

2022 

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# Sexual and Reproductive Health Needs Assessment

## Hampshire



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# Executive Summary

## Introduction: Why do we need a Sexual and Reproductive Health Needs Assessment?

The World Health Organization (WHO) defines sexual health as a state of physical, emotional, mental and social wellbeing in relation to sexuality and not just the absence of disease, dysfunction or infirmity<sup>1</sup>. Good sexual and reproductive health is a key Public Health priority. This joint HNA reflects the

partnership between the Hampshire and Isle of Wight Public Health Teams and our commitment to improve sexual and reproductive health across the whole system, to ensure that our residents have access to effective, efficient and equitable services.

## Aims, Scope and Methodology: How we conducted our HNA

A health needs assessment (HNA) is a systematic method for reviewing the health issues facing a population, leading to agreed priorities and resource allocation that will improve health outcomes and reduce inequalities. The aim of this HNA is to understand the current sexual and reproductive health needs of Hampshire and Isle of Wight residents. As part of our HNA we used current quantitative data and listened to our residents to understand current lived experiences to help shape future priorities for Hampshire and Isle of Wight. This is to ensure that the sexual and reproductive health needs of Hampshire and Isle of Wight residents are included in all future commissioning, service planning and provision across

the whole system. This HNA adopts an inequalities lens to explore variation in outcomes across the Hampshire and Isle of Wight system. Health inequalities are not caused by one single issue, but a complex mix of environmental and social factors which play out in a local area or place – this means that we all have a critical role to play in reducing health inequalities. The role of this HNA is to inform and aid Hampshire County Council, the Isle of Wight Council and all system partners to work towards improving sexual and reproductive health and reducing health inequalities for Hampshire and Isle of Wight residents (excluding the cities of Portsmouth and Southampton).

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<sup>1</sup> Sexual health (who.int)

## Findings: What are our key findings?

### Key sexual health findings in Hampshire

1. In Hampshire in 2020, STIs disproportionately affected people who identified as gay, bisexual and other men who have sex with men, people of Black Caribbean ethnicity and people aged 15 to 24 years old.
2. Overall, of Hampshire residents diagnosed with a new STI in 2020, 45.4% were men and 54.6% were women.
3. The rate of new STIs being diagnosed is higher in more deprived areas
4. Young people are more likely to become re-infected with STIs, which is a marker for persistent high-risk behaviour.<sup>2</sup>
5. The STI testing rate has been declining since 2019, following previous increases since 2012. In 2021, the figure was 2,167.8 per 100,000, compared to 3,453.5 per 100,000 in 2019. Hampshire is worse than England.
6. The proportion of 15 to 24-year olds screened for chlamydia decreased from 18.3% in 2019 to 12.3% in 2020. A further decrease happened from 2020 to 2021, down to 10.6%.
7. Diagnostic rates for syphilis and gonorrhoea are low.
8. HIV prevalence and testing coverage are both low. HIV late diagnoses are high in Hampshire. In Hampshire in 2019–2021, late diagnoses in heterosexual men were worse than England's average, at 65.4% compared to 58.1% in England.
9. Men are underrepresented in Sexual Health Services and have lower testing rates than women.

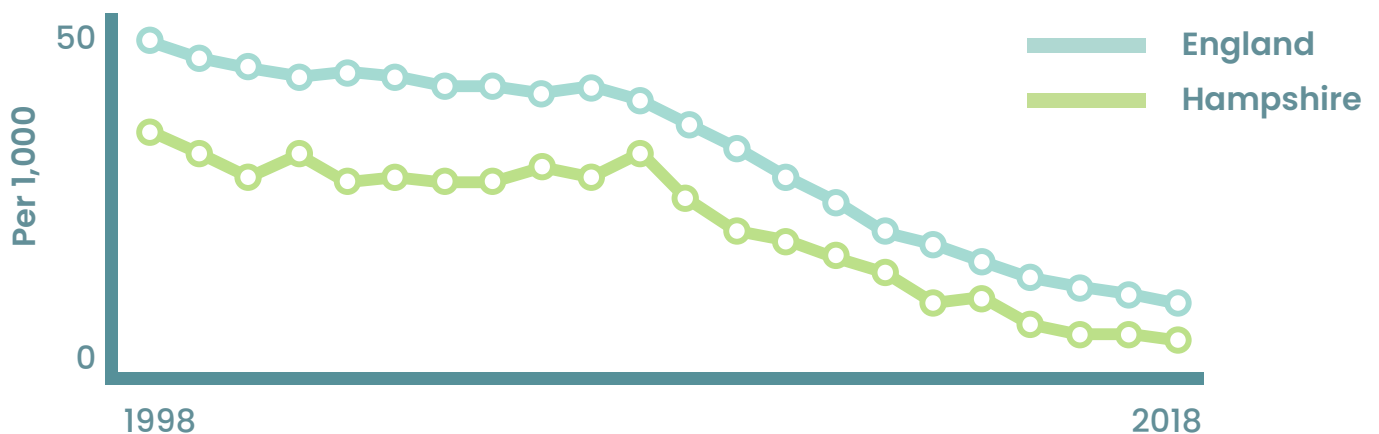
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<sup>2</sup> UKHSA 2022 SPLASH Supplement Report

## Key reproductive health trends in Hampshire

1. Prescription of Long-Acting Reversible Contraceptives (LARC) has declined over time. The total prescribed LARC (excluding injections) was 45.5 per 1,000 in 2020, compared to the highest prescribing rate of 62.7 per 1,000 in 2018.
2. The total percentage of LARC prescribed by GP Services has increased between 2018 and 2020, whilst the percentage of LARC prescribed by SRH Services has declined over the same time period.
3. In line with national trends, the crude birth rate for Hampshire has decreased since 2013. In 2020 the number of live births per 1,000 was 9.3 compared to 10.7 per 1,000 in 2013.
4. Hampshire had an under 18 conception rate of 9.3 per 1,000 in 2020, this is lower than both England (13 per 1,000) and Hampshire's CIPFA nearest neighbours' average. The rate of 9.3 relates to 208 under 18 conceptions in 2020, down from 800 in 1998.
5. The total abortion rate has slowly increased over time. The total abortion rate was 13 per 1,000 in 2013 increasing to 16.4 per 1,000 in 2020. This compares to the 2020 England rates of 18.9 per 1,000.

## Under 18s conception rate per 1,000 for Hampshire



## Prevention

1. Effective prevention requires a whole system life course approach. Sexual health promotion should be inclusive and promote sexual self-efficacy based on a sex positive approach.
2. RSE is most effective when the education (and wider) workforce receives evidence-based training. Hampshire and Isle of Wight children and young people tell us that they want better, more inclusive RSE.

## Access to Sexual and Reproductive Health Services

1. Equalities data is not systematically and routinely collected by all commissioned Sexual and Reproductive Health Services.
2. The quantitative data used in this Health Needs Assessment reflects the demand on sexual and reproductive health services, however it does not reflect unmet need for Hampshire and Isle of Wight residents.
3. Over half of all consultations for Hampshire residents are provided by one clinic, and one online testing service: Solent NHS Trust (Online Sexual Health Service) and St Mary's Community Health Campus. 94% of all consultations for Hampshire residents are provided by eight clinics.
4. There is high acceptability of online sexual and reproductive health services for Hampshire residents. However, there may be people at higher risk of poor sexual and reproductive health that are digitally excluded, therefore a range of service models are needed to ensure equitable access.
5. COVID-19 disrupted access to contraceptive services.

## Hampshire Voices

1. Hampshire residents tell us that they want services that are designed around their lives. Walk-in clinics, evening and weekend openings are what people want from sexual and reproductive health services.
2. Reducing stigma around HIV is key to ensure that people from Black African communities in Hampshire access our sexual and reproductive health services. This is important to ensure greater uptake for women in need of PrEP.
3. We have an engaged wider workforce in Hampshire and Isle of Wight who all contribute to supporting our residents to improve sexual and reproductive health outcomes. However, there is a need to ensure that our workforce is supported to gain knowledge and skills and to come together as a network to share good practice. There is also a need for training around LGBTQ+ Sexual and Reproductive Health.
4. Stigma perceived or enacted affects access to sexual and reproductive health services for some LGBTQ+ people and for some young parents.

**Effective prevention** requires a whole system life course approach.



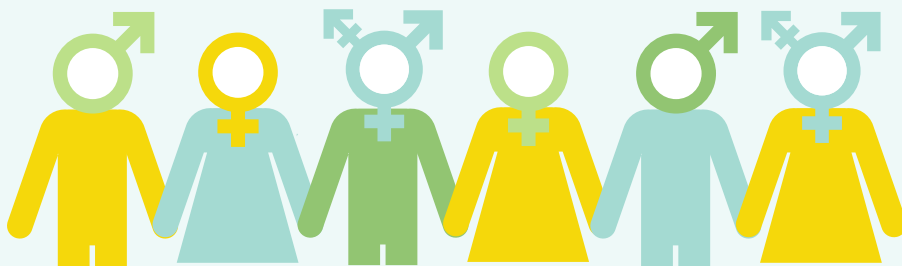
The wider workforce want supporting to gain knowledge and skills with

**LGBTQ+**

sexual and reproductive health

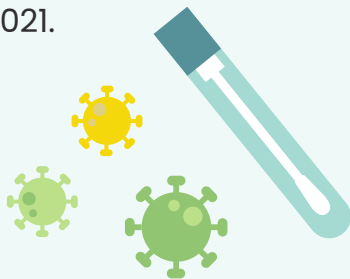
**inclusive training.**

**Relationships and Sex education (RSE)** is most effective when the wider workforce received evidence-based training. Hampshire and Isle of Wight children and young people tell us they want better, more inclusive RSE.



**4,847**

new STIs were diagnosed in residents of Hampshire in 2021.



**63%**

of HIV diagnoses were made at a late stage of infection (2018-2020).



**50.2%**

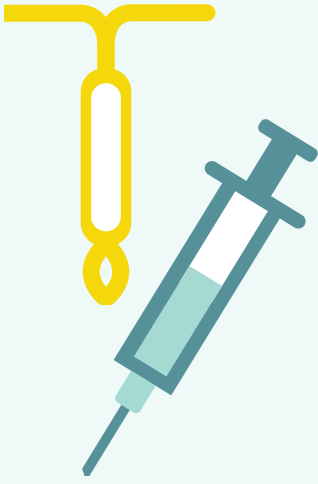
of diagnoses of new STIs in Hampshire residents were in young people

**aged 15 to 25.**

The rate of new STIs being diagnosed is higher in

**more deprived areas.**

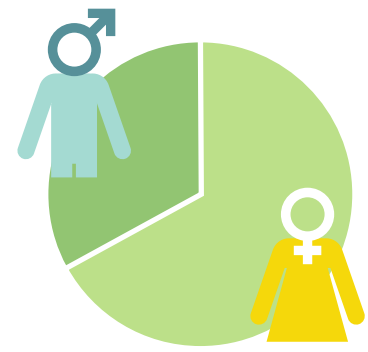




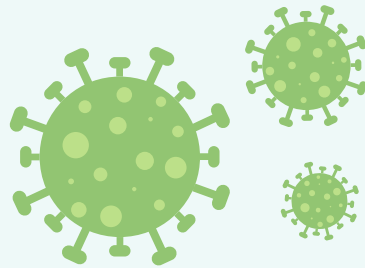
## Men are underrepresented

in Sexual Health Services

**66.9%** of attendances for integrated sexual and reproductive health service care were recorded as women.



The total percentage of **Long Acting Reversible Contraception (LARC)** prescribed by GP services increased compared to the percentage prescribed by Sexual and Reproductive Health Services during 2018-2020.



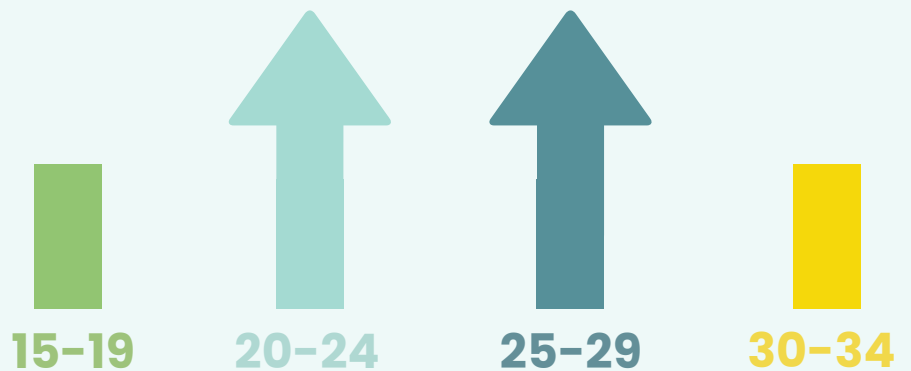
STI testing rate decreased during **Covid-19 pandemic** (Hampshire worse than England).



The number and rate of **under 18 conceptions** are decreasing and are significantly better than England rates.



The highest rates of births in Hampshire is the **30-34** age group.



The total **abortion rate has slowly increased** over time, with highest rate observed in the **20-24** and **25-29** age ranges.

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# Sexual and Reproductive Health Needs Assessment

## Recommendations

Achieving good sexual and reproductive health for all our residents is complex and requires a whole system approach. This SHNA has shown that there are variations in need for services and interventions for different individuals, groups and communities across the life course. These recommendations

reflect our commitment to work together across the whole system to ensure that our residents have access to effective, efficient and equitable services to improve outcomes and reduce inequalities to support good sexual and reproductive health for all Hampshire and Isle of Wight residents.





# Recommendations for Hampshire

## Theme: Working together

**Work collaboratively as a Sexual and Reproductive Health system to ensure our services meet needs to improve population outcomes. Share data, intelligence and insight with system partners.**

**Rationale:** We need to design, plan, monitor and evaluate services and population outcomes together. We need to ensure that equalities data is systematically and routinely collected by all commissioned Sexual and Reproductive Health Services.

**Outcome:** Improve sexual and health outcomes for Hampshire and Isle of Wight residents by using a Population Health Management (PHM) approach to understand demand and unmet need.

**Establish a single Sexual and Reproductive Health Network across Hampshire and Isle of Wight to bring together all partners as a whole system.**

**Rationale:** A whole system approach is required to work strategically together to improve sexual and reproductive health for our populations.

**Outcome:** Improve system working to prioritise prevention to improve sexual and reproduce health.



**Work as a system to support and promote Sexual and Reproductive Health Workforce Training.**

**Rationale:** A confident and trained workforce can support prevention at different levels with the system. Support our wider workforce to access evidence-based sexual and reproductive health training as appropriate.

**Outcome:** Improved training for the wider Public Health workforce to embed preventative practice to improve population outcomes. a Population Health Management (PHM) approach to understand demand and unmet need.

## Theme: Prioritising Prevention

### **Whole system approach to Sexual Health promotion to prioritise prevention.**

**Rationale:** A Hampshire and Isle of Wight approach to Sexual Health Promotion to ensure that campaigns and interventions meet the unique needs of groups at higher risk and our communities.

Ensure that the Sexual Health Promotion service uses data and intelligence to focus interventions in areas of need and with higher risk groups.

Promote a sex and identity positive approach and sexual self-efficacy for all.

**Outcome:** Improve health literacy to ensure good sexual and reproductive health.

Improve uptake of STI testing.

Reduce stigma and improve sexual self-efficacy.

### **Work towards zero HIV transmission by adopting a whole Sexual and Reproductive Health system approach to improve access to community HIV testing and HIV PrEP for higher risk groups and communities.**

**Rationale:** Hampshire has high rates of late HIV diagnosis, with variation between districts.

Isle of Wight has low numbers of late diagnosis but also has low HIV testing coverage.

Working with communities can reduce stigma and increase knowledge of HIV prevention.

**Outcome:** Increase HIV testing coverage and PrEP uptake to reduce rates of late HIV diagnosis in Hampshire and Isle of Wight.



### **Work together to ensure that Hampshire and Isle of Wight young people have access to effective, age appropriate, evidence-based Relationship and Sex Education.**

**Rationale:** All young people can make informed and responsible decisions, understand issues around consent, healthy relationships, and are aware of how to look after their

sexual and reproductive health throughout their life course. RSE is most effective when the education staff (and wider) workforce receive evidence-based training and when home and school are involved.

**Outcome:** Reduce rate of under 18 conceptions and STI new diagnosis in young people.

## Theme: Improving Access to Services and Reducing Health Inequalities

### Improve community access to LARC.

**Rationale:** Women require contraceptive care designed around their needs and our residents have told us that access in the community and with their GP is important. We need to work with partners towards a Women’s Health Hub Model to ensure services meet the needs of Hampshire and Isle of Wight women.

Focus on increasing LARC prescribed activity in Hampshire districts with lower activity than Hampshire average.

**Outcome:** Improve uptake of LARC and reduce unplanned pregnancies.

### Improve access to STI testing for groups at higher risk of poor sexual health.

**Rationale:** Improving uptake and increasing the frequency of STI testing for Hampshire and Isle of Wight residents. Ensure a range of STI testing options based on local need including online self-sampling, in-person attendance at specialist clinics or community pharmacies, primary care and outreach services.

Improve uptake of STI testing for men by ensuring effective sexual health promotion to address knowledge and barriers to testing.

**Outcome:** Reduce STIs.

### Ensure that the Chlamydia Screening Programme promotes the benefits of regular testing and improves accessibility for testing for young people.

**Rationale:** Improving the uptake of Chlamydia Screening for Hampshire and Isle of Wight young people to reduce the health harm caused by untreated chlamydia infection.

**Outcome:** Improve the Chlamydia Diagnostic Rate and proportion screened to reduce diagnoses and reinfections in under 25s.



## Theme: Improving Access to Services and Reducing Health Inequalities

**Ensure that the commissioned Sexual Health Service specialist clinic models (ROSE, SHIELD, TULIP and Xtra) are inclusive and continue to meet the needs of these groups.**

**Rationale:** The Integrated Sexual Health Service provider to undertake this review to understand barriers, to reduce the stigma associated with accessing sexual and reproductive health services.

Ensuring a person-centred approach to improve health and wellbeing, reduce stigma, empower people, to increase their uptake of sexual and reproductive health services.

**Outcome:** Improve access to sexual and reproductive health services for marginalised and higher risk groups to reduce health inequalities.

**Ensure that all services supporting Sexual and Reproductive Health are inclusive and meet the needs of Inclusion Health Groups and those at higher risk of poorer outcomes.**

**Rationale:** Ensuring that no one is left behind in Hampshire and Isle of Wight. Our sexual and reproductive health services will meet the needs of all our residents.

**Outcome:** Reduce health inequalities and improve sexual and reproductive health for Hampshire and Isle of Wight residents.

**Work with system partners to ensure that the Psychosexual Counselling Service meets both the sexual health and non-sexual health needs of Hampshire and Isle of Wight Residents.**

**Rationale:** Improving access to Psychosexual Counselling to ensure equity to meet the needs of Hampshire and Isle of Wight residents.

**Outcome:** Improve sexual health and wellbeing and sexual self-efficacy.

**Ensuring access to contraception is included when planning for and responding to situations in which access to services may be lost or disrupted for longer periods of time.**

**Rationale:** COVID-19 disrupted access to contraceptive services.

**Outcome:** Improve system resilience to ensure access to contraception to reduce unplanned pregnancies.

## Theme: Hampshire Voices

**Ensure that all partners in the system continue to listen to and coproduce with our residents to meet community needs to improve sexual and reproductive health outcomes for all.**

**Rationale:** Improving outcomes by ensuring that our local communities, community and

voluntary sector organisations and commissioned services work together to plan, design, develop, deliver and evaluate our sexual and reproductive health services.

**Outcome:** Improved sexual and reproductive health services to meet the needs of our communities.



