

SCC5. CONDOM ERRORS AND PROBLEMS SCALE

USE WHEN YOU WANT TO EVALUATE:

Outcomes :

- ✓ Skills / competency and capacity of individuals
- ✓ Healthy behavior

Intervention types:

- ✓ Targeted education activities for priority population
- ✓ Targeted awareness activities for priority population
- ✓ Skill building sessions to increase capacity to engage in risk reduction behaviors

Worked well with these populations:

- ✓ Young MSM

Interventions for:

- ✓ HIV
- ✓ STIs

DESCRIPTION

A 14-question questionnaire that assesses how often in the last six months people using condoms made errors in using them or had problems with them; included here as a measure of skill.

WHY THIS TOOL MIGHT BE USEFUL FOR COMMUNITY-BASED INTERVENTIONS

- ✓ Interventions that increase condom skill result in better condom use and fewer condom use failures. In the (descriptive) Du Bois study, 95% of participants made at least one condom error, and 45% experienced condom failure.
- ✓ Appropriate for use with all priority populations
- ✓ Suitable for before and after testing of a program's effects
- ✓ Short scale, Easily completed and analysed
- ✓ Could easily be programmed to be given electronically

Available in:

- ✓ English

ADMINISTRATION, DESIGN, SCORING and ANALYSIS CONSIDERATIONS

ADMINISTRATION

- This questionnaire should take about 10 minutes to fill out each time.
- Tell participants why you are using the questionnaire, being clear that it is to evaluate the program and not them, to help make the program better.
- Participation should be voluntary, so tell participants that it is ok if they do not complete the questionnaire, and assure participants that there are no negative consequences if they don't want to complete it. Give them a way to do something else at the same time that is similar to completing the questionnaire so that confidentiality of this decision is protected. (For further information on ethical considerations in carrying out evaluations, see [Ethics Resources](#)).
- If used in a group setting, ensure that people feel safe and that the space is confidential; no one can see their answers (can see their screen or papers), and put completed questionnaires into a sealed envelope.



SCC5. CONDOM ERRORS AND PROBLEMS SCALE

DESIGN OPTIONS

Measuring before and after intervention (this is the only option for this tool, as people's memories for the 6 months prior to the start of the intervention are not likely to be accurate.)

1. **WHEN TO USE:** Have the questionnaires filled out before the intervention or at the very beginning of it, and again after, as close to the end as possible (often the very last session is not suitable because it may be a celebration, or have low attendance).
2. **LINKING RESULTS:** Include a way to match the same person's pre and post questionnaires while protecting confidentiality, for example using a [password](#) or unique identifier that respondents generate and remember.
3. **SCORING:** Create each person's total Condom Errors and Problems Score by calculating his or her [average](#) of the 14 questions. If questions are left blank (likely because participant doesn't know), then calculate the average of the completed questions. Average scores can range from 0 (never) to 4 (always). The lower the score the fewer errors and problems.
4. **ANALYSIS:** Compare the pre and post scores for each individual, noting how many people improve, how many stay the same, and how many get worse.

SCC5. CONDOM ERRORS AND PROBLEMS SCALE

When you used condoms during the last 6 months, how often					
	Never				Always
Errors					
1. Did the condom come into contact with a sharp object?	0	1	2	3	4
2. Was the condom taken off too early?	0	1	2	3	4
3. Was the condom put on too late?	0	1	2	3	4
4. Was the condom put on upside down?	0	1	2	3	4
5. Was an oil-based lube used?	0	1	2	3	4
6. Was there no space at the end of the condom?	0	1	2	3	4
7. Was a water-based lube NOT used?	0	1	2	3	4
8. Was the condom NOT checked for visible damage?	0	1	2	3	4
9. No air was squeezed out from the end of the condom?	0	1	2	3	4
Failures					
10. The condom slipped during sex?	0	1	2	3	4
11. The condom slipped during removal?	0	1	2	3	4
12. The condom broke?	0	1	2	3	4
Erection Losses					
13. During sex?	0	1	2	3	4
14. While applying the condom?	0	1	2	3	4

Sources:

Mustanski, B., Garofalo, R., Monahan, C., Gratzner, B., & Andrews, R. (Nov 2013). **Feasibility, acceptability, and preliminary efficacy of an online HIV prevention program for diverse young men who have sex with men: The keep it up! intervention.** *AIDS and Behavior*, 17(9), 2999-3012; Du Bois, S., Emerson, E., Mustanski, B. **Condom-Related Problems Among a Racially Diverse Sample of Young Men Who Have Sex with Men.** *AIDS Behav* (2011) 15:1342–1346.