Fécond - Fertility ? Contraception ? Sexual dysfunction survey

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General

Identification

Detailed name	Fertility ? Contraception ? Sexual dysfunction survey
Sign or acronym	Fécond
CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation	CCTIRS n°12.552 / CNIL n° 909024

General Aspects

Medical area	Infectious diseases
Health determinants	Lifestyle and behavior
Keywords	Chronic diseases Sexual and reproductive health Vaccinations, elective abortion, STIs, sexuality

Scientific investigator(s) (Contact)

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Organization	INSERM

Collaborations

Funding

Funding status	Public
Details	INSERM, INED

Governance of the database

Sponsor(s) or organisation(s) responsible	Inserm
Organisation status	Public
Sponsor(s) or organisation(s) responsible	INED
Organisation status	Public

Additional contact

Main features

Type of database

Type of database	Study databases
Study databases (details)	Not-repeated cross-sectional studies (except case control studies)
Database recruitment is carried out by an intermediary	A population file
Database recruitment is carried out as part of an interventional study	Yes
Details	Performed at individual level
Additional information regarding sample selection.	1) The representative national survey was conducted with a random sample of women and men (n=8,645) between 15 and 49 years of age living in metropolitan France. It is intended to study the knowledge and practices of individuals regarding the management of risks associated with sexual activity, considering the interaction between the different events studied. The telephone survey also explores contraceptive and reproductive biography of individuals, periods of infertility, sexual dysfunctions and the methods of treating them. The pilot survey of this study was conducted in 2009 and the final survey was conducted between June 2010 and January 2011. 2) The survey of general practitioners (n=500) and gynaecologists (n=500) is intended to study their knowledge and

	their practices with regard to care for contraception, abortion, infertility and sexual dysfunctions. The pilot survey of this study was conducted in collaboration with the INED survey department and is intended to test different inclusion protocols for physicians for their participation rates. This pilot study as well as the final study (the protocol for which was determined based on the results of the methodological pilot) were carried out between the end of 2010 and September 2011. Furthermore, the FECOND programme presents an important methodological component, intended to shed light on the thinking about the evolution of general population surveys in the context of eroding quality and feasibility of classic telephone surveys.
Database objective	
Main objective	The last few decades have been marked by a major paradigm shift in the realm of reproductive health. From an analysis focused on the health of women as mothers, there has been movement toward a perspective focused on the individuals involved in the reproductive process, then to a global approach to sexuality and the associated risks (Bonnet and Guillaume 2004). The concept of sexual and reproductive health as defined by WHO is not limited to the absence of dysfunctions, diseases or health problems (infertility, abortion, sexually transmitted infections (STI), etc.), but refers to a continuous process of physical, psychological and sociocultural well-being associated with sexuality (WHO 2004). Although their treatment is increasingly medical, sexual and reproductive health issues are today viewed within a global and multidisciplinary perspective (Hart and Wellings 2002). It is within this context of growing medicalisation (Conrad 1992, Giami 2002) that this project intends to shed light on current sexual and reproductive health issues in France. In line with the WHO perspective, we propose to study, for the first time in France, sexual and reproductive health as a process resulting from social and medical determinants that structure the representations and practices of women and men, as well as the social, medical and institutional factors that shape the practices of health care professionals. More specifically, the research is intended to analyse: - socialisation to contraception and the transition from the condom to another contraceptive method at the beginning of reproductive life;

	- the norms and representations related to motherhood/fatherhood and reproductive technologies regarding health practices in this area (medical aid to procreation, contraceptive sterilisation); - contraceptive practices and the conditions of choice of methods at different stages of the life cycle (in particular during the perimenopausal period); - contraceptive failures (and the degree of practical efficacy of the principal methods used) with regard to the side effects of the methods used and the context in which they occur (relationships, preventive and procreative) as well as recourse to emergency contraception in case of badly protected or unprotected sex; - difficulties in conceiving and their treatment: perception of fertility problems, time elapsed, course of treatment (medical and non-medical) and impact on health; - medical monitoring in the realm of sexual and reproductive health, studying the question of access to care, the nature and frequency of gynaecological monitoring for women and gynaecological cancer screening practices. Recourse to treatment for certain specific conditions such as perimenopausal symptoms, sexual dysfunctions and urinary disorders will also be studied
Inclusion criteria	subjects from 15 to 49 years of age who speak French and live in Metropolitan France

Population type

Age	Adolescence (13 to 18 years) Adulthood (19 to 24 years) Adulthood (25 to 44 years) Adulthood (45 to 64 years)
Population covered	General population
Pathology	
Gender	Male Woman
Geography area	National
Detail of the geography area	metropolitan France

Data collection

Dates

Date of first collection (YYYY or MM/YYYY)	06/2009
Date of last collection (YYYY or MM/YYYY)	2011

Size of the database

Size of the database (number of individuals)	[1000-10 000[individuals
Details of the number of individuals	8645, 1000 (doctors)

Data

Database activity	Data collection completed
Type of data collected	Declarative data
Declarative data (detail)	Internet self-questionnaire Phone interview
Details of collected declarative data	Sociodemographics (Marital status, Parents' level of education, Diploma level, Socioprofessional category), Quality of life (Household income, General health condition, Chronic diseases, Migraines, Urinary incontinence), Relationship to health-care system (Consultation, Treatment, Tests/examinations/vaccination, Medical coverage, Reimbursements), Sexual and reproductive health (Contraceptive history, reproductive history, Sexually transmitted infections (STIs) and HIV infection, Sexual dysfunctions, Perimenopause/Menopause), Other (Weight and height of the surveyed individual, Tobacco use, Opinion)
Presence of a biobank	No
Health parameters studied	Health event/morbidity Quality of life/health perception

Procedures

Participant monitoring	No
Followed pathology	
Links to administrative sources	No

Promotion and access

Promotion

Access

Dedicated website	https://www.ined.fr/fr/recherche/projets-recherche/P1419#tabs-3
Terms of data access (charter for data provision, format of data, availability delay)	The members of the FECOND research project team will have access to the anonymised database (no mention of the place of residence of the individuals questioned, only indirect personal data) throughout the data handling period. The database will be made available to researchers upon request to the research team after a period of 2 years: researchers who wish to use the database should send a study protocol to the scientific supervisors of the FECOND survey. Once the protocol is validated, a member of the survey's scientific team will be designated as a point of contact. The researchers will then have to sign an agreement in which they agree: - not to provide the digital files to any other researcher or research team and not to use them to train students; - to only publish results corresponding to the project submitted to the FECOND team. Any other analysis should be the subject of a new project and a validation by the entire FECOND team. - include the FECOND group within the authors (with reference to the team members) in order to account for the work provided by the team in the preparation of the data. Send the team a final version of the article, for feedback, before it is submitted to a journal. to note the organisations that financed the survey in every paper submitted
Access to aggregated data	Access on specific project only
Access to individual data	Access on specific project only