

PUBLIC HEALTH INTELLIGENCE CAMDEN & ISLINGTON PROFILE

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Sexual health of young people in Camden & Islington

March 2014

About this profile

Purpose

This public health intelligence profile describes the trends and patterns in the sexual health of young people in both Camden and Islington.

This work will support and inform:

- Strategies for sexual health provision for young people in Camden and Islington.
- Commissioning intentions for young people's sexual health services in Camden and Islington.
- The Health & Wellbeing Board and its relevant stakeholders.

This profile can be found on both Camden Data and the Evidence Hub in Islington:

<http://www.camdendata.info/Pages/public-health.aspx>

<http://evidencehub.islington.gov.uk/Pages/HomePage.aspx>

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Further information and feedback

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We would also very much welcome your comments on these profiles and how they could better suit your individual or practice requirements, so please do contact us with your ideas.

Recommendations and key messages

OVERVIEW & RECOMMENDATIONS

1. Reducing the rate of STI transmission and infection among young people remains a national and local priority. The rate of chlamydia infections in young people aged 15 to 24 is one of the sexual health related indicators in the Public Health Outcomes Framework. Young people are at particular risk of the transmission of STIs, good sex and relationship education provision should be considered alongside good, open access sexual health services.
2. Reducing pregnancies in those under the age of 18 is a national priority and is one of the sexual health related indicators in the Public Health Outcomes Framework. Between 2000-02 and 2009-11, the rate of teenage conception in Islington has decreased at a similar rate to that of London, while the Camden rate has declined more rapidly. While teenage conception rates have been falling in Camden, the proportion ending in abortion has increased. Evidence suggests that for effective prevention work, young people need a comprehensive programme of sex and relationship education, and access to young people-centred contraceptive and sexual health services.
3. Alcohol consumption by young people leads to an increased likelihood that they will have sex at a younger age, and alcohol misuse is linked to a greater number of sexual partners and more regretted or coerced sex. Alcohol consumption and being drunk can result in lower inhibitions and poor judgements regarding sexual activity, vulnerability and risky sexual behaviour, such as not using contraception or condoms. This emphasises the need for integrated and easily-accessible services as well a good sex and relationship, alcohol and drug awareness education.

KEY MESSAGES

SEXUALLY TRANSMITTED INFECTIONS

- Just over a third of all acute STIs diagnosed in Camden and Islington in 2012 were in those under the age of 25.
- A special analysis of 2011 acute STI data undertaken by the Child and Maternal Health Observatory showed that at the time, Islington ranked 10 out of 32 London Boroughs for rates in acute STIs in those aged 15 to 24, the rate of diagnosis in this borough was significantly higher than averages for both London and England. Camden ranked 20 out of 32 with a crude diagnosis rate not significantly different to the England average but significantly lower than the average in London.

Chlamydia

- Chlamydia accounts for the highest number of acute STIs diagnosed in young people.
- In Camden, the diagnosis rate in those aged 15 to 24 is significantly higher than both the London and England average. In Islington, the diagnosis rate is not significantly different to averages in London and England.
- Diagnosis rates are significantly higher in young women than in young men and this applies to those aged 15 to 19 and those aged 20 to 24 in both Camden and Islington.
- It should be noted that increasing diagnostic rates indicates increased control of chlamydia: it is not a measure of morbidity.

Recommendations and key messages (continued)

SEXUALLY TRANSMITTED INFECTIONS (CONTINUED)

Other diagnosed STIs in young people

- Diagnosis rates of warts are higher in those aged 20 to 24 than in those aged 16 to 19. In those aged 16 to 19, rates are higher in men compared to women.
- Herpes diagnosis rates are significantly higher in young women than in young men in those aged 20 to 24.
- Gonorrhoea diagnosis rates are highest in young men aged 20 to 24; rates in this group are significantly higher rates for women in both ages groups and in men aged 16 to 24.

Human Papillomavirus (HPV)

- HPV is a sexually transmitted infection which and up-take of the vaccine may in part be affected by social attitudes to sexual activity among teenagers and specifically the attitudes of parents. In 2012/13, 80% of girls in Camden and 83% of girls in Islington received their first dose compared to an average of 80% in London and 89% in England.

TEENAGE CONCEPTIONS AND ABORTIONS

- Teenage conception rates have decreased in both Camden and Islington between 2000-02 and 2009-11; in Camden from 49 to 25 per 1,000 and in Islington from 62 to 43. Conception rates in Islington have been consistently higher than averages in London and England over time.
- Similarly, the rate of terminations decreased in both boroughs over the same time period; in Camden from 29 to 17 and in Islington from 37 to 27 per 1,000. Rates in Islington have been consistently higher than averages in London and England over time.
- Between 2000-02 and 2009-11, the proportion of teenage pregnancies ending in an abortion have increased in London (from 58% to 61%) and England (from 46% to 50%) as well as in Camden (from 59% to 68%) and Islington (from 58% to 64%).
- High-quality education about relationships and sex is effective for the prevention of unintended pregnancy. Schools survey results show that 40% of pupils in Islington found the school's provision useful compared to 51% in Camden and 53% in England.

ALCOHOL & SEXUAL HEALTH OF YOUNG PEOPLE

- Alcohol consumption by young people leads to an increased likelihood that they will have sex at a younger age, and alcohol misuse is linked to a greater number of sexual partners and more regretted or coerced sex.
- Self reported school pupil survey information shows that in Camden, 7% and in Islington, 6% of pupils frequently engage in substance misuse. This compares to an average of 7% in London and 9% in England.
- Hospital admissions due to alcohol in those under the age of 18 show are high in Islington compared to the average in London; Islington had the highest rate of admissions of all London boroughs for the period 2008-09 to 2010-11. Admission rates in Camden were not significantly different to rates in London and England.

Understanding the data

95% confidence intervals (95% CI)

- Percentages and standardised ratios are reported with 95% confidence intervals. These quantify imprecision in the estimate.
- The imprecision is influenced by the random occurrences that are inherent in life.
- By comparing the 95% CIs around estimates or a target, we can say whether statistically, there are differences or not in the estimates we are observing, identifying which areas to focus on.

Definition of acute sexually transmitted infections

- The definition of acute STIs is determined by Public Health England. STIs and their respective codes falling within the definition are outlined below:

C1, C2, C3	Chancroid / LGV / Donovanosis
C4, C4A, C4B, C4C	Chlamydia (in GUM services)
NCSP & 'Non NCSP / Non GUM	Chlamydia (in community settings)
B, B1, B2, B5	Gonorrhoea
C10A	Herpes: anogenital herpes (first episode)
C12	Molluscum contagiosum
C4H, C4N, C5, C5A	Non-specific genital infection (NSGI, PID & epididymitis)
C8, C9	Scabies / pediculosis pubis
A1, A2, A3	Syphilis: primary, secondary & early latent
C6A	Trichomoniasis
C11A	Warts: anogenital warts (first episode)

Source: Public Health England

How to use these analyses

It is important to bear in mind the following when looking at this profile (or any other public health intelligence products):

- It is the variation that is important

In this profile, it is the variation between population groups that should be the main point of reflection. It is the *unexplained variation* (defined as: *variation in the utilisation of health care services that cannot be explained by differences in patient populations or patient preferences*) as this can highlight areas for potential improvements. For example, it may highlight under- or over- use of some interventions and services, or it may identify the use of lower value or less effective activities.

The data alone cannot tell us whether or not there are good and valid reasons for the variation. It only highlights areas for further investigation and reflection. A perfectly valid outcome of investigations is that the variation is as expected. However, to improve the quality of care and population health outcomes in Camden and Islington, a better understanding of reasons behind the variation with clear identification of areas for improvement is needed.

- Populations not individuals

Epidemiology is about the health of the population, not the individual. In this profile this is the resident population unless otherwise stated. With regard to sexually transmitted infections data this means residents of Camden and Islington diagnosed with an STI in any clinic.

Beware of small numbers

Some of the graphs have small numbers in them. In these cases, the wide 95% confidence intervals will signify the uncertainty around the percentages or rates; these need careful interpretation.

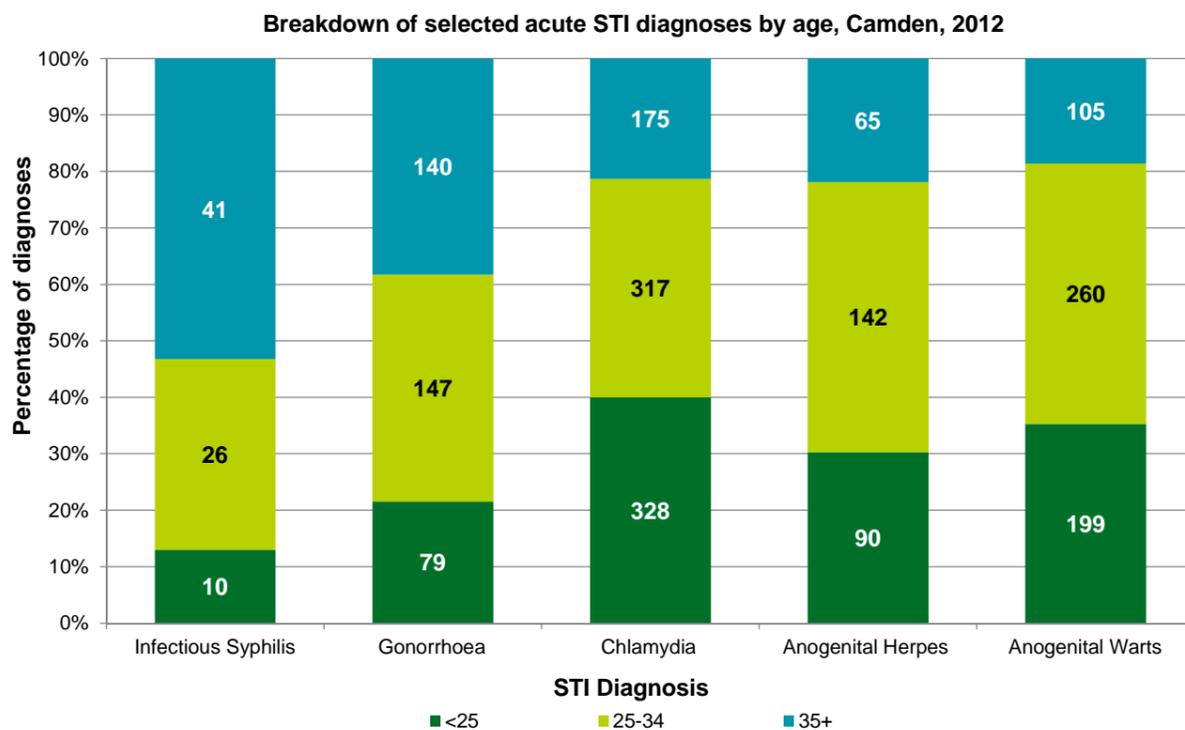
SEXUALLY TRANSMITTED INFECTIONS

One of the ambitions of the Department of Health’s Framework for Sexual Health Improvement in England (2013), is to continue to work to reduce the rate of sexually transmitted infections (STIs) among all ages. Young people are especially susceptible to STIs due to a number of factors including more concurrent sexual partners and more frequent changes in sexual partners.

The rate of chlamydia infections in young people aged 15 to 24 is one of the sexual health related indicators in the Public Health Outcomes Framework (increasing diagnostic rates indicates increased control of chlamydia: it is not a measure of morbidity).



STI diagnoses by age group, Camden



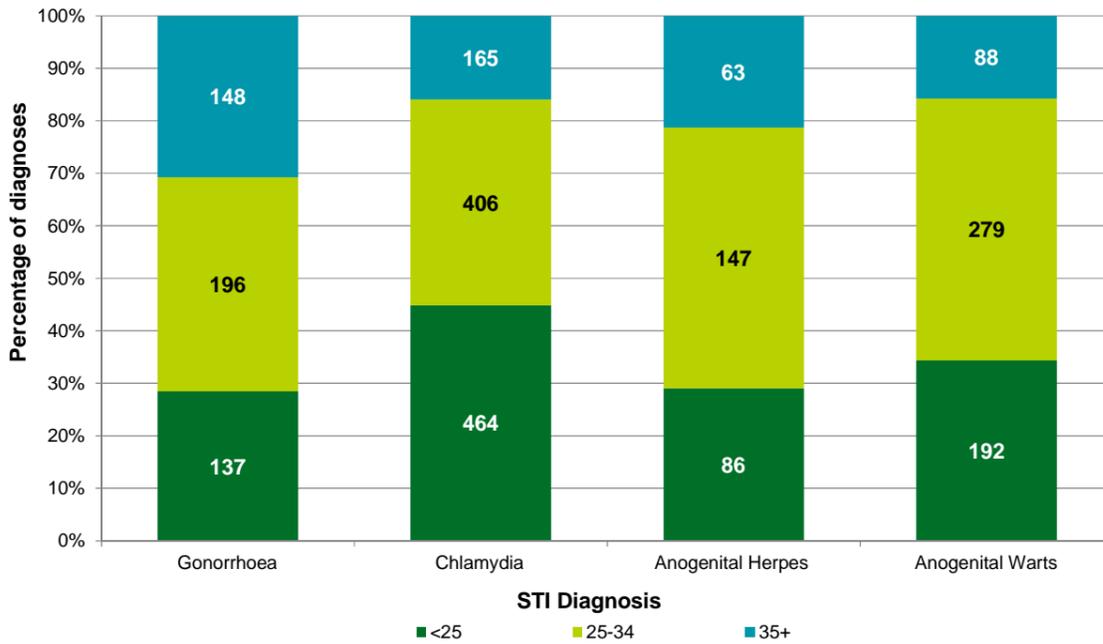
- Overall, in Camden, a third (33%) of selected acute STI diagnoses were in young people aged under 25 in 2012.
- A higher proportion of Chlamydia and warts diagnoses were in people aged under 25 (40% and 35%, respectively) compared to other STIs.

Notes: Numbers in bars represent the total number of cases recorded in 2012 in selected groups
Source: GUMCAD collated by PHE, 2012



STI diagnoses by age group, Islington

Breakdown of selected acute STI diagnoses by age, Islington, 2012



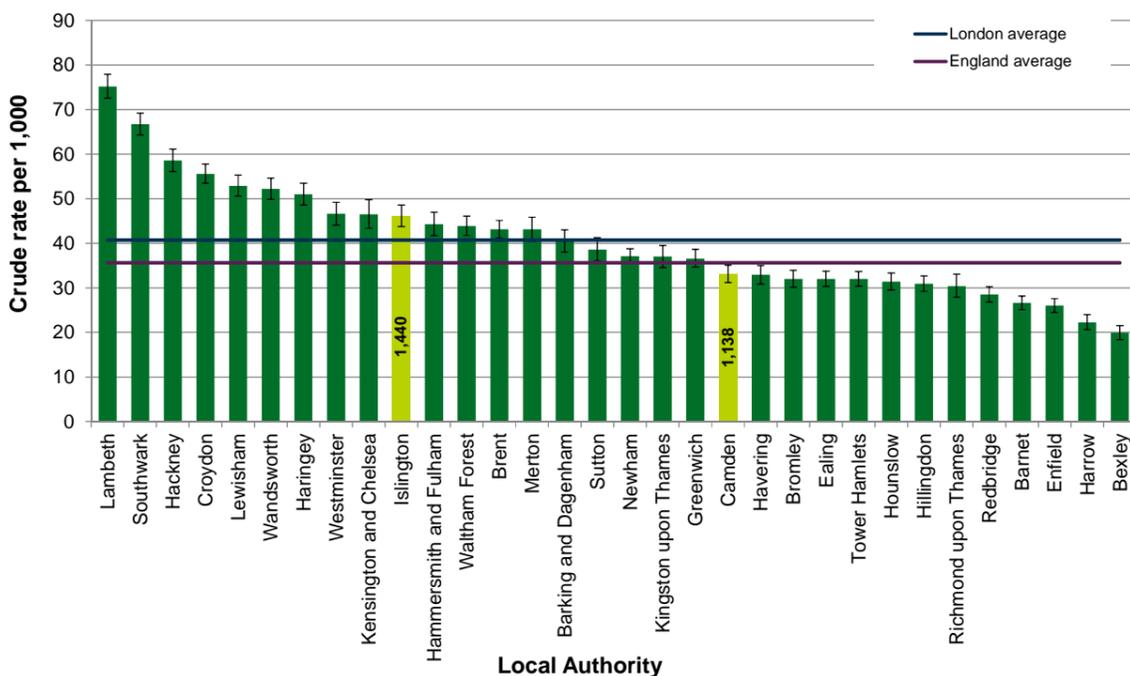
Notes: Numbers in bars represent the total number of cases recorded in 2012 in selected groups. Syphilis not shown due to small numbers
Source: GUMCAD collated by PHE, 2012

- Overall, in Islington, more than a third (36%) of selected acute STI diagnoses were in young people aged under 25 in 2012.
- A higher proportion of Chlamydia and warts diagnoses were in people aged under 25 (45% and 34%, respectively) compared to other STIs.



Acute STIs in 15 to 24 year olds

Crude rate of STIs diagnoses per 1,000 young people aged 15-24 years, by Local Authority, 2011



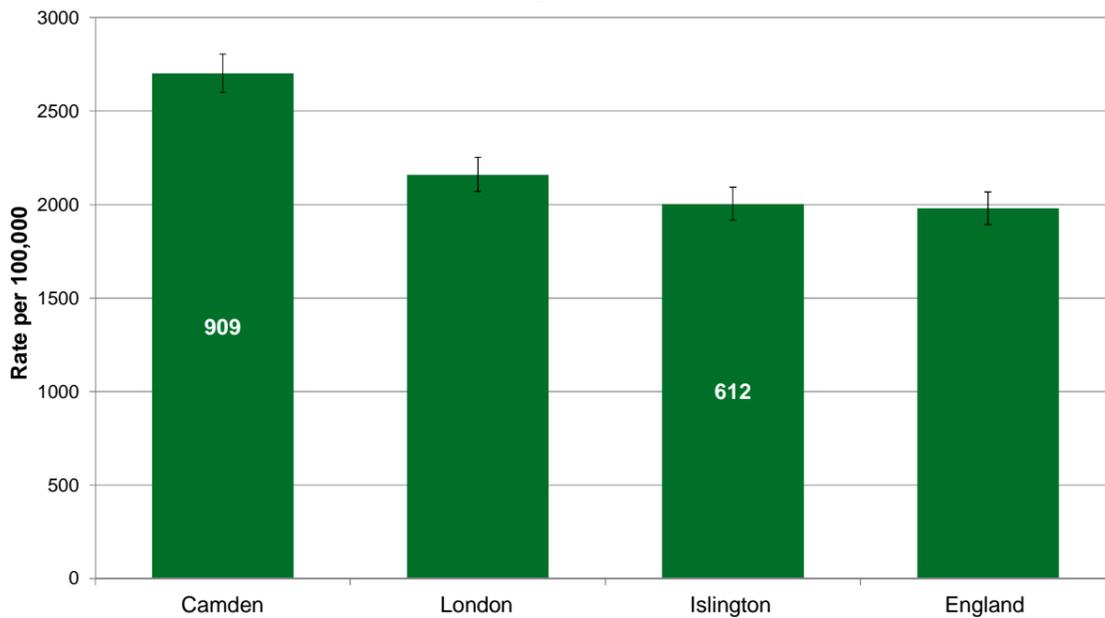
Source: GUM data 2011, HPA & ONS mid year estimates, compiled and published by CHIMAT.

- Data shows that the crude rate of acute STIs in the population aged 15 to 24 varies across London boroughs; from 20 per 1,000 in Bexley to 75 per 1,000 in Lambeth.
- Islington ranks 10 (out of 32) for crude rate of acute STIs in London, with 46 diagnoses per 1,000 population aged 15-24. This is significantly higher than both the London and England averages.
- Camden has the 13th lowest crude rate of acute STI admissions in London, with 33 diagnoses per 1,000 young people. This is significantly lower than London average but not significantly different to the England average.



Chlamydia

Crude rate of chlamydia diagnosis in 15-24 year olds, Islington, Camden, London and England, 2012



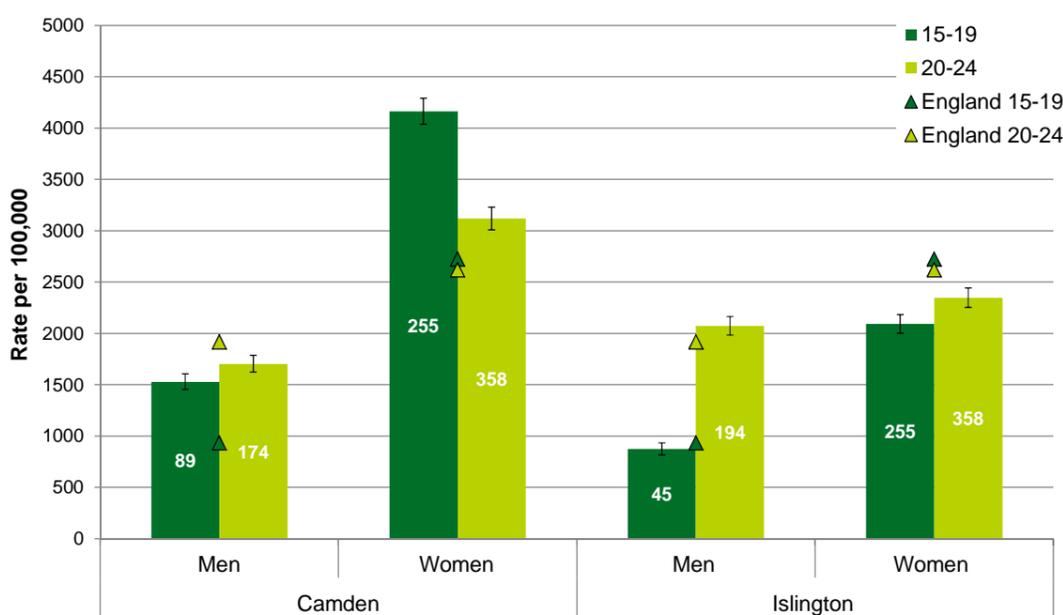
Note: Numbers in bars represent total number of diagnosed chlamydia cases in people aged 15-24 for 2012.
Source: GUMCAD collated by PHE, 2012

- Camden has a significantly higher crude rate (2,701 per 100,000) of chlamydia diagnosis in young people when compared to London and England.
- Islington's rate (2,003 per 100,000) of chlamydia diagnosis in 15-24 year olds is similar to that of London and England.
- Differences in diagnosis rates may be partially explained by differences in testing coverage, in particular through chlamydia screening programmes in community settings aimed at those under the age of 25.



Chlamydia (continued)

Crude rate of chlamydia diagnosis per 100,000 15-24 year olds, by age group and sex, Islington and Camden, 2012



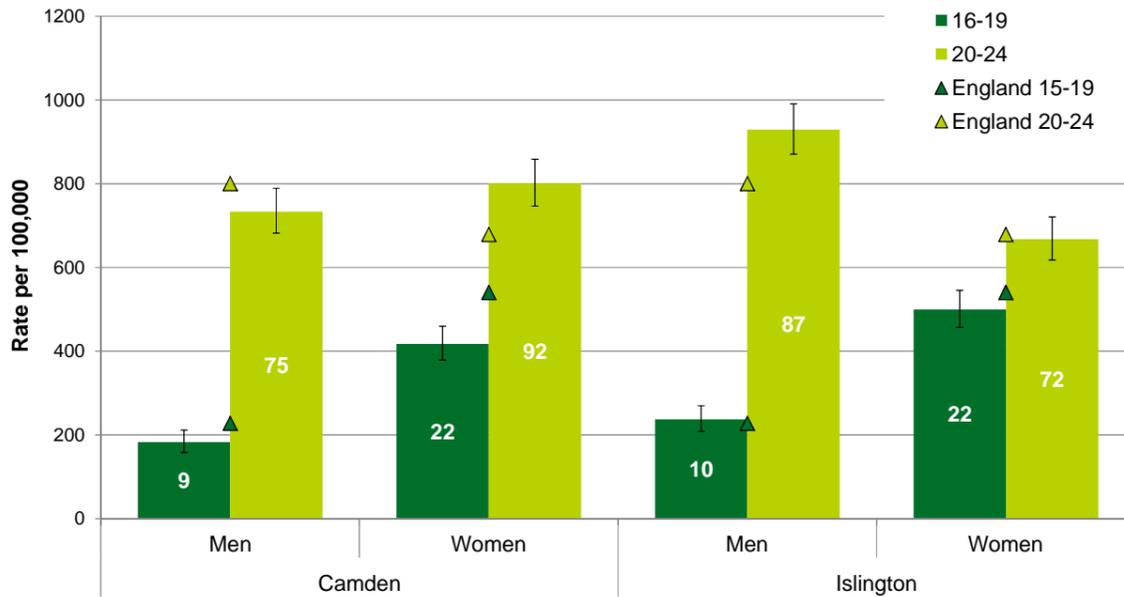
Note: Numbers in bars represent the number of diagnosed chlamydia cases in the corresponding group for 2012
Source: GUMCAD, collated by PHE, 2012

- In Camden, diagnosis rates were significantly higher in young women than in young men, this applies to those aged 15 to 19 and to those aged 20 to 24. There is no significant difference between the two ages groups in young men in Camden, in young women, however, diagnosis rates were significantly higher in those aged 15 to 19 than in those aged 20 to 24.
- In Islington, diagnosis rates were significantly higher in young women than in young men, again, this applies to both age groups, however, the difference is less marked between the sexes in those aged 20 to 24. In young men in Islington, a significantly lower rate of chlamydia was diagnosed in those aged 15 to 19 than in those aged 20 to 24.



Warts

Crude rate of warts diagnosis per 100,000 16-24 year olds, by age group and sex, Islington and Camden, 2012



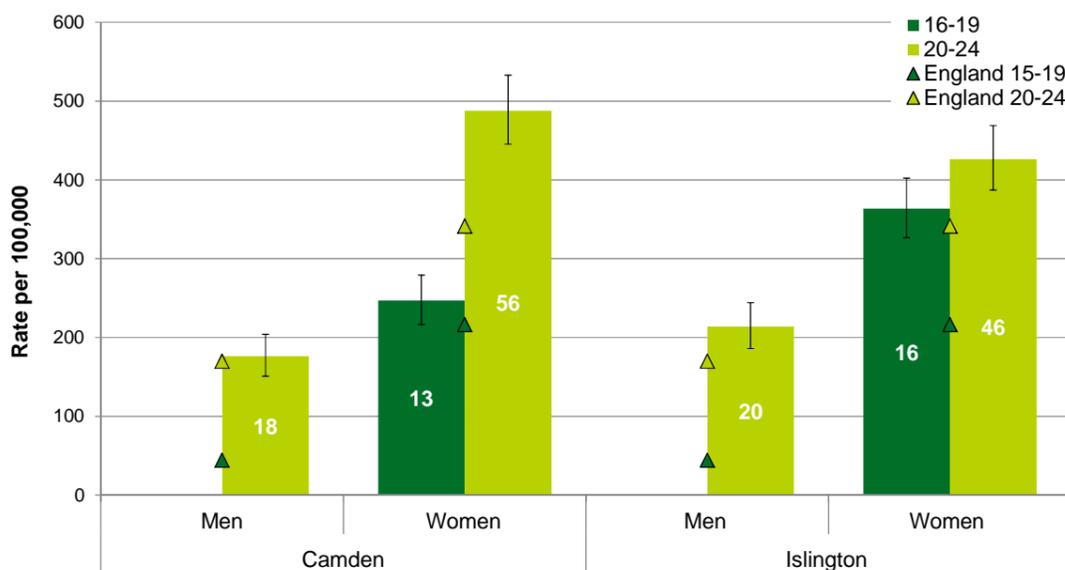
Note: Numbers in bars represent the number of diagnosed warts cases in the corresponding group for 2012; England averages include young people aged 15-19 while borough averages exclude 15 year olds (due to small numbers and data availability), including only 16-19 year olds. Source: GUMCAD, collated by PHE, 2012 (borough figures); PHE, 2013 (national averages)

- The rate of warts diagnosis is significantly higher in those aged 20 to 24 than in those aged 16 to 19, this is true in both young men and women in both Camden and Islington.
- In those aged 16 to 19, diagnosis rates are higher in young women than in young men.
- In those aged 20 to 24 in Islington, rates are significantly higher in men compared to women. In Camden there is no significant difference between the sexes in this age group.



Herpes

Crude rate of herpes diagnosis per 100,000 16-24 year olds, by age group and sex, Islington and Camden, 2012



Note: Numbers in bars represent the number of diagnosed herpes cases in the corresponding group for 2012; Rates for men under 20 have been suppressed due to small numbers; England averages include young people aged 15-19 while borough averages exclude 15 year olds (due to small numbers and data availability), including only 16-19 year olds. Source: GUMCAD, collated by PHE, 2012 (borough figures), PHE, 2013 (national averages)

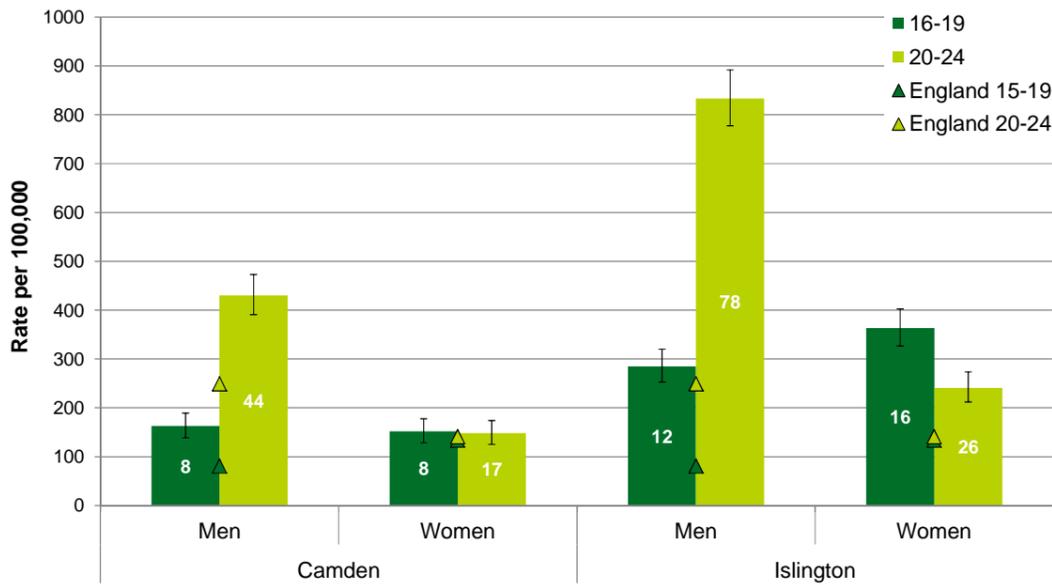
- In Camden, herpes diagnosis rates are significantly higher in young women than in young men. In young women in Camden, those aged 20 to 24 had significantly higher diagnosis rates than those aged 16 to 19.
- In Islington, as with Camden, diagnosis rates are significantly higher in young women than in young men. However, unlike Camden, there is no significant difference in diagnosis rates between those aged 16 to 19 and those aged 20 to 24 in young women.

(NB rates for men aged 15 to 19 are not presented due to small numbers).



Gonorrhoea

Crude rate of gonorrhoea diagnosis per 100,000 16-24 year olds, by age group and sex, Islington and Camden, 2012



Note: Numbers in bars represent the number of diagnosed gonorrhoea cases in the corresponding group for 2012; England averages include young people aged 15-19 while borough averages exclude 15 year olds (due to small numbers and data availability), including only 16-19 year olds.
Source: GUMCAD, collated by PHE, 2012

- Gonorrhoea diagnosis rates are highest in young men aged 20 to 24. Rates are significantly higher in men in this age group compared to those aged 16 to 19.
- Diagnosis rates in young women do not differ between age groups in Camden, however in Islington, rates are higher in those aged 16 to 19 than in those aged 20 to 24.



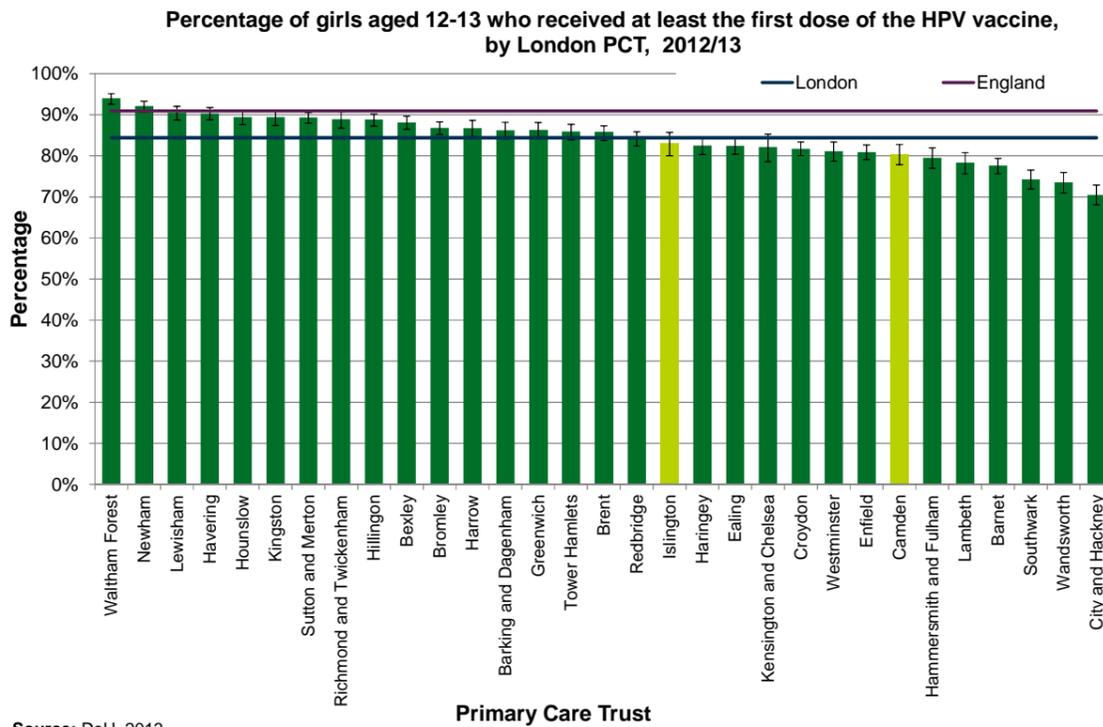
HUMAN PAPILLOMAVIRUS (HPV)

The human papillomavirus (HPV) is a sexually transmitted disease, some types of which are known to cause cervical cancer. The national HPV vaccination programme for girls aged 12-13 began in 2008 and over time this has the potential to significantly reduce rates of cervical cancer. Uptake of the human papillomavirus vaccine may in part be affected by social attitudes to sexual activity among teenagers and specifically the attitudes of parents.

Coverage of the HPV vaccination is one of the indicators in the Public Health Outcomes Framework.



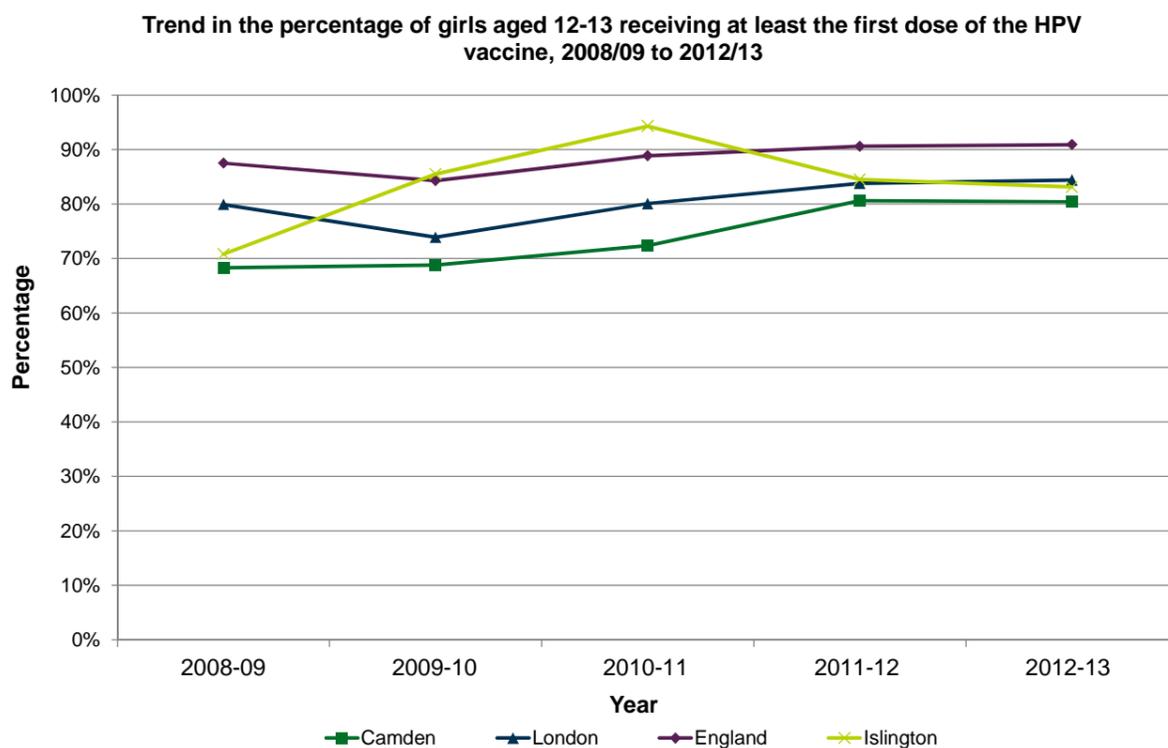
HPV immunisation



- An average of 91% of girls aged 12-13 received the first dose of the human papillomavirus (HPV) vaccination in England in 2010/11 (academic year).
- Uptake of the first dose in London (84%) is significantly lower than the England average.
- In Camden, 80% (799) of girls received their first dose, a proportion significantly lower than both the average in London and in England.
- In Islington, 83% (549) girls received their first dose, a proportion significantly lower than the England average but similar to the London average.



HPV immunisation (continued)



- Uptake of the human papillomavirus vaccine is likely to be affected by social attitudes to sexual activity among teenagers and specifically the attitudes of parents. This indicator therefore is potentially a proxy measure for changes in the social climate in relation to sex and sexual health.
- In Camden, the proportion of girls receiving at least their first dose of the vaccine increased from 68% in 2008-09 to 80% in 2012-13.
- During the same period in Islington, the proportion increased from 71% to 83%.



TEENAGE CONCEPTIONS AND ABORTION

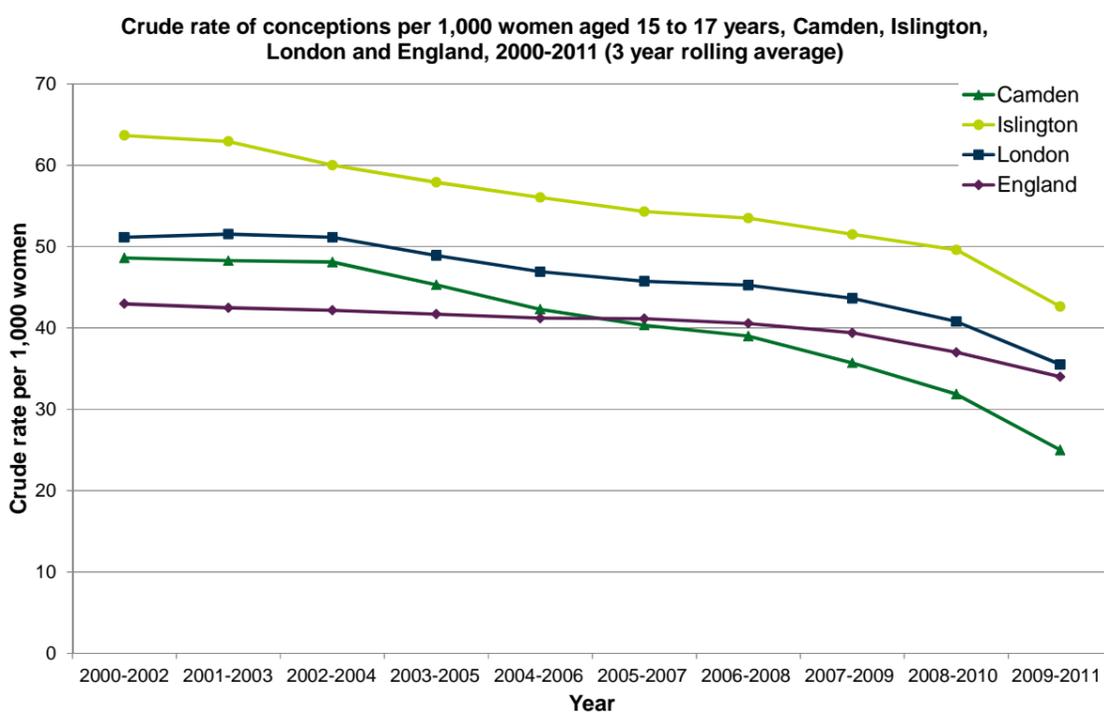
While teenage conception may result from a number of causes or factors, the strongest evidence for ways to prevent teenage conceptions is through high-quality education about relationships and sex and access to and correct use of effective contraception¹. The following section of this profile presents teenage conceptions and abortions as well as sex and relationship education in schools data.

Under-18 pregnancies is one of the sexual health related indicators in the Public Health Outcomes Framework.

1. Framework for Sexual Health Improvement in England, Department of Health, 2013



Teenage conceptions (15-17 years)

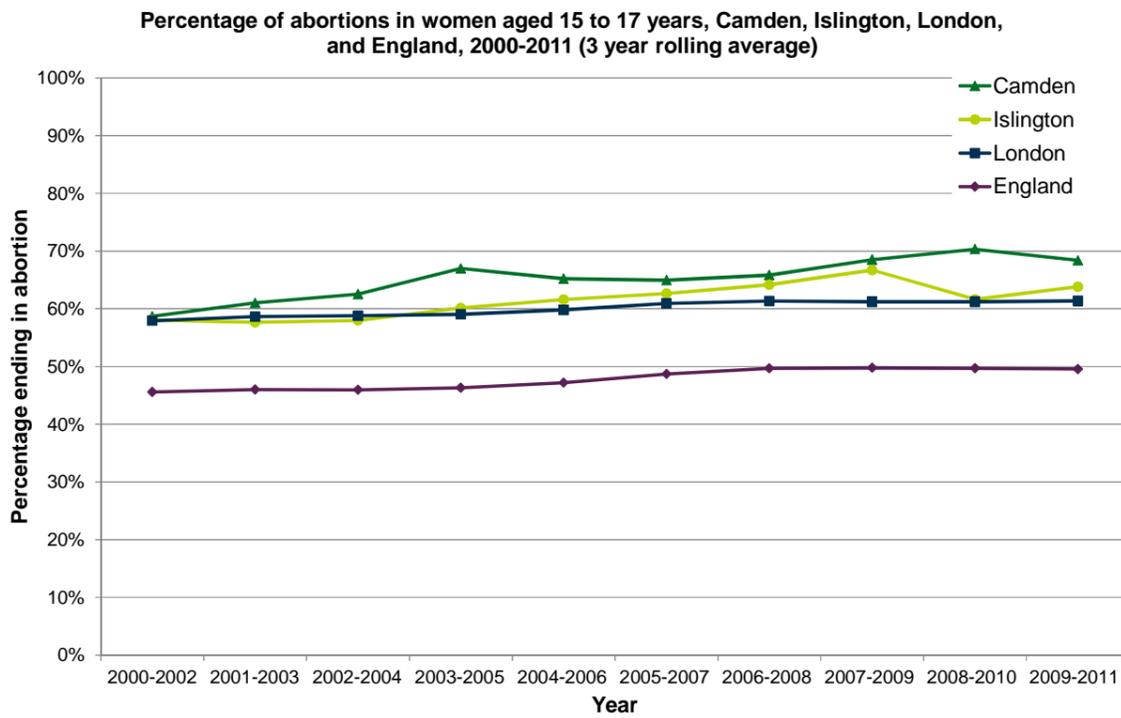


Source: ONS, 2013

- The number of teenage conceptions on average per year in 2009-11 was 70 Camden and 100 in Islington.
- The teenage conception rate in Camden decreased from 49 per 1,000 in 2000-2002 to 25 per 1,000 in 2009-2011.
- In Islington, the teenage conception rate has been consistently higher than London and England over time, however, rates decreased from 62 per 1,000 in 2000-2002 to 43 per 1,000 in 2009-2011.



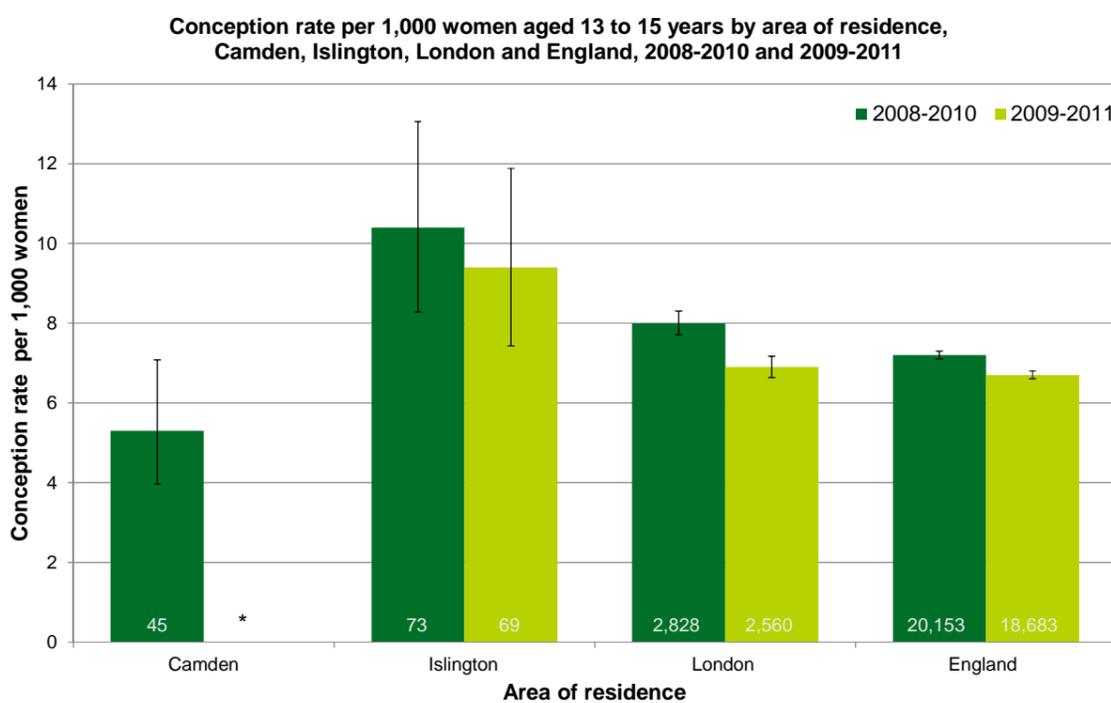
Percentage of teenage abortions (15-17 years)



- The proportion of teenage pregnancies ending in an abortion is consistently higher in Camden and Islington in all years compared to England.
- Between 2000-02 and 2009-11, the proportion of teenage pregnancies ending in an abortion have increased in London (from 58% to 61%) and England (from 46% to 50%) as well as in Camden (from 59% to 68%) and Islington (from 58% to 64%).



Teenage conceptions (13-15 years)

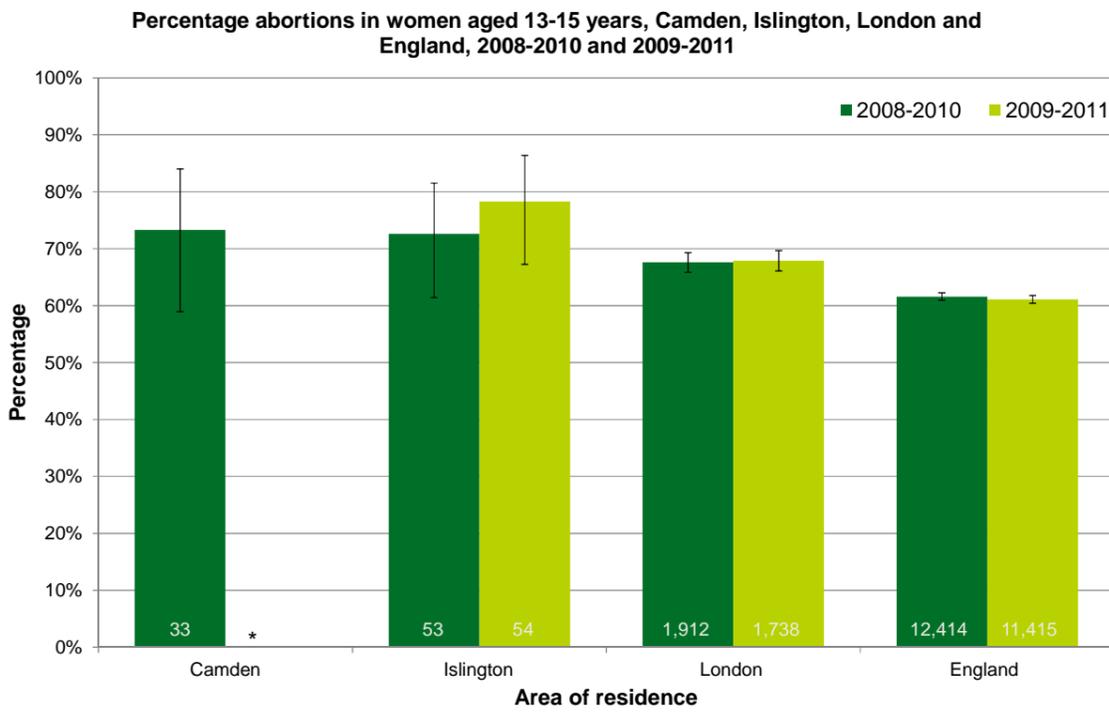


- The number of teenage (13-15 years) conceptions on average per year in 2008-10 was 15 in Camden and 25 in Islington.
- In 2008-2010 the crude rate of teenage conceptions in women aged 13-15 was significantly lower in Camden (5 per 1,000) compared to London and England (8 and 7 per 1,000 respectively).
- The teenage conception rate in Islington in 2009-2011 was 9 per 1,000, significantly higher than London and England (6.9 and 6.7 per 1,000 respectively).

Note: *Due to small numbers the conception rate for Camden 2009-2011 is not included in the analysis. Source: ONS, 2013



Teenage abortions (13-15 years)

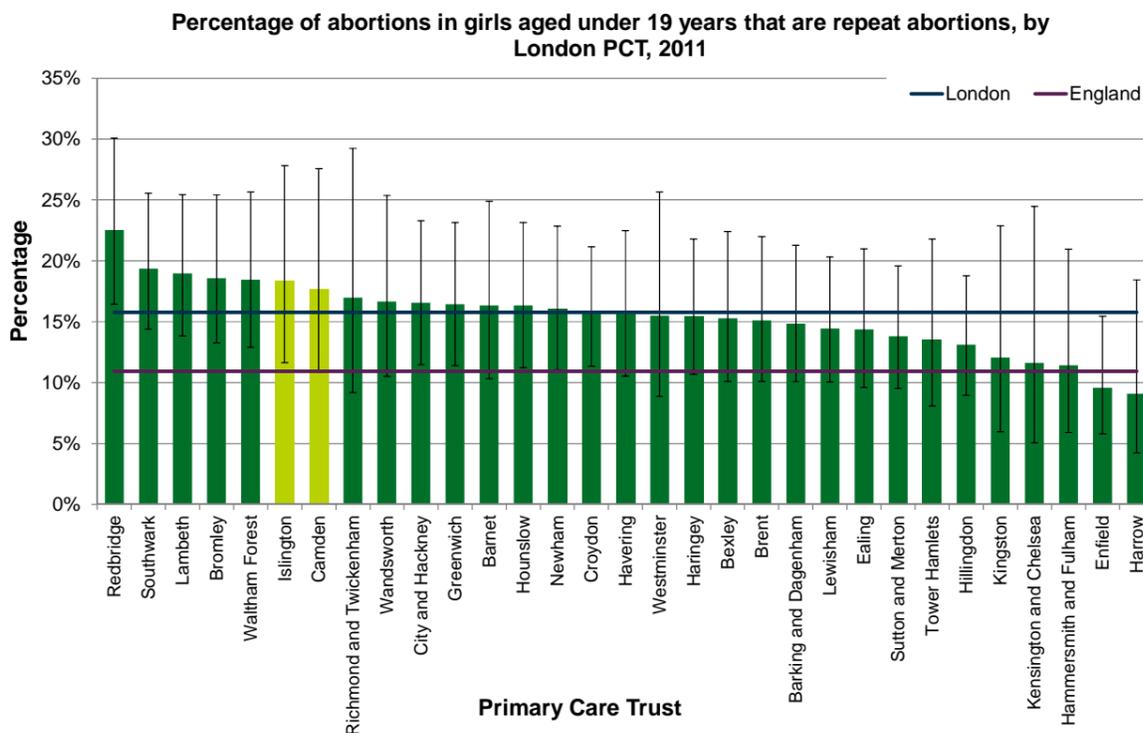


Note: *Due to small numbers the conception rate for Camden 2009-2011 is not included in the analysis. Source: ONS, 2013

- The number of teenage (13-15 years) abortions on average per year in 2008-2010 was 10 in Camden and 20 in Islington.
- The proportion of teenage abortions was 73% for both Islington and Camden in 2008-2010, this was not significantly different from London and England (68% and 62% respectively).
- In Islington, the proportion of conceptions ending in abortion in this age group was significantly higher than the England average.



Repeat abortions in under 19s

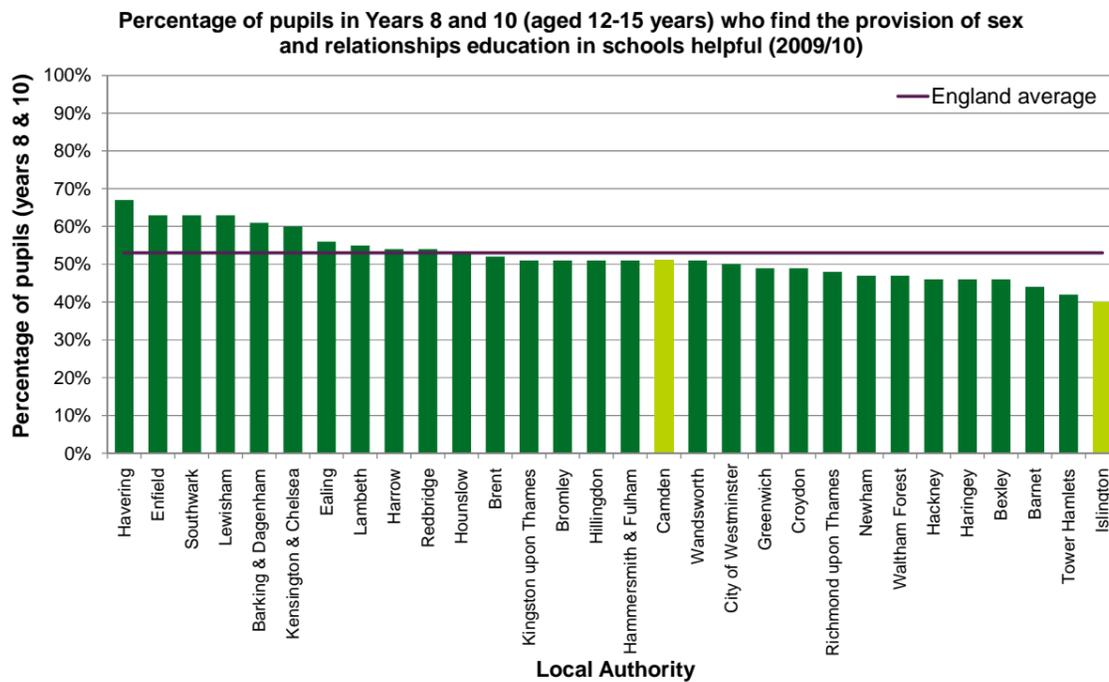


Source: APHO, 2012

- The proportion of girls under 19 presenting for a repeat abortion in 2011 was 11% in England and 16% in London. In both Camden and Islington the proportion was 18%.
- A high proportion of repeat abortions could indicate problems with access to, or use of contraception within the community, this may be due to insufficient service access, sub-optimal service provision, or choice of contraceptive or ineffective individual use of contraceptive methods.



Sex and relationships education



Source: Tell Us 4 Schools Survey, 2009/10

Note: The Government has decided to stop the delivery of the Tellus Survey as part of its commitment to reduce the burdens which data collection imposes on schools and local authorities. Therefore, the Tell Us 5 Schools Survey was not carried out and more recent data is not available.

- High quality sex and relationship education is instrumental for the prevention of unintended pregnancy and the transmission of STIs.
- Schools Survey results from 2009/10 showed that 53% of school pupils in England found the information on sex and relationships they had received in schools helpful.
- In Camden, results were not significantly different from the average in England, where 51% of local pupils found information helpful.
- In Islington, only 40% of school pupils reported finding this information useful, this was significantly lower than the England average.



ALCOHOL & SEXUAL HEALTH

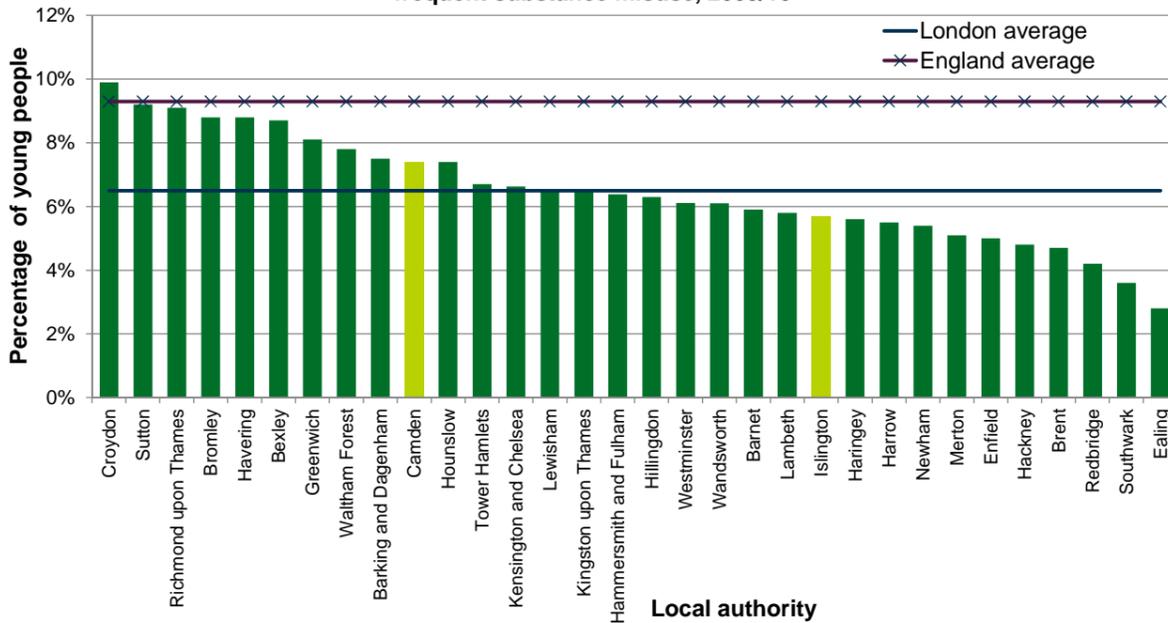
Alcohol consumption and being drunk can result in lower inhibitions and poor judgements regarding sexual activity, vulnerability and risky sexual behaviour, such as not using contraception or condoms. Alcohol consumption by young people leads to an increased likelihood that they will have sex at a younger age, and alcohol misuse is linked to a greater number of sexual partners and more regretted or coerced sex¹.

1. Framework for Sexual Health Improvement in England, Department of Health, 2013



Self reported substance use in school pupils

Percentage of young people aged 10-15 years who indicate that they engage in frequent substance misuse, 2009/10



- Schools survey data from 2009/10 showed that on average, 9% of pupils in England frequently engage in substance misuse. The average in London is lower at 7%.
- In Camden, 7% and in Islington, 6% of pupils report frequently engaging in substance misuse.

Source: Tell Us Survey 4 (2009/10).

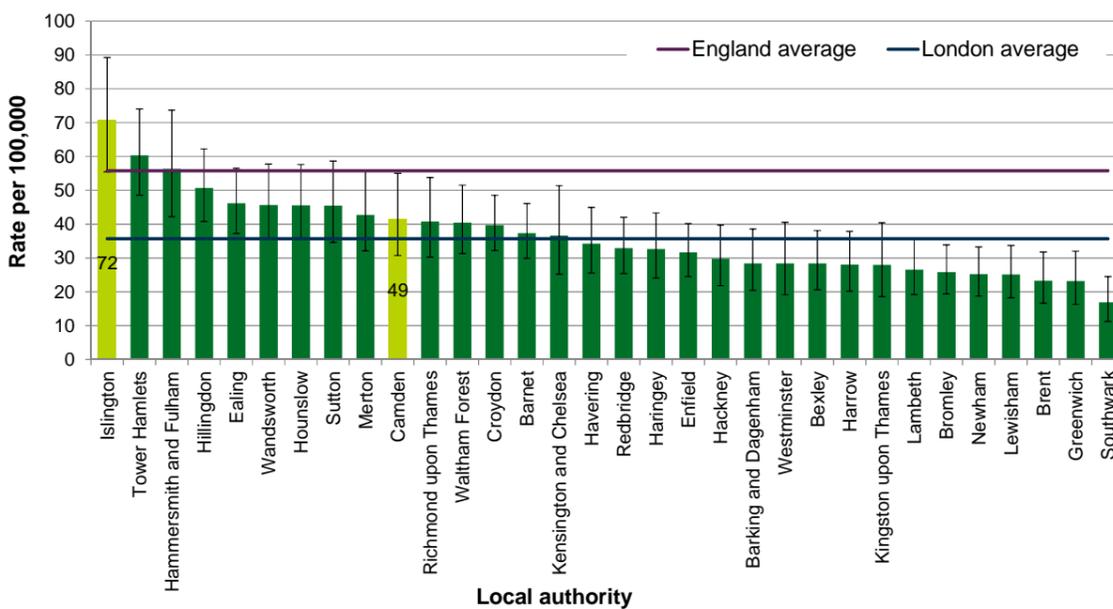
Definition: Frequent substance misuse is defined as one of the following; being drunk twice or more; taken illegal drugs twice or more; taken more than one illegal drug or been drunk once and taken one illegal drug, all in the past 4 weeks from the date of the survey.

Note: The Government has decided to stop the delivery of the Tellus Survey as part of its commitment to reduce the burdens which data collection imposes on schools and local authorities. Therefore, the Tell Us 5 Schools Survey was not carried out and more recent data is not available.



Hospital admissions due to alcohol (under 18s)

Crude rate of hospital admissions due to alcohol per 100,000 (under 18s), 2008/9-2010/11



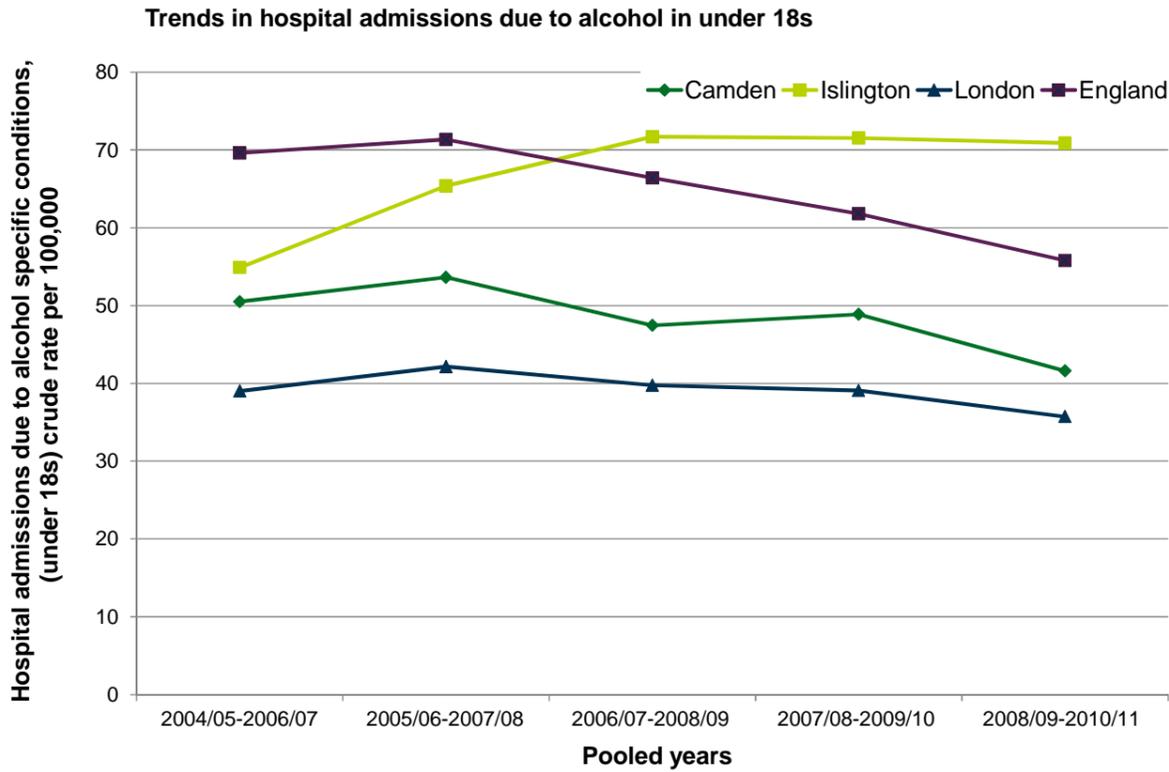
- The rate of hospital admissions due to alcohol in under-18s varies significantly by borough in London.
- Islington had the highest admission rate of all London boroughs, a rate of 70.9 admissions per 100,000 population. This is significantly higher than the rate in London (35.7) but not significantly different to the rate in England (55.8)
- In Camden, the rate of admissions due to alcohol per 100,000 was 41.6; a rate not significantly different from averages in London and England.

Source: Local Alcohol Profiles for England, 2013.

Note: Numbers in bars indicate number of admissions due to alcohol in people aged 0-17 in Islington and Camden from 01/04/08 to 31/03/2011. City of London has been excluded due to small numbers.



Hospital admissions due to alcohol (under 18s)



- Trends in hospital admissions due to alcohol in those under the age of 18 show a downward trend in England.
- In Camden, admission rates per 100,000 decreased from 50.5 in 2004/05-2006/07 to 41.6 in 2008/09-2010/11.
- In the same period in Islington, admission rates increased from 54.9 to 70.9 per 100,000.

Source: Hospital episode statistics, Local Alcohol Profiles for England, 2013.



About Public Health Intelligence

Public health intelligence is a specialist area of public health. Trained analysts use a variety of statistical and epidemiological methods to collate, analyse and interpret data to provide an evidence-base and inform decision-making at all levels. Camden and Islington's Public Health Intelligence team undertake epidemiological analysis on a wide range of data sources.

All of our profiles, as well as other data and outputs can be accessed on the Evidence Hub at: <http://evidencehub.islington.gov.uk>

FURTHER INFORMATION & FEEDBACK

This profile has been created by Camden and Islington's Public Health Intelligence team. For further information please contact Chloe Rousseau.

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We would also very much welcome your comments on these profiles and how they could better suit your individual or practice requirements, so please contact us with your ideas.

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