Luton Public Health Strategic Priorities	Sexual & Reproductive Health – Strategic Plan 2024-2030	Reporting Period: January 2026 Service Lead : Geraldine Reeve

Summary of issue and reason for focused actions:

The consequences of poor sexual and reproductive health are largely preventable and include unplanned pregnancies, infections including HIV, pelvic inflammatory disease and infertility, psychological consequences, stigma, and poorer educational, social and economic opportunities.

By empowering Luton's residents to make informed choices about their sexual and reproductive health, this plan supports the Luton 2040 vision of "a healthy fair and sustainable town where everyone can thrive, and no one has to live in poverty". For example, through improving access to contraception to women of childbearing age and providing sexual health education, this can reduce inequalities by reducing unplanned pregnancies and support women to manage their fertility. This means women stay in education or the workforce longer. Resulting in improved prospects, reduced poverty and an improved economy.

This plan is split in to 5 themes:

1. Addressing inequalities in priority groups
2. HIV prevention and reducing transmission – in line with HIV Action Plan for England 2025-2030
3. Sexually Transmitted Infections (STIs) screening and treatment, with a focus on Chlamydia screening for females aged 15-24 inline with the National Chlamydia Screening Programme
4. Prevention of unplanned pregnancy
5. Children and young people

Overall aims of this plan:

Address inequalities:

- Reducing stigma and discrimination through partnership working
- Provide targeted/tailored health promotion and support
- Improve access to services

HIV Prevention:

- Continue to increase HIV testing rate per 100,000 (3055) increase to 3800 (neighbours average)
- Reduce HIV late diagnoses to under 25% (UKSHA benchmark)
- Continue to increase PrEP uptake

STI testing:

- Increase STI testing rate to 5000 (4132) per 100,000, in line with statistical neighbour
- To increase proportion of females aged 15-24 screened for chlamydia to 20% (14.0%) in line with England
- To increase Chlamydia detection rate to over 3250 per 100,000 females aged 15-24. (UKSHA benchmark)

Prevention of unplanned pregnancy

- Increase total prescribed LARC to over 40 (29.9) per 1000 females 15-44 (in line with England)
- Reduce repeat abortions in under 25s (31.6%) to under 25%

Children and young people

- Increase uptake in c-card scheme among under 25s
- Reduce repeat abortions in under 25s (31.6%) to under 25%
- Continued reduction of under 18 conceptions
- Increase proportion of females aged 15-24 screened for chlamydia to 20% (14.7%) in line with England

Priority Area /Work stream	High level Actions	RAG	Update on Delivery
Theme 1: Addressing inequalities in priority groups	**Black aftrican women living with HIV project in partnership with Luton Sexual Health. To reduce late diagnosis**		**66 responses to survey carried out in clinic. 33 participants identified for focus groups. Planned for Q4**
	Supporting Lea Vale to access inclusion health groups as part of Women's Health Network spec		**Until December 2026. Future funding not confirmed**
	Re-launch Luton Sexual Health Network to ensure joined-up approach to tackling sexual health inequalities across the system		Joint with BMK – due to launch April 2026. Sending out expression of interest to stakeholders to ensure relevant content
Theme 2: HIV prevention and reducing transmission	**Delivery of HIV Action Plan 2025-2030 (Published Dec 2025)**		**Working with commissioners and providers to produce regional action plan that can be tailored at local level. LSH colleagues and GR part of working groups.**
	Continue to raise awareness of HIV testing among all cohorts to normalise testing and reduce stigma		HIV Testing is for everyone project – Focus campaigns on WAD and HIV Testing week **Explore becoming an HIV Confident local authority**
	Support LSH in raising awareness/education about PrEP – initiation and continuation		**Propose continuation of online PrEP following end of trial in April 2026** 65% (n=30/46) of the unique patient prescriptions are from patients who were not previously accessing PrEP through clinic services or privately
	Ongoing engagement with GPs (with support from ICB) and wider community to normalise HIV testing		Testing by GPs has doubled since 22/23 Create HIV testing toolkit for GPs Propose pilot with GPs to add HIV test with NHS Health Check
Theme 3 Sexually transmitted infections	**Address disparity between NCSP requirements and testing in Luton (national issue).**		**4 pharmacies taking part in "In My Testing Era" pilot. Evaluation at end of Q4 but initial results show little impact on uptake of testing. Remains at 4%**
	Address increasing rates of gonorrhoea and syphilis		On regional working group to create action plan LSH commenced DoxyPEP (to prevent syphilis) in September. NHSE commissioning sexual health providers to deliver Bexsero (MenB4C gonorrhoea vaccine)
	Review levels of online testing with LSH to identify cohorts who aren't aware of/accessing the service		

	Undertake focus groups or 1-1 interviews with 15-25 years olds to understand barriers to testing, stigma and condom usage		26/27
	Increase awareness of STIs and ways to access testing. Create digital map of services		26/27
Theme 4 **Prevention of unplanned pregnancy**	**Support provision of LARC and EHC in Luton through Public Health primary care contracts and maternity**		**Both contracts renewed. EHC now also offered online through Preventx (LSH)** **EHC now commissioned in pharmacies via NHSE. LA contract to end March 2026** **Review IUS/IUD insertion costs bring in-line with EoE (increase by £15 - £85-£100)**
	Ongoing monitoring of data from LSH/Primary care to inform access to contraception and testing		
Theme 5 **Children and Young People including teenage pregnancy**	Support LSH with delivery of campaigns and outreach activity in schools and education for parents/carers		RSE for Grown Ups launched. LSH webinars on online safety
	Ongoing monitoring of data (UKSHA/LSH/Primary care) to ensure targeted activity, including awareness campaigns – C-card scheme, testing options, drop bin project (chlamydia), free EHC offer		

Performance indicators – JSNA Overview

New Sexually Transmitted Infection (STI) diagnoses

The rate of new STI diagnoses in Luton is 524 per 100,000. This is significantly higher than the regional average of 320 , but similar to the national average of 520. There has been a significant increase in rate of new STI diagnoses in Luton over the past 3 years. In terms of comparison to our CIPFA nearest neighbours, we are currently ranked 15 out of 16.

HIV late diagnosis

HIV late diagnosis in Luton is 36.4%. This is not significantly different to the national and regional averages of 43.5% and 46.5% respectively. There has been no significant change in the percentage of adults in Luton with HIV late diagnosis over the past 3 years. Luton is ranked 4 out of 16 CIPFA neighbours.

Under 18 conceptions

The under 18 conception rate in Luton is 11.0. This is not significantly different to both the national and regional averages of 13.1 and 11.0 respectively. There is no significant change over the latest 3-year period. Luton is ranked 2 out of 6 CSSNBT neighbours.

Notes: HIV late diagnoses is graded 'against national benchmarks where performance of 50% or above equals 'red', performance of between 50% and 25% equals 'amber, and performance of below 25% equals 'green'.

Performance indicators – UKSHA/OHID

Indicator	2013-15	2014-16	2015-17	2016-18	2017-19	2018-20	2019-21	2020-22	2021-23	2022-24	Trend	Statistical neighbour	England	EofE	UKSHA benchmark
HIV late diagnosis in people first diagnosed with HIV in the UK %	57.1	50.8	44.4	46.9	52.6	55.3	53.8	40.0	34.1	34		50.0	43.3	47.7	<25%
	2016	**2017**	**2018**	**2019**	**2020**	**2021**	**2022**	**2023**	**2024**						
HIV testing rate per 100,000	2033.5	1864.1	2549.5	3054.2	1623.2	2208.4	2594.1	2,909.60	3,055.00			2898.3	2842.7	1586.4	No
Initiation and continuation of PrEP among those with PrEP need						63.5%	70.4%	72.5%	80.8%			68.2	76.1	74.2	No
STI testing rate (exc chlamydia aged <25) per 100,000	2624.1	2381.9	3242.4	3982	2393.2	3061.5	3711	4059.2	4209.4			3716.6	4088.8	2673.1	No
New STI diagnoses (exc chlamydia aged <25) / 100,000	552	439	516	621	330	361	464	518	473			472	482	286	No
Proportion of females aged 15-24 screened for chlamydia %						17.1	14.6	14.8	14.0			10.8	18.0	13.5	No
Chlamydia detection rate per 100,000 aged 15 to 24	2199	1776	2829	3137	1865	1568	1399	1478	1306			766	1589	1153	>3250
Total prescribed LARC excluding injections rate / 1,000	27.9	31.2	32.9	35.8	24.4	26.0	28.9	29.9				28.1	43.5	43.4	No
Under 25s repeat abortions %	30.1	30.9	27.6	31.3	28.0	31.6						31.3	29.7	28.9	No
Under 18s conception rate / 1,000	21.5	16.1	15.7	14.1	12.9	11						9.1	13.1	11.0	No

Luton Sexual Health Attendance Data – updated quarterly

	25/26			
Consultation speciality	Q1	Q2	Q3	Q4
Integrated STI/SRH care	1140	1207		
STI Care	2071	2119		
SRH Care	377	283		
HIV Care	674	661		
HIV and STI care	157	181		
HIV and SRH care	5	1		
HIV and Integrated care	1	1		
Psychology	65	101		
Other care	107	53		
Total	4597	4607		

		2024-25					2023-24				
Service	**Code**	**Q1**	**Q2**	**Q3**	**Q4**	**Total**	**Q1**	**Q2**	**Q3**	**Q4**	**Total**
Full SH screen including HIV Test	T4	1860	1962	1943	1157	**6922**	1765	1923	1750	1948	**7386**
New HIV Diagnosis	H1	4	1	3	2	**10**	6	9	3	3	**21**
Attendance for HIV related care	H2	841	864	800	869	**3374**	1196	1352	1467	741	**4756**
Late HIV Diagnosis	H1B	1	1	0	1	**3**	0	6	3	0	**9**
Contraception	SRH	917	947	810	1625	**4299**	871	906	825	825	**3427**
Child Sex Exploitation	CSE	3	0	0	0	**3**	0	0	0	0	**0**
Female Genital Mutilation	FGM	4	2	3	1	**10**	4	6	1	5	**16**
Outreach Clinic Attendance		27	30	0	12	**69**	30	68		183	**281**
Total		**3657**	**3807**	**3559**	**3667**	**14690**	**3872**	**4270**	**4049**	**3705**	**15896**