



HBSC Briefing Series: 3

Sexual Health

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Introduction

Within Wales there is concern over high rates of teenage pregnancy and increasing rates of some sexually transmitted infections. There is an urgent need for current information on issues related to young people's sexual health. This information can monitor and track young people's health behaviours and help inform policy and programme developments.

The recently launched *Young People's Health in Context* presents the international dissemination of findings from the 2001/02 Health Behaviour in School-aged Children (HBSC) survey.¹ The HBSC is a cross-national research study conducted in collaboration with the World Health Organisation (WHO) Regional Office for Europe.

This short report is the third in a series of HBSC briefings aimed at highlighting aspects of young people's health targeted in the Welsh Assembly Government's key strategies on adolescent health. Based on chapters in *Young People's Health in Context*,¹ the report compares Wales with selected HBSC countries with a focus on sexual health. Data are presented for the three UK countries participating in the study and contrasted with those countries reporting the highest/lowest rates of behaviours.

Background

In health terms, childhood and adolescence are particularly important times of life. Certain behaviours associated with the adolescent years, such as risk-taking and spontaneity, may affect issues relating to sexual health. Given this, research into young people's health and health behaviour – and the factors that influence them – is essential for the development of evidence-based policy and practice in Wales.

The HBSC study collects cross-national data every four years to help measure and track aspects of adolescent health and health-related behaviours and their developmental and social contexts.² The study was first undertaken in 1983/84 and Wales first participated in 1986. Interim surveys are also conducted in Wales every two years.

The cross-national and national data provide a unique opportunity to develop the evidence base for policy and practice and to focus on particular areas of adolescent health highlighted in the *Strategic Framework for Promoting Sexual Health*³ such as the high rates of teenage pregnancy and sexually transmitted infections (STIs) in Wales. The findings will also contribute to the wider strategic aims of the Welsh Assembly Government outlined in the 'better health' dimension of *Wales: A Better Country*⁴ and to the health-improvement recommendations of *The Review of Health and Social Care in Wales* (the Wanless report).⁵

Methods

In 2001/2, 35 countries drew national samples of 11-, 13- and 15-year-olds in accordance with the study protocol.² In the main, fieldwork took place between autumn 2001 and spring 2002. More than 160,000 young people took part and approximately 1,500 respondents in each age group were targeted in every country; pupils were sampled from schools and/or school classes. Pupils who were absent on the day of the survey were not followed up.

Data were collected by self-administered questionnaire. On completion of fieldwork, national data files were prepared using standard documentation and submitted to the HBSC International Data Bank at the University of Bergen, Norway. Data files were checked, cleaned and returned to countries for approval before being put in the international file. Further details of the methods used can be found in *Young People's Health in Context*.¹

The Welsh context

The main aim of this briefing is to present information on sexual behaviour among 15-year-olds in Wales compared to young people within the UK overall. Data from selected HBSC countries allow international comparisons. This report will examine data relating to four areas: experience of sexual intercourse; age of first sexual intercourse; use of condoms; and use of other contraception. The sexual health items within the HBSC survey were asked only of 15-year-olds because the majority of younger adolescents had not yet experienced sexual intercourse and such questions were considered too sensitive for younger students. A number of countries did not collect data on these items.

The key public health concerns around teenage sexual health include pregnancies and STIs. These cause significant health, social and economic problems among young people and are largely preventable through co-ordinated efforts among families, schools, health and education agencies and community organisations.⁶

The 1999 *Welsh Youth Sexual Health Survey*,⁷ reporting on sexual knowledge, attitudes and behaviours of 15- and 16-year olds in Wales, found that 40 per cent of boys and 35 per cent of girls were sexually active. The strategic framework for promoting sexual health in Wales recognises that young people need to be targeted. One of the initiatives of recent years focuses on the development of public education campaigns to highlight the availability of emergency contraception and to promote safer sex. In 2001 the Welsh Assembly Government launched an STI prevention campaign to raise awareness of common STIs and to promote condom use as a method of prevention.

Sexual health

In response to high teenage pregnancy rates and increasing rates of some STIs, the *Strategic Framework for Promoting Sexual Health*³ outlines a number of proposals to ensure that all young people in Wales receive effective education about sex and relationships as part of their personal and social development and have access to sound sexual health advice and services. Recent school based initiatives include developing new curriculum guidelines on sex education through linking sex and relationships education to a broader framework of personal and social education.

The Chief Medical Officer issued the *Welsh Health Circular* (2001) 041,⁸ which sets out best practice on providing effective contraception and sexual health services for young people. The all-Wales Sexual Health Network was set up in response to the sexual health strategy objective of promoting a more supportive environment to encourage openness, knowledge and understanding about sexual issues. The network provides a discussion forum for a range of agencies involved in promoting better sexual health.

Questions on sexual health were introduced for 15-year-olds in the 2001/02 HBSC study, allowing an examination of the position in Wales and providing a source of comparative data.

The four items on sexual health in the survey were:

Have you ever had sexual intercourse? (Sometimes this is called 'making love', 'having sex' or 'going all the way')

Response categories: *yes; no*

How old were you when you had sexual intercourse for the first time?

Response categories: *I have never had sexual intercourse; 11 years or younger; 12 years old; 13 years old; 14 years old; 15 years old.*

The last time you had sexual intercourse, did you or your partner use a condom?

Response categories: *I have never had sexual intercourse; yes; no*

The last time you had sexual intercourse, what method(s) did you or your partner use to prevent pregnancy?

Response categories: *I have never had sexual intercourse, No method was used to prevent pregnancy; Birth control pills; Condoms; Spermicidal spray or foam; Withdrawal; Some other method; Not sure.*

Experience of sexual intercourse

The proportion of 15-year-olds reporting to have ever had sexual intercourse in Wales (34 per cent) is similar to that in both England (38 per cent) and Scotland (34 per cent), Wales being ranked fourth overall (Figure 1). Across all countries, the HBSC average for experience of sexual intercourse is 28 per cent for boys and 20 per cent for girls. However, more girls than boys in the UK report having had sexual intercourse – the proportions are 40 per cent and 29 per cent in Wales, 40 per cent and 36 per cent in England and 35 per cent and 33 per cent in Scotland. These figures also highlight that Wales has one of the largest gender differences in experience of sexual intercourse. Greenland has the highest reported rates of sexual intercourse by the age of 15, Poland has the lowest.

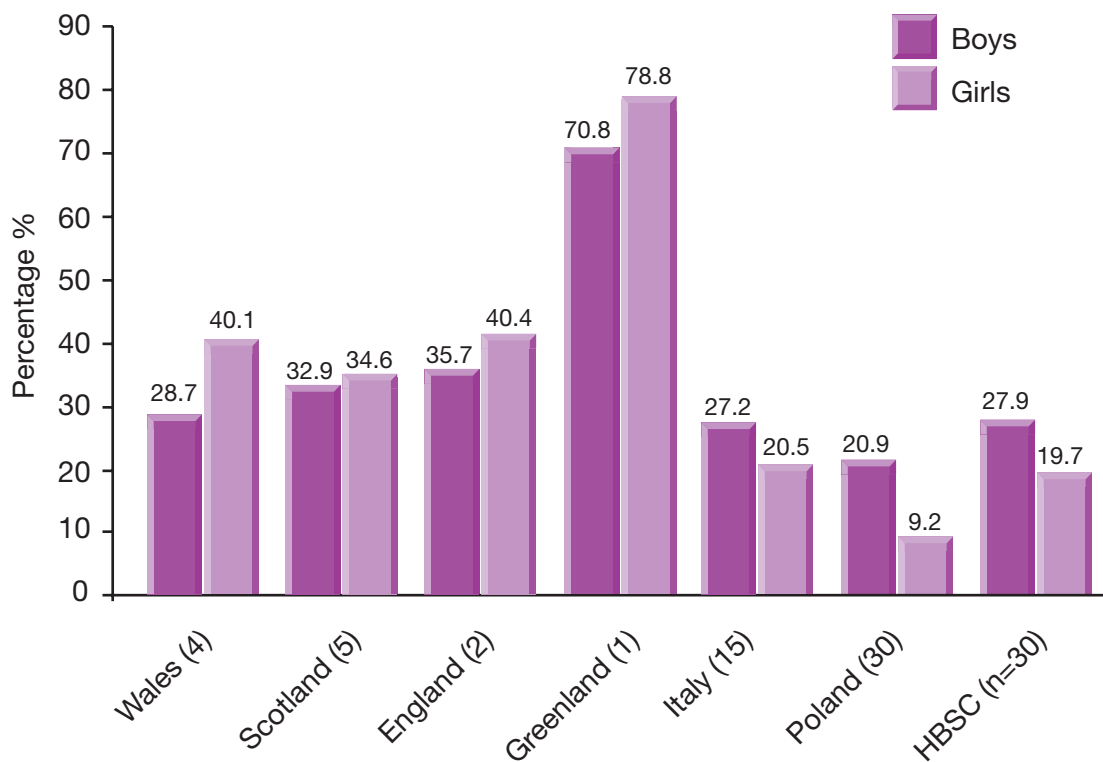


Figure 1 Percentage of 15-year-olds reporting to have ever had sexual intercourse

The mean age of first intercourse among 15-year-olds in Wales reporting to have had intercourse was 14.3 years for both boys and girls. In England and Scotland, the mean age was closer to 14 years. The HBSC average is 14.0 years for boys and 14.3 years for girls.

Use of condoms

Increasing rates of some STIs, such as chlamydia and gonorrhoea have far-reaching consequences for long-term health in Wales. Consequences of inadequately treated STIs can include pelvic inflammatory disease and infertility, cervical cancer and increased susceptibility to HIV infection. Chlamydia represents a particularly preventable source of infertility and reproductive ill health.

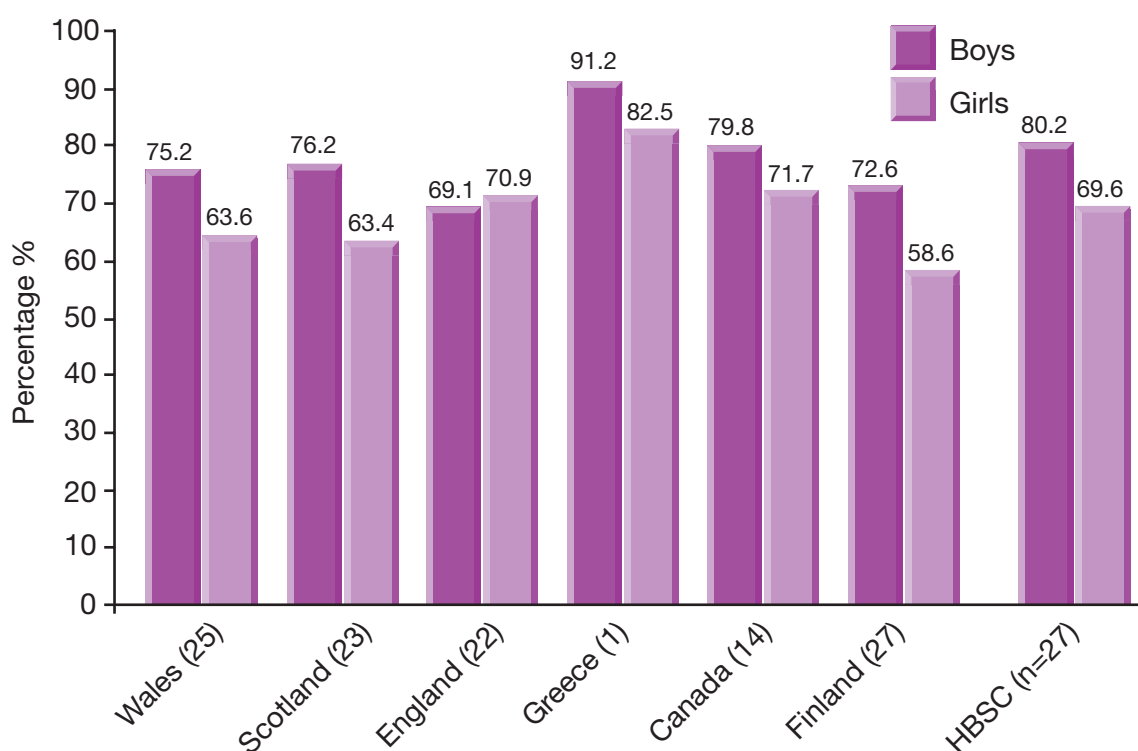


Figure 2 Percentage of 15-year-olds reporting that they or their partner used a condom the last time they had sexual intercourse

Figure 2 shows that the proportion of 15-year-olds in Wales reporting that they or their partner used a condom the last time they had sexual intercourse is 75 per cent for boys and 64 per cent for girls. The HBSC average is 80 per cent for boys and 70 per cent for girls. Wales is ranked twenty-fifth behind England (twenty-second) and Scotland (twenty-third) and is among the lowest six countries to report condom use. Overall, Greece has the highest reported use of condoms; Finland has the lowest.

Use of other forms of contraception

Wales has the highest rates of teenage pregnancy in Europe and has had a consistently higher rate than England.⁹ The proportion of 15-year-olds in Wales reporting use of at least one contraceptive method, including but not limited to condoms, when they last had sexual intercourse is 82 per cent for boys and 85 per cent for girls. The HBSC average is 86 per cent for boys and 85 per cent for girls. Wales is ranked nineteenth.

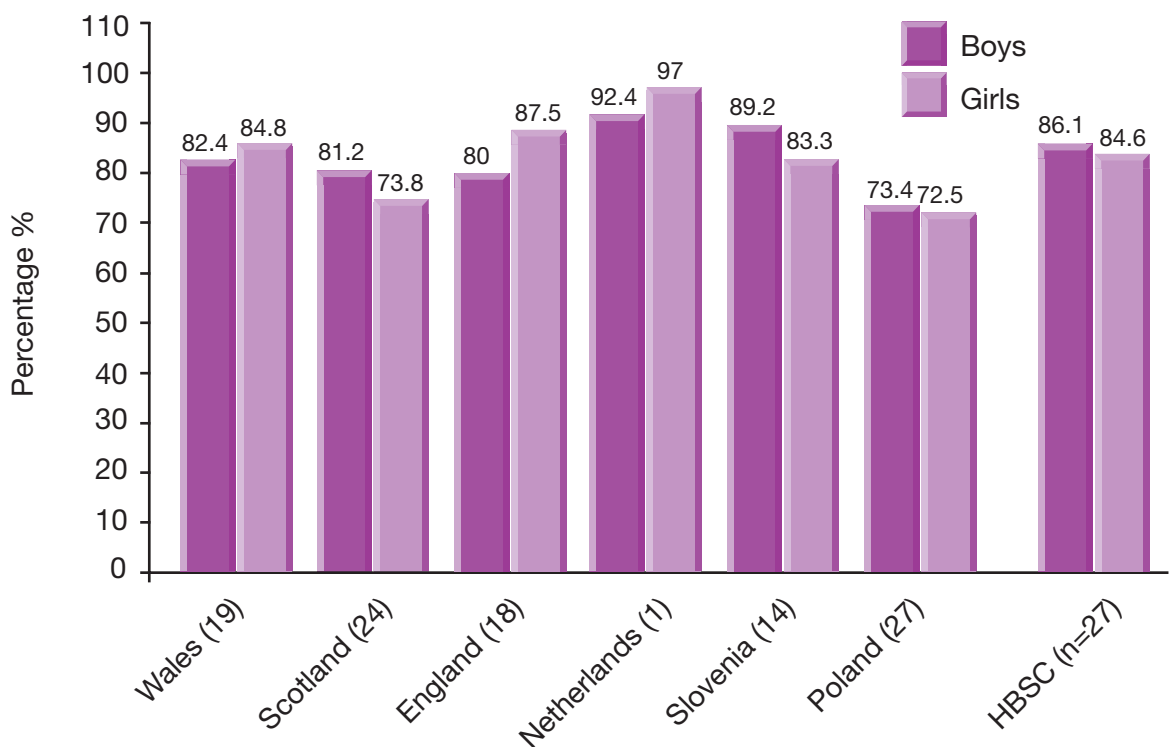


Figure 3 Percentage of 15-year-olds reporting use of at least one contraceptive method at last sexual intercourse

A gender difference is more evident in England and Scotland, with more boys than girls reporting contraception use in Scotland (81 per cent for boys and 74 per cent for girls) but conversely more girls than boys reporting contraceptive use in England (80 per cent for boys and 88 per cent for girls). The Netherlands has the highest reported use of contraception; Poland has the lowest.

The way forward

The international data from the HBSC study clearly illustrate that sexual health issues in young people are of concern in the United Kingdom, Europe and beyond. This short report has highlighted experience of first sexual intercourse, age of first sexual intercourse and contraceptive use. The findings will contribute to collaborative initiatives focusing on joint responsibility for health as set out in *Health Challenge Wales*.¹⁰

A progress report on implementation of the sexual health strategic framework¹¹ was published in 2003. Children and young people are a priority for the Welsh Assembly Government as demonstrated through the appointment of the Children's Commissioner for Wales and the development of a *National Service Framework for Children, Young People and Maternity Services*. Children's health is one of the priority health areas in the new *National Health Targets for Wales*.¹²

The HBSC surveys will continue to track and monitor health behaviour and to inform the development of policies and initiatives for young people. In addition to these briefings on 2001/02 data,^{13,14} a series of research reports based on data from the 2004 HBSC survey in Wales will follow.

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Contact for information

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