

COI
Department of Health
Sexual Health Pitch Research:
Primary and Secondary Audiences
Report of Qualitative Research
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1. BACKGROUND

COI, in conjunction with the Department of Health, commissioned Research Works Ltd. to conduct a qualitative research evaluation of three potential creative routes for the Sexual Health Campaign planned for 2005. The project was required to assess the communication approach of each route and identify the route with most potential for future creative development.

The Public Health White Paper commitment says that DH will develop a *‘new national campaign, targeted particularly at younger men and women, to ensure that they understand the real risk of unprotected sex and to persuade them of the benefits of using condoms to avoid the risk of sexually transmitted infections or unintended pregnancies’*

The overall aim of the Sexual Health Campaign, as stated in the creative brief, is to normalise condom use amongst a primary audience of 15-34 year old men and women. The specific campaign objectives are:

- to stabilise and then drive down STIs by a strong prevention message
- to raise awareness/knowledge of STIs generally in terms of their prevalence, symptoms(or lack of), long term consequences- reduce the subject’s taboo status
- to raise understanding of how people can take control and act now to stop the spread of STIs
- to ‘normalise’ condom use amongst all sexually active adults
- to create an identity for a high profile source of information clearly branded NHS
- to make sure young people have enough information about sexual health to make informed choices about safer sex.

2. RESEARCH OBJECTIVES

The research aimed to assess the communication approach of three potential creative routes. The specific objectives for the research were as follows:

To assess each creative route in terms of the following creative parameters:

- impact and involvement with the approach
- message(s) interpreted
- tone of voice
- perceived target audience
- relevance and credibility for the target audience
- memorability
- impact/effect on current behaviour

To evaluate views of the primary audience and secondary audiences.

To provide recommendations for the creative route offering the most potential of achieving the campaign aims.

3. RESEARCH APPROACH

A series of 15 focus groups and 8 individual depth interviews were conducted as follows:

Primary Audience Sample

12 focus groups, 8 respondents, duration 2 hours:

| AGE | MEN | | WOMEN | |
|--------------------------|-------------|-------------|--------------|-------------|
| | ABC1 | C2DE | ABC1 | C2DE |
| 15 – 19 years old | Group 1 | Group 2 | Group 3 | Group 4 |
| 20 – 25 years old | Group 5 | Group 6 | Group 7 | Group 8 |
| 26 – 34 years old | Group 9 | Group 10 | Group 11 | Group 12 |

- all respondents were sexually active
- a spread in terms of gender and socio-economic background
- a range of relationship states were covered including single, semi-permanent/permanent relationships

- a minimum of 3 respondents attending sessions in London and Birmingham from a number of ethnic minority communities including African Caribbean, South Asian and Chinese.

Secondary Audiences Sample

One focus group with parents aged 35-50 years, 8 respondents, duration 2 hours:

- all respondents from socio-economic group C2DE with children living at home aged 15-24 years
- all readers of a cross-section of newspaper titles including The Mail, The Times, The Sun and The Express

One focus group with 'empty nester' parents aged 51-70 years:

- all respondents from socio-economic groups BC1C2 with children/grand children aged 15-24 years
- all readers of a cross-section of titles as listed above

One focus group with gay men aged 20 –34 years.

Two depth interviews with bisexual men aged 20 – 34 years.

Six depth interviews with African men and women aged 16-34 years:

- three depths with 16-24 year old second generation respondents, country of origin Somalia and Nigeria
- three depth interviews with 25-34 year old first generation respondents, country of origin Somalia and Nigeria
- an even split between men and women.

The research was conducted in Blackpool, Liverpool, Birmingham, Watford, Sutton, Richmond and Truro between 6th and 16th June 2005.

4. MANAGEMENT SUMMARY

The findings of this project indicate that the choice of creative route, for a Sexual Health Campaign aimed at 15-34 year old men and women, is not clear cut. The three creative routes tested were tasked with the communication aim of 'normalising' condom use.

The research findings indicate that the decision effectively lies between two routes: Condom Essential Wear or Use a Condom, not an Excuse.

The Sexual History route emerged as the weakest of the three options under consideration. The idea of promoting condom use by focusing on past partners was not consistently understood. The idea was perceived to be centred around the risks of contracting STIs, but failed to clearly communicate the 'use a condom' message.

Additionally, the execution style relied on a 'changing heads' mechanism to communicate the core idea. This approach was strong and engaging, but only worked effectively on the TV script 'Date' and failed to transfer to the static medium of press and poster. Equally, the condom message carried by the end line, '*Sexperts use a condom*', was not consistently understood. Some thought this line referred to sex rather than condom use, and specifically to people who have 'a lot' of sex - rather than all sexually active men and women aged 15-34 years.

Overall, the Sexual History creative idea is narrow and the condom 'normalisation' message was not clearly communicated.

Choosing between the two routes, Condom Essential Wear and Use a Condom not an Excuse, seems both difficult and complex – since both routes have clear weaknesses in terms of reaching the primary audience with a personally motivating message to use a condom.

The Condom Essential Wear idea was consistently interpreted as a clear statement in support of condom use. However, audience engagement with the fashion branding approach used to express the idea, was not consistent. This approach typically engaged (and appealed to) the ABC1 segment of the sample and especially women. These respondents interpreted Essential Wear as a positive, modern, endorsement of condoms use, which is both relevant and normalising. However, a significant proportion of younger C2DE men, aged 15-24 years, were less interested and involved. The fashion branding mechanism consistently lacked personal relevance and impact for this sample segment. Most thought that the advertising would be overlooked or confused with real fashion advertising. Equally, memorability and stand-out across the life of the campaign may also be a significant issue.

The breadth of messages covered by the executions produced for Condom Essential Wear was a strength. These included challenging information about the risks and consequences of contracting specific STIs – which, for many respondents, provided a clear reason to accept the condom use message. Furthermore, the ambient ideas extended the theme and placed the condom use message in a range of public settings, thus enhancing the normalisation message. This shows that the idea could be extended in a effective manner. Overall, Condom Essential Wear communicated a clear condom use message.

However, the apparent inability of the fashion branding approach to effectively reach young C2DE men is a key weakness.

If this route is chosen, then the following execution amendments are suggested:

- the TV scripts need to bring both male and female characters into focus
- the radio script Saturday Night was strong and engaging, but delivery will need some reconsideration in order to reach a younger C2DE male audience
- press and poster executions need to clearly highlight the link between the visual and condom message in order to avoid confusion with fashion advertising.

Use a Condom not an Excuse also has a clear focus on condom use. However, the idea of focusing on 'excuses' as a trigger to prompt thinking about condom use had variable impact. Women were more often challenged by the focus on excuses. They acknowledged that excuses are a common factor in negotiating condom use. However, the idea worked best in executions with a strong risk or consequence focus - thus motivating some respondents to overcome both inertia and the temptation to make excuses. However, for others, an exclusive focus on 'excuses' seemed to confirm rather than challenge the sexual 'status quo'. Men were much less likely to see 'excuses' in terms of negative behaviour. Indeed a significant proportion see 'excuses' as a means to an end – since many evidently believed that having unprotected sex is preferable. Therefore the idea requires a challenging presentation of risks and personal consequences if it is to challenge men to re-consider their use of sexual excuses.

The realistic executional style used in this route was seen as familiar, although some respondents (typically older and from socio-economic group BC1) rated the style as dull, boring and unmemorable. Others, typically younger C2DE respondents, were more positive and clearly liked the real life 'gritty' qualities of the execution style. The press executions were more successful than the TV scripts because of their focus on specific STIs and potential consequences. The TV scripts were divisive and seemed to have the potential to convey a negative image of women - rather than challenging men and women to consider their own attitudes and behaviour in relation to condom use.

Overall, Use a Condom not an Excuse seemingly offers an opportunity to focus on condom negotiation in a clear, direct and serious manner. However, the 'excuses' idea is not motivating for young men in particular and will need a stronger element of risks and consequences to effectively trigger engagement with the condom use message.

If this route is progressed then the following amendments are suggested:

- TV Scripts would require revision, bringing the male role into focus through stronger consequences and risk information
- The press adverts are engaging for younger C2DE respondents, but not older ABC1/C2DE respondents: these would need re-casting to appeal to a wider audience
- The design style appears 'dated' overall.

The views expressed by the secondary audiences broadly mirrored findings from the primary audience sample.

Parents were supportive of the campaign aims and did not take issue with any of the ideas reviewed. Most favoured the Condom Essential Wear route. They typically saw the fashion approach as a positive statement but were also concerned about memorability and the potential of the idea to challenge young peoples' attitudes and behaviour regarding condom use. Some supported the Use a Condom not an Excuse idea but had consistent doubts about the executional style and tone, which was seen as sensible but unmemorable.

African men and women aged 16-34 years were divided between support for Condom Essential Wear and Use a Condom not an Excuse. Younger female respondents favoured the Use a Condom not an Excuse idea. They thought it had an educational, serious tone which is appropriate for the topic. Other African respondents favoured the style and focus of Condom Essential Wear, concluding that this offers a more contemporary and engaging approach.

Gay men favoured the Condom Essential Wear route. They saw the idea as a modern positive statement advocating condom use to all sexually active adults.

Bisexual men were broadly undecided and concluded that none of the routes presented a strong, challenging, trigger message for men in particular.

In conclusion, both routes, Essential Wear and Use a Condom not an Excuse, have specific strengths and weaknesses. It seems that the final choice will be determined by the needs of key target groups for the campaign – and the ability of the creative teams to effectively address the executional issues will also be important.

5. MAIN FINDINGS

5.1 PRIMARY AUDIENCE FEEDBACK

5.1.1 Current Environment for Sexual Health Messages

A clear set of differences in attitudes toward sexual health issues emerged between men and women across the primary audience sample.

Female respondents were generally more aware and concerned about sexual health issues. The triggers for their concern were focussed upon pregnancy and/or STIs (commonly referred to as STDs or infections). Furthermore, women highlighted a common pressure on girls to be the responsible party in relation to contraception, including the use of condoms. Overall, a majority of women considered men to be the main obstacle to using a condom on a consistent basis:

'You try and use a condom at the beginning but they get fed up and put more pressure on you' (Female, 20-25 years ABC1)

'They don't care, they're not going to get pregnant they put it all on the girl' (Female 15-19 C2DE)

'You'd be surprised at some older men, you really would. Most men say 'don't using a condom, can't feel anything'. As a women it's your decision- do you walk away or do you carry on' (Female, 26-34 years C2DE)

Equally, female respondents acknowledged that embarrassment is a factor inhibiting condom use, as well as a perceived lack of access to free condoms when they are most needed. Many respondents - especially younger, less experienced, women - discussed the stigma attached to women 'carrying' condoms. Most felt that men typically interpreted this as a statement of willingness to have sex.

Women were more aware of STI messages and most were receptive to information about symptoms and consequences. Awareness was often driven by recall of recent radio advertising and specifically by coverage of Chlamydia in magazines:

'There's that football chant one (radio advert) where they go on about all the infections out there' (Female, 20-24 years ABC1)

By comparison, men were significantly less interested and concerned about sexual health issues. A majority, while acknowledging that using a condom is the 'right thing to do', did not see condom use as either beneficial or desirable. In general, men did not seem to consider sexual health issues to be important. Overall, men were significantly less concerned about condom use, especially men aged 15-24 years from C2DE backgrounds. There was a clear lack of urgency regarding the issue of using a condom or the need to plan and take personal responsibility. It was interesting to note that many young men primarily associated condom use with the prevention of pregnancy, rather than the prevention of STIs. Awareness of STIs was high but not top of mind for men. There was a general sense that they are more of an 'issue' nowadays – and recall of recent radio advertising dealing with STIs was relatively high across the male sample:

'There's that one where they describe all the sores, dripping itching and...' (Male, 20-24 years ABC1)

It was clear that knowledge about the risks and consequences of STIs was low and contributed to a lack of urgency around condom use for young men. Complacency about STIs was highest amongst young C2DE men aged 15-24 years (even amongst those currently suffering with an STI!). Their relatively relaxed attitude seemed linked to a perception that 'easy' treatment options for STIs are readily available.

Overall, therefore, it seemed that broad awareness of STIs was high across the sample but a more comprehensive understanding of the risks and consequences was not consistently demonstrated. There were clear gaps in knowledge about the prevalence of STIs for particular age groups and awareness of specific details about individual STIs, including symptoms and consequences, was poor.

Our analysis of the primary audience sample revealed the following attitude segmentation regarding sexual responsibility:

- **15-20 years:** a majority are pursuing a single life with few concerns about sexual health or responsibility beyond themselves, especially men. Number of partners can be high, with ‘one night’ stands a relatively common theme. Alcohol is typically blamed for incidences of unprotected sex

- **20-24 years:** an increase in personal responsibility emerges, with a majority moving on to (or aspiring towards) permanent relationships. The issue of condom use becomes more complicated in a relationship - ‘*when do you stop using one?*’ Women are typically more conscious of the need for caution, but pressure or ‘trust’ in the relationship can often overwhelm caution and debate. Men, especially from lower socio-economic groups, generally perceived screening as shameful - an admission that their girlfriend probably has an STI

- **25-34 years:** a majority of respondents are in permanent relationships and the issue of condom use is typically seen as ‘juvenile’ and a thing of the past. The issue of being single or becoming single clearly presents a new challenge (in terms of negotiating condom use) amongst a more sexually experienced audience. Single women in this age group were more conscious of the need for condom use – especially those who were single for a number of years. Single men in this category were more blasé and felt they could rely on their experience to assess encounters where condom use would be preferable – specifically “one night stands”.

Overall, older single people were often as complacent as their younger counterparts but felt they had age and experience on their side.

It was clear that the 'Use a condom' message is not new to this audience or particularly interesting (least of all for younger men). A new 'angle' is needed to prompt personal reassessment of the personal benefits of condom use – and it seems that the campaign primary audience of 15 –34 year old men and women requires targeted messages about condom use to effectively increase impact and relevance.

6. REACTIONS TO CREATIVE ROUTES: St. Luke's Sexual Histories: *'Sexperts use a condom'*

6.1 Communication Background

Campaign Approach: the Task:

- To create a sense of personal identification with the real risks of STIs, so the target audience take on habitual usage of condoms and become advocates for condom use amongst their partners and peers
- To reposition condom use from Safe Sex, to Smart Sex, building from protection, security, self-respect and caring messaging, to condom use as a symbol of expertise, kudos and sexual confidence

Creative Expression: 'Sexperts use a condom'

The creative stimulus explored in the groups aimed to bridge the transition from Safe Sex to Smart Sex via a positive, uniting end-line and building on theme of 'Sexual Histories'.

Creative executions in this route aimed to demonstrate that:

- if you have unprotected sex, the risk from STIs is much greater than you thought because you effectively sleep with everyone your partner's ever had unprotected sex with and the partners before them.

- using a condom is the only way to protect yourself from sharing other people's sexual histories.

6.2 Overview of responses to Sexual History: 'Sexperts use a condom'

Very different views emerged across the sample, especially between men and women, toward the idea of focusing on sexual history.

A majority of female respondents found the idea uncomfortable, thought-provoking and sometimes quite personally 'shocking' - clearly communicating the high level of risk of contracting a STI as a consequence of unprotected sex:

'It's true. If you had to stand there with all the people they've ever slept with behind you, it would definitely put you in a different frame of mind' (Female 26-34 years C2DE)

'God, it makes you think when you see it like that ... quite scary really and it could make you worried and paranoid' (Female, 20-24 years ABC1)

By comparison, male respondents did not respond with the same degree of shock, concern or personal focus. A majority interpreted the idea as a general warning about STIs, but a significant proportion remained unmoved and the risk of personally contracting an STI seemingly remained remote:

'It is showing you who she has been with and that she might pass on a disease' (Male, 20-25 years C2DE)

'It becomes personal when you're with them longer, but you don't think about it for a one night' (Male, 15-19 years, C2DE)

Furthermore, the focus on sexual history did not seem to prompt a personal consideration of the importance of condom use - and the sexual history and STI message continually dominated respondents' focus.

At best, the creative idea was seen as a call to be aware of STIs, think about your personal vulnerability to STIs, and (for some women) consider screening:

'It does make you think of mistakes you've made and rather forget and you would think of getting checked out if you're really worried' (Female 20-24 years ABC1)

A significant problem with the sexual history theme was that a significant proportion of the sample remained focused on the advertising characters' sexual histories – and failed to consider their own behaviour.

'It makes everyone seem really dirty so that you wouldn't want to have sex with them at all, let alone use a condom' (Female, ABC1, 15-19 years)

Overall, while a strong warning message about STIs was conveyed by this route, the creative route fails to communicate a strong 'condom use' message and equally fails to challenge or generate a personal assessment of behaviour.

Overall responses to the executional style were as follows:

- the 'changing heads' technique employed by the creative approach was well recognised and positively received. However, the technique worked best in the TV format and in the TV/Date execution only (clearly conveying the core idea of past sexual history and the risk of STIs)
- however, the creative style failed to transfer successfully to the static mediums of press, poster and ambient materials. In these media the creative idea was often lost. Many literally interpreted the poster/press executions on the basis of the visuals alone, which were typically seen as grotesque and rarely interpreted as having a link with sexual health messages.

Overall, the TV execution 'Date' was vital in establishing a consistent understanding of the core idea. The execution style, while very strong in many respects, dominated the creative idea and failed to work across the range of media channels likely to be involved in this campaign.

6.3 Sexual History Individual Executions: TV/Date

This execution was seen as strong on impact, intriguing, funny, unexpected, memorable, graphic and weird.

'That would definitely make you watch it' (Male, 15-19years ABC1)

The storyline was seen as intriguing - although the scenario of a date in a bar typically suggested an older person, with a long sexual history, as the target for the advert.

The core message was felt to focus on the number of partners involved, followed by the possibility of Geoff contracting an STI. There was little thought given, by either male or female respondents, to Geoff's past history and his attitude or behaviour in relation to sexual health. The male character seemed largely passive and apparently represented a stereotypical young male character 'chatting' up a 'bird'.

The message prompted some respondents (particularly women in their 20s) to think about their sexual history.

'Oh my god, seeing it like that makes you think' (Female 20-24 years, C2DE)

However, a focus on the woman's sexual past, encouraged a significant proportion of men to concentrate and comment on her character, while not engaging with Geoff's role and responsibility or the sexual health implications for themselves.

'Women are as bad as blokes nowadays' (Male, ABC1 20-24 years)

'She's a slapper' (Male, 15-19 years, C2DE)

Equally, the number of partners recalled by the main female character confirmed a view that STIs only occur if you sleep around or are similar in attitude and lifestyle to Anita. It failed to challenge the view that anyone can tell if somebody has an STI. Only a minority considered the possibility that *'it only takes one of those blokes to pass on an infection'*.

Many female respondents felt that the scenario over-focuses on the Anita character's role and interpreted this emphasis as increasing the pressure on women to *'take responsibility for using a condom'*.

Overall, the execution was broadly engaging but, for a majority of the sample, the core message focused on the sexual history of the female character, at the expense of a condom use message.

6.4 Sexual History Individual Executions: TV/Tent

Impact across the primary audience sample was significantly poorer than was found in relation to the Date execution - mainly because of the shorter length of the execution. While the Tent scenario suggested a younger target audience and was clearly more relevant to younger respondents 15-20 years, the overall intention of the advert was unclear.

The 'changing heads' mechanism failed to communicate the sexual history theme as a consequence of the smaller number of head changes for the male character compared with the female character in the Date execution.

A majority of respondents concluded that viewing the Date execution first would be important in terms of impact, involvement and correct interpretation of the sexual history theme.

'I didn't get it at first. I think they'd be more frightened of their parents finding out rather than worrying about catching anything' (Female, 15-19 years, ABC1)

After prompting and review, most respondents understood the message as 'an STI can be contracted after only one unprotected sexual encounter'.

6.5 Sexual History Individual Executions: Poster 'Love the sex not the ex.'

The visual elements of this execution were typically perceived to be weird and engrossing - but there was a consistently poor take-up of the core message.

In groups where this execution was shown prior to viewing the TV/Date execution, a majority of respondents were unclear about the intention of the advertising. A number thought it was advertising a new series on Living TV or Footballers Wives.

'Is it a new reality show about transvestites on Living or is it about footballers wives and a new weird relationship' (Female, 25-34 years ABC1)

As well as the visual, respondents focussed on the relevance of the main poster headline: 'Love the sex not the ex'. This was consistently seen as unclear without the context of the TV/Date script to emphasise the sexual history theme of the route. The references to 'sex' and 'ex' seemingly contributed to speculation about the advertising being a trailer for a TV show.

Also the focus in the headline on 'sex' was felt to imply that young people are having 'lots' of sex and promotes sex ahead of the STI message. Some younger, less experienced, female respondents were particularly concerned about the emphasis of the advertising being misinterpreted. Also, some younger C2DE respondents (despite viewing the TV scripts) remained unclear about the sexual history theme and missed the STI focus.

Overall, while the poster was certainly eye catching, the core message about STIs and condom use was poorly communicated.

6.6 Sexual History Individual Executions: Tri-site Poster

There were very mixed responses to this execution, mainly as a consequence of two specific design elements:

- the visual was less obviously a juxtaposition of a woman's head on a man's body
- it was considered an unpleasant and off-putting, rather than intriguing, image.

A significant proportion of men and women across the sample interpreted the poster as a depiction of a series of 'drag queens', with little obvious connection to the sexual history theme.

Overall, this execution failed to effectively communicate a condom or STI message across the sample.

6.7 Sexual History Individual Executions: Press:

'There's a part of him...Chlamydia'

The 'changing heads' device was ineffectual - the character with a female body and male head simply looked 'like a real guy' to many respondents.

Executional issues aside, the introductory line to the press copy was typically perceived as engaging, if unpleasant: *'There's a part of him that will always stay with her. Chlamydia'*. With prompting, the main copy was well received and emphasising the symptoms and experience of contracting Chlamydia was thought provoking for women who were considering having children. While it was less effective amongst the male sample, it did generate some level of thought regarding the serious consequences of contracting an STI.

The sobering tone and personal focus of the copy was maintained through to a clear link with condom use- *'Protect yourself...'*, which was seen as a positive message.

Aside from design issues, this execution presented challenging messages about the risks and consequences of contracting Chlamydia, as well as delivering a positive action-orientated message about condom use.

6.8 Sexual History Individual Executions: Press:

'Unprotected sex'

The visual seemed to offer an improved synergy between the sexual history theme and the 'changing heads' mechanic - it was clearly and accurately perceived as an odd image of a man's head on a woman's body. Many respondents felt it was reminiscent of advertising for the Dove brand. Again, prior viewing of the TV/Date execution was felt to be key to recognition and understanding of the core theme.

The headline '*unprotected sex*' was a powerful 'hook', attracting attention and focusing respondents on the issue of condom use.

The copy detail clearly emphasises the risk of contracting an STI, although reactions to the statistic quoted (*then consider that 1 in 9 people have had a sexually transmitted infection*) differed between men and women. Women were more inclined to believe the figure and think about the issue of personal risk. Men, however, quickly began to question the credibility and relevance of the information – even where they had been initially engaged by the statistic:

'1 in 9 people in England have a sexually transmitted disease! That's rubbish' (Male, 20-25 years, C2DE)

The execution was thought to highlight the dangers of unprotected sex, as well as the need to use a condom:

'I can understand the situation. You always know you are supposed to (use a condom) but it is the situation when you are out and pissed and it doesn't happen' (Male, 20-24 years, C2DE)

6.9 Sexual History Individual Executions: Proposed Straplines Lines

Sexperts use a condom was interpreted in a number of ways:

- experts at sex use a condom therefore it is cool to use one
- or ... sexperts are people who have a lot of sex and therefore should use a condom
- or ... the NHS are experts at sexual health services (which was a minority interpretation).

Sexperts ... proved a divisive strapline and failed to communicate the core campaign messages. It seemingly emphasised 'sex' at the expense of the condom use message. Equally, it failed to underpin the humour of the executions with a personally challenging message about the personal risks of STIs and the need for condom use.

Play it smart, use a condom was seen as a down-to-earth, positive statement advocating condom use. It was considered practical, if dull in tone- '*NHS speak...*'

Smart Sex comes in a condom was generally well liked and especially appealed to younger respondents (particularly those aged 15-24 years). It was considered an upbeat, cheeky statement advocating both safe sex and condom use. Older respondents were also positive in their responses but typically saw it as more 'juvenile' in tone and less relevant to their age group.

6.10 Sexual History: Ambient Ideas

A majority of the ambient ideas for the sexual history route were well received. The Ann Summers tie-in was particularly well received by women, who saw it as a clever and positive link, connecting to times when people are thinking about sex:

'I think it demonstrates that you can have the best of both worlds, the naughtiness and the sex, but use a condom and you'll be all right' (Female, 20-24 years, ABC1)

The branded condoms were also seen as a positive idea. Respondents, particularly women, favoured placing condoms in as many positive public settings in order to reduce the embarrassment associated with buying condoms through a pharmacy or a condom machine:

'The more places you can get free condoms where they're in your face the less excuses there going to be' (Female, 20-24 years C2DE)

The free condom in a magazine was also well received – and the headline *'erasing your partner's history with a rubber'* was equally clear, endorsing condom use as a positive course of action. However, issues concerning safety in relation to using a free condom were raised by a significant number of respondents – and there were particular concerns about people tampering with the condoms if they are presented in a public setting like a pub or club.

The Valentine's card idea was disliked by a majority of respondents and typically seen as unappealing. Some felt that it could be used in a nasty fashion as a prank or to generate relationship friction by focussing on sexual history:

'That's what I'm concerned about it would cause rows. You know what they're like (men) it brings up that thing about how many have you had and you'd end up getting grilled and having an unnecessary row' (Female, 25-34 years, C2DE)

7. REACTIONS TO CREATIVE ROUTES: DLKW - Condom Essential Wear

7.1 *Communication Background*

Campaign Approach

The DLKW campaign approach is to address two central tasks:

- tackle current risky sexual behaviour; reassert relevance and necessity of condoms to ensure safer sex is practised all the time, through informing people of the serious risk of STIs
- tackle condoms' current image problem; too clinical, too childish or too kinky. Give condoms a broader appeal, more grown-up, normalised and part of the high street

Creative Expression: 'Condom Essential Wear'

The executions reviewed creatively expressed the central idea through a fashion branding approach with the aim of:

- positioning condoms as a must-have accessory' alongside other mainstream aspirational brands
- using every execution to reinforce why condoms are 'essential wear' and the unequivocal serious risk of STIs

7.2 Overview of Condom Essential Wear

The core message being communicated through the Condom Essential Wear idea was consistently understood - across the sample - as a clear statement advocating condom use.

However, the fashion branding approach, integral to the creative idea, was not universally engaging or personally challenging to a majority of the primary audience. The approach was most appealing to respondents from a higher socio-economic background and specifically effective amongst women. A majority of men, however, did not engage with the fashion approach, especially respondents from lower socio-economic backgrounds, aged 15-24 years. Some of the latter group did find certain executions appealing but it was clear that the close similarity with fashion advertising diminished the effectiveness of the route in terms of engaging and challenging their personal attitudes and behaviour:

'It just says condom but I know that, maybe not for me personally but it might make some people aware' (Male 15-19 years, C2DE)

'I like it, it looks good saying it's fashionable to wear a condom' (Male, 25-34 years, ABCI)

'It doesn't seem serious enough for me' (Male, 20-24 years C2DE)

Views were also divided about whether the creative idea delivers a new, memorable and personally challenging perspective on the generic 'use a condom' message. Essential Wear is a widely known fashion term amongst women but not amongst men, although the sentiment was understood: *make it essential, I get it'*

Those who favoured the fashion branding approach saw the core message as a modern, 'cool' endorsement of condom use - bringing the issue into the public eye in a positive manner: *'it's making it uncool not to wear a condom'*. However, those who were less keen about the approach were unsure that condom use could be made glamorous and young male respondents were especially doubtful. It seemed a romantic, 'girly' notion which did not challenge some segments of young men:

'Most of us think that it is not that cool to wear condoms. This is trying to change that and make it fashionable, but fashions come and go and I'd prefer to go without a condom' (Male, 20-24 years, C2DE)

The messages covered in the range of executions did move beyond the general Essential Wear condom use statement. Executions with information about specific STIs were consistently involving for a majority of the audience, particularly younger single respondents:

'It talks about more facts and what the diseases are which does make you think'
(Male, 20-24 years, C2DE)

'It's not just a fashion statement about condoms - it has some hard hitting stuff like on Chlamydia' (Female, 15-19 years, C2DE)

Overall, the creative idea was clearly interpreted as communicating a condom use message - 'make condoms essential to your sex life'. However, questions were evident about the suitability of the fashion branding approach in terms of engaging and challenging a significant section of the primary audience (specifically young 15-25 year old C2DE men):

*'It is just one of those things. Doesn't make me think I have to wear a condom. Bull** to that'* (Male 20-24years, C2DE)

7.3 Essential Wear: Executional Style

The executional style was recognised as a well known fashion 'look' associated with brands such as The Gap, Marie Claire, Tommy Hifiger, FCUK and Armani. All were seen as successful and expensive brands, although with a female bias.

The similarity of the approach to 'real' fashion advertising, as well as familiarity with the 'look', limited the impact of a number of executions. Some respondents felt that the ability of the executional presentation to stand-out across the life of a campaign would be a concern. Specifically, the distinctiveness and stand-out for the route was an issue, especially for men:

'It's just another bit of clever advertising, I'd miss it, it looks the same as all the other adverts with models' (Male, 15-19 years, C2DE)

'I don't go in those type of shops so I'd go past it and not think twice' (Female, 20-24 years C2DE)

'I think it's good, a nice style, a new way of talking about condoms, not dirty or hidden away but cool and young' (Female, 20-24 years, ABC1)

Overall, the creative idea consistently focused on condom use and the risks of STIs across the range of executions – but views were divided about the effectiveness of the fashion branding approach in terms of reaching and challenging significant groups within the primary audience.

7.4 Essential Wear Individual Executions: TV/*The One*

A majority were not immediately engaged with this execution, although the setting was initially familiar (holidays, Soltan and erectile dysfunction advertising was mentioned). The romantic, exotic sea-side imagery was appealing to women, but men were very uninvolved in what they saw as a 'girly' romantic scenario. Also, younger respondents saw the execution as less relevant on the basis of the setting – far removed from their own 'real world' of pubs and clubs. Clearly the pace and delivery of the execution was an issue affecting initial impact and engagement.

However, the storyline of a young man with a beautiful young girl did attract attention. The twist in the storyline was intriguing- *'so you think you know the ending...but then'*. The line *'is she the one'* becomes more powerful as the story unfolds. A majority of respondents wanted to know: *"Is he going to sleep with the girl?"*:

'It is a good message but you can't relate to it, you aren't going into the sea with a girl thinking about whether she has a disease or not you just want to get it on with her' (Male, 20-24 years C2DE)

'It's good the change in the mood, it makes you think, catches you out you think you know but do you' (Male 20-24 years ABC1)

'It does catch you unawares, very unexpected but why is it focused on the guy?'
(Female, 20-24 years, ABC1)

The male character in the execution was perceived to be mostly concerned about himself, with his main focus on the threat posed by the girl – and there was little in the advertising to prompt male respondents to examine the male character's own history:

'You have to think smart and protect yourself and don't worry about anyone else'
(Male, 15-19 years, ABC1)

The tone was felt to be sobering, ending on a positive and direct note about condom use:

'You can't miss the condom at the end, it's good, got some facts in it too' (Male, 25-34 years, C2DE)

The execution delivered a number of engaging and relevant messages to a majority of respondents:

- certain STIs are incurable
- STIs are massively on the increase
- use a condom.

Overall, the execution was considered to be a warning about the risks of contracting an STI and impact was strongest amongst women, because of the setting/key messages and weakest amongst young C2DE, because of the depiction of a 'older' couple and a romantic, unreal, setting.

Executional issues aside, the advertising communicated, across the sample, the risks associated with unprotected sex and the need to use a condom to prevent contracting an STI.

7.5 Essential Wear Individual Executions: TV/Child

The length and delivery of the storyline inhibited interest – most saw it as slow and ‘boring’. This was seen as advertising aimed at women, given the focus on a female character, children and Chlamydia. Men, particularly young men, viewed fertility as an issue for women. Only a minority of male respondents recognised that male fertility could also be affected by Chlamydia or considered that their future long-term partner might also be affected.

Therefore, the execution had a narrow appeal to young women without children, who planned to have children in the future (female respondents in their late 20s/early 30s with children were less interested in the approach). The twist in the storyline was sobering for the former segment: *‘I want to have children and that really brings it home to you’*.

The core message is to avoid contracting Chlamydia through condom use and (for some respondents) consider screening if you are worried. Awareness of the lack of symptoms associated with Chlamydia was relatively high across the female sample.

Overall, a focus on the consequences of Chlamydia generated more personal consideration of behaviour amongst a small segment of the female sample

7.6 Essential Wear Individual Executions: Radio/Saturday Night

Interest was constrained by the delivery of this execution - it was consistently referred to as long and monotonous. The character sounds ‘dull’, unattractive and ‘old’. The language used in the execution, however, did engage men - for example, use of the word ‘shag’ certainly focussed male attention.

Otherwise, the advertising was clearly seen to be aimed at men, and a majority did ‘sit up’ and listen to information about the symptoms/consequences of having genital warts. The character’s story did challenge current thinking, with key ‘new’ data which maintained engagement – respondents were interested by the focus on genital warts being caused by a virus that does not go away, as well as the absences of symptoms.

Women supported focussing the advertising on a male character and specifically on the consequences for a man, as well as the need for men to take responsibility for condom use ‘*girls have to think about it, blokes don’t care*’.

Overall, the message was involving because of its focus on a specific STI and the inclusion of information which was unfamiliar to a majority of the sample. It presents a personal account of living with an STI which did prompt some respondents to consider their own personal vulnerability (both men and women). Interest in the message was specifically high across the sample, since it offers new information which does provoke consideration of the need to use a condom.

7.7 Essential Wear Individual Executions: Poster/Couple in Urban setting

This execution had a relatively high impact amongst both men and women – and the couple embracing visually focuses on the ‘moment’: ‘*that’s how it is , after a club*’.

The executional style was considered very similar to major brand advertising: Tommy Hilfiger, Armani and FCUK were a few names mentioned by respondents. Many expressed doubts that this would stand out and remain memorable in a busy high street setting, in the company of ‘real’ fashion advertising.

Connections between the core idea, Condom Essential Wear, and ‘the moment’ were seen as thought-provoking for supporters of the route: ‘*that’s when you should be thinking about condoms, but you can get caught out*’. However take-up of the condom message was very low amongst young C2DE men, aged 15-24 years - the visual ‘excited’ but did not challenge personal attitudes.

The statistic quoted at the bottom of the poster (*Every 15 seconds someone in the UK discovers they've got a ...*) was typically overlooked, being seen as too small. Following consideration, the statistic was not felt to challenge personal attitudes and prejudices: it was interpreted as a bland statement and largely received sceptically, especially by young men.

Overall, 'Condom Essential Wear' was a clear statement at the centre of this advertising route, although levels of personal engagement with the condom use message were highly variable. Typically, respondents who supported the use of condoms, and favoured a fashion-based approach, were most receptive. For others, the execution lacked a strong hook to motivate personal consideration of the need to use a condom. Many believed that the advertising could be misinterpreted as contraceptive advertising: '*is it advertising condoms?*'

7.8 Essential Wear Individual Executions: Poster/ Couple Close-up Kissing

This execution was considered to be so similar to fashion brand advertising that respondents raised significant doubts about the overall distinctiveness of the idea.

The Condom message, positioned across the centre of the execution, was noted with prompting, but respondents clearly felt the fashion style would dominate communication and impact in the real world

The statistic quoted in the bottom copy (*Chlamydia is a serious Sexually Transmitted Infection. Every 6 minutes someone in the UK discovers they've caught it*) - again seen as too small and recessive - was more engaging. The specific focus on an individual STI did heighten interest. Chlamydia was a real concern for some female respondents and the infection rate quoted was particularly thought-provoking for women who are considering having children.

Overall, reactions to this execution highlighted the key issues of initial stand-out and overall distinctiveness which seemed to be a core issue with the fashion branding approach.

7.9 Essential Wear Individual Executions: Press/Drop Dead Gorgeous

The visual of a young attractive women in a swimsuit staring at the viewer was engaging for a majority of the sample. This was seen as a strong attractive pose – conveying a powerful, challenging, sexy attitude.

The ‘double meaning ‘of the headline, *Drop Dead Gorgeous*, became more powerful after respondents had read the copy relating to the levels of HIV infection amongst heterosexual women. The focus on an individual STI was again more engaging and the information was new and obviously thought-provoking.

The Condom Essential Wear strapline was felt to ‘sign off’ the execution with a clear message about condom use.

Overall, the execution seemed to generate a consideration of the need for condom use with an additional focus on consequences which seem to heighten recognition of the importance of the issue.

7.10 Essential Wear Individual Executions: Press/Incurable Romantic

A majority believed this execution to be actual fashion advertising. There was little interest in the headline, (*Incurable Romantic*) and the man in the visual was felt to look like a fashion model.

However, after prompting, the copy detail - *Genital Warts is spreading fast. It’s highly infectious and there is no cure* - was of interest to respondents, covering urgent and disturbing news about an unfamiliar STI.

The apparent absence of a cure was shocking for many male and female respondents. However, a small minority of young male C2DE respondents remained ‘blasé’ and unconcerned. Some of these respondents had previously contracted an STI and had ‘been cured, therefore they simply did not believe the serious tone of the copy. Equally most refused to be challenged regarding their role and responsibility in terms of passing on the virus. Others in this sample had never contracted an STI despite years of unprotected sex and therefore subscribed to the view that *‘it hasn’t happened to me and it won’t happen to me, I can tell if a girl is dirty’* .

For a majority, the focus of the copy detail was challenging and did prompt consideration of the importance of using a condom. However, the fashion branding theme dominates this execution and clearly reduced audience engagement.

7.11 Essential Wear: Ambient

The idea of a High Street Window Display (Condom Essential Wear) with information running along the end of the display stating, *Every 15 seconds someone in the UK discovers they have a STI*, received a mixed response.

Supporters of the creative idea and fashion branding approach, saw it as a high profile and positive endorsement of condom use: *‘making condoms sexy by putting it out there, normal’*.

Others dismissed it as ‘too clever’ or ‘not me’: *‘That looks like the type of shop I can’t afford to go in’*. Young men in particular dismissed the idea on this basis – few saw anything personally relevant in placing a glossy statement about condom use in a fashion store.

Placing the strapline ‘Condom Essential Wear’ on a Condom dispenser was consistently seen as effective.

Equally, T-shirts featuring the strapline and worn by bar/club staff were well received. It was believed that these would be noticed and might even become a conversation point in the pubs and clubs. Respondents also suggested that beer mats featuring relevant ‘factoids’ on individual STIs might also be effective.

The idea of placing the strapline on a take-away carton lid was unanimously rejected and typically seen as a distasteful idea.

The idea of a belt buckle containing a condom was supported by many respondents, and by women in particular. Men also saw this as a useful accessory but preferred an option without branding on the buckle.

Overall, the ambient ideas did work well – and seemed to fit with the positive tone of the creative idea:

‘You’ve got to make it a more open subject, put it out there not hidden in a toilet or on a counter’. (Female, 20-24 years, C2DE).

8. REACTIONS TO CREATIVE ROUTES: Rainey Kelly: Use a Condom, Not an Excuse. Sex Sense

8.1 Communication Background

Campaign Approach

Change attitudes of target audience to change behaviour:

- Make personal the risk – *STIs are not only real, but something people like them really can and do catch - the consequences are serious*
- Encourage peer reward through *normalisation*, even making it ‘cool’ to use a condom

- Increase wider social pressure – *there should be no doubt that the type of person they want to be, or be with, would not sanction NOT using a condom*

Creative Expression: ‘Use a Condom, not an Excuse’. Sex Sense

- Excuses can be used at any point of the ‘condom continuum’ when there may be the decision not to buy, carry, discuss or use condoms.
- Unequivocal, but not preachy – people have a choice and there are consequences for good and bad decisions
- Sex Sense ident can be applied to link varied aspects of campaign and wider sexual health promotions

8.2 Overview of: Use a Condom, not an Excuse. Sex Sense

The idea of ‘excuses’ was successful in communicating a condom use message. It focused on the negotiation stage, when condom use can be overlooked in the heat of passion. However, the idea of focusing on ‘excuses’ as a means of triggering consideration of the personal benefits of condom use received a mixed response.

Women typically acknowledged that the notion of ‘excuses’ is ‘true’ and is a factor affecting condom use. A majority also agreed that ‘excuses’ do not represent acceptable behaviour and, therefore, the idea did resonate and seemingly has the potential to prompt a personal assessment of condom use.

Men were divided in their responses, according to their personal support for condom use as the ‘right’ thing to do and whether they viewed excuses as a ‘bad’ thing. Men who supported condom use in principle, but failed to consistently use a condom, did engage with the idea. However, most were less self-critical about past encounters when excuses were used than their female counterparts. Consequently, the theme was less personally challenging, and often reminded male respondents of their parents or teachers offering advice. Thus the tone did not resonate well with men, particularly at the older end of the sample.

A significant proportion of younger C2DE men aged 15-24 years recognised that ‘excuses’ happen, but did not see this as negative behaviour – only a simple means to an end. These respondents openly expressed the view that unprotected sex is preferable and where possible (especially when drunk) the issue of an excuse does not occur at all.

The ‘excuses’ idea elicited different reactions across the range of executions presented. The idea worked best in the press executions, where the focus is on consequences triggering a need for condom use – and, thus, overcoming or challenging ‘excuses’ becomes personally relevant.

Overall the ‘excuses’ idea worked best at prompting a focus on condom use amongst women. However, it requires a clear connection with risks and consequences to prompt men to re-consider their behaviour.

8.3 Use a Condom not an Excuse: Executional Style

The realistic execution style of this route was seen as familiar - the slow motion technique intended for the TV executions was well recognised by all. This gritty realism was felt to be connected with drugs, drink driving, speed - as well as smoking advertising. These campaigns were well recalled and had made a strong impression, particularly on C2DE groups, amongst whom calls for a more ‘shocking’ approach to the issue were frequently highlighted:

‘It’s got to be shocking, if not I won’t take any notice’ (Male, 20-24 years, C2DE)

However, associations with government advertising generated problems in this instance, with some respondents drawing parallels with sex education videos seen at school:

‘I’ve seen this before, dull and boring like being back at school, talking about excuse and the look of that one (press execution) is like a drug poster I’m sure’ (Female, 15-20 years ABC1)

A majority of respondents described the visual style as drab and unappealing – respondents felt that might reflect ‘real’ life, but this was not an image which a majority wanted to identify with, either on TV or in magazines.

An alternative view was expressed by a significant segment of younger C2DE respondents, who considered the execution style, involving, gritty and relevant. They identified with the ‘real’ scenarios and were receptive to the idea of core messages being communicated through a focus on ‘real’ life events.

8.4 Use a Condom not an Excuse: Strapline and Idents

Use a Condom not an Excuse states a ‘truism’ but it assumes a degree of awareness and agreement with the view that condom use is preferable- *‘yeah that’s true, but we all make them’*. The strapline was seen as direct and clear but did remind many respondents of an older person (such as one of their parents) speaking - *‘very sensible but not really someone you listen to’*.

The **Sex Sense** statement generally appealed across the sample and clearly did suggest a ‘sixth sense’ concept (which was taken to mean that condom use should be automatic, similar to personal safety practice such as the safe cross code for road safety). More negatively, however, it was seen as overtly sensible: *‘it’s just saying safe sex, I can hear my mother saying that as I go out’*.

The Sex Sense symbol added to the governmental associations: *‘it looks like the drink drive or smoking sign’*.

The alternative statement **Sex Life**, was interpreted as promoting sex and seen to be incongruous in the context of the campaign aims: *‘what’s it got to do with safe sex? We all want a sex life’*.

Overall, Use a condom not an excuse. Sex Sense did clearly summarise the core intention of the campaign - to advocate condom use unequivocally. Unfortunately it was frequently seen as sensible in tone - which did generate both disinterest and concerns about relevance amongst respondents aged 15-34 years.

8.5 Use a Condom not an Excuse Individual Executions: TV/ Club

The Club scenario generated interest across the sample and was particularly relevant for single respondents.

Focusing on the female character in the execution - specifically when she discusses her dilemma about sleeping unprotected with the male character direct to camera – suggested a female target audience for the advertising. The storyline was seen as ‘realistic’, however interpretations of the core message were inconsistent and varied.

Women were typically angry about the character’s apparent lack of care for her own personal safety and about the attitude of the male character in the scenario. They were annoyed that the execution does not have a positive outcome in which either condoms are used or she decides not to sleep with the male character unprotected:

‘It makes her seem really weak the way she says ‘oh do it anyway’ (Female, 26 – 34 years, C2DE)

Women were concerned that the advert would convey a very negative message to men that women are underhand and feckless.

Seemingly in confirmation of this view, men (particularly 15-24 year olds) saw this as a commentary on ‘modern’ women: *‘she’s a slapper, you can’t trust her’*.

Women felt that the tone of the advert is unpleasant, selfish and negative – and respondents typically distanced themselves from the character and thus the message.

Male respondents focused exclusively on the female character's actions and did not consider the male character's part in the scenario. Many men, particularly young 15-24 year old C2DE respondents, saw the message as a statement about 'modern' women and how a man might be deceived by their 'deviousness'.

At best, respondents identified with a general STI warning, as well as the need for personal vigilance: '*you're on your own...*'. A majority saw the character's behaviour as abnormal and, thus, felt able to distance themselves from consideration of their own behaviour

8.6 Use a Condom not an Excuse Individual Executions: TV/Waiting

This execution also had a female lead character and was set in a flat where a couple are 'getting close'. Involvement and interest was highest amongst women in the sample, although the setting suggests an 'older' person with their own flat - which makes the execution less relevant to younger respondents.

Female respondents thought that the advertising accurately reflected women's insecurities about negotiating condom use. However, a majority felt that focusing on excuses from the female character's perspective only helped to reinforce the excuses, rather than challenging the status quo. Even though the character does choose to suggest that they use a condom, women felt the advertising over-focused on the dilemma and missed opportunities to deal with reasons why people should seek to overcome those excuses: '*It tells you what you already know, I would rather they said that it is more ladylike to use a condom*'

The male character remained passive throughout the execution and was seen to have played no positive part in the scenario – and many respondents noted this as a fundamental weakness of the execution. Male respondents were largely uninvolved with the execution and saw it as a message for women to take the lead in relation to condom use.

Respondents felt that the execution dwells on the excuse at the expense of the 'use a condom' message, which was not seen as the most powerful trigger for motivating behaviour change. Excuses were seen as realistic but a more emotive button needs to be pressed in order to challenge attitudes and motivate condom use.

8.7 Use a Condom not an Excuse: Press/Chlamydia and Gonorrhoea

The visuals involved in both these executions triggered interest in the advertising, especially amongst younger C2DE women. The visuals showed a close-up of a young couple kissing in a club setting and a couple on a bed partially clothed.

The lead headlines for the advertising - *I've got Chlamydia because...I've got gonorrhoea because...* - were very involving for a majority of respondents: *What has he/she got?'*

The focus on a specific STI in the headline interested a majority of the sample. Respondents consistently requested more information about the specific symptoms and consequences of contracting individual STIs.

The visuals were also of interest - both characters are involved in the 'moment' – and this heightened personal identification with the core focus on unprotected sex: *'we've all been there'*.

Gonorrhoea was an unfamiliar term, which did affect interest for some respondents. The copy seemingly missed an opportunity to challenge further consideration about the consequences of contracting Gonorrhoea. The '1 in 9' statistic lacked the capacity to challenge many respondents at a personal level, especially young men.

Women identified with the excuses listed in the main section of the execution and did consider their personal vulnerability as a result. Men remained less convinced by the excuses but did focus on the 'disease' and think about the value of using a condom.

The Chlamydia copy was more powerful than the Gonorrhoea copy - '*If left untreated, you could become infertile*' was thought provoking because it defined specific consequences.

Overall, both executions conveyed a clear message about the risks of contracting a STI, coupled with a clear focus on the value of using condoms.

8.8 Use a Condom not an Excuse: GP Poster and Ambient resources

The **GP poster** was considered familiar and low impact, with the typeface, specifically, identified as dated and more suited to a younger teenage audience.

The excuse stated in the centre of the execution - '*I'm allergic to rubbers*' - was familiar to women, but men were largely uninvolved: '*so what... great, another excuse*'.

The **Use a Condom booklet** was well received in principle by women, although many saw it as more suitable for a younger teenage audience. Men unanimously rejected the resource and clearly saw it as a 'school-room' resource.

The **Postcard with free condom** was well received across the sample - placing relevant resources in social settings was viewed positively. Equally, being 'free' enhanced the value of the resource for some groups.

The slogans quoted were seen as engaging and cheeky, but more information was requested about specific STIs in order to maximise interest. The slogans included; *All you have to do now is pull*, *Now all you have to worry about is your dancing* and *Now you have to choose who to get it on with*.

9. SECONDARY AUDIENCES

9.1 The Views of Parents

Parents typically supported both the campaign aims and intended media channels. All felt that the campaign was much needed, since recall of media coverage about STI rates was high: *'they think they know it all but there not putting it into practice'*

In general, parents favoured a strong campaign approach, with 'shock' tactics employed.

Sexual History was seen as a clever and engaging approach, likely to appeal to a wide cross-section of adults. However, it was seen to focus on women and the limitations of the 'changing heads' device was noted, since this was only felt to be effective in the TV/Date script.

Sexperts was disliked by a majority, since it was felt to communicate a sense of promiscuity and/or perversion.

Use a Condom not an Excuse. Sex Sense was supported as an idea but parents had issues with the TV scripts in particular.

The TV executions were, again, felt to focus on women and lack a clear consequence message or positive course of action. Most believed that this would not engage their children.

Parents also thought that the execution style was dull and unexciting. Additionally, most had concerns about the unsuitably 'sensible' tone of the executions.

Condom Essential Wear was favoured for its relevant fashion branding approach *'they're all into fashion'*.

There were, however, some concerns that the fashion style would overshadow the message – but, overall, most felt the message was a positive endorsement that all sexually active adults could support.

The TV and radio scripts were felt to add the necessary ‘shock’ tactics, adding depth and range to the communication.

9.2 The Views of Gay and Bisexual Men

Gay men were very familiar with advice and warnings on condom use and STIs from gay media and press. There was, however, no interest in a government campaign aimed at the heterosexual community.

The Sexual History route was disliked as confusing and off-putting. Equally, this was the only route which generated cause for concern amongst this sample segment, since the changing faces might be interpreted as transsexuals.

Use a Condom not an Excuse. Sex Sense was thoroughly disliked as ‘*ugly and unappealing*’. The excuses were seen as lame and predictable.

Condom Essential Wear was the clear favourite – typically seen as young, trendy and aspirational. Equally, it clearly communicates the condom message.

The High Street display and belt buckle ambient ideas were also well received.

Bisexual men typically reflected the views of the primary heterosexual audience. Most felt the routes lacked a clear challenge (to men in particular) to consider the value of using a condom.

9.3 The Views of African Men and Women

Male and female African respondents, aged between 15 and 34 years, all saw themselves as part of a modern, culturally open, multi-ethnic society. Consequently, African respondents' personal reactions to the campaigns broadly mirrored the reactions of the main male and female target audiences.

Male African respondents (who were all from educated backgrounds) typically favoured 'Condom essential wear' as the campaign style most relevant to the contemporary lifestyle which they and their peer group shared.

Younger female African respondents preferred what they perceived as the more explanatory, educational approach of 'Use a Condom, not an Excuse', a choice which reflected a younger viewpoint.

Clearly, respondents were conscious that attitudes towards sex are considerably more conservative amongst the broader Nigerian community and particularly the Somali community where sex is not discussed. In particular, Somali respondents did not feel that any of the campaigns would be appropriate or acceptable for the Somali community - and an entirely different and targeted approach would be required.

More generally, African women and Somali males were conscious that more traditional members of their communities (i.e. their parents) would be likely to object to images that might be construed as 'promoting sex'. One example was the Condom Essential Wear 'urban couple' execution. Somali respondents felt that the fashion branding approach should be balanced by stronger health education messages.

Some male African respondents became confused and disturbed by the gender manipulation employed in the Sexual Histories route.

The 'sexpert' strapline from the Sexual Histories route was identified as culturally inappropriate: *'You don't want to be an expert at sex. We know who they are...'*

The “Use a Condom, not an Excuse” strapline was considered a sound, pithy, to-the-point message emphasising personal responsibility.

‘Condom Essential Wear’ was considered an acceptable headline, which suits the fashion branding approach.

APPENDIX A: TOPIC GUIDE

Introduction; self, company and purpose of the study' *to gather the views and opinions of people toward a new advertising campaign dealing with sexual health. I will be showing you a number of ideas, stress they are not finished adverts*
Outline code of conduct and data protection requirement in relation to recording the session and respondent guarantee of anonymity

Respondent background; name, age, work status, relationship status and favourite social activities. For parents/grandparents establish their family circumstances

General warm-up; current media consumption, what TV watched, papers/mags read, radio listened to, how spend free time, what are life's hassles and what are life's fun time

Introduce the creatives; *we will rotate order of showing the stimulus to respondents, also we will stress once again that they are not finished adverts*

Initial reactions, give respondents time to review stimulus

- What strikes you about this idea?
- How would you describe this idea?
- Is it of interest to you? Why/why not?
- Who is aimed at?
- What is its main focus and message behind the idea?

The creatives in detail:

FOR EACH CREATIVE ROUTE:

- Spontaneous responses:
 - What were your first impressions of this?
 - What did you like/dislike about this?
- Understood communication:
 - What was the *main message* of the advertising? [Explore to see if 'use a condom every time' emerges. If not, what elements are detracting from this?]
 - What else are they trying to say?
 - Ease of legibility/understanding of headline and body copy? [Understand importance of copy in delivering overall message and any issues around size and complexity of words used]

- Relevance:
 - Who is the ad aimed at? Them? Who else? Why? (probe age, gender, lifestage etc)
 - What within the ad fits with you and your lifestyle? What elements are more ‘someone else’- who and why?
 - Do they relate to/dislike/aspire to be the people featured?

- Likely impact on behaviour:
 - How does the ad make them feel [probe, in regards to relationships]
 - Do you think that you would listen to these messages? Why/not?
 - What difference, if any, do you think that it would make to your own behaviour? Why/not? Do you think it would affect anyone else – who and why?
 - What are you more/less likely to do now? Why?
 - Probe; does it alarm – encourage ‘worried well’ or drive people to get tested?

- Understanding and appeal of creative idea:
 - Respondents to ‘play back’ ad – describe as if describing to someone else who hadn’t heard it? [ie Check whether ad is understood] What are the good bits about the idea, the less good bits? Why do they think so? (Note how memorable ad is)
 - If they find any of the creative funny, is that a good thing or not, if not, why not?

- Impact and Stand Out:
 - What is the main thing that stands out from the advert?
 - What has the ad told them that is *new*?
 - Any other ad it reminds them of? Similarities/differences?

- Branding and Perceived Source:
 - Assess logo/ sign off
 - How would you describe the tone of this idea?
 - Probe: who is speaking to you through this idea? Is it a person you would listen to about sexual health? Is it clearly NHS? If not, why not and who is thought to be behind this idea?
 - Does the NHS brand help or hinder the communication’s credibility?

- Concerns/issues:
 - Anything that worries/concerns you about this idea? What and why?
 - Do you think that your friends/other people that you know would share these concerns? Why?
- Suggestions for improvement
- Comparisons/Associations:
 - How does this compare to other adverts you've seen?
 - What, if anything does it remind you of?

Specific questions for each route:

SEX SENSE/SEX LIFE & USE A CONDOM, NOT AN EXCUSE

TV:

- How true is the situation described in the ad? Have they had a similar experience?
- What happened for them? Did they make an excuse? How did they feel about it afterwards
- How does the ad make them feel? That they should do anything differently? What about other people? Where is this coming from – understand specific elements. [Understand whether validates giving an excuse instead of using a condom]
- How do they feel about the 'protagonists'/characters in the ad? Could they be one of them? Would they mind being seen as either of them, why? Do they know other people who are really like those people – what is it about them/why? [Understand if being stigmatised, if any intrinsic negativity]
- How 'dangerous' does the situation have to be to prompt use of a condom? Is the risk of getting a STI enough? To what extent is mentioning names of STI's important? What about other consequences?
- What sort of style would they expect the ads to have – explore how trendy/beautiful/ordinary etc – draw comparisons with other advertising they know and press ads for illustrations. Why is this style important?

Press:

- How easy/difficult is it to make sense of these ads?
 - (For lower literacy levels in particular), what is focused on (image, headline, endline, etc) and what is lost? Can they be bothered to read the whole ad – why, what keeps their interest going? If not, why not? What is their overall take-out if the entire ad is not deconstructed?
- What do they think of the imagery used? How would they describe the style?
 - Is it appropriate for the advertising content, is it engaging?

- How would they describe the people featured?
- To what extent should the people/style be ordinary/normal versus more aspirational/trendy/beautiful, etc
- How does it compare to what they *expect* from the TV executions – if different, which is better and why?
- How do they feel about the ‘protagonists’/characters in the ad? Are the people featured people like them, or are they other people, how and why?
- Would they mind being seen as either of them, why? [Again, understand if being stigmatised, if any intrinsic negativity]
- How does the ad make them feel/respond? That they should do anything differently? What about other people? Where is this coming from (understand specific elements)? [Understand whether validates giving an excuse instead of using a condom.]
- As with TV, how ‘dangerous’ does the situation have to be to prompt use of a condom? Is the risk of getting a STI enough? To what extent is mentioning names of STI’s important? What about other consequences?

Idents/identities

In some groups explore identities first – introduce as a ‘logo’ or stamp of identity that would be used in a sexual health advertising campaign and also appear on all sorts of other sexual health materials, condoms, promotional activity etc.

- Explore spontaneous associations, positives and negatives and understand preferences

In other groups, explore Sex Sense ident within context of creative work then Sex Life as an alternative

- What does it add/contribute to the overall message?
- To what extent does it encapsulate the idea of sexual health and using condoms? [Understand role of time/if it could build into a ‘shorthand’ for sexual health over the duration of the campaign and beyond]

Ambient:

- Where could they imagine these being distributed/seen, that would get through to them? Where would they be happy to pick them up/use them?
- If they wouldn’t be happy to pick them up/use them, why/why not?
- In what ways do they/do they not look related to each other?

Overall:

- *Synergy* - How well do the different elements of the campaign hang together?
- In what ways are they similar?
- In what ways do they/do they not look related to each other?
- *Longevity* - Do they think that people would continue to take notice of the ads once they knew them? Why/why not? Do they imagine lots of different ones?
- *Accessibility* - How easy/difficult is it to make sense of these ads?

CONDOM ESSENTIAL WEAR

TV

Understanding for each of the executions and across both men and women

- How would they describe the tone of the ad?
- How do they feel in response to the ad – what emotions are they experiencing?
- How engaging and appropriate is this? How would they make it better?
- To what extent does it prompt thought? And what are those thoughts specifically about? What kind of action does it inspire, would it affect behaviour in anyway?
- Does it remind them of any other ads they've seen – which ones, why?
- What effect does this have? E.g. more engaging, surprising, hard-hitting etc versus less credible/serious, a 'spoof'

Messaging:

- What is the main message? And the sub messages?
- To what extent is it encouraging normalisation of condom use? Does it encourage change of behaviour generally?
- Do they think people will take it seriously? Why/why not?

Press

Cut-through:

Within some groups, show poster first (and this route first). Hold up briefly, then explore:

- Have they seen this ad before? Who is advertising, what is it about?

Where seen later within the group:

- If they saw this ad at a glimpse, what elements do they notice/take away from it? (understand whether clocked as fashion ad only or whether juxtaposition of fashion with word 'condom' cuts through to catch attention)
- (For lower literacy levels in particular), what is focused on (image, headline, endline, etc) and what is lost? How easy is it to read the body copy? Are there any other reasons why they can't/don't read the copy?
- What is their overall take-out if the entire ad is not deconstructed?

Messaging:

- What is the main message? And the sub messages?
- To what extent is it encouraging normalisation of condom use? Does it encourage change of behaviour generally?
- Do they think people will take it seriously? Why/why not?
- How does the NHS logo work within this idea? Did they notice it – if/when they did, how does it affect the overall message?
- What difference does it make showing the NHS logo in different places? (probe effect on impact/noticeability as well as contribution to message)

Overall

Style

- To what extent does the style fit with the style of the press? [Understand synergy – is a fashion-style visual enough versus do they look too different, etc]
- If no/different – is one more appropriate than the other, or is another direction felt more appropriate and why]
- To what extent do they look at fashion ads? Which ones do they particularly like?
- Why do they like those ads? (probe; ideas for clothes, pleasant to look at/beautiful people vs more ‘raw’ approach, specific styling of ad, etc)
- What fashion brands are they most into at present? Can they recall any ads for those – which ones, why?

Show mood board ...

- How much does the imagery/photography (TV and press) reflect the style they are interested in/ match them as individuals [Fully understand resonance, role/appropriateness of aspiration and perceptions of attainability]
- Describe the aspects that fit well
- What else is missing/could be better to make it more ‘them’?
- What would it be (more) like if it was definitely for other people/not for them?

- *Synergy* - How well do the different parts of the campaign fit together? Are they recognisable as one campaign – in what way? In what ways are they different from each other?
- *Longevity* - Do they think that people would continue to take notice of the ads once they knew them? Why/why not? Do they imagine lots of different ones?
- *Accessibility* - How easy/difficult is it to make sense of these ads?
- Could there be a fashion brand called ‘Condom’? Would anyone think it was a clothes label?

Radio

- How well/not does this execution fit with the press and the TV?
- In what ways?
- Does it perform any function in drawing the elements of the campaign together? What, how and why?
- In what ways is it perform better or worse than the TV or Press?

Ambient

- If Condom Essential Wear was applied in ‘fashion situations’ to help promote the campaign e.g. t-shirts and belt buckles (show ambient board), what affect does this have?
- To what extent does it support the advertising campaign – add/detract, how?

- Impact on credibility – e.g. does the campaign seem more/less serious? does it make the idea more confusing (e.g. more likely to be mistaken as an actual fashion label)?

SEXPERTS USE A CONDOM

Poster

Within some groups, show 48 SHEET SINGLE POSTER first. Hold up briefly, then explore:

- What is this ad about? Why, which elements are telling them this [Understand whether concept of sexual history is understood]

Endline/idents

- What do they think of the sign off from the ads ‘sexperts use a condom’
- Explore all spontaneous responses/reactions
 - Who are ‘sexperts’? Does it include them, who else might it include?
 - What else springs to mind/any other associations?
- What does the style/way that it is written add? Do they like it? What does it remind them of?
 - In a years’ time – would it look dated? Would it be memorable? How about in 3 years? 5 years?
- Explore alternative sign offs, designed up and in situ
 - To what extent are they an improvement– what do they add, why?
 - To what extent are they less good – why?
- To what extent does it encapsulate the idea of sexual health and using condoms?
 - how memorable are they? Can they imagine this as a device on other advertising or all sorts of other sexual health materials/promotions? [Understand role of time/if it could build into a ‘shorthand’ for sexual health over the duration of the campaign and beyond]

Overall

For TV and creative route as a whole:

- What is the main message of these ads? And the sub messages? Understand spontaneous hierarchy
 - To what extent is it about promiscuity vs condom use/prevention of STIs
- What is their reaction to the message? What do they think about first, next in terms of their own behaviour/what they will do?
 - Explore extent to which first reaction is to: will think about it/ask who else partner has slept with; reject idea of considering partner’s ‘baggage’ ; go and get tested for STIs; use a condom to make sure not at risk, etc
 - What do they feel about the imagery/visual device – spontaneous/instinctive reactions?
 - What emotions does it prompt?
 - If prompts discomfort in any way - on what grounds e.g. gender, race?

- *Synergy* - How well do the different parts of the campaign fit together? Are they recognisable as one campaign – in what way? In what ways are they different from each other? How important is humour to this synergy? What role does the sign off play?
- *Longevity* - Do they think that people would continue to take notice of the ads once they knew them / does interest fade once deconstructed? Why/why not? Is the sign off enough to carry through to different creative work?
- *Accessibility* - How easy/difficult is it for people to get the creative idea? Accessible, too clever?

Sum-up for Each Idea:

- What is memorable?
- What saying about sexual health?
- Who is it aimed at/likely to attract the attention of?
- Any concerns or issues with the idea?
- Is it likely to offend or exclude anybody?

Sum-up:

Preferred idea for a sexual health campaign aimed at adults aged 16-34 years aiming to 'normalise' condom use and raise awareness of STIs

Specifically, compare across ideas:

- Which preferred – why?
- Which do you think is likely to have most impact on your behaviour why? Which is likely to have most impact on other people/everyone else, why?
- Which do you think their friends/other people you know are most likely to notice of? Why?
- Any additional comments/ideas for improvement?

For Parents and Grand parents

- What role could this campaign have?
- Do you support the aims of the campaign and the media channels suggested for the campaign activity?
- What role if any could this campaign have for parents discussing sexual health issues with their children?