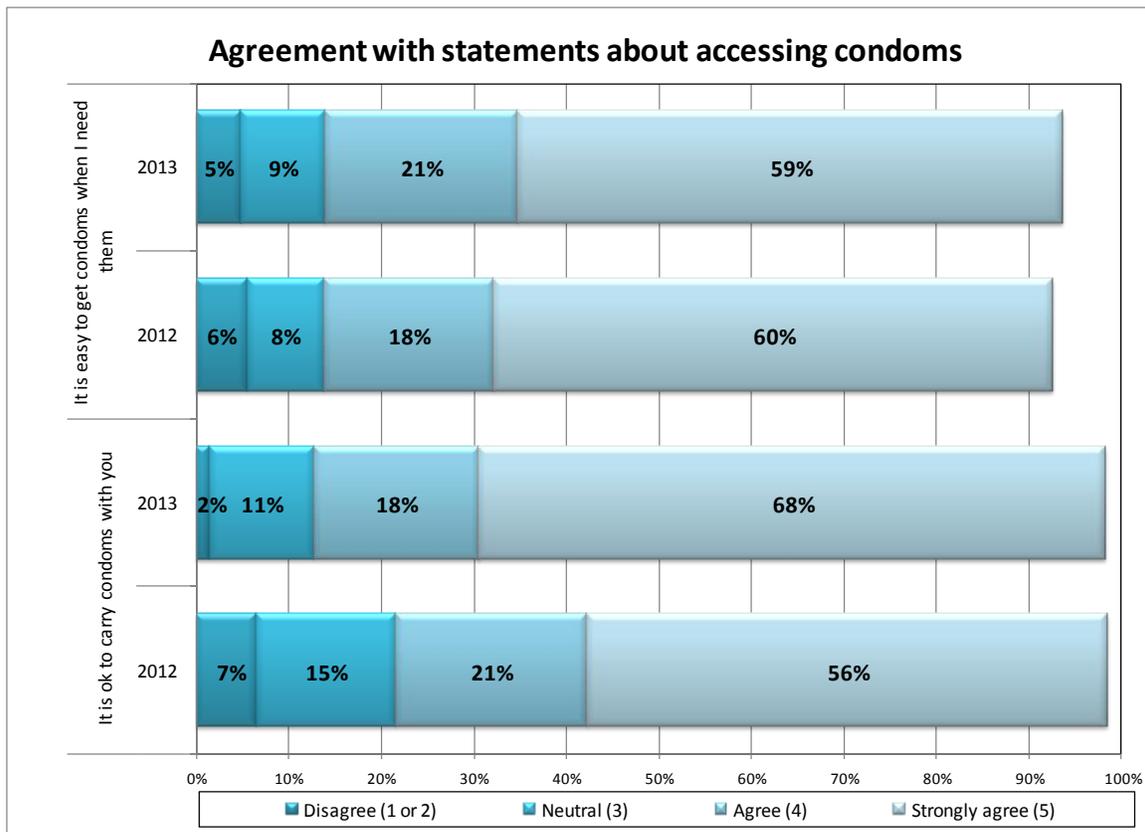


Figure 4⁶

⁶ Those who did not provide a response to this question are included in the calculations, but are not shown in Figure 3.

Table 29 shows several statistical and practical differences between groups and their agreement with statements about accessing condoms.

- ▶ As respondents get older, they are generally more likely to strongly agree with both statements.
- ▶ Females are slightly more likely than males to strongly agree with both statements.
- ▶ Visible minority respondents are less likely than their counterparts to agree with either statement. This continues a trend of visible minority respondents having less positive attitudes and behaviours related to condoms.

Table 29: Profile of those who strongly agree with statements about accessing condoms				
	% who strongly agree			
	Easy to get condoms when needed		Okay to carry condoms with them	
	2012	2013	2012	2013
Overall	60%	59%	56%	68%
Saw Heads Up?! campaign in 2012				
Yes	65%	62%	62%	71%
No	56%	54%	51%	64%
Saw Heads Up?! campaign in 2013				
Yes	-	61%	-	72%
No	-	55%	-	63%
Longitudinal age				
15	52%	58%	49%	61%
16	54%	48%	55%	65%
17	58%	54%	50%	63%
18	65%	65%	57%	74%
19	73%	73%	70%	76%
Year-to-year age				
15	52%	53%	49%	44%
16	54%	58%	55%	61%
17	58%	48%	50%	65%
18	65%	54%	57%	63%
19	73%	65%	70%	74%
20	-	73%	-	76%
Gender				
Male	57%	54%	53%	63%
Female	64%	64%	59%	72%
Cultural background				
Caucasian/European	66%	63%	57%	73%
Aboriginal	71%	64%	70%	68%
Visible minority	43%	45%	46%	57%
Sexually active				
Yes	71%	73%	71%	81%
No	53%	68%	46%	77%
Area*				
Assiniboine South	59%	55%	47%	63%
Downtown	63%	55%	51%	69%
Fort Garry	79%	61%	59%	63%
Inkster	38%	58%	62%	70%
Point Douglas	63%	58%	57%	60%
River East	47%	58%	50%	72%
River Heights	74%	57%	65%	65%
Seven Oaks	58%	58%	47%	59%
St. Boniface	46%	49%	61%	64%
St. James	70%	66%	76%	75%
St. Vital	67%	63%	58%	71%
Transcona	57%	72%	55%	78%

Note: Bolded percentages indicate a statistically significant difference between groups.
* Areas have very small sample sizes; results should be interpreted with caution.

4.4.1 Results for new 15-year-old cohort

For the two questions asked in 2012, results from the new 15-year-old cohort in 2013 are very similar to the previous year 15-year-old cohort. About 53% strongly agree that it is *okay to carry condoms with you* (52% in 2012), and 44% strongly agree that *it is easy to get condoms when they need them* (49% in 2012).

4.5 Knowing how to put on a condom

In 2013, respondents were asked for the first time their agreement with the statement *I know how to put on a condom properly*. Overall, almost 8 in 10 agree, including 65% who strongly agree. However, there are 9% who disagree, indicating they do not know. Also, almost 1 in 10 could not provide a response to this question, most of whom were those who were not sexually active. These respondents may not have provided an answer because they have not had the chance to use a condom, and may not have felt they could answer it without putting any knowledge they have into practice.

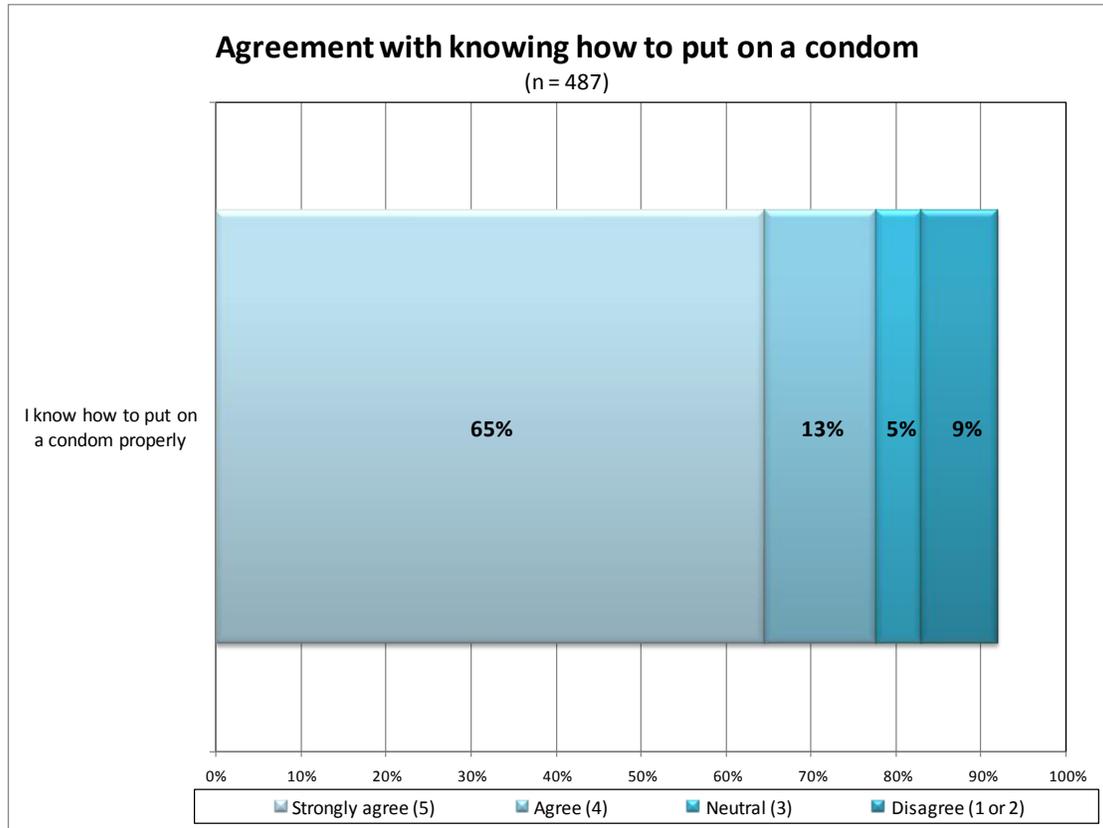


Figure 5⁷

Examining the proportion of those who strongly agree that they *know how to put on a condom properly*, shows the following differences:

- ▶ Male respondents (71%) are much more likely than female respondents (57%) to strongly agree, which is expected, given that men would be the ones wearing the condom.
- ▶ Those who are sexually active (83%) in the past three months are much more likely than those who are not (51%) to know how to put one on.
- ▶ Increased sexual activity likely explains why, as age increases, respondents are more likely to strongly agree with this statement.

⁷ Those who did not provide a response to this question are included in the calculations, but are not shown in Figure 3.

Table 30: Profile of those who strongly agree with statements about putting on a condom	
	% who strongly agree
	Know how to put on a condom properly
Overall	65%
Saw Heads Up?! campaign in 2013	
Yes	67%
No	63%
Age in 2013	
15	55%
16	59%
17	58%
18	71%
19	70%
20	82%
Gender	
Male	71%
Female	57%
Cultural background	
Caucasian/European	67%
Aboriginal	73%
Visible minority	53%
Sexually active	
Yes	83%
No	51%
Area	
Assiniboine South	58%
Downtown	55%
Fort Garry	69%
Inkster	59%
Point Douglas	71%
River East	70%
River Heights	66%
Seven Oaks	61%
St. Boniface	57%
St. James	72%
St. Vital	64%
Transcona	70%
Note: Bolded percentages indicate a statistically significant difference between groups. * Areas have very small sample sizes; results should be interpreted with caution.	

5.0 Conclusions

Below, we summarize the key findings from this research:

- ▶ Aided and unaided awareness of the *Heads Up?!* campaign is higher in 2013 than in 2012. The unaided awareness increase is positive, given the amount of advertising related to condoms and sexual behaviours. Among the 15-year-old cohort, overall aided awareness is down compared to 15-year-olds in previous year, but unaided awareness is higher. This may indicate that the campaign was not as successful reaching this group, but the 2012 iteration stood out much more amongst ads relating to condoms and sexual behaviours.
- ▶ Messaging from the campaign continues to be very clear, with a shift away from recall of messaging related to pregnancy and more emphasis on messaging related to STIs.
- ▶ Although awareness is higher and messaging is clear, most results show that being aware of the campaign (either in the 2012 or the current year survey) does not indicate a strong correlation with positive changes in behaviour. For instance, among the initial cohort, those who saw the ad report lowering incidences of condom use for vaginal sex than those who did not see the campaign (59% versus 73%). With that being said, those who saw the campaign in the previous year continue to hold more positive attitudes toward condoms, although that has not necessarily translated into increased use.
- ▶ The main barriers for condom use appear to be the use of other forms of birth control (predominantly birth control pills) or simply not having one. The former issue points to a hypocrisy in respondents' attitudes and behaviours. Respondents tend to say that condoms are more important for preventing the transmission of STIs, but they use them more as a form of birth control than STI prevention. Indeed, when other forms of birth control are in play or participants believe their partner does not have an STI, condom use appears to decrease.
- ▶ Visible minority respondents appear to be a group that requires attention. Although their condom use is higher than other minority groups, their attitudes toward condoms are much less positive. They are less likely to talk to their partners about condoms, carry condoms, or know how to use condoms properly.

Appendix A – Questionnaire

INT

Hello may I please speak with <PARTICIPANT’S NAME>?

Respondent on phone..... 1 => INTR1
Respondent not available - SET CALLBACK 2 => INT01
Respondent no longer lives there..... 3 => INTR4

INTR4:

INTR4. <FNAME > is part of a study which is being conducted by the Winnipeg Regional Health Authority, and involves a series of surveys where people are paid for participating. Do you have a new phone number where we can reach <fname > to complete the survey?

Yes..... 1
No - CODE AS NO LONGER AT PHONE NUMBER..... 0 => /INT01

NPHON:

RECORD NEW PHONE NUMBER (INCLUDE AREA CODE, e.g. 2049999999)

INTR5:

INTR5. Thank you for your assistance today.

Back to Intro / try new number..... 1 => INT

INTR1.

My name is <INTERVIEWER NAME> and I am calling back from Prairie Research Associates about a survey you participated in for the Winnipeg Regional Health Authority in <DATE>. You may have recently received a letter about the survey. We are conducting the second follow-up survey, for which you will receive another \$10 gift card from one of Boston Pizza, Tim Hortons, iTunes, or Futureshop for participating.

Is now a convenient time for you to complete the follow-up survey?

Yes..... 1 => Q1
No 0 => SET CALLBACK
Refusal..... 9 => INT01
Wants to do online..... 2 => INTR2

[PROMPT: The survey will take about 5 minutes and will ask questions about advertising, sexual behaviors, and perceptions of sex.]

TINTR2:

Because of the sensitive nature of the questions, we are giving participants the option of completing the survey online. Would you prefer to complete it by phone or online? (In order to complete the survey online you must have a valid email address)

RECORD EMAIL:

Refusal..... 9 => INT01

Q1:

Q1. Do you remember recently seeing or hearing any advertising about using condoms?

Yes..... 1
No 0 => Q3
Don't know 8 => Q3
No response 9 => Q3

Q2:

Q2. What do you remember about the ad? What did it show?

Other (specify)..... 66 O
Nothing 00 X
Don't know 88 X
No response 99 X

Q3:

Q3. Do you remember recently seeing or hearing any advertising about using condoms that included the line *Heads up?*, and promoted the website getsomecondoms.com?

Yes..... 1
No 0 => Q7
Don't know 8 => Q7
No response 9 => Q7

Q4:

Q4. What do you think these ads were trying to tell you?

Other (specify)..... 66 O
Nothing 00 X
Don't know 88 X
No response 99 X

Q5 REMOVED

Q6:

Q6. Where did you see or hear this advertising?

Bus shelters.....	01	
Facebook.....	02	
In buses.....	03	
Movie theatre.....	04	
Radio.....	05	
School.....	06	
Television.....	07	
Billboards.....	08	
Other (specify).....	66	O
Don't know.....	88	X
No response.....	99	X

Q7 AND Q8 REMOVED

Q9:

Q9. I have a series of questions about sex and condoms. For each, please rate how much you agree or disagree with the statement on a scale of 1 to 5 with 1 meaning you strongly disagree and 5 meaning you strongly agree. If you don't think the statement applies to you please answer "don't know".

	1 Strongly disagree	2	3	4	5 Strongly agree	Don't know	No response
<i>It is ok to carry condoms with you</i>	1	2	3	4	5	8	9
<i>It is ok to talk to my partner about condoms</i>	1	2	3	4	5	8	9
<i>It is ok to refuse to have sex if my partner does not want to use a condom</i>	1	2	3	4	5	8	9
<i>Condoms decrease the pleasure I feel during sex.</i>	1	2	3	4	5	8	9
<i>Condoms decrease the pleasure my partner feels during sex.</i>	1	2	3	4	5	8	9
<i>The most important reason to wear a condom is to prevent pregnancy</i>	1	2	3	4	5	8	9
<i>The most important reason for wearing a condom is to reduce the risk of getting HIV/AIDS</i>	1	2	3	4	5	8	9
<i>The most important reason for wearing a condom is to reduce the risk of getting other sexually transmitted infections such as gonorrhoea, syphilis, or Chlamydia</i>	1	2	3	4	5	8	9
<i>It is easy to get condoms when I need them</i>	1	2	3	4	5	8	9
<i>I know how to put on a condom properly.</i>	1	2	3	4	5	8	9

Q18A:

Q18A. I would like to ask you a few questions about your sexual behaviours. I just want to remind you that anything you say will remain confidential and anonymous. Have you ever had vaginal, anal, or oral sex?

Yes.....	1	
No.....	0	=> Q28
Don't know.....	8	=> Q28
No response.....	9	=> Q28

Q18B:

Q18B. Approximately, how old were you the first time you had vaginal, anal or oral sex?

RECORD AGE: _____

Don't know 8
No response 9

Q18C:

Q18C. Did you use a condom the first time you had vaginal, anal or oral sex?

Yes..... 1
No 0
Don't know 8
No response 9

Q18: WORDING CHANGE

Q18. In the past 3 months have you had any of the following types of sex?

Vaginal (that is, putting someone's penis in your vagina/putting your penis in someone's vagina)
..... 1
Anal (that is, putting your penis in someone's rectum/ putting someone's penis in your rectum)
..... 2
Oral (that is, putting someone's penis/vagina in or on your mouth, or putting your penis/vagina in or on someone
else's mouth) 3
None of the above in the last three months 0 X => Q28
Don't know 8 X => Q28
No response 9 X => Q28

Q19:

Q19. Did you use a condom the last time you had... ..Vaginal sex (that is, putting
someone's penis in your vagina/putting your penis in someone's vagina)

=> /+1 if NOT Q18=1

Yes..... 1
No 0
Don't know 8
No response 9

Q20:

Q20. Did you use a condom the last time you had... ..Anal sex (that is, putting your penis
in someone's rectum/putting someone's penis in your rectum)

=> /+1 if NOT Q18=2

Yes..... 1
No 0
Don't know 8
No response 9

Q21:

Q21. Did you use a condom the last time you had... Oral sex (that is, putting someone else's penis/vagina in or on your mouth, or putting your penis/vagina in or on someone else's mouth)

=> /+1 if NOT Q18=3

- Yes..... 1
- No 0
- Don't know 8
- No response 9

Q19B:

Q19B. Thinking about the last time you had vaginal sex did any of the following happen?

=> /+1 if NOT Q19=1

- Starting having sex before putting a condom on 1
- Took the condom off and then continued to have sex 2
- The condom slipped off during sex 3
- The condom broke during sex 4
- Don't know 8
- No response 9

Q20B:

Q20B. Thinking about the last time you had anal sex did any of the following happen?

=> /+1 if NOT Q20=1

- Starting having sex before putting a condom on 1
- Took the condom off and then continued to have sex 2
- The condom slipped off during sex 3
- The condom broke during sex 4
- Don't know 8
- No response 9

Q19A:

Q19A. Why did you not use a condom the last time you had vaginal sex?

=> /+1 if NOT Q19=0

- Specify 66
- Don't know 8
- No response 9

Q20A:

Q20A. Why did you not use a condom the last time you had anal sex?

=> /+1 if NOT Q20=0

- Specify 66
 - Don't know 8
 - No response 9
-

Q21A:

Q21A. Why did you not use a condom the last time you had oral sex?

=> /+1 if NOT Q21=0

Specify	66
Don't know	8
No response	9

Q25:

Q25. Now thinking about your last sexual encounter.... Was it with... (READ RESPONSES)

Your spouse	4
Your boyfriend or girlfriend	5
A friend you've known for a long time	3
A person you met recently	2
A person you had just met	1
Don't know / Don't remember	8
No response	9

Q22 DROPPED

Q23:

Q23. Now thinking about your last sexual encounter.... Did you and your partner talk about using or having condoms?

Yes	1
No	0
Don't know	8
No response	9

Q24 DROPPED

Q23AF: [FEMALES ONLY]

Q23A. Other than condoms, what other types of birth control do you use?

Birth control pills	1
Depo	2
Other (specify)	66
None	0
Don't know	8
No response	9

Q23AM: [MALES ONLY]

Q23A. Other than condoms, what other types of birth control does your partner use?

Birth control pills	1
Depo	2
Other (specify)	66
None	0
Don't know	8
No response	9

Q26, Q26A, Q27 DROPPED

Q28:

Q28. People are different in their sexual attraction to other people. Which best describes your feelings? Are you...

- Only attracted to females 1
- Mostly attracted to females..... 2
- Equally attracted to females and males..... 3
- Mostly attracted to males..... 4
- Only attracted to males 5
- (DO NOT READ) Don't know / Unsure..... 8
- (DO NOT READ) No response 9

Q29 AND Q30 DROPPED

Q31:

Q31. Which the following businesses would you like to receive the \$10 gift card?

- Futureshop 1
- Tim Horton's..... 2
- Boston Pizza 3
- iTunes 4

ADDRESS:

In order to send you your gift card, we need to confirm your mailing address. The mailing address we have on file is <READ BELOW>. Is this correct?

- Yes..... 1 => INT99
- No 0
- Don't know 8 => INT99
- No response 9 => INT99

CORRECTION:

May I please have your new:

[READ BACK TO RESPONDENT TO CONFIRM]

- ADDRESS.....
- CITY.....
- PROVINCE.....
- POSTAL CODE.....

INT99:

Thank you very much for completing the survey. Just a reminder, that we may be contacting you in the future to complete additional surveys. You should receive your \$10 gift card in the mail in a few weeks.

COMPLETIONCO D => END
