Assessing the perceived benefits of a new condom wrapper/integrated applicator:

An exploratory study

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**Abstract**

Errors and problems associated with male condom use are very prevalent and increase the likelihood of inconsistent and incomplete use, thereby compromising condom effectiveness. The aim of this study was to assess the perceived benefits of a new condom wrapper/integrated applicator designed to reduce barriers to condom use and lessen the likelihood of user errors and problems. After viewing videos depicting features of the wrapper/applicator, participants (N = 547; 62.9% male, M age = 29.2) completed online questionnaires. Most participants reported that the product would make condom application easier and quicker, make them more confident that condoms had been applied correctly, and make sex more pleasurable and playful. The majority of participants who had recent experience of condom use errors/problems reported that the use of the product would likely prevent these issues from occurring. Reduced chance of condom damage, the design features of the wrapper, and not having to touch the condom itself during application were perceived as particular benefits of the product. The findings suggest that the product might reduce the likelihood of a range of condom user errors and problems and enhance pleasure during condom-protected sex. Future larger-scale studies that involve participants physically testing the condom wrapper/applicator are warranted.

**Introduction**

Although male condoms remain the main protection against sexually transmitted infections (STIs), their effectiveness is compromised by inconsistent use and errors and problems. Condom use-associated errors and problems are common and occur across a wide range of populations and ages. (1) A diversity of samples has been studied, for example, sex workers (2,3), STI clinic attendees (4,5), monogamous married couples (6,7), and college students (8,9). Some studies have focused on populations at heightened risk of STI infections and HIV such as men who have sex with men. (10,11) The large majority of research has been conducted in developed countries and mostly in North America. (1) The most frequent errors and problems documented have been prevalence of breakage and slippage, erection problems during condom application or during sex, incomplete use (not using condoms from start to finish of sex) and problems with the fit and feel of condoms. (1)

User errors and problems not only reduce condom effectiveness (12) but also create barriers to future use. For example, men who experience condom-associated erection loss when using condoms are more likely to report inconsistent or incomplete use (not using condoms from start to finish of sex). (4) Both men and women also often perceive condoms as a “turn off” and as interfering with sexual pleasure (13,14).

Reducing barriers and problems associated with condom use were the impetus to the development of a new condom wrapper/integrated applicator (*Temptt*) that was the focus of this project (see Table 1 for a description of the product’s key features). The product is intended to work with both latex and synthetic condoms whilst still retaining compliance with the existing ISO4074 and ISO23409 standards. It was also designed to be easy to open and to apply, without touching the condom or the penis. The wrapper contains lubricant that covers both the inner and outer surfaces of the unrolled condom. The product includes visual features: jeans and a zipper on the outside of the wrapper (to serve as a cue to prompt condom use) and optionally may include erotic images of a couple in various sexual positions on the inside of the wrapper (designed to make condom use more playful and pleasurable). The aim of the current study was to assess the perceived benefits of this condom wrapper/applicator.

**Methods**

*Participants*

Inclusion criteria were men and women aged over 18 years, who had prior experience of using male condoms. Recruitment was via targeted advertising on Facebook and Twitter. Organizations linked with sexual health, such as the Family Planning Association and Brook, were also asked to share the advertisement.

*Procedure and measures*

 All of the study procedures were completed online, using *iSurvey*, a survey generation tool developed at the [*blinded for peer review*]. Potential volunteers were first presented with an information sheet and consent statement. Those who completed the questionnaire were given the chance to win 4 x £50 Amazon gift vouchers. The questionnaire took between 10-40 minutes to complete; completion time varied because the number of questions asked depended on participant responses (see Measures). Ethical approval was obtained from [*blinded for peer review*]. Data collection took place between June 2017 and August 2017.

 Participants first completed a questionnaire assessing demographic and sexual history variables (see Table 2 for variables assessed). They were then shown two videos of the condom wrapper[[1]](#footnote-1),[[2]](#footnote-2) and were asked two open-ended questions about what they particularly liked/disliked about the product. These were followed by questions that specifically asked about perceived ease and speed of application, how complicated the wrapper would be to apply in comparison to traditionally wrapped condoms, how confident they would be that the condom had been applied correctly, and lastly, their likely motivation to use the product (response options: yes/no/unsure).

 Finally, participants completed a revised version of the Condom Use Errors/Problems Survey, (CUES) (15) comprising 11 items on how often they experienced various condom use errors/problems during the last three times they had condom-protected intercourse (defined as penile-vaginal or penile-anal intercourse). Errors such as forms of incorrect use (e.g., putting condom on after starting sex) and problems such as breakage or slippage, erections difficulties and discomfort are assessed. Respondents indicate whether or not each condom use error or problem occurred during the last three times they used and applied a male condom and if so, if it occurred on one, two or three occasions. The survey items have evidence of content and face validity because they were informed by widely cited condom use guidelines. (16,17) Our studies have found, for example, that respondents who reported previous instruction on correct condom use were found to have lower error scores than those who had not such instruction (9) and correlations have been reported between errors and specific problems such as incomplete use and erection difficulties (4) and using sharp objects to open package and condom breakage (18).

Participants who had not used a condom at least three times within the past three months did not answer the CUES and ended the survey. The remaining participants completed the CUES and based on their answers regarding specific errors/problems, were then presented with another short video depicting the specific features of the wrapper designed to prevent each error/problem. They then answered questions about whether they felt that the relevant feature would: prevent the error/problem from happening in the future (yes; no; maybe) make them more likely to use a condom (response options: more likely; less likely; no more or less likely; don’t know), and more likely to apply the condom before sex had begun (more likely; no change; less likely; don’t know).

*Data analysis*

The closed questions were analysed descriptively to obtain frequencies and percentages. The two open-ended questions pertaining to which features participants liked or disliked about the applicator were assessed qualitatively and categorised according to theme. Participant responses were read and assessed by one author in order to identify unique responses that had not been measured adequately by the closed questions, and to identify emergent categories. These responses were assessed a second time to apply each comment to one or more of these categories. The second author reviewed and cross-validated these categories until agreement was reached on the final categories.

**Results**

Table 2 displays descriptive information for the sample. A total of 547 participants completed the survey (*M* age = 29.2, *s.d.* = 8.4). The majority were male (62.9%), lived in the UK, (92.3%) were White British (86.3%), and identified as heterosexual (79.1%). Over half had been screened for STIs on at least one occasion (59.6%); 14% had been previously diagnosed with at least one STI, most commonly Chlamydia. Thirty-eight percent reported that they “always” used condoms and 20.8% used them “most of the time.” Most participants indicated that they used condoms to prevent pregnancy (37.6%), to prevent STIs (19.7%), or for both of these reasons (39.0%).

For all but two items, the majority of participants reported that the product would be an improvement over standard types of condoms; the two exceptions were condom use negotiation and increasing the likelihood that a condom would be applied before starting sex (see Table 3). Overall, 71.1% considered that they would be more willing to use the product than their “usual condom.”

For those participants who reported having experienced specific condom use errors or problems during the last three times they used a condom, the large majority thought that the product would have prevented the error/problem occurring. For example, 79 (96.3%) of those who put the condom on inside out and then flipped it over, 38 (95%) of those who had let condoms come into contact with a sharp object, and 48 (62%) of those who reported condom-associated erection loss thought that use of the condom wrapper would prevent these issues from occurring (see Table 4 for full results).

In response to the two open-ended questions about what they particularly “liked” or “disliked” about the product, the most frequent comments pertained to reduced damage to the condom (n = 96), the “unique,” “stylish,” and “discreet” design (n = 58), and not having to touch the condom itself to apply it (n = 41). Other participants commented that there would be less transfer of lubricant onto hands (n = 21) and that use of the condom wrapper “wouldn’t ruin the moment” (n = 9).

Some sample comments provided about the ease of application were:

 *“The tear strip appears much easier than trying to tear the foil. Not having to physically touch the condom with your hands is a pro point too. The smell lingers on your hands and is not the nicest of odours and also is cleaner and more hygienic.”* (F, Het,[[3]](#footnote-3) 30 years old)

 *“Yes, the ease of application makes it less likely to be torn by sharp finger nails. Helps to maintain the spontaneous nature of passionate sex.”* (M, Het, 68 years old).

One participant commented that the applicator might be especially useful for young people:

 *“So much easier to put on...no issue with knowing which way up it should go. I teach Sex Ed, this would be so good as often young people don't know what to do.”* (M, Het, 32 years old)

Another participant noted that the produce might be particularly helpful in situations where users’ judgments were reduced by alcohol:

*“Looks very good! Ease of use and packaging is simple, condoms aren't easy to put on when drunk this would help immensely and in general would be an upgrade.”* (M, Het, 24 years old)

Regarding perceived dislikes, the most common concerned uncertainty of how well the wrapper would be to apply to a penis that was not fully erect/less rigid (n = 11) or concern that using the product may be less intimate or erotic than traditional application (n = 7). Some sample comments were:

 *“I dislike that the applicator looks visually to require a rock-hard penis. It does not look easy to apply it to a 70-90% hard penis, whereas conventional ones can be rolled down by hand. This is important due to the distraction of applying a condom reducing erection hardness for me and many others.”* (M, Bi, 27 years old)

*“It's harder to check for any unwanted holes that may have accidentally been created…” (*M, Het, 18 years old)

**Discussion**

Overall, the findings suggest that the new *Temptt* design of condom wrapper/applicator was broadly acceptable to potential users; participants thought that the design would help to prevent and address specific condom errors/problems and the majority reported being more likely to use Temptt than their ‘usual’ condom. Participants thought that the product would be an improvement over standard condoms in several ways, including ease of application and confidence that condoms have been applied correctly. They also rated the product as likely making condom-protected sex more “playful” and pleasurable.

Participants who reported experiencing a specific condom use error or problem were then asked if they thought that the product shown would prevent the specific error or problem. Very high proportions of participants thought that use of the product would prevent these errors/problems, particularly those related to condom application and erection difficulties.

The open-ended comments provided insight into what aspects of the product the participants particularly valued.Comments about reduced chance of damage to the condom afforded by the wrapper/applicator was an advantage were most frequent, followed by comments related to the design features of the product, and not having to touch the condom itself to apply it.The latter comment is interesting, given previous findings that many men and women find the smell and texture of condoms unappealing. (14, 19, 20). A few participants had negative comments/concerns; however, these comments might have been related to the fact that they only saw a prototype of the product and not the actual wrapper.

These findings suggest that if the condom wrapper becomes available, it would be beneficial to highlight that use could reduce risk of condom damage, make application easier for both men and their female partners, and enhance ‘playfulness’ of the condom use experience.

Previous applicators developed to improve the ease and accuracy of condom application such as the O-Ring Condom [<http://www.o-ringcondom.com/>], Wingman condoms [<https://wingmancondoms.com/?locale=en>] and One Touch condoms [<http://onetouchcondoms.eu/classic.html>] have tended to focus on a single issue, for example, speed of application, or the correct orientation of the condom. In contrast, the *Temptt* wrapper/integrated applicator was designed to address a range of user issues, including speed and application, but also has safeguards to prevent against accidental misuse. For example, the use of the “shield/pocket” in the product (see Table 1) that prevent the possibility of touching the outer surface of the condom or trapping air in the tip.

Limitations of this small exploratory study include the use of a convenience sample, reliance on self-report, and the inherent risk of demand characteristics in this type of consumer satisfaction survey. Despite these limitations, the findings suggest

that this new condom wrapper/applicator may improve condom users’ experience of using condoms and reduce the likelihood of a range of user errors and problems, which should increase condom efficacy. Future larger-scale studies evaluating the condom wrapper/applicator are warranted. These should involve participants physically testing the product during sexual activity and providing information about the condom experience, errors and problems, and overall satisfaction with the product.

**Conflicts of Interest**

The authors declare no conflicts of interest.

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Table 1*. Key features of the Temptt condom wrapper/applicator*

**‘Pull’ tab**

* A tactile surface that makes it intuitive to orientate the wrapper (and thus the condom inside it) the correct way up (even in the dark);
* The pull tab has an easy to grip textured surface which makes the wrapper easy to unseal (even with ‘oiled’ hands) and thus, reduces the likelihood of someone using scissors or teeth to open the package;
* If a user should still decide to open the wrapper using their teeth, then the intuitive way to do this would be to use their teeth to grip the pull tab only, rather than the whole packet (which is how a conventional condom foil wrapper would be torn open and risks damaging the condom inside);
* Regardless of whether the user chooses to use their fingers or their teeth to open the wrapper, the shearing forces required to unseal the wrapper are directly ‘up’ and ‘away’ from the condom, not ‘through’ or ‘across’ it, as is typical when opening a conventional foil condom wrapper.

**Shield/Pocket**

* Once the protective outer wrapper has been opened, the whole outer surface of the rolled condom is still protected by the applicator ‘shield’ – this prevents any possibility of contact transfer of bodily fluids from occurring;
* The tip of the condom is secured beneath the shield, between two surfaces that form the applicator ‘pocket.’ The purpose of the pocket is to ensure that when the condom has been applied, there is no possibility of there being any air trapped in the tip. How it functions is by using some of the force that is being applied by the user to open the applicator, to bring the two surfaces of the pocket into closer contact, thereby squeezing out any air from the tip of the condom.

**Unrolling strips**

* The pair of unrolling strips ensure that the user fully unrolls the condom, as the strips are designed to only disengage from the condom when the condom has been fully unrolled;
* The unrolling strips also ensure that there is no need to touch the condom as it’s being unrolled.

Table 2. *Demographic characteristics of sample (N = 547)*

|  |  |  |
| --- | --- | --- |
|  | N | % |
| Gender |  |  |
| Male | 344 | 62.9 |
| Female | 197 | 36 |
| Other | 6 | 1.1 |
| Relationship Status |  |  |
| Single (not currently dating)Single (casually dating) | 74107 | 13.519.6 |
| In a monogamous relationship | 326 | 59.6 |
| In an open relationship | 19 | 3.5 |
| OtherPrefer not to say | 201 | 3.7.2 |
| Sexual Orientation |  |  |
| Heterosexual | 431 | 79.1 |
| Gay/Lesbian | 41 | 7.5 |
| Bisexual | 67 | 12.3 |
| Other | 6 | 1.1 |
| Employment status |  |  |
| Full-time employment | 349 | 63.8 |
| Part-time employment | 44 | 8.0 |
| Self-employed | 38 | 6.9 |
| Student | 88 | 16.1 |
| Not in paid employment | 28 | 5.2 |
| Country of residence |  |  |
| United Kingdom | 505 | 92.3 |
| United States | 17 | 3.1 |
| Canada | 10 | 1.8 |
| Other | 14 | 2.8 |
| Ethnicity |  |  |
| White British | 472 | 86.3 |
| White American | 14 | 2.6 |
| White Irish | 10 | 1.8 |
| Any other White background | 24 | 4.4 |
| Black African/Black Caribbean | 6 | 1.1 |
| Any other ethnic group | 21 | 3.8 |

Table 3. *Participants’ assessment* *of different features of condom wrapper/applicator (N = 547)*

|  |  |  |
| --- | --- | --- |
|  | N | % |
| *Quicker to apply* |  |  |
| Strongly agree | 335 | 61.6 |
| Slightly agree | 145 | 26.7 |
| Neither agree nor disagree | 42 | 7.7 |
| Slightly disagree | 14 | 2.6 |
| Strongly disagree | 8 | 1.5 |
| *Less fiddly* |  |  |
| Strongly agree | 298 | 55.1 |
| Slightly agree | 138 | 25.5 |
| Neither agree nor disagree | 52 | 9.6 |
| Slightly disagree | 38 | 7.0 |
| Strongly disagree | 15 | 2.8 |
| *Easier to apply* |  |  |
| Strongly agree | 305 | 56.6 |
| Slightly agree | 143 | 26.5 |
| Neither agree nor disagree | 50 | 9.3 |
| Slightly disagree | 29 | 5.4 |
| Strongly disagree | 12 | 2.2 |
| *Make sex more pleasurable* |  |  |
| Yes | 377 | 73.6 |
| No | 35 | 6.8 |
| Don’t know | 100 | 19.5 |
| *Make sex more playful* |  |  |
| Yes | 322 | 61.2 |
| No | 153 | 29.1 |
| Don’t know | 51 | 9.7 |
| *Help negotiation* |  |  |
| Yes | 116 | 21.2 |
| No | 298 | 54.5 |
| Don’t know | 129 | 23.6 |
| *Increase likelihood to apply before sex has begun* |  |  |
| More likely | 117 | 21.4 |
| No change | 357 | 65.3 |
| Less likely | 12 | 2.2 |
| Don’t know | 45 | 8.2 |
| *More confident that the condom had been applied correctly* |  |  |
| Yes | 325 | 59.4 |
| Neither more or less confident | 171 | 31.3 |
| No | 30 | 5.5 |
| Don’t know | 19 | 3.5 |
| *More willing to use than usual condom* |  |  |
| Yes | 389 | 71.1 |
| No | 57 | 10.4 |
| Don’t know | 100 | 18.3 |

Table 4. *Number (percentage) of participants who reported having experienced specific condom use errors/problems who thought that the product would have prevented the issue/made them more likely to use a condom*

|  |  |  |  |
| --- | --- | --- | --- |
| CUES Questions | Would wrapper have prevented this issue? | Would this feature make you more likely to use a condom? | Would this feature make you more likely to apply the condom before sex had begun? |
|  | Yes | No | Maybe | More likely | No change | Less likely | Don’t know | More likely  | No change | Less likely | Don’t know |
| Flipped over (non-appliers) |  |  |  |  |  |  |  |  |  |  |  |
| N | 15 | 1 | 1 | 12 | 5 | - | - | 10 | 7 | - | - |
| % | 88.2 | 5.9 | 5.9 | 70.6 | 29.4 | - | - | 58.8 | 41.2 | - | - |
| No space at tip (non-appliers) |  |  |  |  |  |  |  |  |  |  |  |
| N | 8 | - | 5 | 5 | 8 | - | - | 3 | 10 | - | - |
| % | 61.5 | - | 38.5 | 38.5 | 61.5 | - | - | 23.1 | 76.9 | - | - |
| Did not squeeze air out (non-appliers) |  |  |  |  |  |  |  |  |  |  |  |
| N | 20 | 6 | 3 | 9 | 17 | - | 3 | 9 | 18 | - | 2 |
| % | 69.0 | 20.7 | 10.3 | 31.0 | 58.6 | - | 10.3 | 31.0 | 62.1 | - | 6.9 |
| Flipped over |  |  |  |  |  |  |  |  |  |  |  |
| N | 79 | - | 3 | 51 | 31 | - | - | 37 | 41 | - | 2 |
| % | 96.3 | - | 3.7 | 62.2 | 37.8 | - | - | 46.3 | 51.2 | - | 2.5 |
| No space at tip |  |  |  |  |  |  |  |  |  |  |  |
| N | 13 | 1 | 2 | 7 | 9 | - | - | 5 | 10 | - | - |
| % | 81.3 | 12.5 | 6.3 | 43.8 | 56.3 | - | - | 33.3 | 66.7 | - | - |
| Did not squeeze air out |  |  |  |  |  |  |  |  |  |  |  |
| N | 43 | 7 | 8 | 29 | 27 | 1 | 1 | 24 | 28 | 1 | 5 |
| % | 74.1 | 12.1 | 13.8 | 50.0 | 46.6 | 1.7 | 1.7 | 41.4 | 48.3 | 1.7 | 8.6 |
| Lost erection |  |  |  |  |  |  |  |  |  |  |  |
| N | 48 | 8 | 21 | 47 | 25 | 1 | 3 | 44 | 29 | - | 2 |
| % | 62.3 | 10.4 | 27.3 | 61.8 | 32.9 | 1.3 | 3.9 | 58.7 | 38.7 | - | 2.7 |
| No lubricant (water based) |  |  |  |  |  |  |  |  |  |  |  |
| N | 31 | 12 | 7 | 22 | 26 | 2 | - | 21 | 28 | 1 | - |
| % | 62.0 | 14.0 | 24.0 | 44.0 | 52.0 | 4.0 | - | 42.0 | 56.0 | 2.0 | - |
| Wrong lubricant (oil based) |  |  |  |  |  |  |  |  |  |  |  |
| N | 7 | 4 | 1 | 4 | 7 | 1 | - | 5 | 7 | - | - |
| % | 58.3 | 33.3 | 8.3 | 33.3 | 58.3 | 8.3 | - | 41.7 | 58.3 | - | - |
| Contact with sharp object |  |  |  |  |  |  |  |  |  |  |  |
| N | 38 | 2 | - | 32 | 8 | - | - | 24 | 16 | - | - |
| % | 95.0 | 5.0 | - | 80.0 | 20.0 | - | - | 60.0 | 40.0 | - | - |
| Condom broke |  |  |  |  |  |  |  |  |  |  |  |
| N | 6 | 2 | 4 | 6 | 5 | - | 1 | 5 | 6 | 1 | - |
| % | 50.0 | 16.7 | 33.3 | 50.0 | 41.7 | - | 8.3 | 41.7 | 50.0 | 8.3 | - |
| Condom slipped off |  |  |  |  |  |  |  |  |  |  |  |
| N | 16 | 9 | 6 | 14 | 16 | 1 | - | 13 | 17 | 1 | - |
| % | 51.6 | 29.0 | 19.4 | 45.2 | 51.6 | 3.2 | - | 41.9 | 54.8 | 3.2 | - |
| Problems with feel |  |  |  |  |  |  |  |  |  |  |  |
| N | 21 | 16 | 18 | 28 | 22 | 2 | 3 | 24 | 26 | 3 | 2 |
| % | 38.2 | 29.1 | 32.7 | 50.9 | 40.0 | 3.6 | 5.5 | 43.6 | 47.3 | 5.5 | 3.6 |

1. For links to videos, see  <https://vimeo.com/227165338/0c5bb438ec> and  <https://vimeo.com/227165803/d58fea24e9>

 [↑](#footnote-ref-1)
2. Because one of the two videos contained an image of a heterosexual couple, participants were presented with the following disclaimer: *“*Please note: for the sake of simplicity, all sexual imagery used in this small-scale survey depicts heterosexual couples only. However, in the event that a larger survey is undertaken, or this product undergoes further development work, several alternative versions will be produced using imagery more appropriate for the LGBTQ+ communities.” [↑](#footnote-ref-2)
3. Het = heterosexual; Bi = Bisexual [↑](#footnote-ref-3)