The most commonly sexually transmitted infections (STIs) diagnosed in Cheshire West and Chester are Chlamydia and Genital Warts. Except for Gonorrhoea, the number of diagnosed cases of most STIs has fallen and rates of infection are lower than those for the North West and England.

Young people in England, under the age of 25, continue to be disproportionately affected by STIs accounting for 64% of all Chlamydia, 54% of Genital Warts, 55% of Gonorrhoea and 43% of Herpes infections in 2012. In Cheshire West and Chester (2012), the 20-24 age band have the highest overall prevalence of acute STIs (3,800 per 100,000 population) with the 15-19 age band having the second highest prevalence (2,272 per 100,000 population). A number of factors have been identified which can lead to increased risk of acquiring STIs:

- unprotected sex
- frequent change of and/or multiple sexual partners
- alcohol or substance misuse leading to ‘risky’ sexual behaviour (unsafe and regretted sex).

Public Health England recommends that local areas should be achieving a rate of 2,300 Chlamydia diagnoses per 100,000 15 to 24 year old resident population annually. A total of 10,580 Chlamydia tests were reported to the National Chlamydia Screening Programme in Cheshire West and Chester in 2012, of which 809 (7.6%) were positive. The crude rate of Chlamydia diagnoses in Cheshire West and Chester was 2,045 per 100,000 young adults aged 15 to 24 years, a similar rate to the England average of 1,979 per 100,000 young adults but less than the recommended rate.

The Government has set out its ambitions for improving sexual health in its publication ‘A Framework for Sexual Health Improvement in England’ (2013). This recognised that while individuals’ needs may vary, there are certain core needs:

- Preventative interventions that build personal resilience and self-esteem and promote healthy choices.
- Access to accurate and timely information that helps people to make informed decisions about relationships, sex and sexual health.
- Rapid access to confidential, integrated health services, in a range of settings, accessible at convenient times.
- Early accurate and effective diagnosis and treatment of sexually transmitted infections (STIs), including HIV, combined with the notification of partners who may be at risk.

**Recommended actions**

- Chlamydia screening - Further targeted roll out of the national programme is crucial to achieve the diagnostic target of 2.3% positivity in 15 to 24 year olds.
- Community focused STI screening services - Access to STI screening in communities is an important focus of service development. It is vital to encourage and develop opportunities to ensure this continues, for example, GP new patient screening.
- Prevention - The ability for young people to make positive lifestyle changes and minimise risk as a result of health promotion interventions. This includes the provision of information and advice, promotion of key sexual health messages, educational and awareness sessions, distribution of safer sex materials and outreach work.
- Young people’s sexual health services; additional services require development, linked to those young people who are at risk, or deemed hard to reach, as they do not access mainstream services. Services need to be ‘You’re Welcome’ accredited within nine months of establishment.
- Sexual health is patterned by socioeconomic inequalities, with those from deprived areas and men who sleep with men being those most at risk of negative outcomes.

Rationale: Sexual health is an important part of physical and mental health. Essential elements of good sexual health are equitable relationships, and sexual fulfilment with access to information and services to avoid the risk of unintended pregnancy, illness and disease (Public Health England, 2013).