Blackburn with Darwen

Sexual Health Strategy 2023 - 2028









Visual minutes designed as part of stakeholder engagement

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Foreword

THE CARE WORK IN THE STORE OF T

It is with great pleasure that I introduce this new Sexual Health Strategy for Blackburn with Darwen.

This strategic document demonstrates our commitment to the fundamental right to good sexual health for every individual in our community.

This strategy represents a collective vision, that recognises that sexual health is a vital component of our overall wellbeing. The development of this strategy has been supported by the engagement of over one hundred and fifty stakeholders. Their voices have been heard through digital surveys, focus groups and stakeholder workshops. These diverse perspectives have brought to light the varied needs and challenges that our community faces regarding sexual health. The invaluable insights, expertise, and lived experiences shared have increased our understanding and awareness, ensuring that this strategy is not just data driven but rooted in the real-world context of Blackburn with Darwen.

This Sexual Health Strategy for Blackburn with Darwen is a visionary roadmap towards a community where sexual health is not just prioritised, but celebrated. It envisions a borough where every individual can lead a healthy and fulfilling sexual life, free from stigma and barriers.

The work does not end here. We move forward with the knowledge that our strategy must be capable of evolving with our community's changing needs and the advances that occur within sexual health. We commit to continuous adaptation, ensuring that our goals are achieved and that our services remain at the forefront of best practice.

This is a shared vision, one that we can only make a reality through collective effort and mutual support. Together, with the strong foundation of stakeholder engagement we strive to achieve excellence in sexual health services for Blackburn with Darwen residents.

Cllr Damian Talbot Executive Member for Public Health and Wellbeing

Executive Summary

This sexual health strategy aims to promote accessible and equitable sexual health services for all individuals in Blackburn with Darwen regardless of race, ethnicity, sexuality or socioeconomic status.

Our integrated sexual health offer is promoted across the life course and includes access to education, prevention, testing, and treatment. We will work collaboratively with local healthcare providers, community organisations, and stakeholders to ensure that sexual health services are tailored to meet the specific needs of our diverse populations.

Through proactive education, we will empower individuals with the knowledge and skills necessary to make informed decisions about their sexual health. By partnering with schools and community organisations, we will promote open dialogue, challenge stigma, and encourage positive relationships, health and sex education.

Our aim is that Blackburn with Darwen is a place where sexual health and safe healthy relationships can be openly discussed and embraced, creating an environment that encourages prevention and promotes a culture of care and respect.

To achieve our vision, we are dedicated to expanding access to testing and treatment services.

We will reach out further to engage with vulnerable and diverse communities, ensuring that testing services are easily accessible, culturally sensitive, and non-judgmental.

We will remove barriers and increase awareness about sexual health, we aspire to increase sexually transmitted infection (STI) testing rates, leading to early diagnosis, prompt treatment, and prevention to stop the spread of infections.

We are committed to tackling the onward transmission of HIV through innovative prevention strategies and early intervention. By partnering with key stakeholders, community organisations, and individuals living with HIV, we will work collaboratively to increase awareness of prevention methods such as pre-exposure prophylaxis (PrEP) and promote regular testing for early diagnosis.

We will improve sexual health and reduce unintended pregnancies through the promotion of Long-Acting Reversible Contraception (LARC) uptake in General Practitioners (GPs) and Sexual Health services (SHS). By working collaboratively to remove barriers to access, we aim to empower individuals to make informed choices regarding their reproductive health.

Abdul Razaq Director of Public Health

Sexual health is..



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A state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.



World Health Organisation (2006): Definition of Sexual Health

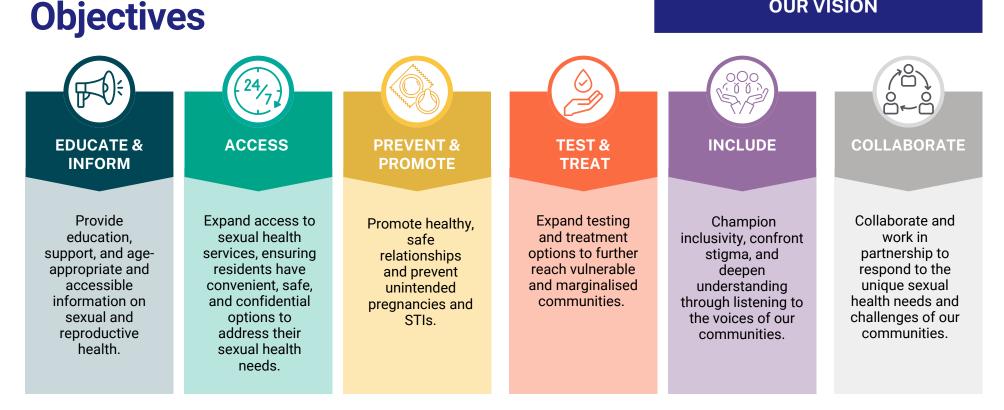
Our vision for sexual health

We recognise and celebrate the diversity in our communities, envisioning a borough that champions inclusivity, actively reduces stigma and discrimination, and prioritises the sexual well-being of all.

Our commitment to achieving this involves a comprehensive, collaborative inclusive, and strategic approach that promotes sexual health, well-being, and positive relationships for every individual in our community.

Our vision is that all our residents have equal access to sexual health services throughout their life and they can enjoy a life of good sexual health, free from prejudice or bias.

OUR VISION



National Guidance &

Principles





National context

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At a local level, this strategy has been developed alongside the Blackburn with Darwen Joint Strategic Needs Assessment (JSNA), The Health and Wellbeing Strategy, and also local sexual health data. At a national level, this strategy is underpinned by the National Framework for Sexual Health Improvement in England, NICE Quality Standards, and the UKHSA / Office for Health Improvement and Disparities OHID (OHID) Sexual and Reproductive Health Profiles.

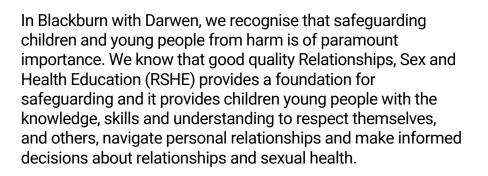
Particular focus has been considered in relation to:

The Public Health Outcomes Framework (PHOF) <u>Healthy</u> <u>lives, healthy people: Improving outcomes and supporting</u> <u>transparency</u> sets out a vision for public health, desired outcomes and the indicators that will help us understand how well public health is being improved and protected. The PHOF sets out specific priorities and indicators to improve public health, and it includes indicators related to sexual health, such as reducing the rates of sexually transmitted infections (STIs) and increasing access to sexual health services.

<u>Sexual and reproductive health and HIV: applying All Our</u> <u>Health</u> provides information on how to improve sexual and reproductive health and reduce the transmission of HIV in England. The <u>Women's Health Strategy</u> places a strong emphasis on the way the Government listens to voices of women and girls in order to create improvements in the healthcare system. The strategy focuses on the importance of sexual and reproductive health as a key component of women's overall well-being. It recognises that women's sexual health needs are diverse and that they require access to comprehensive sex education, contraception, reproductive healthcare services, and support alliances. In Blackburn with Darwen we recognise the significance of this work and will align the priority of reproductive health and unintended pregnancies with this wider and exciting agenda.

<u>Towards Zero</u> is the Government's action plan which aims to achieve zero new HIV infections, AIDS and HIV related deaths in England by 2030, with ambitious interim targets set for 2025. The HIV Action Plan focuses on the four core themes – prevent, test, treat and retain. In Blackburn with Darwen, we are committed to working Towards Zero and creating an environment where education, prevention, testing, and treatment of HIV go hand in hand with reducing stigma for individuals living with HIV.

Relationships, Sex and Health Education



RSHE also provides an opportunity to educate about the risk and dangers associated with the digital world where young people today encounter pornography at an increasingly early age, often before receiving formal education about relationships or sex. This unfiltered exposure can result in distorted perceptions of intimacy, consent, body image, and sexual expectations. We recognise the widespread access to pornography and its potential impact on children and young people.

In the delivery of RSHE it is important to acknowledge parental concerns regarding the teaching of this topic, yet essential to emphasise that RSHE is not about encouraging promiscuity, or promoting ideologies, but safeguarding children and young people from harm. Evidence has show the protective nature of RSHE and how it can safeguard children from misinformation, potential harm, and exploitation. Independent and published research from a wide range of credible sources in the UK demonstrate that RSHE contributes to improved physical and mental health for children and young people. When young people have received RSHE, they are:

- More likely to seek help or speak out.
- More likely to practice safe sex and have improved health outcomes.
- More likely to have consented to first sex, and for first sex to happen at an older age.
- More likely to have an understanding of digital safety in regard to relationships and sex.
- More knowledgeable and aware of discrimination, gender equity and sexual rights.
- Less likely to be a victim or perpetrator of sexual violence.



Commissioning responsibilities

Local Authorities:

Local authorities in the UK have various responsibilities for commissioning of sexual health services, depending on the type and level of the service.

In Blackburn with Darwen we commission:

- open access sexual health services, including free STI testing and treatment, notification of sexual partners of infected persons and free provision of contraception.
- specialist services, such as young people's sexual health, teenage pregnancy services, outreach, HIV prevention, sexual health promotion, services in schools, colleges and pharmacies.
- psychosexual counselling and HIV social care.

We collaborate with integrated care systems (ICSs) and NHS England to ensure seamless pathways of care for sexual and reproductive health services, such as abortion, sterilisation, vasectomy, HIV treatment and care, cervical screening and sexual assault referral centers.

Some specialised services are directly commissioned regionally by Integrated Care Systems (ICSs), Integrated Care Boards (ICBs) and at the national level by NHS England.

NHS England commissions:

- Contraception provided as an additional service under the GP contract.
- Promotion of opportunistic testing and treatment for STIs and patient-requested testing by GPs.
- · Sexual health elements of prison health services.
- Sexual assault referral centers.
- Cervical screening/HPV vaccination.
- Specialist fetal medicine services.

ICB / ICS

- Contraception provided as an additional service under the GP contract (primary care commissioning).
- Promotion of opportunistic testing and treatment for STIs and patient-requested testing by GPs (primary care commissioning).
- HIV treatment and care.
- Women's health.
- Most abortion services, sterilisation, vasectomy, non-sexualhealth elements of psychosexual health services', gynecologic including any use of contraception for non-contraceptive purposes.

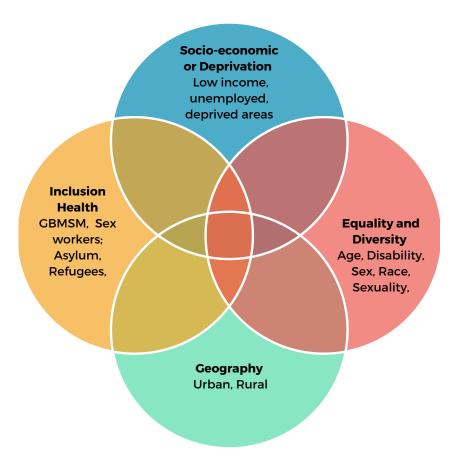
Tackling health inequalities

Sexual health is a vital component of overall well-being, encompassing physical, emotional, and social aspects of an individual's life. To improve sexual health in Blackburn with Darwen we must focus our efforts on addressing the health inequalities that exist within our communities:

- Increase knowledge and access to PrEP and PEP
- Ensure that young people receive good quality RSHE and access to contraception and sexual health services.
- Deliver targeted outreach in public sex environments to reach out to GBMSM
- Control and prevent the transmission of STIs through increasing the uptake of vaccinations e.g. HPV vaccines, Hep A/B ,gonorrhea and promoting regular testing- including self testing
- Develop satellite sexual health services delivered in different locations and community settings.
- Support the development of the Women's Health Hubs.
- Expand the community pharmacy scheme so that emergency areas.
- Involve communities of lived experience in research, design, delivery, and evaluation of sexual health programs.
- Provide innovative digital solutions for sexual health alongside traditional sexual health services.
- Understand the needs and behaviours of communities to ensure services are sensitive inclusive to diverse community needs.

To address health inequalities it is important to understand the complexities of people's lives and how various forms of inequality intersect to affect sexual health outcomes.

by the STIGMA



Trauma informed sexual health

Half of adults (48%) in the UK have experienced at least one Adverse Childhood Experience (ACE) in their childhood or adolescence*

Adverse Childhood Experiences (ACEs) are defined as highly stressful events or situations that occur during childhood and/or adolescence, which can be a single event or incident, or prolonged threats to someone's safety, security or bodily integrity.

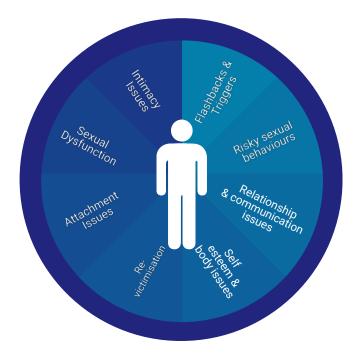
It's important to recognise that each individual's experience is unique, and trauma's impact on sexual health and relationships can vary widely.

By identifying trauma-informed sex positivity* as a central guiding public health value, and incorporating traumainformed approaches within our sexual health offer it not only benefits trauma survivors but also contributes to creating an inclusive, empathetic integrated sexual health service for individuals.

In Blackburn with Darwen our offer will:

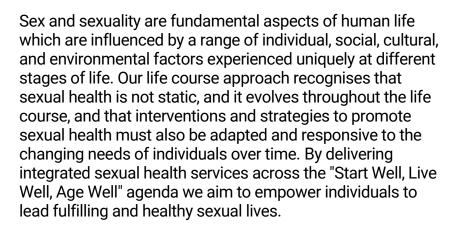
• Promote a culture of respect, empathy, and understanding towards individuals seeking sexual health services, regardless of their experiences.

- Ensure all sexual health resources are trauma-informed, taking into account the potential triggers and vulnerabilities associated with trauma.
- Ensure all services that contribute towards sexual health in Blackburn with Darwen are trauma-informed, signposting towards training and resources to further build capacity





Sexual health across the life course



Start Well:

Starting well in life involves having a safe and solid foundation for physical and emotional health, including healthy habits and relationships influenced by parents and guardians. The knowledge, skills and attitudes required for happy, healthy relationships are influenced by a range of factors. In partnership we aim to ensure that young people receive age-appropriate Relationships Sex and Health Education (RSHE) and access to youth friendly preventative and support services to equip them with the knowledge, skills and attitudes necessary to achieve healthy, safe relationships and positive sexual health.

Live Well:

Living well involves the promotion of healthy relationships, and an understanding of and access to contraception, empowering individuals to make informed choices about their reproductive and sexual health whilst preventing unintended pregnancies. It encourages regular screening to detect and address potential issues early on and promotes regular testing as a positive intervention to protect and prevent the further spread of infection and to stop the spread of disease.

Aucation

ELIRE J.

Age Well:

Older people's sexuality is often ignored or marginalised and the age well agenda recognises that sexual health remains important as individuals age. This includes providing age appropriate information addressing age-specific concerns, providing information on intimacy and sexual well-being, and continued access to testing and treatment for sexually transmitted infections.

Our Residents &

Our Response





Our residents

Source: Census 2021, Office for National Statistics

Population

BwD had a total resident population of 155,762 as of March 2021 with the highest proportion of 0-15's in the North West and a median age of 37 years.

Ethnicity

35.7% of the population identify as Asian/Asian British & just over 60% of the population identify as 'White'

Religion

38% of people identify as Christian and 35% identify as Muslim & just over 21% of people have no religion

Deprivation

The borough is relatively deprived, with a third of the borough's lower super output areas (LSOAs) among the most deprived decile of LSOAs nationally

Population of BwD

Disability

20.7% of borough residents are disabled/day-to-day activities are limited a lot or a little.

by the STIGM

LGBTQ+

Around 2500 residents identity as lesbian, gay or bisexual. Around 650 people stated their sex was registered different from their sex at birth

Employment

Just over 51% aged 16 & over, are in employment. Lower than the national average of just over 55%

Drugs & Alcohol

In 2021/22, there were over 1,200 adults & 35 children (<18) in treatment for drug & alcohol issues

Key population factors in sexual health

- Age STIs are a leading cause of infectious disease among young people, with re-infections potentially affecting fertility and reflecting unhealthy relationships or poor sexual health knowledge. However, STI rates are also increasing among older adults.
- **Gender** About 45% of pregnancies are unplanned, leading to potential health risks like postnatal depression and low birth weight. Additionally, one in four women face sexual assault as adults. Men who have sex with men (MSM) are more prone to mental health issues and substance abuse.
- Socio-economic groups People in less deprived areas tend to first have sex at a later age and are more likely to have children later in life than people in more deprived areas. People in more deprived areas are less likely to access abortion services than people in less deprived areas. New STI diagnosis rates are higher amongst those living in more deprived areas.
- Disability People with learning disabilities often face challenges due to concerns about vulnerability, consent, and potential exploitation. A study shows that by age 19/20, they are as likely as their peers to have had sexual intercourse, but more likely to practice unsafe sex. Young women in this group have a higher likelihood of pregnancy or motherhood.

 Sexual orientation – MSM are more likely to be diagnosed with bacterial STIs than other men, some MSM do not identify as gay or bisexual, especially in societies where being gay is considered taboo.
Lesbian, bisexual, and other women who have sex with women (LBWSW) face sexual health inequalities, including higher STI rates and lower participation in screening and STI testing. Access to sexual health services can be hindered by heteronormative assumptions in sexual health, maternity, and infertility treatment services.

by the STIGM

• **Gender identity** - Trans and non-binary people report that the provision of good sexual and reproductive health information is poor, with these groups reporting that information is skewed towards those identifying as the same gender as birth and heteronormative assumptions.

> Blackburn with Darwen Joint Strategic Needs Assessment (2023). https://www.blackburn.gov.uk/health/health-strategy-and-reports/jointstrategic-needs-assessment

South Asian communities

In Blackburn with Darwen, 35.7% of the population identify as Asian/Asian British. In developing this strategy, our stakeholders and communities have highlighted the need to recognise and acknowledge the distinct challenges faced by South Asian communities.

Research highlights that South Asian communities face several barriers to healthcare access, including: low socioeconomic status, racial and cultural discrimination, geography, language barriers, and traditional hierarchies within families.

These barriers can obstruct access to sexual health information and services, leading to a lack of knowledge and awareness about sexual health issues and available services. Conservative attitudes towards sex and sexuality can be prevalent in some South Asian communities, leading to stigma and shame around discussing sexual health issues openly. This can further hinder access to sexual health information and services. Arranged marriages, which are common in some South Asian cultures, can limit discussions and considerations regarding sexual health and compatibility.

Strict and traditional gender roles can impact the ability of individuals, particularly women, to access sexual health resources and make autonomous decisions regarding their sexual health. Lack of culturally appropriate sexual health education can also contribute to a lack of knowledge and awareness about sexual health issues and available services. Economic, legal, and cultural barriers can limit access to sexual health services, while strong religious beliefs can influence perceptions, attitudes, and behaviours related to sexuality and sexual health, potentially limiting discussions and access to services.

To improve sexual health in Blackburn with Darwen it's crucial to create a diverse and culturally aware approach. This approach should include focused interventions, outreach that understands cultural nuances, and provision of resources aimed at diverse and marginalised communities.



Gender and sexuality



Within this strategy and across our sexual health services, we recognise and promote a an approach that embraces and celebrates diversity within gender and sexuality.

Through this strategy and action plan we aim to champion inclusivity and destigmatise conversations around gender and sexuality, and provide accessible and affirming sexual health for all individuals in our borough.

Through the implementation of this strategy and action plan we will:

Inclusive Research:

• Recognise the unique intersections of gender, sexuality, race and ensure that our approach recognises the unique challenges experienced by individuals.

Sexual Orientation:

• Recognise and affirm a range of sexual orientations, including but not limited to heterosexual, homosexual, bisexual, pansexual, and asexual identities.

Inclusive Sexual Health

 Provide culturally competent and affirming sexual health services for individuals across the gender and sexuality spectrum.

Relationships and Sex Health Education

- Promote inclusive sexual health education in schools, covering diversity in gender, sexuality and relationship dynamics.
- Ensure educational programs increase understanding of diverse sexual orientations and reduce stereotypes and prejudices.

Gender Inclusivity:

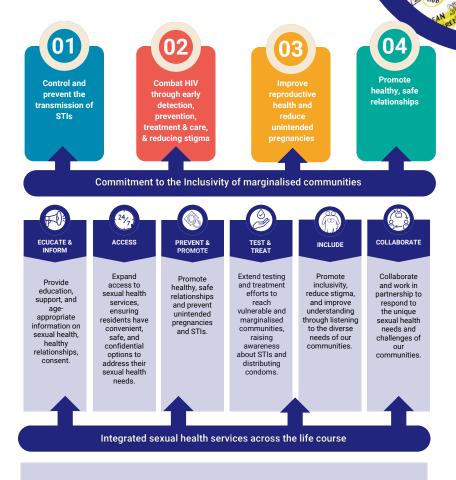
- Acknowledge that gender exists on a spectrum beyond the binary of male and female, including non-binary, genderqueer, and genderfluid identities.
- Use inclusive language that respects individuals' chosen pronouns and gender identities to create a safe and supportive environment.

A commitment to inclusivity

Throughout our stakeholder engagement events, a reoccurring theme has emerged regarding the inclusivity of diverse and underrepresented communities in sexual health. Stakeholders and community members have continuously identified the unique needs and multi layered challenges faced by our communities in Blackburn with Darwen. We recognise that our journey towards sexual health equality is ongoing, and we are committed to continuous improvement, particularly in our efforts in reaching out to communities and individuals who have historically been hindered from accessing sexual health services.

We understand the importance of creating diverse, culturally aware approaches. These should include targeted interventions and outreach that account for cultural nuances, alongside the provision of tailored resources and information. Our goal is to reduce stigma, raise awareness, and increase access to sexual health services for people who South Asian, LGBTQ+ as well as neurodiverse and disabled communities, contributing to overall community health and resilience in Blackburn with Darwen.

Our commitment to the inclusivity of marginalised communities serves as the golden thread woven throughout the priorities identified in this strategy. We strive to ensure all residents have equal access to sexual health services throughout their life and that they can enjoy a life of sexual health, free from prejudice or bias.



by the STIGMAR DISCRIMINATION

FRYENT

Our vision is that all our residents have equal access to sexual health services throughout their life and they can enjoy a life of sexual health, free from prejudice or bias.

Our Vision

Our Sexual Health

Priorities





Integrated sexual health

Integrated sexual health

Our sexual health services provide a prevention-focused, integrated clinical and digital approach across the life course.

Clinical services are available to anyone living in Blackburn with Darwen and include:

- STI testing and treatment
- Contraception (including long-acting methods and emergency contraception)
- Pregnancy testing and help with pregnancy choices
- HIV support
- Information and advice around all aspects of sexual health and wellbeing
- Cervical screening
- Psychosexual counselling

Specialist advice and support on HIV

- Counselling services
- Befriending services
- Complementary therapies
- Group and peer support

Alongside our clinical provision, education and outreach play a crucial role in our offer and by providing information about safe practices, prevention of sexually transmitted infections (STIs), and healthy relationships we aim to empower individuals to make informed choices about their sexual health.

Digital sexual health

Residents also have the convenience of accessing comprehensive digital sexual health services without the necessity of a clinic visit or a direct consultation with a healthcare practitioner through the Those over 16 can access:

- Postal STI tests for chlamydia, gonorrhoea, HIV, and syphilis are available, ensuring wider accessibility and privacy
- Provisions for testing and treatment are available for genital warts and herpes, facilitating comprehensive care
- Access to repeat and emergency contraception is facilitated, offering additional support and peace of mind

Current Response

Awareness, Education & Campaigns

3114 people supported via Education and Outreach.

1785 people received information, training or support on HIV

5616 sexual health

Prevention & Contraception

kits distributed **Emergency Hormonal** Contraception (EHC) issued 2069 times through the community pharmacy scheme

410 safer sex packs distributed & 266 brief interventions & significant contacts via outreach in public sex environments

1782 young people

sessions of RHSE

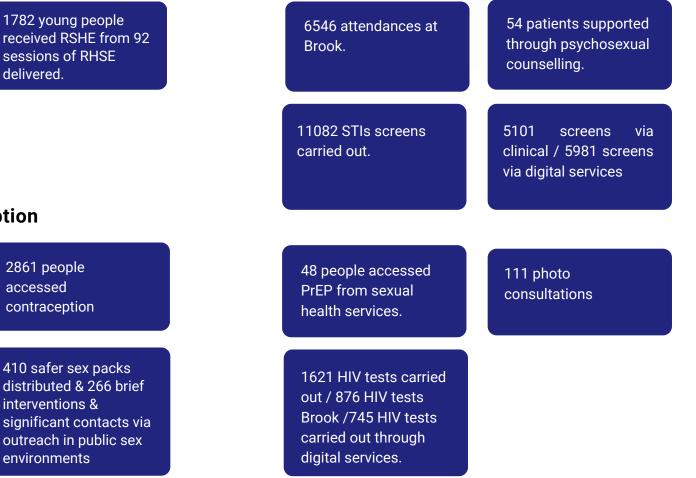
delivered.

2861 people

contraception

accessed

Testing and Treatment



Data : Provided through commissioned Sexual Health Services : 2022



Sexual health data

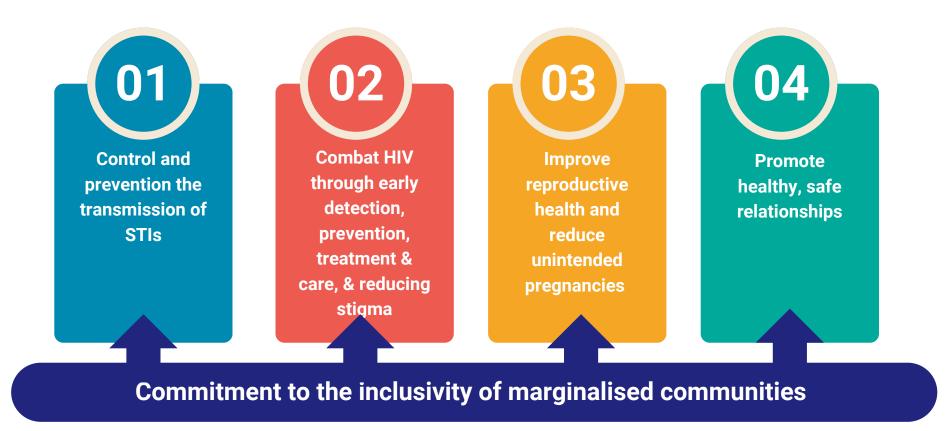


OHID Sexual and Reproductive Health Profiles (2023) Available from: https://fingertips.phe.org.uk/profile/sexualhealth

Sexual health priorities

The four sexual health priorities in this strategy have been identified from the Office for Health Improvement and Disparities (OHID) Sexual and Reproductive Health Profiles. Alongside these priorities we have identified additional cross cutting themes to reach out to engage with diverse and under-represented communities in our borough.

By changing how and where we promote and deliver our services, as well as hearing the voices of these who have traditionally been marginalised, we aim to create sexual health strategy for Blackburn with Darwen that truly reflects the needs of our communities.



Control and prevent the transmission of STIs

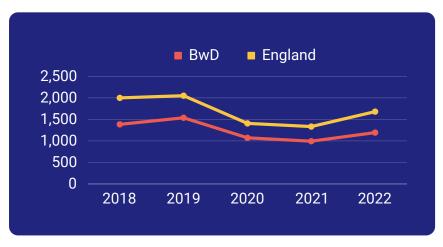
Sexually transmitted infections are spread through sexual contact, including vaginal, anal, and oral sex. They can be caused by bacteria, viruses, parasites, and fungi. If left untreated STIs can have serious consequences including infertility, chronic pain, and even death.

Preventing the spread of STIs through universal access to free condoms, promoting and improving STI testing and increasing the uptake of vaccinations e.g. HPV, with young people or HEP A/B, MPOX with MSM is important for both individual and public health. By taking steps to prevent the spread of these infections, we can protect ourselves and our communities from the potential consequences of these infections.

What is the current data telling us?

- Despite an uptake in 2022, diagnostic rates for new STIs have fallen since 2016. With the borough having the fifth lowest rate amongst authorities in the North West in 2022.
- In 2022, from 3,794 tests for STI's (excluding chlamydia under 25) amongst borough residents, 284 tests came back positive (7.5%). Similar to the national rate (7.6%).
- Since 2020, the proportion of 15-24 year old's screened in the borough has increased but remains much lower than national and regional figures.

 Since 2018, there have been between 200-300 diagnoses of chlamydia among 15 to 24 year olds per year within sexual health services (SHS), with the current rate of detection amongst the lowest amongst authorities in the North West.



Chlamydia detection rate per 100,000 aged 15-24

 The rank for Gonorrhoea diagnoses (which can be used as an indicator of local burden of STIs in general) in Blackburn with Darwen was 115th highest (out of 150 UTLAs/UAs) in 2021. The rate per 100,000 was 36.7, better than the rate of 90.3 in England

Combat HIV through early detection, prevention, treatment & care, & reducing stigma

HIV (Human Immunodeficiency Virus) is transmitted through contact with certain body fluids, blood, semen, vaginal fluids, rectal fluids, and breast milk.

HIV is a virus that attacks the immune system, specifically the CD4 cells, (T cells) which aid the immune system in fighting off infections. If not treated, HIV can lead to AIDS (Acquired Immunodeficiency Syndrome). Unlike some other viruses, the human body cannot get rid of HIV, so once someone has HIV, they have it for life. Over time, HIV can destroy so many T cells that the body can't fight off infections and disease.

Preventive measures such as regular HIV testing, condom use, access to PrEP and PEP alongside prompt initiation of antiretroviral treatment and retention in care is critical for prevention and to ensure that individuals with HIV are able to live long, healthy lives.

Due to medical advancements in HIV, undetectable HIV means it is now untransmittable (U=U), and if a person with HIV has an undetectable viral load due to effective treatment, they cannot pass on the virus to their sexual partners. What is the current data telling us?

- In 2022, 3 people in Blackburn with Darwen were diagnosed with HIV.
- In 2022, 114 people in the borough were diagnosed and living with HIV with 95 aged from 15 to 59.
- In 2022, 735 people (29.4% of those eligible) took a HIV test in sexual health services.
- Testing coverage amongst men (55.8%) is worse than the national figure (65.1%). Rates are also significantly lower amongst women with only 18% eligible testing compared to 38.5% nationally.
- Testing coverage (83%) and repeat testing (43.6%) amongst MSM are around the national average.
- In 2022, the proportion of all HIV negative individuals accessing SHS with PrEP need was 3.4%, compared to 9.7% nationally.
- Across 2020-22, the proportion of people newly diagnosed with HIV who start ART within 91 days of their diagnosis was 100% compared to 85.4% nationally.

Improve reproductive health & reduce unintended pregnancies

Good quality sex education and access to contraception and sexual health services can empower individuals to plan their futures and improve their wellbeing.

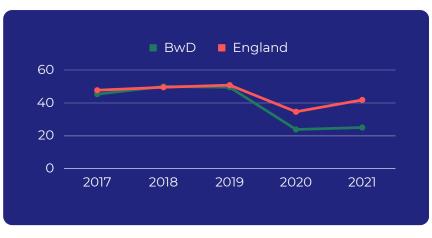
Preventing unintended pregnancies plays a crucial role in reducing maternal and infant mortality rates, as well as improving the overall health outcomes for mother, parent and child.

By focusing on the social, economic, and health consequences of unintended pregnancies and prioritising reproductive health, we can improve outcomes and promote the well-being of individuals, families, and our communities in Blackburn with Darwen.

What is the current data telling us?

- There were 42 pregnancies amongst under 18's, (with 4 amongst under 16's specifically) a rate of 12.6 per 1,000 in 2021, not dissimilar from the national figure (13.1 per 1,000).
- The mean age of mothers has slightly increased from 29.3 in 2019 to 29.6 in 2021. Lower than the national average of 30.9.

 NICE advises that LARC methods are highly effective as they do not rely on daily compliance and are more cost-effective than condoms/ the pill. Rates of prescribed LARC (25 per 1,000) and GP-prescribed (17.7 per 1,000) and SHS (7.2 per 1,000) LARC specifically have fallen since the COVID pandemic.



Total prescribed LARC (excluding injections) rate per 1,000, 15-44, 2017 to 2021

- In 2021, there were 630 abortions of those aged 15-44 living in the borough, meaning the rate of abortion was above the national average. However, the current abortion rate for under 18s is the second lowest in the North West.
- Amongst under-25s, in 2021, 34.2% of abortions involved individuals who had an abortion previously.

Promote healthy, safe relationships

Promoting healthy relationships across the life course is a priority in this sexual health strategy as it lays the foundation for a safe, fulfilling, and respectful relationships for individuals. Healthy relationships encompass not only physical aspects but also emotional, psychological, and social aspects of intimacy.

Addressing the significance of consent, gender equality, and shared responsibility in intimate partnerships helps prevent the continuation of harmful behaviours and the spread of sexually transmitted infections.

Healthy relationships contribute to overall mental well-being, boosting self-esteem and reducing the risk of mental health issues related to sexuality. By prioritising healthy relationships within this sexual health strategy, we aim to promote and respect diversity and difference across our communities so each individual feels and safe and welcomed in our borough.

What is the current data telling us?

- Hospital admissions for violence (including sexual violence) are in the lowest percentile in England with 83.8 per 100,000.
- In terms of the rate of sexual offences the borough's rate (3.4 per 1,000) is slightly higher than England (3.2 per 1,000) in the 2021/22 period.
- There were 42 pregnancies amongst under-18's, (with 4 amongst under-16's specifically) This equates to a rate of 12.6 per 1,000 in 2021, not dissimilar from the national figure (13.1 per 1,000).
- The mean age of mothers has slightly increased from 29.3 in 2019 to 29.6 in 2021. Lower than the national average of 30.9.
- The 2021 BWD School Health Needs Assessment (SHNA) surveyed 463 young people in year 9, 24% of young people did not know where to go for advice and information about relationships and sexual health.



Recommendations

& Governance





Working towards our vision

To achieve our vision, we will ensure that our integrated offer is implemented across the life course and we will work in partnership to impact on the sexual health priorities identified in this strategy.

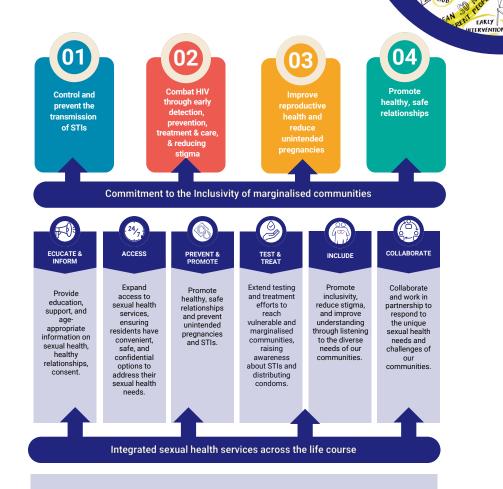
Each priority will be underpinned by a series of universal objectives

- Educate and Inform
- Increase Access
- Prevent and Promote
- Test and Treat
- Include
- Collaborate

Through each priority and objective we will reinforce our commitment to the inclusivity of marginalised communities,

We will establish a sexual health network and will continuously engage with stakeholders to co-create action plans which will be reviewed on an annual basis.

As part of the sexual health network will train and develop our workforce, whilst sharing resources, research and best practice across sexual health.



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DISCRIMINATION TOWARDS OUR HIV RESIDENTS TOOLBOX

Our vision is that all our residents have equal access to sexual health services throughout their life and that they can enjoy a life of sexual health, free from prejudice or bias.

Our Vision

Building upon the national framework

In developing this strategy we recognise the changes that have occurred since the development of the National Framework in 2013 and over the course of this strategy we will aim to build upon those foundations by:

- **Prevention and Treatment of HIV**: Control and prevent the transmission of HIV though reducing barriers to PrEP, increasing and continuing to promote condom use and regular HIV testing.
- **Improve Outcomes:** Ensure that people living with HIV have efficient and continues access to effective treatment
- **Prevention and Treatment of STIs:** Controlling and preventing the transmission of STIs through increasing the uptake of vaccinations e.g. HPV vaccines, Hep A/B ,gonorrhea and promoting regular testing- including self testing alongside the distribution of condoms with high risk communities.
- Improve Women's Health: Ensuring that residents have ease of access to all methods of contraception including through new services including Women's Health Hubs and the NHS National Pharmacy Contraception Service

- Digital Integration: Provide innovative digital solutions for sexual health alongside traditional sexual health services.
- **Comprehensive Education:** Promote high quality, age appropriate Relationships, Sex and Health Education (RHSE).
- Stigma Reduction: Encourage open discussion and regular health checks to reduce the stigma around sexual and reproductive health.
- **Promote Inclusivity:** Acknowledge and address the needs of all genders, sexual orientations, and identities, ensuring services are sensitive and appropriate for a diverse population.
- Voices of Communities with Lived Experience: Create opportunities to learn from residents to improve our sexual health offer.



Recommendations: Years 1-2



targeted training to GPs on HIV interactions and clinical conditions,



of Care Testing (POCT) and satellite services sites into services

working with vulnerable communities.

 Increase places where residents access SHS



PROMOTE

 Improve uptake of vaccination programmes e.g. HPV with adolescents & MPOX / Hep A/ B vaccine with GBMSM

 Promote the use of PReP and (PEP)



TREAT

 Expand mobile outreach and testing services with a focus on high risk and vulnerable groups

Offer HIIV
testing as part
of routine care



- Listen to the voices of communities
- Map and understand the needs of communities
- Reach out and improve our offer for diverse communities
- Remove barriers to access, information and support



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 Establish a sexual health alliance and promote intersectoral collaboration across health, education, voluntary sector services

 Collaborate to develop a monitoring and evaluation framework for this strategy

These initial actions have been identifed through stakeholder engagement undertaken as part of this strategy development process.

Governance

The governance of this strategy is a critical element to ensure that these sexual health priorities are achieved and are impactful to the individuals and communities of Blackburn with Darwen.

Sexual Health Services

The Blackburn with Darwen Public Health team holds responsibility for commissioning of integrated sexual health services. Representatives from the Public Health team alongside the Strategic Commissioning Team meet with commissioned services on a quarterly basis to review contract performance and agree any changes in services required. Any issues highlighted through these meetings are flagged and escalated to the Public Health Senior Leadership Team for further action where necessary. Through these contract meetings, and through any future commissioning exercises, we will work closely to ensure that commissioned services are fully aligned to support the successful delivery of this strategy.

Health and Wellbeing Board

Development and delivery of the Sexual Health Strategy forms part of the Live Well priorities identified within the Blackburn with Darwen <u>Joint Local Health and Wellbeing Strategy</u>. The Blackburn with Darwen Health and Wellbeing Board is ultimately responsible for delivery of the Health and Wellbeing Strategy and will therefore receive an annual (or upon request) high level update on performance against delivery of this strategy.



References &

Acknowledgements





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The development of this strategy has been supported with the engagement of over one hundred and fifty stakeholders, either through digital surveys, events or community focus groups. The ideas, expertise and lived experiences of our communities have increased awareness of the diverse needs and challenges relating to sexual health in Blackburn with Darwen. All stakeholders have played a pivotal role in shaping a strategy that is inclusive, evidence-based, and responsive to the priorities and aspirations of our communities in Blackburn with Darwen.

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Thank you all of the stakeholders who have contributed to development of this strategy.

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Glossary

- BBV Blood Borne Virus
- BME Black Minority Ethnic communities
- BWD Blackburn with Darwen
- CSE Child Sexual Exploitation
- EHC Emergency Hormonal Contraception
- FSRH Faculty of Sexual and Reproductive Healthcare
- HIV Human Immunodeficiency Virus
- HMO House in Multiple Occupation
- ISHS- Integrated Sexual Health Service
- IUD Intrauterine Device
- IUS Intrauterine System
- GBMSM Gay and Bisexual Men and Men who have with Men
- JSNA Joint Strategic Needs Assessment
- LARC Long Acting Reversible contraception
- LGBTQ+- Lesbian, Gay, Bisexual, Transgender, /Queer/Questioning,
- MECC Making Every Contact Count
- MSM Men who have Sex with Men
- NCSP National Chlamydia Screening Programme
- NHSE NHS England

- NICE National Institute for Health and Care Excellence
- PEP Post exposure Prophylaxis following sexual exposure
- PReP Pre-Exposure Prophylaxis
- PHE Public Health England
- POP Progestogen-Only Pill
- POCT Point of Care Test
- PrEP Pre-Exposure Prophylaxis
- RSE Relationships and Sex Education
- SARC Sexual Assault Referral Centre
- SHS Sexual Health Services
- SHNA Sexual Health Needs Assessment
- SRH Sexual and Reproductive Health
- STI Sexually Transmitted Infection
- ToP Termination of Pregnancy
- WSW- Women who have Sex with Women



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