# Young People & Sexual Health

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#### Are teenagers having less sex?

By Reality Check team BBC News



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**Reality Check** 



### Not for the first time, we've been hearing that teenagers now are having less sex than previous generations.

A cursory search of the question "are teenagers having less sex?" throws up 1.5 million results in the UK, including numerous articles categorically stating that the answer is "yes" - and it's probably all to do with social media.

#### **Top Stories**

#### Vaping on buses 'should be considered'

E-cigarettes are much less harmful than tobacco and shouldn't be treated the same way, MPs warn.

() 58 minutes ago

### China 'training for strikes' on US targets

() 1 hour ago

Low-carb diets 'could shorten life'

() 17 August 2018

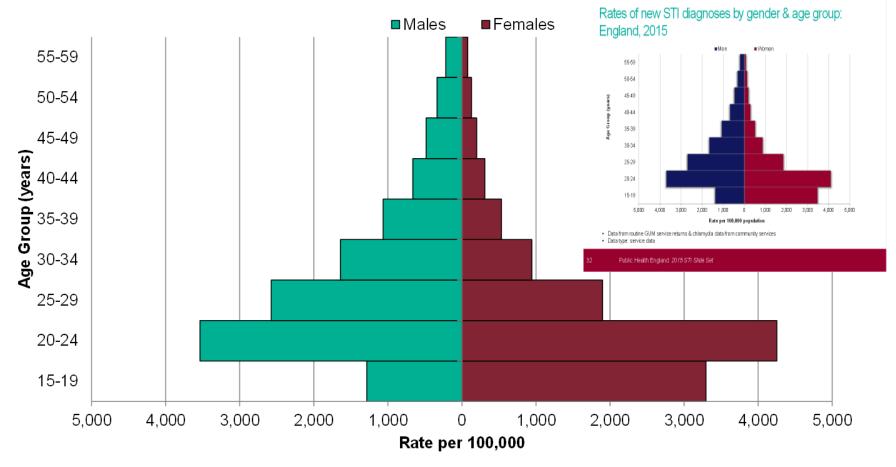
#### Features



'I run the last Blockbuster'

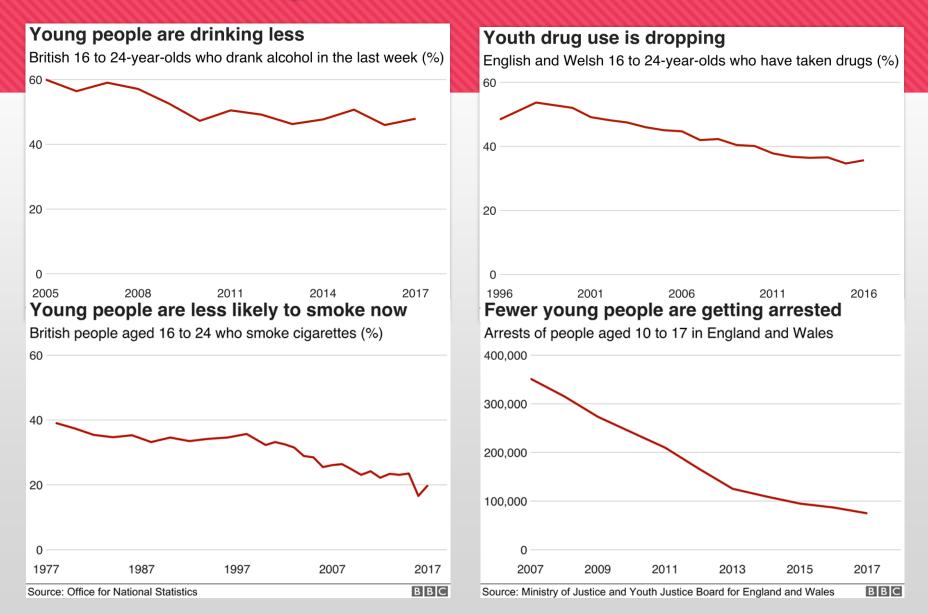


# Rates of new STI diagnoses by gender and age group: England, 2017

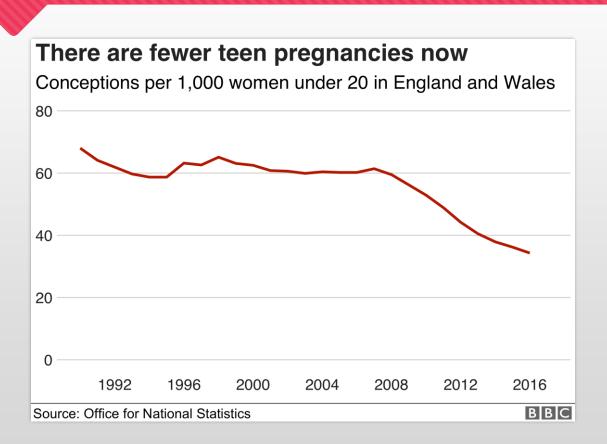


- Data from specialist and non-specialist SHS (GUMCAD and CTAD returns)
- ONS Census mid-year 2016 estimates used for denominators
- Data type: service data

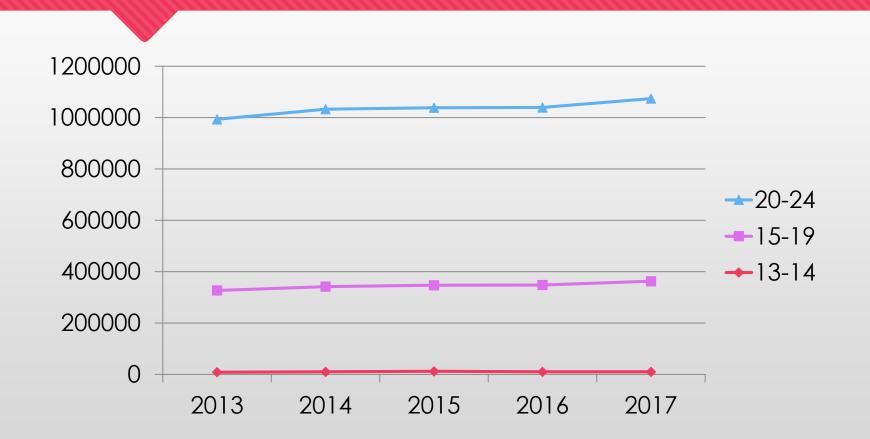
## **Risk taking behaviour**



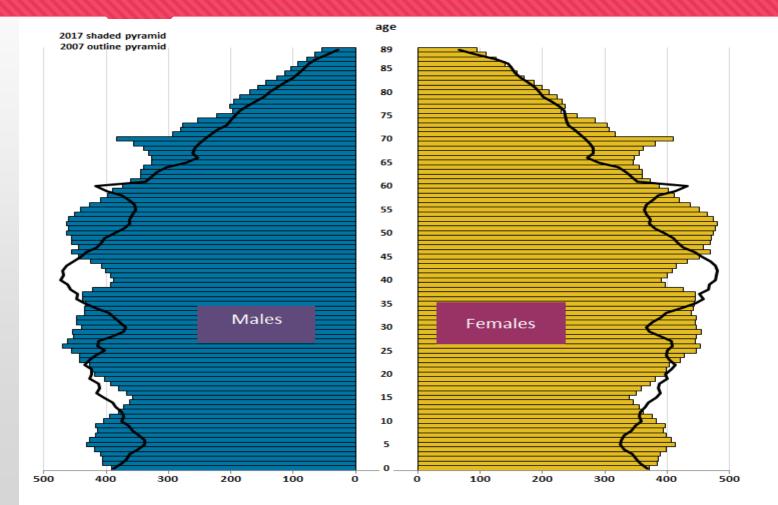
## Less sex?



# Total number attendances by age at specialist SHS in England 2013-2017

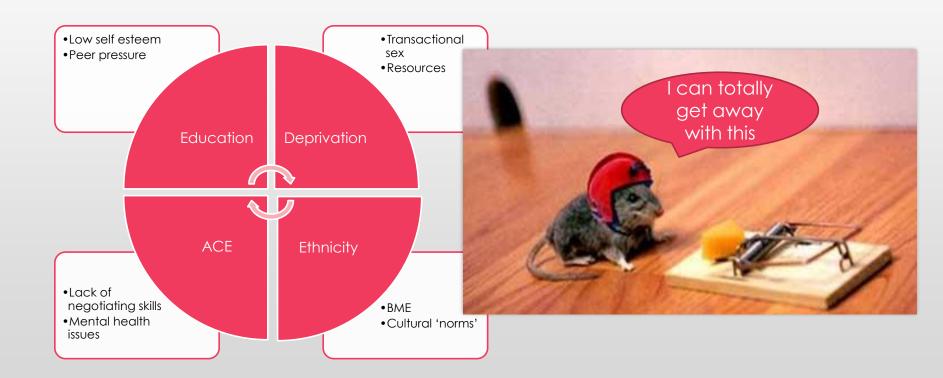


6% fewer 11- to 18-yearolds in the mid-2017 population (350,000 fewer people). ONS



Population (thousands)

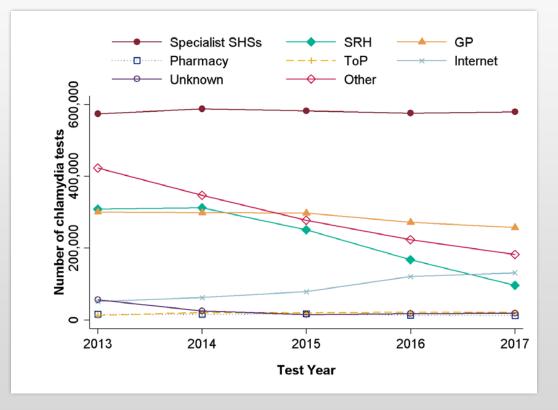
## **Risk behaviours** issues are complex –its not just the 'teenage brain'



## You're Welcome

- Involving young people in their care and in the design, delivery and review of services
- Explaining confidentiality and consent
- O Making young people welcome
- O Providing high-quality health services
- O Improving staff skills and training
- O Linking with other services
- O Supporting young peoples changing needs

# Chlamydia tests\* among 15 to 24 year olds by test setting, 2013-2017, England



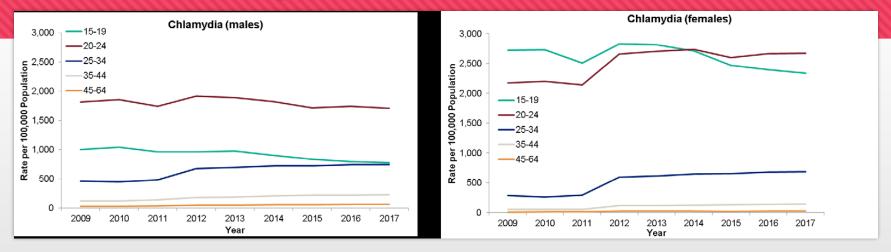
Sexually transmitted infections and screening for chlamydia in England, 2017 Health Protection Report Volume 12 Number 20

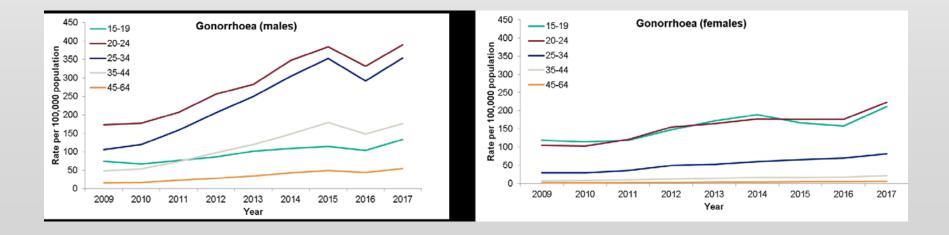
	Tests				Diagnoses				Tests positivity	
Test setting	2016		2017		2016		2017		(%)	
	Number	%of total	Number	%of total	Number	%of total	Number	%of total	2016	2017
Specialist SHSs	575,663	40.6%	579,083	44.5%	64,198	49.7%	68,335	53.9%	2%	11.8%
GP	272,660	19.2%	257,919	19.8%	17,239	13.3%	17,444	13.8%	6.3%	6.8%
SRH	168,340	11.9%	97,098	7.4%	17,488	13.5%	10,931	8.6%	10.4%	11.3%
Internet	121,730	8.6%	132,006	10.1%	10,316	8.0%	11,888	9.4%	8.5%	9.0%
ToP	22,411	1.6%	21,890	1.7%	1,425	1.1%	1,403	1.1%	6.4%	6.4%
Pharmacy	14,335	1.0%	13,030	1.0%	1,304	1.0%	1,277	1.0%	9.1%	9.8%
Other	223,801	15.8%	182,602	14.0%	15,699	12.2%	14,003	11.0%	7.0%	7.7%
Unknown	<mark>1</mark> 8,896	1.3%	19,021	1.5%	1,520	1.2%	1,547	1.2%	8.0%	8.1%
Total	1,417,836	100%	1,302,649	100%	129,189	100%	126,828	100%	9.1%	9.7%

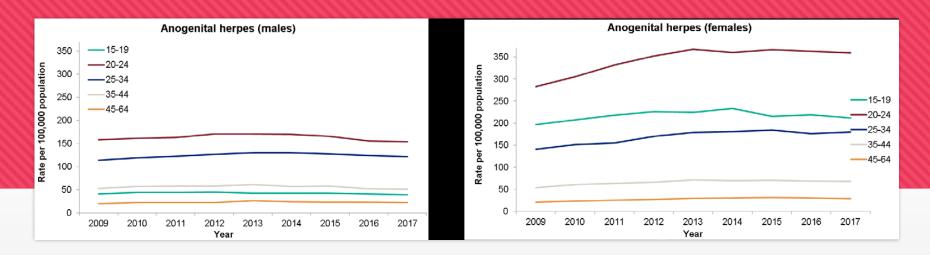
### Table 1. Chlamydia tests, diagnoses, and test positivity\* among 15 to 24 year olds by test setting, 2016-2017, England

\* Data from specialist and non-specialist sexual health (including community based) services (SHSs) GP: General practice; SRH: Sexual and reproductive health service; ToP: Termination of pregnancy service.

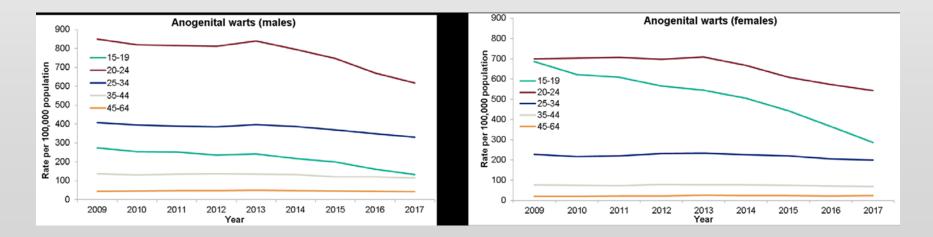
Rates of new sexually transmitted infection diagnoses among people attending sexual health services† by age-group and gender, 2009-2017, England



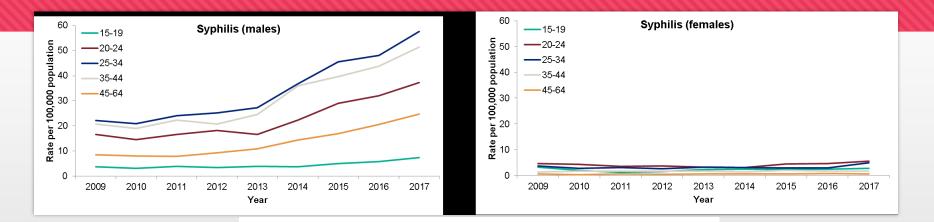




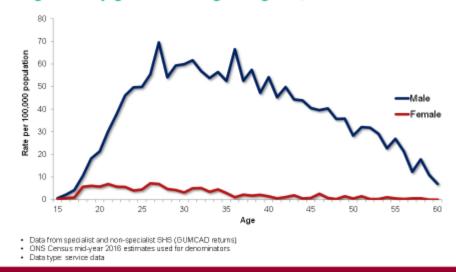
There were 441 diagnoses of first episode genital warts in 15 to 17 year old girls in 2017, a 90% decrease relative to 2009; this decrease is largely due to the high coverage National HPV Immunisation Programme in school-aged girls



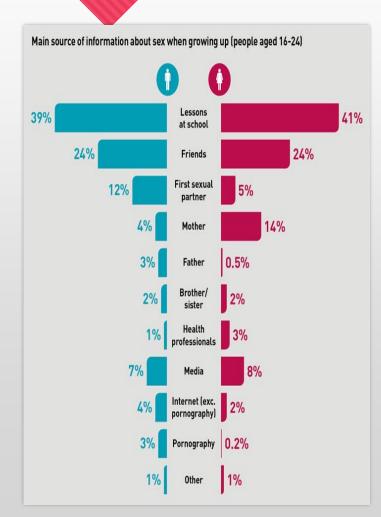
# Worrying .....



## Rates of syphilis (primary, secondary & early latent) diagnoses by gender and age: England, 2017



## Where young people get info



## Relationship and Sex Education

Tanton C, Jones KG, Macdowall W, et al Patterns and trends in sources of information about sex among young people in Britain: evidence from three National Surveys of Sexual Attitudes and Lifestyles BMJ Open 2015;5:e007834. doi: 10.1136/bmjopen-2015-007834



## What's it like to have an STI?

Watch to find out.

## If you're 16-24, you're more at risk of getting an STI

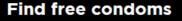
$\rightarrow$	You don't need	to hav	e sex with	lots of	people to	get an	STI
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PROTECT AGAINST STIS

USE A

- → Many STIs are symptomless and, if left untreated, can cause long-term health problems
- $\rightarrow$  STIs like gonorrhoea are becoming harder to treat or may not be treatable at all
- $\rightarrow$  59% of people who got chlamydia or gonorrhoea in 2016 were aged 16-24

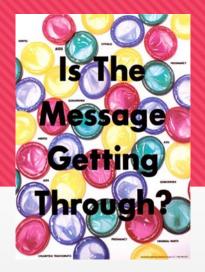
Protecting yourself is as simple as using a condom.



Search

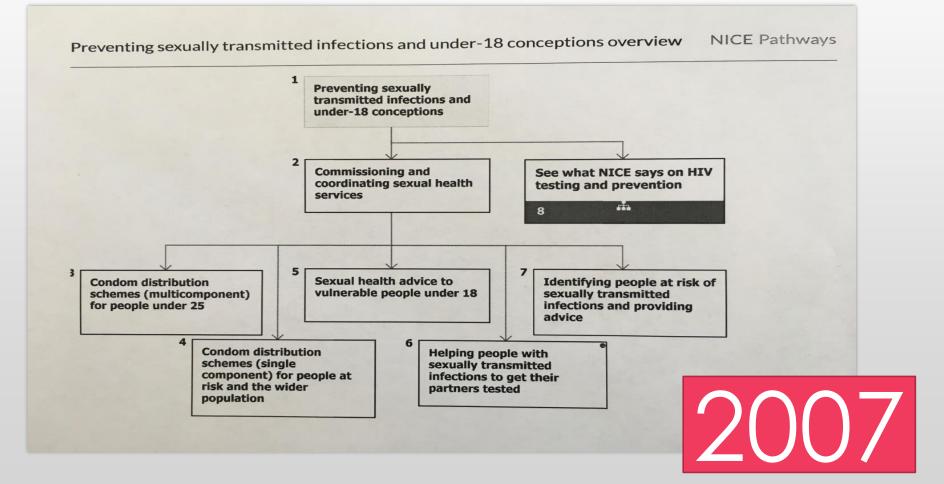
Use my location

# Health promotion



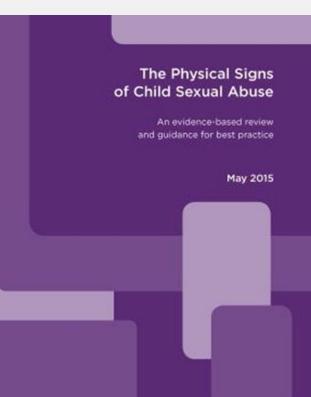
- Public Health England 'Protect against STIs', campaign to reduce rates STIs among 16 to 24-year-olds through condom usage. The campaign is the first government sexual health campaign in 8 years.
- YouGov survey 2,007 young people.
- almost half (47%) of sexually active young people said they have had sex with someone new for the first time without using a condom; whilst 1 in 10 sexually active young people said that they had never used a condom cf NATSAL2000 80%
- 56% men & 43% of women said that it is difficult to talk about STIs with friends. 58% said that if they had an STI they would find it difficult to talk to their sexual partner about it

## NCE National Institute for Health and Care Excellence



## Its not all about STIs

- O Prevention of unintended adolescent pregnancy
- O Inappropriate Sexual Behaviours
- O Child Sexual Exploitation/ Abuse
- O FGM/C
- O Intimate partner violence
- O LBGTQIA
- O HIV positive Young people
- O Mental Health & Wellbeing
- O Looked After Children



## **Good practice**

- A holistic sexual risk assessment including recreational drug and alcohol misuse.
- Vulnerability assessment for self-harm, mental health and special educational needs [SEN] and physical disabilities.
- Assessment of safeguarding risks using <u>'Spotting the Signs proforma</u>' or a modified version.
- Services should have a confidentiality policy, which is clearly displayed and routinely discussed with young people during their consultation.
- Sexual health consultations for young people should include a sexual health risk assessment and have a discussion about contraception options including LARCs
- Staff working with children and young people should have Level 3 safeguarding training. They should discuss safeguarding concerns with their lead and named safeguarding professionals and use referral pathways for support agencies.
- Brook / BASHH Spotting the Signs: A national proforma for identifying risk of child sexual exploitation in sexual health services [April 2014] https://www.brook.org.uk/our-work/spotting-the-signs-cse-national-proforma

#### 5 to 9 years

#### 9 to 13 years

### 13 to 17 years

## 🔵 Green behaviours

- solitary masturbation
- sexually explicit conversations with peers
- obscenities and jokes within the current cultural norm
- interest in erotica/pornography
- use of internet/e-media to chat online
- having sexual or non-sexual relationships
- sexual activity including hugging, kissing, holding hands
- consenting oral and/or penetrative sex with others of the same or opposite gender who are of similar age and developmental ability
- choosing not to be sexually active



- accessing exploitative or violent pornography
- uncharacteristic and risk-related behaviour, e.g. sudden and/or provocative changes in dress, withdrawal from friends, mixing with new or older people, having more or less money than usual, going missing
- concern about body image
- aking and sending naked or sexually provocative images of self or others
- single occurrence of peeping, exposing, mooning or obscene gestures
- giving out contact details online
- joining adult- only social networking sites and giving false personal information
- arranging a face to face meeting with an online contact alone

## Red behaviours

- exposing genitals or masturbating in public
- preoccupation with sex, which interferes with daily function
- sexual degradation/humiliation of self or others
- attempting/forcing others to expose genitals
- sexually aggressive/exploitative behaviour
- sexually explicit talk with younger children
- sexual harassment
- non-consensual sexual activity
- use of/acceptance of power and control in sexual relationships
- genital injury to self or others
- sexual contact with others where there is a big difference in age or ability
- sexual activity with someone in authority and in a position of trust
- sexual activity with family members
- involvement in sexual exploitation and/or trafficking
- sexual contact with animals

# SEXUAL BEHAVIOURS

# On-line services & Safeguarding

Standards for Online and Remote Providers of Sexual and Reproductive Health Services.

 Joint BASHH/ FSRH Standard Sept 2018 –out to consultation

2018 UK National Guideline on the Management of Sexually Transmitted Infections and Related Conditions in Children and Young People

• ASIG CEG Spring 2019

## and what about PrEP in under 16yr olds ?



#### 4.5 Evidence for safety and efficacy in young people (15–25 years): recommendations

- 11. We recommend that PrEP with daily or on-demand oral TD-FTC should be offered to young MSM (15–25 years) who are identified as being at elevated risk of HIV acquisition through condomless anal sex in the previous 6 months and ongoing condomless anal sex. (1A)
- 12. We recommend that PrEP with TD-FTC should be offered to young people having condomless anal sex with partners who are HIV positive, unless the partner has been on ART for at least 6 months and their plasma viral load is <200 copies/mL. (1A)</p>
- 13. We recommend that PrEP with daily oral TD-FTC should be offered to young HIV-negative trans women who are identified as being at elevated risk of HIV acquisition through condomless anal sex in the previous 6 months and ongoing condomless sex. (1A)
- 14. Routine BMD scanning in young people initiating PrEP is not recommended. (1D)

#### Good practice points

- Consider PrEP with daily oral TD-FTC on a case-by-case basis in young people with current factors other than condomless anal sex that may put them at increased risk of HIV acquisition. See Section 5.
- In young trans people who are having only anal sex, on-demand PrEP could be used as it is likely to have the same biological efficacy as seen in MSM.
- The risks and benefits of providing PrEP for adolescents should be weighed carefully in the context of UK laws and judgements about autonomy in healthcare decision-making (e.g. Fraser competency), and balanced against protecting young people from harm.

- BHIVA/BASHH guidelines cover over 16 year olds
  - Any different to offering contraception ?
  - Discuss with safeguarding ?

## **Adolescent SIG meeting**

- O The Law and Emerging Clinical Topics
- O Sept 27<sup>th</sup> Senate House ,London
- O Places still available



## Questions

