

Sexual Health Strategy for Rotherham (Refresh 2019 – 2021)



The World Health Organisation (2004) defined Sexual Health as: 'a state of physical, mental and social wellbeing in relation to sexuality: it is not merely the absence of disease, dysfunction or infirmity'.

Sexual health includes access to sexually transmitted infection (STI) testing and treatment, contraception and includes healthy, safe relationships, consent and resilience.



Strategic Ambitions

- Improving sexual health
- Improving reproductive health
- Focusing on vulnerable groups
- Building on successful service planning and commissioning

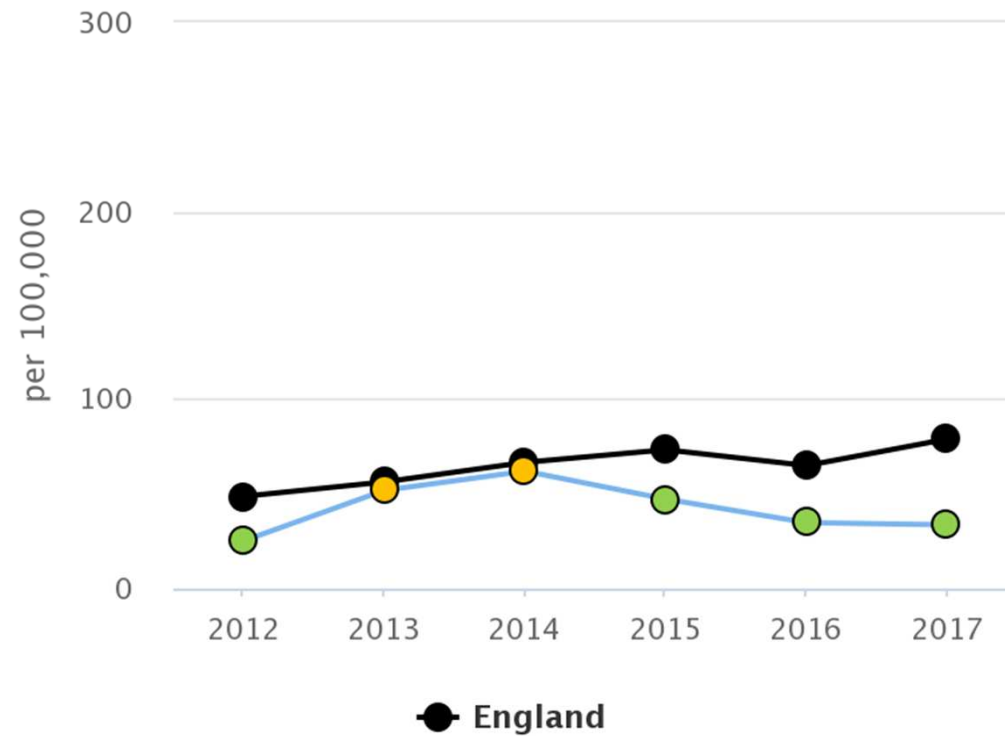


Improving Sexual Health

- STI diagnosis of 581.4 per 100,000 (compared to 743 per 100,000 in England)
- 58% of diagnoses of new STIs were in young people aged 15-24 (compared to 50% in England)
- Rate of chlamydia detection per 100,000 young people aged 15-24 was 2,010 (compared to 1,882 per 100,000 in England)



Rates of gonorrhoea (2013-2017)



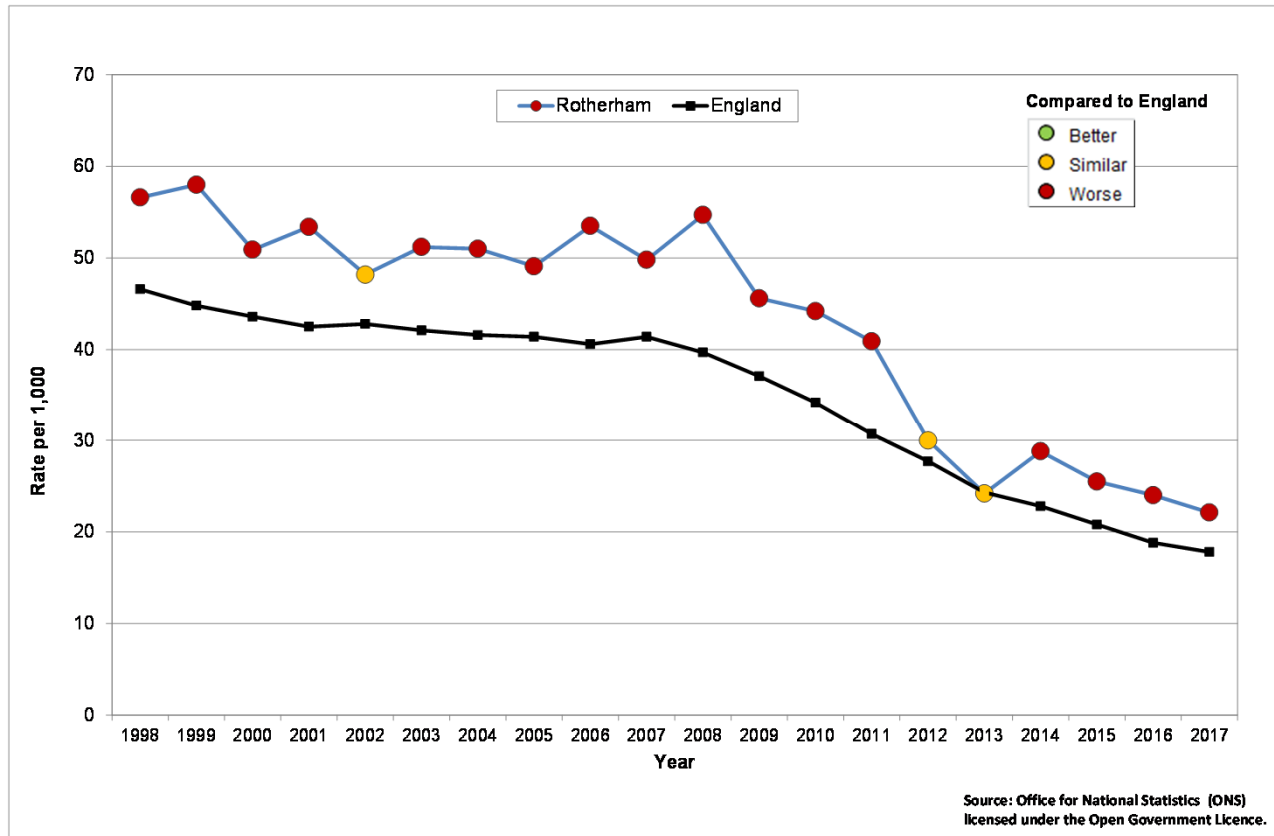
Priorities

- STI diagnoses in young people:
 - 58% of diagnoses in Rotherham in 2017 in young people aged 15-24.
 - Young people are also more likely to become re-infected with STIs.
- Pelvic Inflammatory Disease (PID) admissions:
 - PID admission rate in Rotherham, at 542.8 per 100,000, is much higher than the rate in England (242.4 per 100,000) and Yorkshire and Humber (264.7 per 100,000).
 - PID can be a complication of some STIs especially chlamydia so screening and treatment of this infection is a priority.



Improving Reproductive Health

Under 18 Conceptions by Year (rate per 1,000 females aged 15-17)
Rotherham compared to England 1998 – 2017



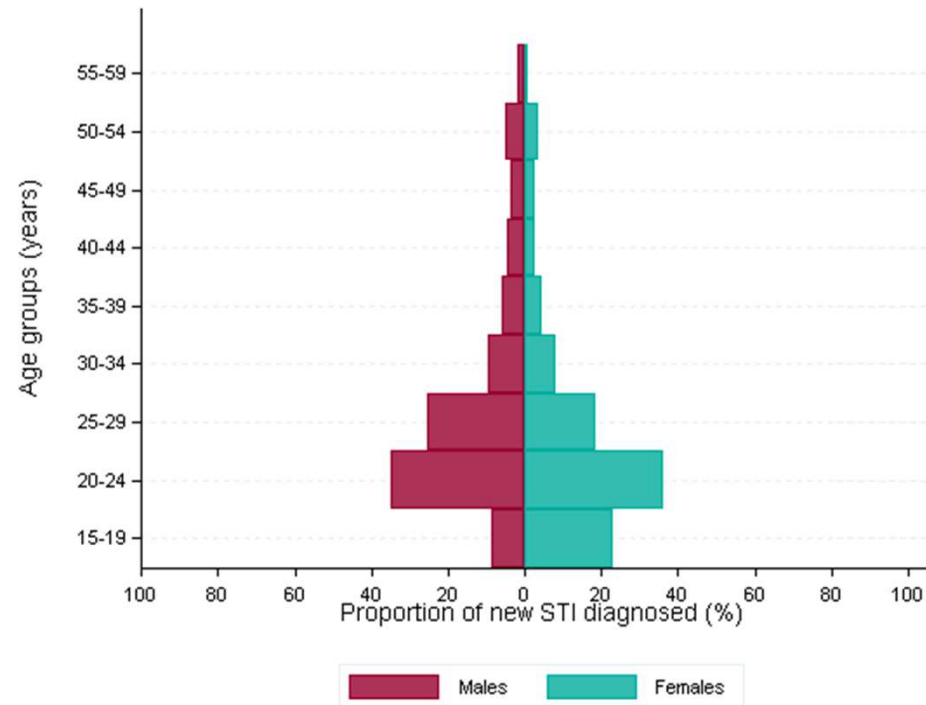
Priorities

- Under 18 conception rate:
Rotherham has a relatively high rate of 24.0 per 1,000 females aged 15-17 compared to the rate of 18.8 in England and 22.0 in Yorkshire and Humber.
- Access to contraception:
There is good uptake of LARC in Rotherham but this could be improved in those women under 25
- Timely access to abortion services:
Among NHS funded abortions in Rotherham, the proportion of those under 10 weeks gestation was 71.5%, while in England the proportion was 76.6%. Whilst this shows an improvement from 2016 when the rate was 69.7% there is still room for improvement.



Focusing on Vulnerable Groups

Certain population groups are more affected by poor sexual health than others, young people, for example:



Priorities

- 58% of diagnoses of new STIs in Rotherham in 2017 were in young people aged 15-24 years compared to 50% in England. Services, health promotion and prevention initiatives to prioritise young people.
- Prevention, diagnosis, treatment and care needs to be delivered to the general population as well as having a focus on groups and individuals with greater sexual health needs such as young people under 25, vulnerable adults such as those with ,learning difficulties, MSM, black and ethnic minority groups and people living in areas of high deprivation



Building on Successful Service Planning and Commissioning



Priorities

- Ensure provision of integrated services that are evidence based, value for money, informed by sexual health needs
- Build on the success of the commissioned services and look to promote access and understand any barriers preventing access



Key Indicators for Success

- Increased chlamydia detection rate
- Reduction in number of people presenting with HIV at a late stage
- Maintenance of continued year on year reduction in teenage unplanned pregnancy rates
- Reduction in levels of STIs
- Reduction in onward transmission of STIs
- Reduction in repeat abortions
- Increased access to contraception



Implementation and Monitoring – the action plan

The strategy highlights the vision, ambitions and priorities for sexual and reproductive health for the people of Rotherham.

It will be implemented by an action plan managed via the multi agency Rotherham Sexual Health Strategy Group.

