

# **Southampton Strategic Assessment (JSNA)**

**Sexual Health page content**

*Last updated September 2024*

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## 1. Sexual health background

Sexual health is defined as a state of physical, emotional, mental and social wellbeing in relation to sexuality; it is not just the absence of disease. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, which encompasses safe sexual experiences that are free of coercion, discrimination and violence. In England, the definition of sexual health also includes the provision of advice and services around contraception, termination of pregnancies, Sexually Transmitted Infections (STIs) and Human Immunodeficiency Virus (HIV).

The government's [Framework for Sexual Health Improvement in England](#) highlights the importance of good sexual health and ambition is to improve sexual health of the whole population, with key objectives outlined.

The Southampton Sexual Health Needs Assessment (available in the resources section below) has identified a number of opportunities to improve sexual health outcomes and reduce inequalities across the system.

- [Sexual health dashboard](#)

## 2. Who is at risk and why?

The factors that affect sexual health (both positively and negatively) are multiple and complex. If a person is engaging in sexual activity the use of condoms improves the chances of avoiding unwanted pregnancy and contracting a sexually transmitted infection.

Different population groups have a differing range of factors affecting their sexual health. Higher levels of STIs and HIV are seen among young heterosexuals aged 15 to 24 years, black ethnic minorities and men who have sex with men (MSM).

The consequences of poor sexual health include:

- Unintended pregnancies and abortions
- Psychological consequences of sexual coercion and abuse
- Poor educational, social and economic opportunities for teenage mothers, young fathers and their children
- STIs and HIV
- Cervical and other genital cancers
- Hepatitis, chronic liver disease and liver cancer
- Pelvic inflammatory disease, which can cause ectopic pregnancies and infertility

More information is available in the sexual health dashboard and resources section below.

- [Sexual health dashboard](#)

### 3. Sexually Transmitted Infections and HIV

STIs and HIV are a consequence of poor sexual health, with efforts focused on reducing the incidence and prevalence as well as the onward transmission of STIs and HIV amongst the population, especially within high-risk groups. More information can be found in the resources section below.

**Chlamydia** – Is the most frequently diagnosed STI in England, with rates of infection substantially higher in young people aged 15 to 24. In 2023, 17.5% of females (aged 15-24) in Southampton were screened for chlamydia, with a detection rate of 1,640 cases per 100,000 females aged 15 to 24 (1,610 below goal). A high detection rate of chlamydia is not necessarily bad, as Public Health England recommend a detection rate of at least 3,250 cases per 100,000, which was set as it would likely result in a continued reduction in the prevalence of chlamydia. Chlamydia is effectively treated with antibiotics.

**Genital warts** – Is caused by infection with specific subtypes of human papillomavirus (HPV). There is no cure for genital warts, symptoms can clear up by themselves, but further outbreaks can occur. Southampton had a first episode genital warts diagnosis rate of 60.2 cases per 100,000 population in 2023, significantly higher than the England average of 45.8 cases.

**Genital herpes** – Infections are frequently due to herpes simplex virus (HSV) type 2, although type 1 infection is also seen. Similar to genital warts, those diagnosed with herpes can experience outbreaks or recurrent episodes that require treatment. In 2023, Southampton had a genital herpes diagnosis rate of 40.8 cases per 100,000 population, no significant change to the previous year and lower, but not significantly to the England average of 40.8 cases.

**Gonorrhoea** – Gonorrhoea is a STI caused by bacteria called *Neisseria gonorrhoeae* or gonococcus and can usually be treated with a course of antibiotics. Southampton had a gonorrhoea diagnosis rate of 132.6 cases per 100,000 population in 2023, significantly lower than the England average of 149.2 cases.

**Syphilis** - Is a sexually transmitted infection caused by the bacterium *Treponema pallidum*. Antibiotics can resolve it in the early stages. Without treatment, however, it can lead to disability, neurological disorders, and even death. Syphilis cases have more than doubled in Southampton and across England over the last 10 years. In 2023, the rate for Southampton was 21.4 diagnoses per 100,000. This was higher, but not significantly, to the England rate of 16.7 per 100,000. In 2012 the rates were 5.9 per 100,000 and 5.6 per 100,000 respectively.

**Shigella** – Is a bacteria that causes Shigellosis (also known as bacillary dysentery). It can cause severe illness, requiring admission to hospital for treatment. Infections amongst MSM have been increasing over the past decade and circulating strains are becoming multi or extensively resistant to antibiotics. In 2023, Southampton had a crude rate of 14.0 per 100,000 adult male population, higher, but not significantly, than England’s crude rate of 9.0 and the worst amongst ONS comparators.

**HIV** – HIV is a virus that damages the cells in a person’s immune system and weakens their ability to fight everyday infections and diseases. Whilst there is currently no cure for HIV, there are very effective drug treatments, antiretroviral therapy (ART), that enable most people living with HIV to live a long and healthy life. In 2022, Southampton had a new HIV diagnosis rate of 15.8 cases per 100,000 population, significantly higher than the England diagnosis rate of 6.7 cases. Early diagnosis of HIV is vital to effective treatment, with later diagnoses associated with poorer health outcomes. Late HIV diagnoses remain high across the UK, with 42.3% of adults diagnosed in Southampton during 2020-22 classified as having a late diagnosis; lower but not significantly than the England average of 43.3% and above the national goal of less than 25%.

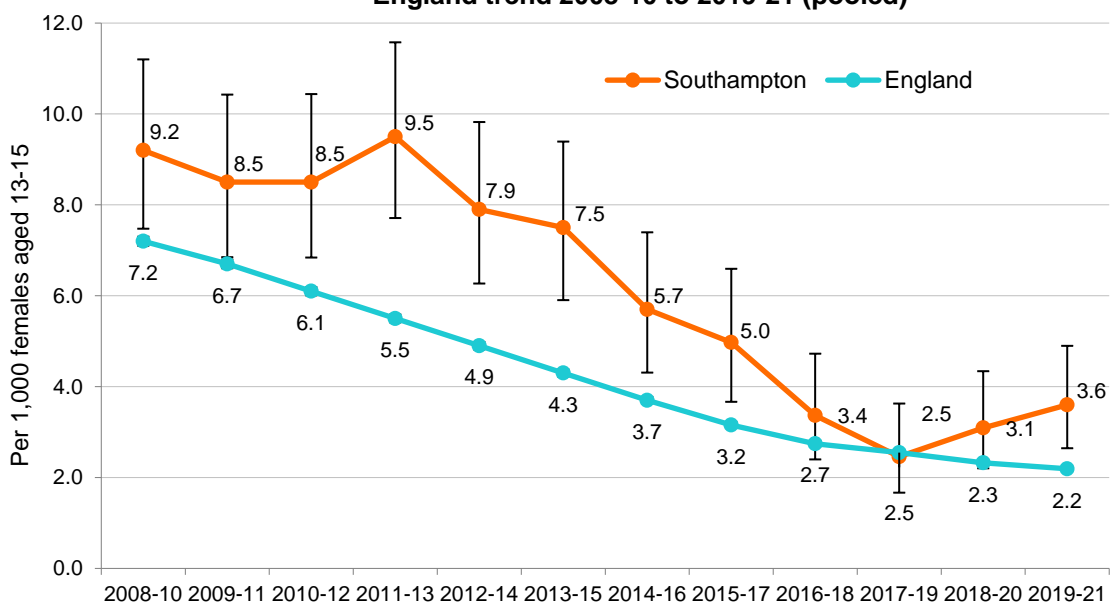
- [Sexual health dashboard](#)

#### 4. Teenage pregnancies

A large proportion of teenage pregnancies are unplanned and around half end in abortions. Teenage pregnancies are an avoidable experience for most young women. Although, for some young women having a child can represent a positive turning point in their lives, for many more teenagers bringing up a child is extremely difficult and often results in poor outcomes for both the parent and the child. Around 1 in 5 young women aged 16 to 18 who are not in education, training or employment are teenage mothers; young fathers are also more likely to have poor education and have a greater risk of being unemployed in adult life.

Teenage conceptions in Southampton among females aged under 16 (aged 13-15) in 2021 is 2.9 per 1,000 (11 conceptions). If Southampton had 3 fewer conceptions, it would have the same rate as England of 2.1 per 1,000. After declining by 80.0% between 2014 and 2018 to 1.2 per 1,000, the lowest rate for Southampton since 2009, the rate had increased by 78.2% in 2020 to 5.5 per 1,000, significantly higher than England (2.1 per 1,000). By 3 years pooled, Southampton’s rate has been increasing since 2017-19 from 2.5 per 1,000 to 3.6 per 1,000 in 2019-21. This is the first time since 2015-17 that Southampton’s rate has been significantly higher than England (2.2 per 1,000).

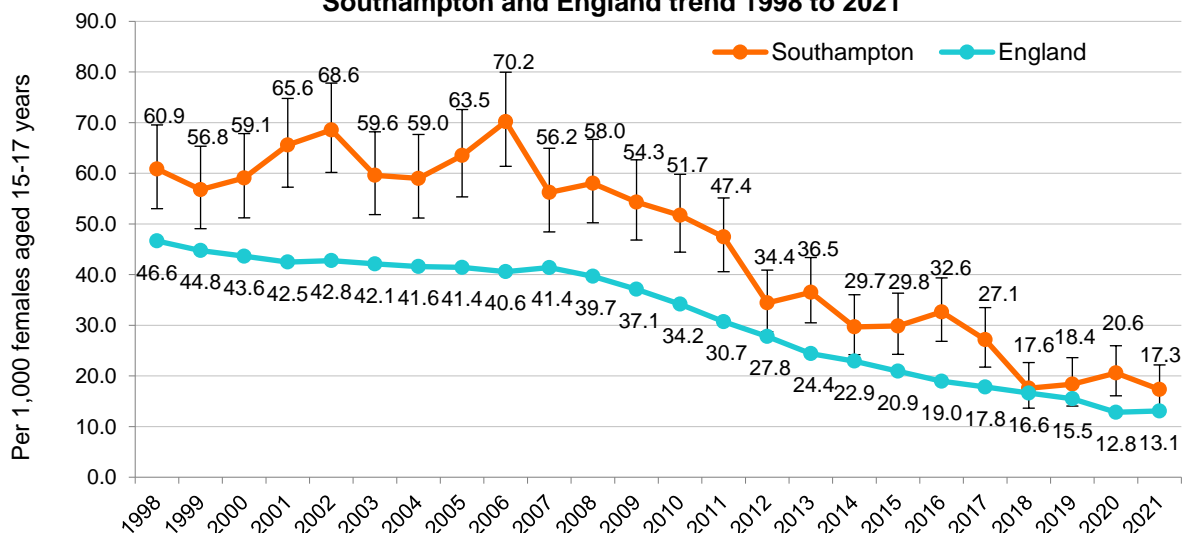
Under 16 conception rate per 1,000 female population: Southampton and England trend 2008-10 to 2019-21 (pooled)



Source: Office for National Statistics

For females aged under 18, Southampton’s rate continues to fall faster than the England average. The conception rate is 17.3 per 1,000, the lowest rate for Southampton since 2001. However, Southampton is the 5<sup>th</sup> highest amongst its ONS comparators and significantly higher than England’s rate of 13.1 per 1,000.

Under 18 conception rate per 1,000 female population, aged 15-17 Southampton and England trend 1998 to 2021



Source: Office for National Statistics

Ward analysis shows that Bevois, Peartree and Sholing wards have the highest number of teenage mothers aged under 18 years between 2020-2022. Analysis also shows a very strong link between

deprivation and teenage mothers, with the number of teenage mothers 6.4 times higher for females living in the most deprived England deprivation quintile compared to the top two least deprived. More information can be found in the [Health inequalities](#) section.

- [Sexual health dashboard](#)

## 5. Reproductive health

Reproductive health refers to a state of physical, mental and social wellbeing in all matters relating to the reproductive system. It addresses the reproductive processes, functions and system at all stages of life to ensure individuals have the capability to reproduce and the freedom to decide if, when and how often to do so ([World Health Organisation](#)).

Long Acting Reversible Contraceptives (LARC) are one of the most effective methods in reducing unwanted pregnancy, as they do not rely on a daily routine like other forms of contraceptive such as the pill. LARCs include contraceptive injections, implants, the intra-uterine system (IUS) or the intrauterine device (IUD). However, the contraceptive injection isn't included within LARC indicators as this method has a higher failure rate. In Southampton, 47.0 per 1,000 females aged 15-44 years are using one of the LARC methods outlined above, this is significantly higher than the national average of 44.1 females (2022).

It is important that females requesting an abortion have early access to services and support, as the earlier in the pregnancy the abortion is performed, the lower the risk of complications there are. Data from the most recent period (2021) shows that within Southampton 89.0% of abortions were performed within 10 weeks gestation, which is similar to the England average of 88.6%. More information can be found in the sexual health dashboard, available below.

## 6. Resources

### 6.1 Sexual health dashboard

Sexual health is defined as a state of physical, emotional, mental and social wellbeing in relation to sexuality; it is not just the absence of disease. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, which encompasses safe sexual experiences that are free of coercion, discrimination and violence. The sexual health dashboard presents a wide range of data regarding sexual health, to provide intelligence to help drive strategic decision making, such as the Southampton Sexual Health Improvement Plan. Analysis includes benchmarking against statistical neighbours and trends over time for all indicators included. Some indicators include analysis at a sub-city level. Metadata is also included for all indicators. Data in this dashboard is compiled from a range of publicly available sources including Office for Health Improvement and Disparities (OHID).

[Sexual health dashboard](#)

### 6.2 Southampton Sexual Health Needs Assessment

This health needs assessment (HNA) uses a systematic approach with a combination of quantitative data, service user and staff surveys, qualitative research and stakeholder engagement to understand the needs of the population in terms of their sexual and reproductive health, together with the assets available in the city to support these needs. Within this, the HNA attempts to understand the additional needs and support available for certain groups, who may need a different approach to improve and maintain their sexual health and wellbeing.

[Southampton Sexual Health Needs Assessment](#)

### 6.3 You Said, We Did - Sexual Health Residence Survey

In May 2022 Southampton City Council ran a survey for residents to capture their knowledge and experience of sexual health services in the city. This was part of a broader health needs assessment undertaken by the council's public health team to better understand what residents need and to develop services to fit that. This is a summary of what you told us, and some examples of what we have done, or will do, to respond.

[You Said, We did – Sexual Health Residence Survey](#)

### 6.4 Other resources

UK Health Security Agency – [Summary profile of local authority sexual health \(SPLASH\) Southampton July 2024](#)



[OHID - Fingertips - Bespoke sexual health profile](#)

[OHID - Fingertips - Sexual and Reproductive Health profiles](#)

[PHE - Good progress but more to do: teenage pregnancy and young parents](#)

[Department of Health - A Framework for Sexual Health Improvement in England](#)

[PHE - Spotlight on sexually transmitted infections in the South East](#)

[PHE - Annual epidemiological spotlight on HIV in the South East](#)

[NHS - Sexual health](#)