



London Borough  
of Hounslow

**healthwatch**  
Hounslow

# Young People's Sexual Health Services in Hounslow

Healthwatch Hounslow Report  
March 2023



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# Organisations involved

**Healthwatch Hounslow** is your local health and social care champion. From Feltham to Chiswick and everywhere in between, we make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



Healthwatch Hounslow were commissioned by the **London Borough of Hounslow** as the independent consumer champion to carry out a research project seeking insights into the provision of existing sexual health services for young people in Hounslow.



**London Borough of Hounslow**

## About Young People's Sexual Health Services in Hounslow

Young people in the borough have free access to a number of sexual health services including the Condom-Card (C-Card) and National Chlamydia Screening Programme (NCSP). Previous engagement work from the borough revealed there is some lack of knowledge by young people of these programmes and where to access these services. This was identified through a previous engagement completed by the local authority.

## Aim of the Study

This study had two main areas of focus:

- a) To gather evidence to hear directly from young people about their knowledge, experience and needs on sexual health services.
- b) To perform a mystery shopper exercise, with young people acting as service users at pharmacies across the borough who were subscribed to delivering sexual health services to young people.

## Objectives

- To understand where young people would like to access NCSP and C-Card
- To understand what young people know about existing services
- To identify barriers to accessing sexual health services
- To review the experience of accessing sexual health services within pharmacies.

# Executive Summary

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- A) What are young people's experiences, knowledge, barriers to access and needs of sexual health services?**
- B) How good is the quality of pharmacies delivering sexual health services for young people?**

This study revealed issues in several areas. Firstly, awareness of free sexual health services was low and young people did not know how or where to access these services. Engagement did not necessarily reflect or make use of modern technologies. Within schools, there is plenty of opportunity to reach and engage with young people on sexual health topics but this appears to be under-utilised, with no support for teachers delivering the information.

The second part of the study reviewed how good pharmacies were in delivering sexual health services. By using mystery shoppers aged 16 – 21 who reflected the age of service users, our findings were very concerning. Despite being signed up to offer sexual health services, there was minimal delivery of any services and information. Signposting was inconsistent, haphazard and occasionally inaccurate. Some visits carried out at the end of the exercise proved to be more positive but overall the services offered were inadequate.

As a result, we do have concerns for young people on the promotion of sexual health services, and the quality of an essential front line service by pharmacies contracted to deliver the service.

## Reaching out



**112 Young people engaged with on a survey**

An online survey for young people age 16 – 24 was shared with two local schools, who supported the programme.



**2 x 25 Year 11 young people engaged in a focus group**

Focus groups allowed for a deeper conversation on young people's experiences



**5 Mystery Shoppers**

A team of mystery shoppers age 16 – 21 visited local pharmacies to research the delivery of sexual health services to young people.

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## Key Findings and Recommendations

We found a number key themes that stood out from the research.

### Promotion of Sexual Health Services

#### General Promotion of Sexual Health Services

Awareness by young people of the Condom Card (C-Card) and National Chlamydia Screening Programme (NCSP) was very low. Often they simply had not heard of the free condom scheme or STI test-kits and so were not using them.

**Recommendation:** Share information of what services are available through advertising on social media (Instagram and TikTok) and through schools.

#### Support for PHSE Teachers on Sexual Health Services

PHSE teachers were keen to share information on sexual health services with students but had limited resources and time to research local sexual health services themselves. As well as PHSE classes and assemblies, teachers suggested they can improve communication with students through weekly e-bulletins and display screens around the premises.

**Recommendation:** Package up information on sexual health services in neat PowerPoint presentations or videos which require minimal input from teachers but allows them to share up to date and accurate information.

#### Share information on Sexual Health services on a regular basis

The group of 16 year old mystery shoppers could only vaguely remember one occasion where they might have been given information in class on sexual health services. Furthermore, teachers said that 16 year olds had missed out on two years of PHSE classes due to covid – as such they are behind on their knowledge of the subject.

**Recommendation:** To compliment the above recommendation, information shared in schools should be frequent not just annually – at least quarterly so that all students are reached and have up to date information. It will also reinforce messaging on safe sex in all sexual activity.

#### Overcoming religious and cultural barriers to sexual health education

At times there was a reluctance to engage with discussions by some students as they considered that the topic didn't affect them as 'sex outside of marriage' was against their religious beliefs.

**Recommendation:** Tackling the importance of contraception and the use of STI testing beyond sexual behaviour outside marriage may enable better engagement with students on the sexual services that are available to all young people, so knowledge is gained regardless of religious beliefs.

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## Key Findings and Recommendations Continued

### Access to Sexual Health Services

#### Privacy and confidentiality

The survey results and the mystery shopping exercises revealed the importance of privacy to young people. The young people appreciated the use of private rooms in pharmacies for some of their conversations. Some students were also nervous about their information being shared online.

Recommendation: For privacy, specially allocated rooms for discussions were important. Our mystery shopper got around discussing sexual health matters out loud in a pharmacy by saying 'I've got something personal/embarrassing to ask' – which meant pharmacists immediately took them to private rooms. However, some had no idea that a private room was even an option so promoting this service may help privacy and engagement.

Anonymity was important too and where possible, services should try to collect minimal personal data.

#### Accessing STI test kits: from pharmacies, GPs and specialist service pick up points

The survey results showed that young people were very interested in accessing Sexual Transmitted Infection (STI) test kits from pharmacies and GPs. This perhaps reflects the need for anonymity, convenience and accessibility.

Recommendation: Easy access in ordering/picking up STI tests at specialist service pick up points may help encourage regular testing. Furthermore, given the lack of participation by pharmacies identified in this report, a review on how young people can access kits, and how this information can be communicated is essential. All participating venues should be regularly monitored to ensure young people are not dissuaded from using the service. Young people expressed a particular interest in accessing services from venues they regularly visit such as Boots, Superdrug and supermarkets.

#### Accessing STI test kits: from schools

During discussions in the focus groups, many students were keen for more access to free contraception and STI kits through schools – as long as they could do so with some degree of anonymity.

Recommendation: Improve access to contraception and STI test kits in schools. This might be through visiting school nurses, vending machines, distributed during PHSE classes etc. Respondents to the survey also suggested information should be given in assemblies.

#### Empowerment of young people

Some young people said that there was societal pressure to have sex before they were ready.

Recommendation: Empowering young people to be confident about having sex when they are ready and having the confidence to insist on contraception and regular STI testing might normalise good sexual health practice.

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## Key Findings and Recommendations Continued

### Improving Sexual Health services provided by Pharmacies

#### Rethink the entire provision of sexual health services by pharmacies

The majority of pharmacies were not able to offer young people core sexual health services they had signed up to provide. As a result, young people have lost a key venue for accessing services.

Recommendation: If young people are going to be directed to pharmacies then the service needs to function properly. It needs to be well-set up, pharmacy staff (including counter staff) trained, and vitally, regularly monitored to ensure it is fit for purpose.

#### Clear signage of participation in sexual health services by Pharmacies

There was minimal signage of sexual health services within the pharmacies, and when it was present it was in the private room which is too late if serving as a promotion tool.

Recommendation: There should be a sticker on the door/window saying 'C-Card and STI testing for under 25s service here'. There should be leaflets and posters on display inside the pharmacy, not just in the private room. Ideally staff should wear a C-Card badge, to help reassure young people that the pharmacy will know about the service. A system to refresh and re-order information leaflets must be included in any commissioned service.

#### Consistency in sexual health service leaflets

It is conjecture but noticeable that on the final day of the visits pharmacies started giving more help. They may have realised that mystery shoppers were active. The responses seemed to be better as they gave out different leaflets, but were still scrambling for phone numbers on google – and in general did not have the resources to give young people up to date information.

Recommendation: Pharmacies should be provided with an informative leaflets for sexual health services for the whole borough of London. When they run out, they should have a route to ordering more. Having stock of leaflets and ensuring regular supplies are obtained promptly should form part of monitoring the service.

#### Lack of participating pharmacies in centre of Feltham

We were surprised by the lack of 'participating' pharmacies in the centre of Feltham. Despite a sexual health centre in central Feltham, this only has limited hours and local young people were unaware of its existence. Recommendation: Recruit a central Feltham pharmacy to participate in the sexual health service – providing a wider service over longer hours of operation.

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## Key Findings and Recommendations Continued

### Improving Sexual Health services provided by Pharmacies

#### Adequate training for pharmacy staff

There were on two occasions worrying comments made to the mystery shoppers by staff in pharmacies. Additionally, several pharmacies were directing the mystery shoppers to GPs for sexually transmitted infection (STI) testing. Not all GPs provide such screening.

**Recommendation:** Thorough training for all staff, not just the pharmacists, at the beginning and throughout the programme to help improve staff knowledge and advice.

### Improving Sexual Health services provided by Pharmacies – a Pharmacy perspective

#### Reimbursement for services

A couple of pharmacies noted the disbandment of the sexual service had arisen because they no longer received reimbursements.

**Recommendation:** Timely reimbursements is essential for pharmacies to participate in the service. When commissioning these services the pharmacies should not be able to simply stop the service unless due notice is given. This enables issues to be resolved or another local supplier to be established for continuity of this essential service. It also prevents payment for services that are no longer provided.



# Survey, Focus Group and Teacher Comments Results

The next section gives detailed responses from the survey, focus groups and comments made by teachers.



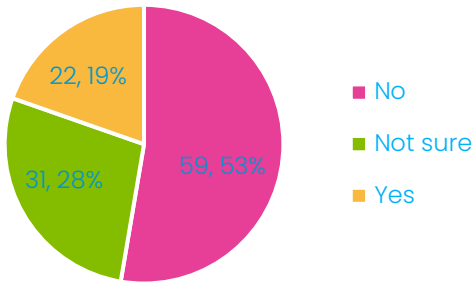
## Topic 2: Have Young People heard of the C-Card and NCSP?

In the borough of Hounslow, during 2022-2023 young people under 25 had free access to the Condom Card (C-Card) and National Chlamydia Screening Programme (NCSP). To gauge awareness, young people were asked if they had heard of either scheme.

### Awareness of the C-Card

The pie chart below shows that just under 20% (n.22) of young people were aware of where to access the C-card.

Are you aware of where to access the Condom Scheme (C-Card)?



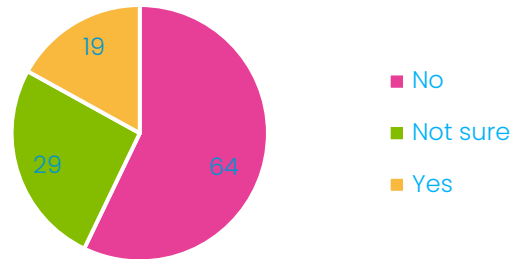
Gender did not appear to make a huge impact on the awareness of the C-Card, with only slightly more males than females and those of other genders being aware of the C-Card.

When looking at this by age group, awareness of the C-Card increased to 26% (n. 6) amongst the 18 – 21 year olds, while for the 14 – 17 year olds it remained around 20%.

### Awareness of the National Chlamydia Screening Programme

The pie chart below shows that only 17% (n.19) of young people were aware of where to access the National Chlamydia Screening Programme.

Are you aware of where to access the National Chlamydia Screening Programme?



Males in the survey had slightly more awareness than females and those of other genders or who preferred not to say.

Age appeared to make no impact on awareness.

### Topic 3: Have Young People used the C-Card and NCSP?

Only a very small number of the young people surveyed had used the C-Card or NCSP.

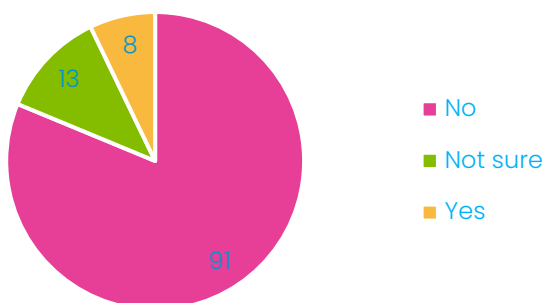
#### Use of the C-Card

The pie chart below shows that just under 7% (n.8) of young people were aware of where to access the C-card.

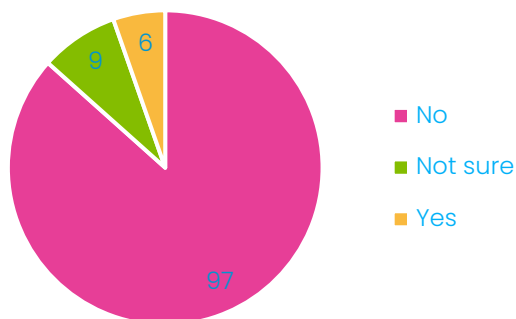
#### Use of the National Chlamydia Screening Programme

The pie chart below shows that only 5% (n.6) of young people were aware of where to access the NCSP.

Have you ever used the C-Card?



Have you ever used the NCSP?



When the eight young people who had access the services were asked where they had accessed them and how they rated them, the responses were very mixed with young people noting that they'd used most services, from clinics to pharmacies and GPs.

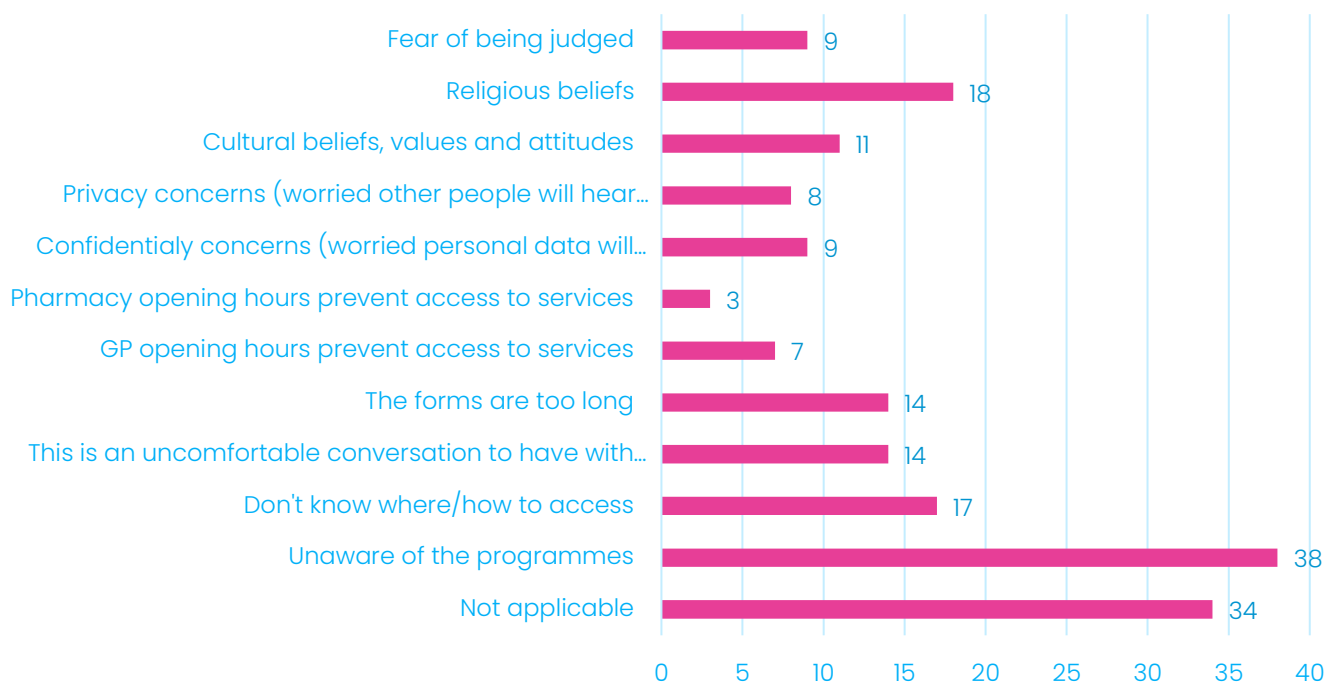
From conversations with young people, they noted that the clinics 'never answer the phone' and very few knew that they were eligible for free access to condoms and chlamydia testing. One student told us there wasn't a sexual health clinic locally – either suggesting that awareness was low or that the current service in Feltham is limited.

## Topic 1: Where do you access Sexual Health Services?

### Barriers to accessing the services

For those who had not accessed services, the survey asked what was stopping them from doing so. The biggest reason provided was 'Unaware of the programme' with a third of respondents giving this as one of the reasons (n.38). This was closely followed by 'Not applicable' who are likely to be those currently abstaining. Other reasons listed a few times were 'Religious beliefs' (n.18), 'Don't know where/how to access' (n. 17), The forms are too long (n.14) and 'This is an uncomfortable conversation to have with a health professional' (n.14).

### What is preventing you from using these services?



When added together, 'Unaware of the programmes' and 'Don't know where/how to access' form a sizable chunk of responses and indicate more work is required around promotion of sexual health services.

Similarly, religious and cultural reasons appear to be a barrier to services indicating sensitivities around how services are accessed is important.

Concerns around privacy, confidentiality, stigma also raise concerns about where these conversations take place and how this information is stored.

# Topic 1: Where would you like to access Sexual Health Services?

## Accessing non-local GP surgeries/pharmacies

Just over 41% of respondents said they were aware they could access the services from other GP surgeries/pharmacies that were not their local service. This also means a sizable amount were unaware or not sure.

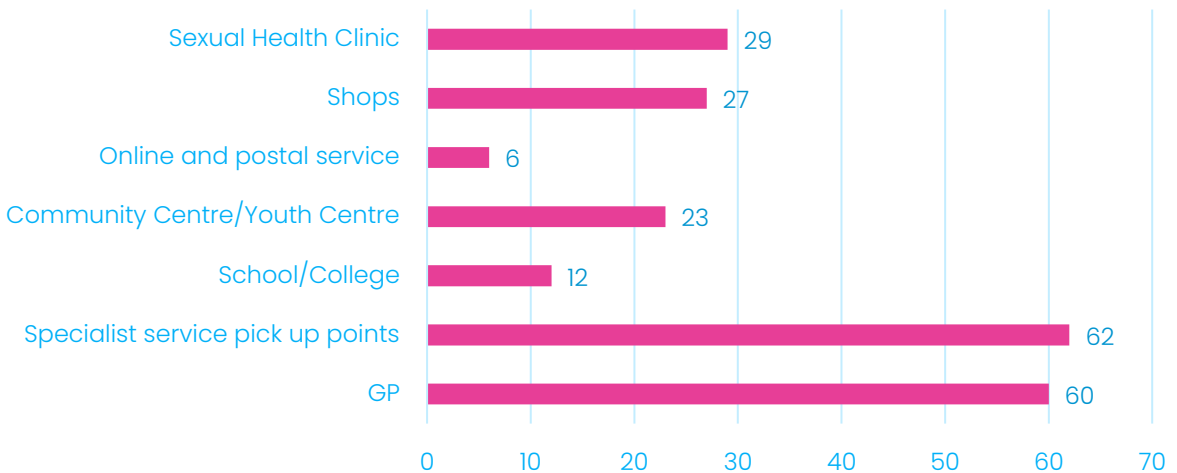
Are you aware that you can currently access these programmes from other GP surgeries/Pharmacies that are not your local service?



## Preferred place to access NCSP test kits

Respondents were asked where they would prefer to access their NCSP test kits. The most commonly listed places were: Specialist service pick up points, the GP, Sexual health clinics and shops.

Where would you prefer to access National Chlamydia Screening Programme (NCSP) test kits?

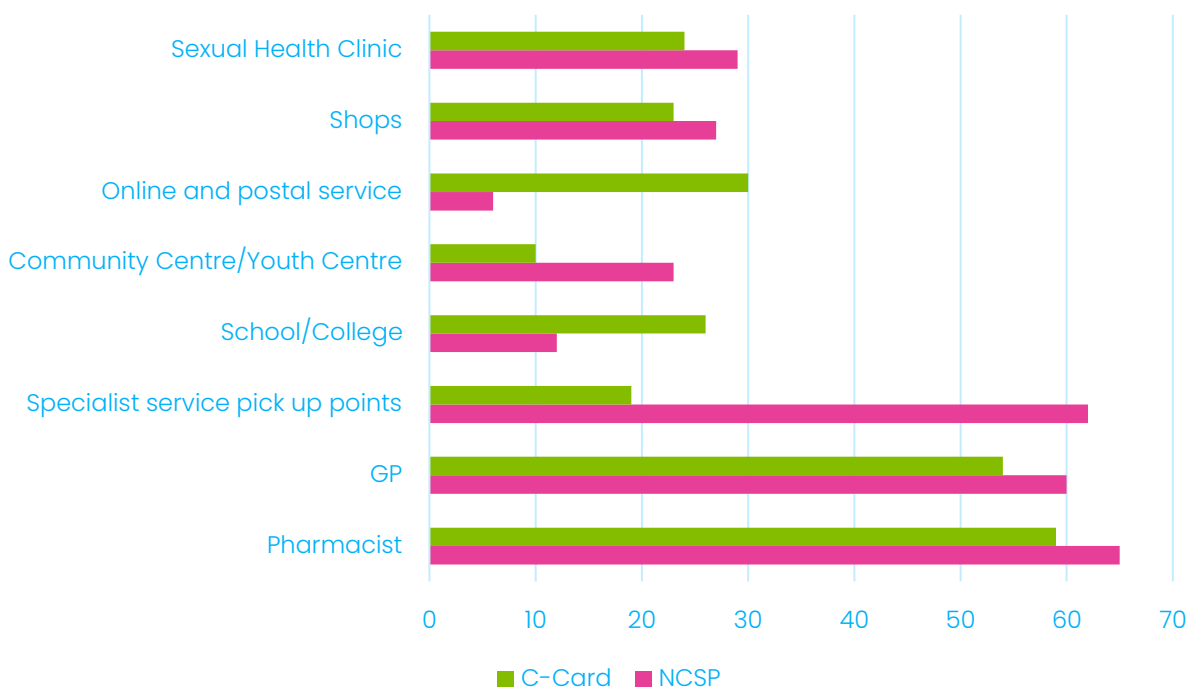


## Topic 1: Where would you like to access Sexual Health Services?

### Preferred place to access NCSP test kits

Respondents were asked where they would prefer to access sexual health services. While GP and Pharmacies were the most popular for both the C-Card and NCSP test kits, it is noteworthy that for the NCSP test kits, Specialist Service Pick up Points also was frequently chosen.

### Where would you prefer to access Services?

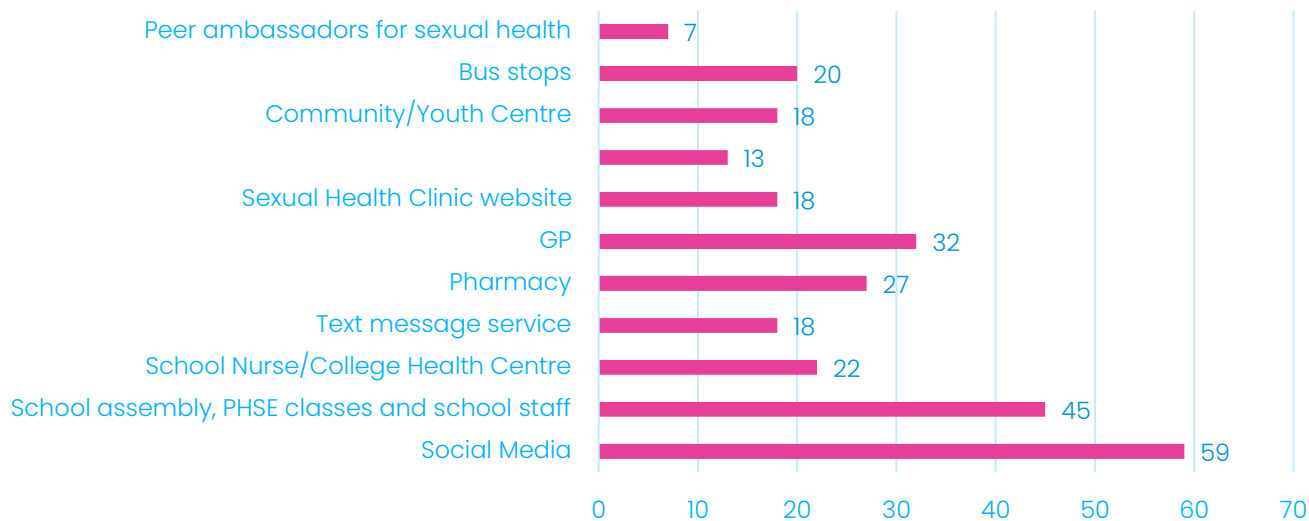


## Topic 1: Where would you like to access Sexual Health Services?

### Preferred

Respondents were asked how the services could best be promoted to themselves. The most popular response was through Social Media (n. 59), followed by School assembly, PHSE classes and school staff (n.45) and then via GPs (n.32).

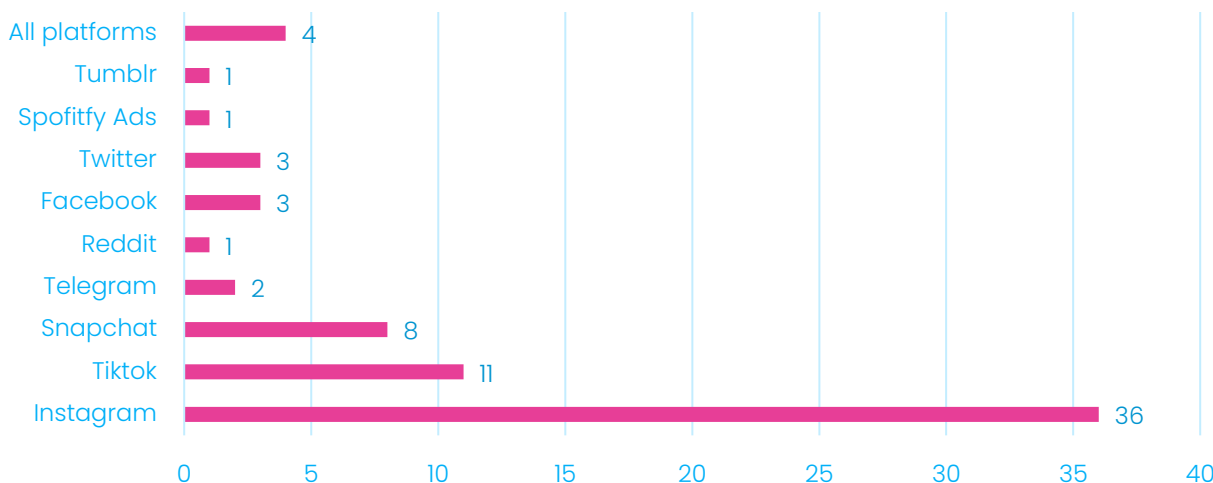
### How can we promote the NCSP and C-Card to you and your peers?



### Young people and Social Media

Instagram followed by TikTok and Snapchat were the most commonly suggested platforms used by young people. Interestingly in our conversations, the Year 11 students showed a preference for TikTok while the Year 12 and Year 13s showed a preference for Instagram.

### Which social media platforms would you suggest we could promote the services on?

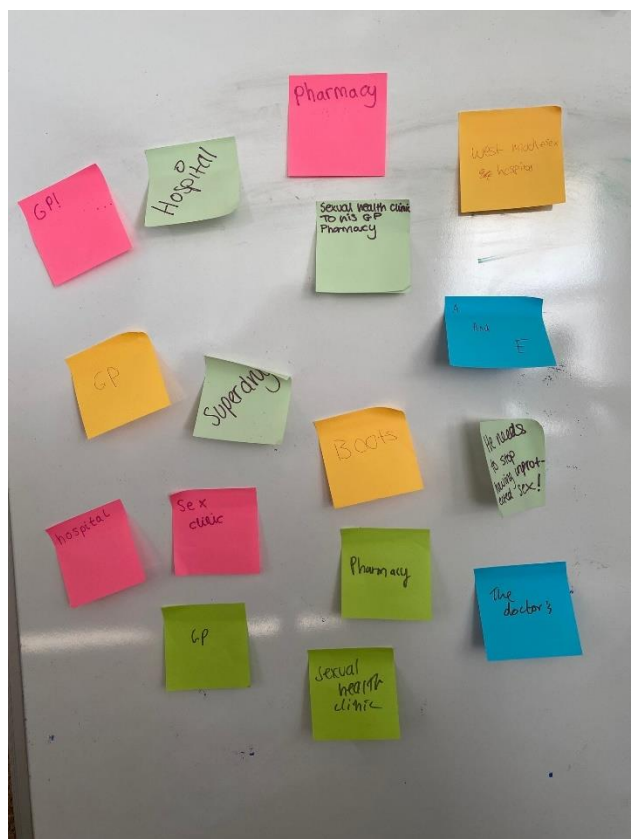
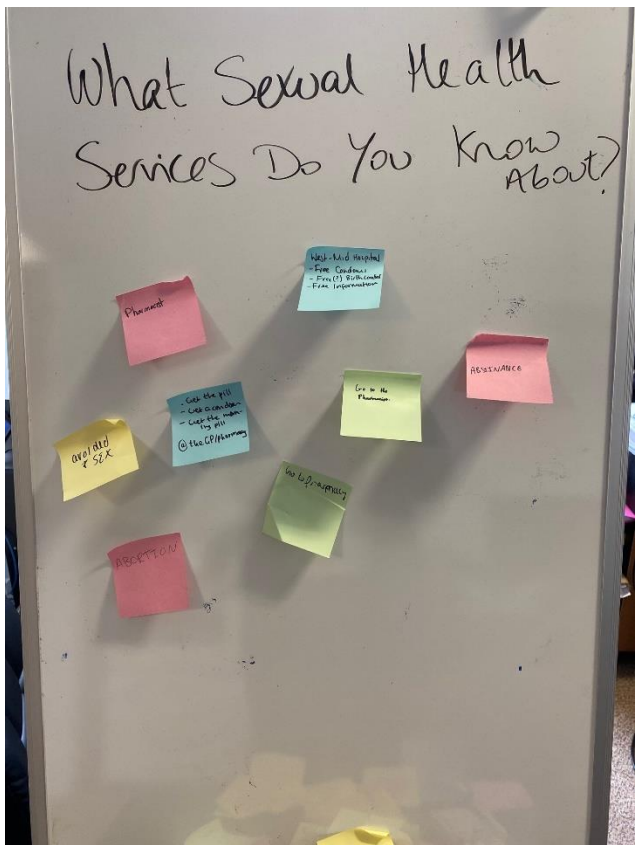


# Focus Group

The comments from the focus groups largely reflected the results from the survey, however there were some further interesting points discussed.

## Part 1: Awareness of sexual health services

Both focus groups were run with Year 11 students from a school in the west of the borough. Half the class were given a scenario first where they had a hypothetical friend called Beyonce who was 16, had a new older boyfriend, had started having sex and was worried about pregnancy. The other half of the class had a hypothetical friend called Jay-z who was 18 and worried about STIs. The students were tasked with giving information and advice to both Beyonce and Jay-z. Suggestions were put on stick notes and put on the wall:



"Go to the pharmacy" was mentioned 7 times, GPs mentioned 5 times, sexual health clinics mentioned 3 times, Hospitals/West Mid Hospital mentioned 2 times and avoiding sex for religious reasons was mentioned 3 times.

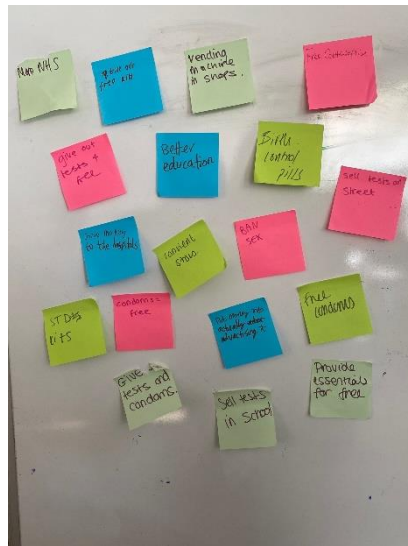
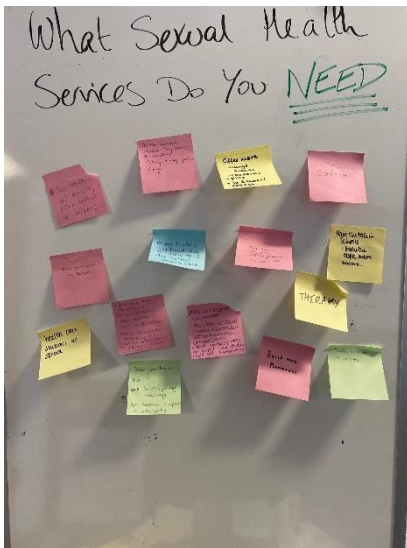
Given the results we see later from the mystery shopper exercise on pharmacies, it is interesting that they were highly cited at this stage.



# Focus Group

## Part 2: What sexual health services would work for young people

The groups were then given their next scenario: they were the Director of Sexual Health Services and had an unlimited budget and access to local institutions. How would they spend their money to support Beyonce and Jay-z access sexual health services. The students then wrote their answers on post-it notes and posted them on the wall:



### Recommendations from Young People:

- Focus investment in high infection areas such as nightclubs.
- Improve confidence of young people who feel sex is the only way to prove themselves
- Give out free condoms and birth control
- Free tests for STDs & Gonorrhoea
- Online services for those stuck in a similar situation so they know what to do next
- Keep the topics light and easy to understand – less medical mumbo jumbo
- Free contraceptives everywhere.
- Advertise on social media information about contraception
- Give more money to NHS x 3
- Contraceptives/health stations in schools x 4
- Build more pharmacies
- Free condoms at Boots & Superdrug pharmacies and supermarkets.
- Tesco and Asda bathrooms could be used for testing
- Have a school nurse that comes once a week to offer advice and condoms or pills

# Focus Group

## Recommendations from Young People continued

- Public bathrooms with free condoms
- Make corporations donate to sexual health services
- Provide contraception for free x 5
- Vending machines in shops
- Vending machines in streets
- Free STD kits x 3
- Put all the money into actually advertising it
- In convenience stores
- Birth control pills
- Better education
- Have the talk in schools – make the topic more aware
- Ban sex

## Religious and cultural observations

Although the exercise was about supporting a hypothetical friend in a hypothetical situation, there was a small number of students in both classes who wanted to close any discussion on the topic as they deemed sex before marriage as against their religious beliefs. When other students were suggesting the schools have a bigger role in encouraging safe sex and contraception, they felt that this only encouraged pre-marital sex and was inappropriate.

Consideration of religious and cultural beliefs and how sexual health is promoted might remove the stigma of sexual health being linked to promiscuity and sex out of wedlock.

Both classes gave a good range of suggestions on how to improve sexual health services for young people and the stand out sources of discussion were:

- Increased promotion of how to access services – make use of social media
- Increased access to free condoms and STI testing
- Make services available in places where young people go: schools, Superdrug, Boots and supermarkets
- Empower young people to only have sex when they feel ready and not bow down to pressure
- Take into consideration religious and cultural differences.

# Teacher Comments

During our visits to schools to conduct surveys and focus groups, it was a good opportunity to chat to teachers to discuss their insights into how young people can be supported with sexual health services.

We found four key pieces of information:

- 1) Due to Covid Lockdowns, today's 16 year olds might have missed 2 years worth of PHSE lessons and information on sexual health and relationships.
- 2) The lockdowns have also resulted in an immaturity amongst this age group where they have not had the same social/relationship development as earlier generations – increasing vulnerabilities.
- 3) The teachers have to source any information they can get on sexual health from what they can find. They are time-poor, not necessarily local and not up to date on the latest services. They would warmly welcome pre-packed materials and visits from sexual health teams.
- 4) Technology in schools means that they can relay information in weekly e-bulletin emails to students as well as on screens in the communal areas.

"When it comes to referring to sexual health services in my classes, I have to piece together what I find on the internet. It would be great to have a ready-made PowerPoint presentation and/or posters of all the local sexual health services. A lot of the teachers don't live in Hounslow so this would be really helpful.

And if it could be as user-friendly and digestible as possible that means we can just share it. We have digital screens throughout the school, weekly e-bulletins as well as PHSE classes where we can share digital formats of the information."

We also have opportunities during our assemblies and PHSE classes where we would welcome the opportunity for someone to come in and talk about these services."

**Year 12 Teacher**

"We often find that year 11s now are a lot less emotionally developed compared to 5 years ago due to Covid. They've lost 2 years of building and developing relationships so although they think they are year 11s their maturity is more like that of a year 9. This could give them heightened vulnerabilities when it comes to relationships."

**Year 11 Teacher**

# Mystery Shopping in Pharmacies

The next section gives detailed results from our mystery shopper exercise conducted across participating pharmacies in Hounslow



### What is Mystery Shopping

Mystery shopping is when trained individuals (the “mystery shoppers”) act as potential customers or service users and objectively report on their experiences of using a service. With this research method, the participants being evaluated are unaware that the researcher is anything other than an average customer.

In this study, mystery shoppers age 16 – 21 were visiting pharmacies participating in an enhanced sexual health service for young people. This method allowed our mystery shoppers to experience the service from the view of a service user and can be used to assess various aspects of a service, such as provision of services, customer service and overall quality.

### Background to Pharmacies participating in enhanced Sexual Health Services for Young People

15 pharmacies across Hounslow signed up to an enhanced sexual health services scheme for young people.

Six areas that participating pharmacies are expected to deliver as part of the service include:

- **Safeguarding** - Do pharmacists direct young people (YP) to a local bathroom to complete the chlamydia screen, document relevant information and complete necessary safeguarding procedures, do pharmacists provide demonstrations on how to use condoms to YP
- **Clear referral pathways** – are pharmacists aware of local services, able to refer people to specialist service for additional support.
- **Contraception** – what is the procedures for repeat prescription of Emergency Hormone Contraception (EHC), what measures do pharmacists take for people accessing repeat EHC, do pharmacists promote other forms of contraception
- **Sex and relationships** – do pharmacists give clear advice and refer/promote to other services for additional support
- **Ease of access** – is it easy to request C-Card or NCSP, do they have signs to promote these programmes and make YP aware that they offer C-Card and/or NCSP, do pharmacists “up-sell” other schemes
- **Confidentiality and consent** – do pharmacist use side rooms and/or make conversations easy to have.

The priority of our mystery shoppers was to focus on the C-Card and NCSP.

### About our Mystery Shoppers

We recruited the following mystery shoppers to support us:

- 1 x 21 year old male, white ethnic background,
- 1 x 16 year old female, Asian ethnic background
- 1 x 16 year old female, Black ethnic background
- 1 x 16 year old male, Asian ethnic background
- 1 x 16 year old male, White ethnic background

Not all mystery shoppers attended each pharmacy but we tried to ensure a minimum one female and one male attended each one with the minimum number of visits being two per pharmacy.

Mystery shoppers were briefed on the project and given indications as to key areas to ask about which included the C-Card, Chlamydia testing and Emergency Hormone Contraception.

### 15 Participating Pharmacies Visited.

These pharmacies spanned the whole of the London Borough of Hounslow.

The 15 Pharmacies have been anonymised for this report, labelled Pharmacy A – Pharmacy O.

### Summary of Mystery Shopper Experiences

On the whole, the mystery shopper experience revealed that most of the pharmacies were not actively participating in or even aware of the enhanced sexual health services they had signed up to. Only one pharmacy out of 15 gave out mystery shoppers free condoms, no pharmacies offered 'in-house' STI testing and signposting and information was inconsistent. It was only on the last day of visits (day 6 - by which point mystery shoppers were on their second and third visits at pharmacies) that there was a noticeable improvement in advice, information and signposting. Our first leaflets on sexual health services were only given on the last day. Disturbingly, one staff member in a pharmacy said to our mystery shopper that if they were not showing symptoms of Chlamydia (an asymptomatic infection), then they 'probably didn't have it.'

Pharmacists mentioned that they had signed up to the C-Card in the past, but that the scheme had 'fallen apart' with others noting that their reimbursements were not being made and they had stopped participating. There was minimal signage of sexual health services, and when posters were present, they tended to be in the private rooms which you had to ask to use. The lack of awareness also indicates missed safeguarding opportunities.

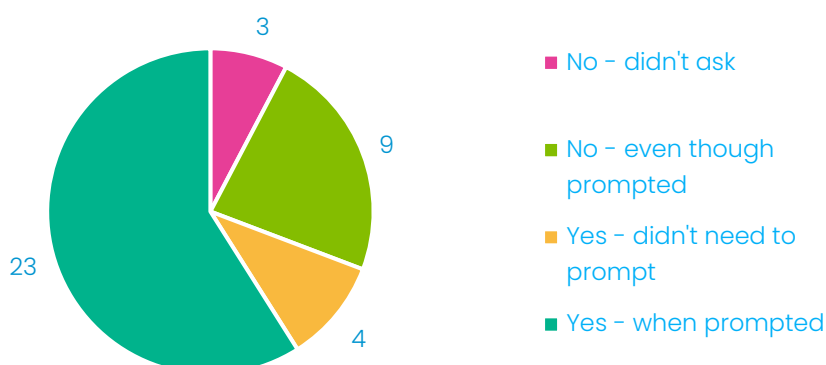
On a more positive note, the vast majority of pharmacists and staff were kind, friendly and non-judgmental. Private rooms were generally available, although this often had to be prompted.

The next section goes into more detail of the different areas mystery shoppers reviewed.

### Access to the Condom-Card (C-Card)

Considering the 15 pharmacies visited had signed up to the C-Card, there was no pro-active involvement and the mystery shoppers had to largely prompt pharmacists to talk about the C-Card. Only 10% of visits did not require the mystery shopper to prompt the pharmacist to mention it. And those that did talk about it, often said they were not participating or no longer participating.

Did the pharmacist mention the C-Card to you>



## Mystery Shopping: The Provision of Sexual Health Services in Pharmacies

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### Accessing the C-Card (Continued)

On the whole, the mystery shopper experience revealed that most of the pharmacies were not actively participating in, or in some cases, even aware of the scheme.

“Mentioned the C card scheme but had none available.” **Pharmacy F, 2<sup>nd</sup> visit**

“No C-card scheme available.” **Pharmacy B, 1<sup>st</sup> visit**

“They ran out of stock.” **Pharmacy B, 2<sup>nd</sup> visit**

“When I asked them about anything I could get at the pharmacy, I was told to get it from the GP.” **Pharmacy L, 2<sup>nd</sup> visit**

“They did talk about the Condom scheme but their pharmacy couldn't provide it.” **Pharmacy C, 2<sup>nd</sup> visit**

“When I asked they didn't know where to get free condoms or if I could.” **Pharmacy A, 2<sup>nd</sup> visit**

“The pharmacist said he could sell them to me but told me that other pharmacies do the C-card scheme.” **Pharmacy G, 1<sup>st</sup> visit**

“When I asked about condoms the pharmacist said they weren't part of the c card scheme.” **Pharmacy M, 2<sup>nd</sup> visit**

“They didn't have any to hand but I was told that I could sign up online.” **Pharmacy J, 2<sup>nd</sup> visit**

“Pharmacist told me that I can get condoms for free at other pharmacies.” **Pharmacy I, 1<sup>st</sup> visit**

“Staff did not know what the C-card scheme was.” **Pharmacy D, 1<sup>st</sup> visit**

“Stated that the C-card scheme was cut by the NHS and this particular location did not utilise it.” **Pharmacy C, first visit**

### Posters, leaflets and information on Sexual Health Services

Signage, posters and leaflets on display was minimal in most pharmacies, with our mystery shoppers only spotting signage in four of the pharmacies.

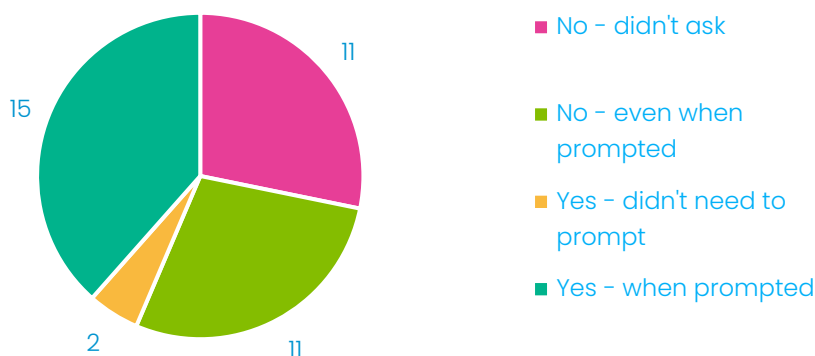
Mystery Shoppers noted that the posters were only on show once they had gone into a private room. Mystery shoppers were only provided with leaflets on sexual health services and phone numbers for clinics on day 6 of our visits, which was the final day.



### Accessing the NCSP

In the pie chart below, it shows that in only 5% (n.2) of visits, pharmacies mentioned the NCSP without the mystery shopper having to give a prompt. With a prompt, this increased to 38% (n.15) of visits. However, not one of the pharmacies provided the mystery shoppers with a test-kit. Some pharmacies directed mystery shoppers to clinics by name, and by day 6 they started to give more information such as leaflets, web addresses and phone numbers for sexual health clinics. It was during these conversations that one pharmacist/staff worker said “if they didn't have symptoms, they were probably okay.” Only one clinic offered STI testing.

Did the pharmacist mention NCSP to you?



### Comments from the mystery shoppers include:

“Also mentioned the NCPs but didn't have any at the moment.” **Pharmacy F**

“They didn't do the testing however they gave me advice about what I can do, they told me I can go to west Middlesex hospital and that there's a sexual health clinic I can get tested at.” **Pharmacy C**

“The pharmacy didn't do the testing but they told me where I could get the test done, at Isleworth clinic.” **Pharmacy G**

“I asked about testing but I was told to go to a clinic that was nearby.” **Pharmacy J**

“Pharmacy said they no longer offer testing because they aren't reimbursed.” **Pharmacy F**

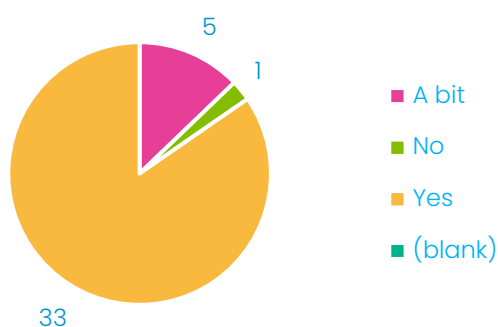
“The pharmacist was very helpful and gave me a lot of information about STI prevention.” **Pharmacy G**

## Mystery Shopping: The Provision of Sexual Health Services in Pharmacies

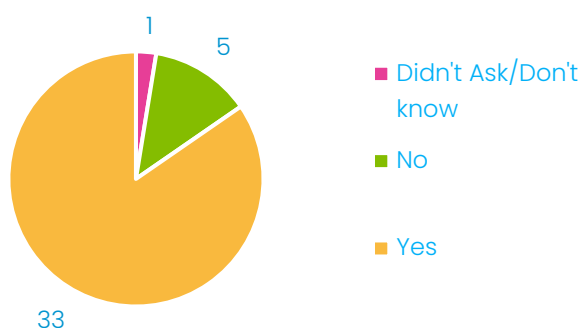
### Kindness of staff and putting young people at ease

On most occasions, the mystery shoppers found the majority of staff to be very kind and helpful, with 84% (n.33) of visits resulting in positive review from the mystery shopper. These figures were also similar when feeling being able to talk in a non-judgmental environment.

Where the staff kind and easy to talk to?



Did you feel you could talk about your relationship in a non-judgmental way to the pharmacists?



### Comments from the mystery shoppers include:

"I felt the staff were a little standoffish." **Pharmacy L**

"He was inviting and non-judgmental." **Pharmacy F**

"The pharmacist was very kind and supportive." **Pharmacy I**

"Kind and tried to be helpful." **Pharmacy J**

"Very kind and helpful, tried to make me feel comfortable and reassured me, Googled west Middlesex sexual health clinic policy for me and gave me a number to get an appointment." **Pharmacy A**

"They were direct and to the point, had to wait a bit since it was busy." **Pharmacy F**

## Mystery Shopping: The Provision of Sexual Health Services in Pharmacies

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### Privacy

For the majority of visits, most of the mystery shoppers were happy with the level of privacy of their conversations (67%, n. 26). All pharmacies had a side room to speak in but not all the mystery shoppers spotted them as some were less obvious than others.

On occasions, mystery shoppers had to request to use the private room while some pharmacists were happy to offer its use unprompted.

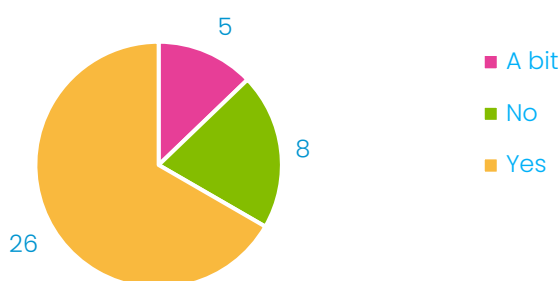
### Comments from the mystery shoppers include:

“There was a private room but it was missing a door and was right next to checkout.”

“Didn’t have private room available, felt that my conversation could be heard by people behind me in the line.”

“I was taken to a private room and the pharmacist was very respectful and tried to make me feel at ease.”

Do you feel your conversations  
with the pharmacist were private?



### Private Bathroom

No mystery shoppers were able to identify a bathroom for self-test kits but they noted that this was often because of the lack of self-test kits meant there was no need to enquire. Access to private bathrooms is an important issue for young people who may lack privacy at home.

### Confidentiality

No mystery shoppers felt concerned about their confidential details being at risk, but this may be in part because of the lack of services on offer.

## Mystery Shopping: The Provision of Sexual Health Services in Pharmacies

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### Emergency Hormone Contraception (EHC)

This topic was discussed slightly less than the C-Card and Chlamydia testing but the mystery shoppers still presented some opportunities to discuss options.

In one instance, the pharmacist was recommending going straight to the GP to if they wanted an abortion without enquiring about the time frame involved. Other pharmacists were able to give some verbal information on EHC but did not provide any leaflets or further information.

### Comments from the mystery shoppers include:

“Mentioned the time frame in which it needed to be taken and how it worked.”

“Even though he mentioned that the person would need to come within 3 days but didn't explicitly mention the pill.”

### Safe Relationships

Again, this topic was discussed slightly less than the C-Card and Chlamydia testing, however, on the final day of the visits, a couple of pharmacists took a much keener interest in chatting to the mystery shoppers in more detail about safe relationships.

### Summary Comments

The next section is where mystery shoppers had a free text section to write their general observations from each pharmacy visit.

## Mystery Shopping: The Provision of Sexual Health Services in Pharmacies

### Free Comments the Pharmacies

The Mystery Shoppers were given an opportunity to summarise their experiences with the pharmacies. Each comment per pharmacy is given by a different mystery shopper and are in order of the visits.

Pharmacy	Mystery Shopper Summary Comments
Pharmacy A	<p>"Thought the staff was nice and approachable. The pharmacy was not busy so did not utilise the private room. There was no signage of C-card or NPSC, and for NPSC, they referred me to nearby clinics and hospitals."</p> <p>"There was not much help as the staff didn't know what was available."</p> <p>"Very helpful attitude but no direct support given."</p>
Pharmacy B	<p>"Did signpost to nearby clinics and health centres. However, no c-card scheme, or STI testing was available at this site."</p> <p>"They carried the c card scheme but ran out of stock. They recommended another pharmacy that did carry it."</p>
Pharmacy C	<p>"Thought the staff was nice, however, this options for male condoms, and when asked about the C-card scheme, the staff member said it was no longer available there because the NHS was cutting it down. The staff member could not provide pharmacies that still utilised the C-card scheme. No visible private room."</p> <p>"Very polite and accommodating (private room) told me about testing and condoms."</p> <p>"They were really good they gave me a leaflet with many sexual health clinics and also lots of phone numbers and opening times. The staff were very understanding and made me feel comfortable."</p>

Pharmacy	Mystery Shopper Summary Comments
Pharmacy D	<p>“It was alright but she didn't say anything relating to the C-Card scheme of NCSP. ”</p> <p>“Staff were not very helpful, and did not know what the C-card was.”</p>
Pharmacy E	<p>“They were supportive but couldn't offer me anything.”</p> <p>“Little to no sexual health services available on site.”</p>
Pharmacy F	<p>“No c-card, they offered STI testing. Staff unaware of C-card scheme, had to ask the doctor on site.”</p> <p>“Told me to go a GUM clinic and ask other pharmacies if there have advice or free condoms.”</p> <p>“The staff offered guidance and referred me to a different clinic but did not provide any actual help with getting condoms the pill or getting tested.”</p>
Pharmacy G	<p>“The pharmacist was very helpful and gave me a lot of information about STI prevention.”</p> <p>“Staff seemed unwilling to provide information on sexual health services.”</p> <p>“Really really helpful and I felt extremely comfortable. The side room made it feel confidential and the advice was really helpful. They also have a phone number which was good.”</p>

## Mystery Shopping: The Provision of Sexual Health Services in Pharmacies

Pharmacy	Mystery Shopper Summary Comments
Pharmacy H	<p>“They didn't really help but told me to go to a GP if I wanted to abort (when I mentioned pregnancy).”</p> <p>“The staff was very pleasant, and when prompted, gave thorough explanations on options such as the morning after pills, and where to find testing and other pill related contraceptives.”</p>
Pharmacy I	<p>“The staff was very pleasant, and when prompted, gave thorough explanations on options such as the morning after pills, and where to find testing and other pill related contraceptives.”</p> <p>“Not many options in terms of contraceptives are sexual health services. Did not know what local GP's/ family health centres offered C-card or STI testing.”</p>
Pharmacy J	<p>“Overall there was a lack of signage on things such as the C-card and NSCP. I felt comfortable talking to the staff who gave knowledge on alternative contraceptives, such as a numbing cream. I felt like my conversation was safe and private, and judgment-free. The staff also referred to websites and locations where to apply for the C-card and where to kit STI kits for free.”</p> <p>“They had a good start in terms of condoms but not testing.</p> <p>“Attempts to be helpful and have good information but was referred to different clinics.”</p>
Pharmacy K	<p>“They took me to a private room - I didn't have to ask. They referred me to another service. No free condoms, said "we don't do that service anymore”</p> <p>“Little to no sexual health services in the pharmacy.”</p> <p>“It wasn't that helpful apart from the clinic advice. They didn't have any posters or have a side room for private discussions. ”</p>

Pharmacy	Mystery Shopper Summary Comments
Pharmacy L	<p>“The pharmacy had no signage of either the C-card or NSPC. The staff member was a little standoffish, and at times felt uneasy trying to gather information on certain topics. Provided an alternative contraceptive in the form of a prescription pill. Referred me to nearby clinics and hospitals for STI testing, however when prompted about the C-card, the answer given implied that yes there was a C-card, but it was not able to be used at that particular location.”</p> <p>“Not much in terms of what the pharmacy had to offer but I was given alternatives through the GP.”</p>
Pharmacy M	<p>“The pharmacy felt kind of non-judgemntal. I had to mention I would like a private room. Wish there were more leaflets of posters that young people could take home. Recommended me to go to STI checking place, offered no free condoms or free chlamydia testing kits.”</p> <p>“They didn't offer much help and instead directed me to a clinic.”</p> <p>“The pharmacist mentioned that the C-card scheme is falling apart. Stated in order to learn more about pill-based birth control, my significant other would need to be there.”</p>
Pharmacy N	<p>“No c-card scheme available, No STI testing. referred to nearby Health Centres. Private room, but location of pharmacy was located in food store so outside of the room there was no privacy.”</p> <p>“Pharmacist wasn't available, but I received a wide range of condoms for free. But I wish I could speak to a professional about my situation.”</p> <p>“They gave free condoms and recommended going to a GP but didn't give any specific name or phone number.”</p>



Pharmacy	Mystery Shopper Summary Comments
Pharmacy O	<p>“They were really helpful but didn't carry the C-card scheme. Instead, they recommended places which do.</p> <p>“A staff member mentioned that the pharmacy is not part of the C-card scheme anymore.”</p>

# Demographic Data From the Survey

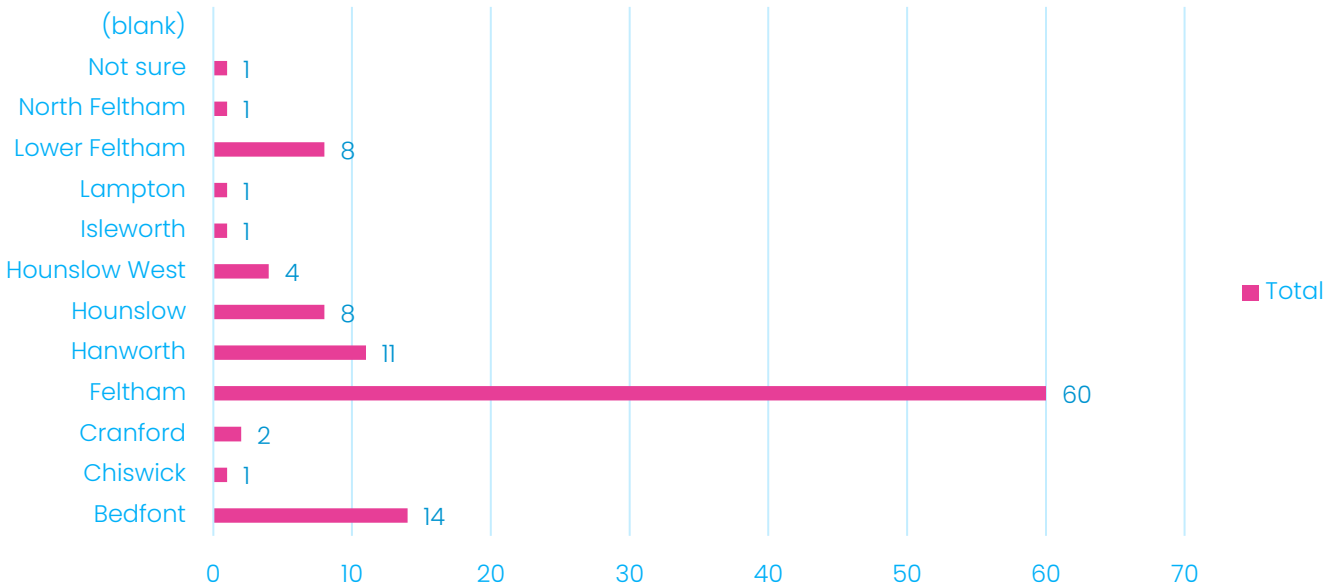
Where we were able to collect demographic data from the survey it has been noted on the following pages.



# Survey Demographic Data

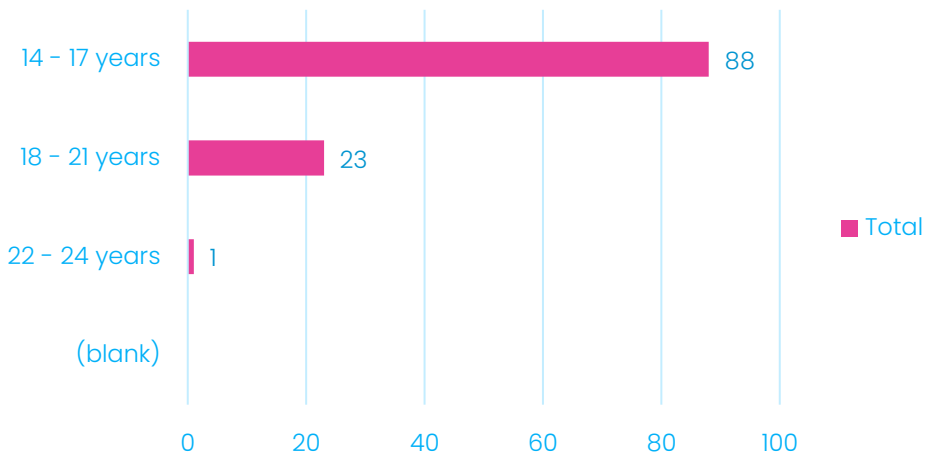
The survey data was cleaned so that any respondents over the age of 25 and/or who lived outside of the borough of Hounslow were removed. We also removed a couple of individuals who may not have taken the survey very seriously.

## What area of the borough do you live in?



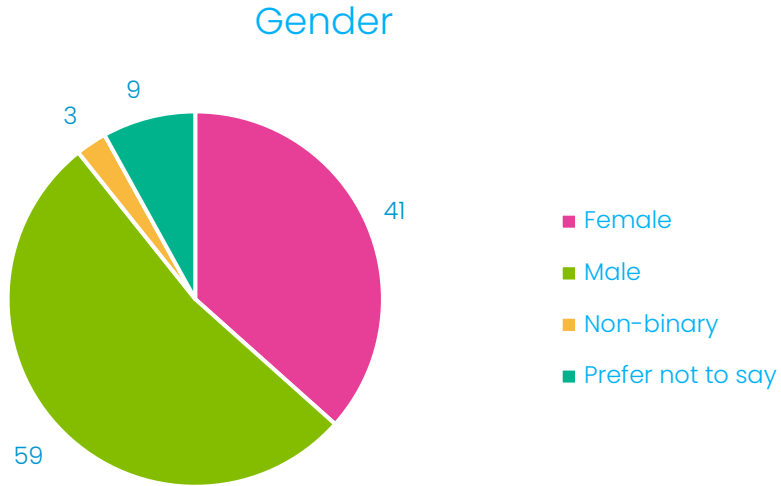
Most respondents to the survey lived in the west of the borough. This is reflective of areas of the schools we were largely working in.

## Age Group

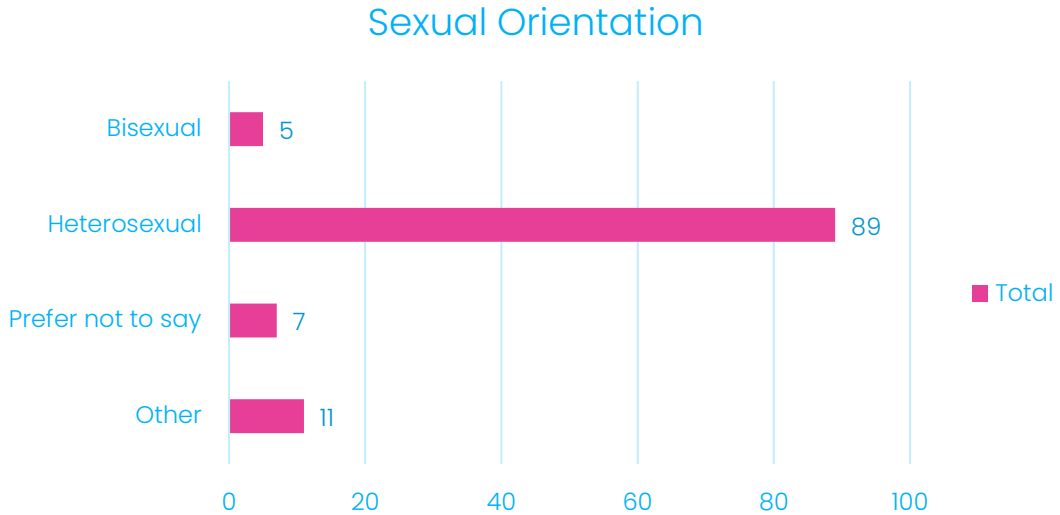


Most respondents to the survey were age 14 – 17 years. This is reflective of our considerable interaction with Years 11, 12 and 13 within the schools.

# Demographic Data



We engaged with more males (52%, n. 59) than females (36%, n. 41). Just under 3% (n. 3) described themselves as non-binary and 8% (n.9) preferred not to say their gender.

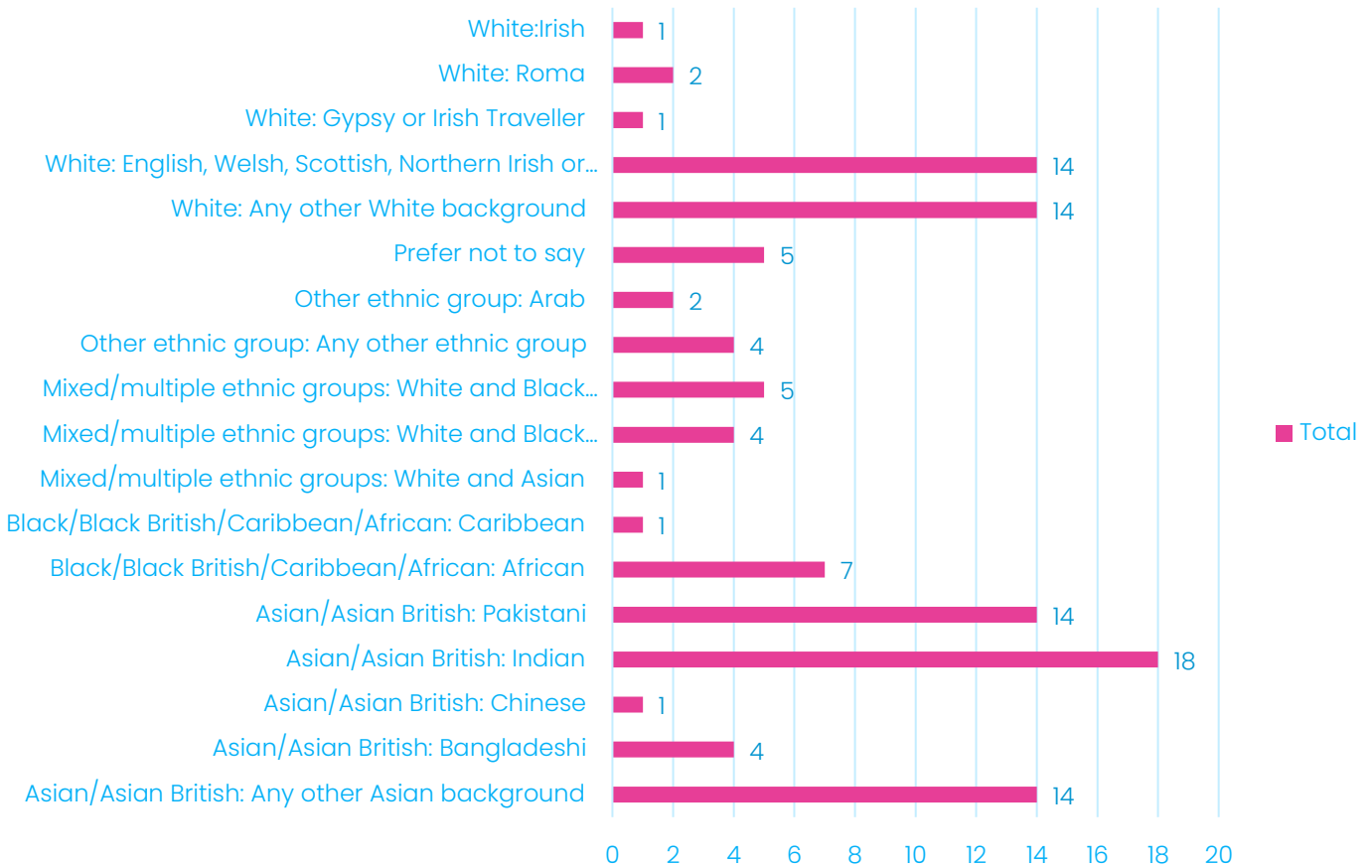


The majority of respondents to the survey identified as heterosexual (79%, n. 89) followed by Other (9%, n. 11) and Prefer not to say (4%, n. 5).

# Demographic Data

The ethnic background of respondents was relatively reflective of the areas in the west of the borough where most of the surveys were completed. Those of an Asian/Asian British background mainly identified from Indian (n.18), Pakistani (n.14) and Any other Asian Backgrounds (n.14). For those of White ethnic backgrounds the largest groups were those from English, Welsh, Scottish, Northern Irish or British backgrounds (n.14) and from White Other backgrounds (n.14).

Ethnic Background



# Overview of Engagement

Date	Method of Engagement	Number of residents
March 2023	Online survey for 16-24 year olds	112
08, 10, 15, 16, 17, 20, 21, 24 March 2023	Multiple Mystery shopping visits to 15 pharmacies.	n/a

## Limitations of this study

### Survey

The residents who completed the survey tended to live in the Feltham and Bedfont and western areas of the borough, who may have had different experiences to those living in the east of the borough.

### Focus Group

The residents who participated in the focus group tended to live in the east of the borough and were only from one school. Experiences of young people in other schools and other parts of the borough may differ.

### Mystery Shopping

Some elements of the mystery shopping experience can be subjective and based on a narrow number visits.

## Acknowledgements

We would like to give particular thank to our team of young people who conducted the mystery shopping exercise, who through snow, rain and train strikes were dedicated visiting pharmacies across the borough.



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