



## **FSRH statement on the release of data on sexual and reproductive health services in England 2016-17 by NHS Digital**

09<sup>th</sup> October 2017

The Faculty of Sexual and Reproductive Healthcare (FSRH) welcomes the publication, by NHS Digital, of data on sexual and reproductive health (SRH) services in England for the year 2016-17. NHS Digital reports a 7% decrease in contacts with services when compared with the previous year and a 24% decrease in the last 10 years.

The data corroborates what several recent reports have indicated. For example, Public Health England's (PHE) recent survey of service commissioning found that local authorities (LAs) cannot maintain the current levels of service provision due to cuts in the public health budget, with fragmented commissioning threatening access to contraception and other sexual health services.

The data also supports the recent findings of the Royal College of General Practitioners (RCGP), whose recent report, endorsed by FSRH, indicates that years of progress in sexual and reproductive healthcare, including steadily increasing uptake of long-acting reversible contraception (LARCs), is at risk due to pressures facing primary care.

A concerning trend is that prescriptions for LARCs have fallen over the last three years, a decrease of 6%. This reduction follows annual increases in the previous years. Use of intrauterine devices and systems by under 20s amount to only 3% of females this age.

Access to SRH services is influenced by their availability in the individual's area of residence, and this post code lottery is directly connected to levels of deprivation. NHS Digital reports that the likelihood of young women aged 13 to 15 accessing SRH services for emergency contraception increases with the deprivation level in their area of residence. This varied from 3 per 1000 in the least deprived areas to 8 per 1000 in the most deprived areas.

Jane Hatfield, Chief Executive of the FSRH, said:

*"This data reinforces worrying trends that FSRH members have been reporting for some time now. We are concerned that the decrease in numbers of women accessing SRH services for contraception is a direct result of deep cuts to the Public Health grant since 2015 that have already led to local services shutting down or reducing access to users.*

*The data also reflects the consequences of the implementation of the Health & Social Care Act in 2013, which has led to the fragmentation in commissioning of SRH services, rendering the system hard for women and men to navigate.*

*If cuts to public health funding and SRH services are not addressed, women and girls in England will continue to suffer the consequences, and unplanned pregnancies are likely to increase, with the most vulnerable disproportionately affected."*

**Ends**

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Notes to editors:

- The Faculty of Sexual and Reproductive Healthcare (FSRH) is the largest UK professional membership organisation working at the heart of sexual and reproductive health (SRH), supporting healthcare professionals to deliver high quality care. It works with its 15,000 members, to shape sexual reproductive health for all. It produces evidence-based clinical guidance, standards, training, qualifications and research into SRH. It also delivers conferences and publishes The Journal of Family Planning and Reproductive Health Care. For more information please visit: [www.fsrh.org](http://www.fsrh.org)
- SRH services include family planning services, community contraception clinics, integrated GUM and SRH services and young people's services e.g. Brook advisory centres. They provide a range of services including, but not exclusively, contraception provision and advice, sexual health treatment and advice, pregnancy related care, abortion related care, cervical screening, psychosexual therapy, PMS treatment, colposcopy services, fertility treatment and care and gynaecological treatment and care.
- A contact may be a clinic attendance, or a contact with the service at a non-clinic venue such as home visits/outreach, or a non-face to face contact such as by telephone or e-mail.
- You can access the NHS Digital report [here](#)

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