

Many GP surgeries now offer contraception, and also testing for sexually transmitted infections (STIs). Working out who would benefit from these is important, especially as women may not want to discuss their sex lives with their doctor. 'Psychosocial factors' such as stress or binge drinking may be more common among women experiencing sexual risk, so asking about these issues might be another way of identifying if a woman would benefit from STI testing or contraception.

To find out exactly which psychosocial factors are most common among women experiencing sexual risk we did two things. Firstly, we looked at the answers which nearly 5000 women gave to the National Survey of Sexual Attitudes and Lifestyles (Natsal-3). This survey is valuable because it looks at many different sections of the English female population. Secondly we looked at papers that had already been written about Natsal-3 and similar surveys across similar countries.

This is what we found from the Natsal-3 survey:

Women who said they were aged 16-24, or who binge-drank every week or who first had sex before they were 16 were more likely to report: having more than one sexual partner in the last year, not using condoms with more than one sexual partner in the last year, and not using a condom the first time sex happened with the most recent partner. Women who said they were single or not living with a partner, or who said they had used drugs at some point in their lives, were more likely to report not using condoms with more than one partner in the last year, but they weren't more likely to report not using a condom the first time they had sex.

This is what we found from the review of papers

Unstable relationships, drug and alcohol use, and smoking were looked at in many of the papers. Smoking and not being in a steady relationship were linked to unplanned pregnancy, not using contraception and having more sexual partners. Early life experiences were also important (such as having sex younger than 16 or not getting on with parents), as well as the quality of sexual relationships (having an older or an abusive partner).

Looking at what we have found it seems that asking women in GP surgeries some psychosocial questions might be a useful way of working out if it would be useful to discuss contraception and STI testing with them. To test this further we are asking women in GP surgeries and sexual health clinics to fill out a survey. This will help us work out which psychosocial questions are most useful and most acceptable to women patients.