

Title of proposed EIA	Sexual and Reproductive Health Strategy 2023-2030
Reference No	EQUA1109
EA is in support of	New Strategy
Review Frequency	Annually
Date of first review	20/03/2024
Directorate	Strategy Equality and Partnerships
Division	Public Health
Service Area	Sexual and Reproductive Health
Responsible Officer(s)	<a href="#">Lottie Drury</a>
Quality Control Officer(s)	<a href="#">Juliet Grainger</a>
Accountable Officer(s)	<a href="#">Becky Pollard</a>
Purpose of proposal	To approve the Sexual & Reproductive Health Strategy 2023-2030 so it can be used to inform the procurement of the service post March 2024.
Data sources	Survey(s); Consultation Results; Other (please specify)
Please include any other sources of data	<a href="#">Sexual and Reproductive Health Needs Assessment</a> and feedback from the <a href="#">public and stakeholder consultation</a>
ASSESS THE IMPACT AGAINST THE PROTECTED CHARACTERISTICS	
Protected characteristic: Age	Service Users / Stakeholders; Wider Community
Age details:	The Sexual Health Strategy specifies that the service will be universally accessible to all ages within the legal framework for sexual consent and will therefore have a positive impact on this protected characteristic. Some of the specific actions recommended in the strategy are targeted at vulnerable and most at-risk populations, including those under 25 years of age. The system will also maintain a focus on the needs of Young

People and will further develop the service response to groups of Young People with greatest needs e.g. Looked after Children and Care Leavers. Guidance recommends that specific services are made available to Young People as evidence indicates this age group is more at risk of poor sexual health. Improved access to contraceptive services and larger volumes of young women using the most effective contraception will be achieved through redesigning the local approach. The National Chlamydia Screening Programme (NCSP) has changed focus by promoting screening for young women on change of partner or annually. The National Human Papillomavirus (HPV) vaccination programme is also benefiting girls and boys in terms of a reduction in genital warts. The strategy also identifies the needs for an Under 13s pathway to be developed.

Protected characteristic: Disability

Service Users / Stakeholders; Wider Community

Disability details:

This strategy will have a neutral impact on disabilities. The service will be contracted to meet all requirements around the Equality Act 2010 to ensure their services are accessible to disabled people. The service specification will outline in detail the requirements for the service to comply with the Equality Act 2010 and the Public Sector Equality Duty and ensure that all staff are trained and competent in equality and diversity issues.

Protected characteristic: Sex

Service Users / Stakeholders; Wider Community

Gender details:

Publishing the strategy will have a positive impact on this protected characteristic. The service will need to demonstrate that it is contributing to the delivery of local priorities, including those that focus on meeting the particular needs of women, men and those who identify as non-binary. The service will identify those being, or at risk of being, sexually exploited and aim to reduce health inequalities for people who experience poor sexual health, including MSM (men who have sex with men), lesbians, bi-sexual women and transgender people. An objective is to ensure that robust safeguarding arrangements are in place, which includes issues such as sexual exploitation and FGM (female genital mutilation) which disproportionately affects women and girls. Dedicated staffing that is configured in response to domestic violence and sexual violence will be available

and explicit care pathways of support will be made available. Men who have sex with men are targeted through outreach to ensure sexual health needs are addressed.

Protected characteristics: Gender Reassignment

Service Users / Stakeholders; Wider Community

Gender reassignment details:

The strategy is likely to have a neutral impact on this protected characteristic. The service will provide an open access service that will be made available to the population of Birmingham including this protected group and those who suffer from gender dysphoria. The service will be expected to meet all service user needs by taking account of equality, discrimination and good relations between protected groups in the way that it delivers services, buys goods and services and employs people.

Protected characteristics: Marriage and Civil Partnership

Service Users/ Stakeholders; Wider Community

Marriage and civil partnership details:

The strategy is likely to have a neutral impact on this protected characteristic. The service will provide an open access service that will be made available to the population of Birmingham including this protected group.

Protected characteristics: Pregnancy and Maternity

Service Users / Stakeholders; Wider Community

Pregnancy and maternity details:

The strategy will have a positive impact on this protected characteristic. The sets out actions to reduce unintended conceptions in all ages and repeat terminations through a range of measures including increased availability, uptake and continuing use of long-acting reversible contraception methods (LARC), have a clear referral pathway to abortion providers (not commissioned by the LA) by liaising with those providers to ensure prompt contraception provision following termination.

Protected characteristics: Race

Service Users / Stakeholders; Wider Community

Race details:

The strategy will have a positive impact on this protected characteristic. It will inform a service that is contributing

to the delivery of local sexual health priorities, including those that focus on particular groups within ethnically diverse communities. The service will also work to increase uptake of HIV testing, and to reduce late HIV diagnoses and new infections amongst groups who are most affected, including black African people.

Protected characteristics: Religion or Beliefs

Service Users / Stakeholders; Wider Community

Religion or beliefs details:

The integrated sexual health service will have a neutral impact on this protected characteristic. The service will provide an open access service that will be made available to the population of Birmingham including those who follow different religions or beliefs, or those with no religion or belief. The service will be contracted to meet all requirements of the Equality Act 2010 to ensure services are accessible. The specification outlines in detail the requirements to the service which is expected to comply with the Equality Act 2010 and the Public Sector Equality Duty and ensure that their staff is trained and competent in equality and diversity issues.

Protected characteristics: Sexual Orientation

Service Users / Stakeholders; Wider Community

Sexual orientation details:

The sexual health service will have a positive impact on this protected characteristic. The service will be expected to provide an open access service to the population of Birmingham, including people who are gay, lesbian, bisexual or heterosexual and to support their sexual health needs.

Socio-economic impacts

The strategy informs an open access and integrated sexual health service, it must be accessible to all patients eligible for free NHS treatment, irrespective of their place of residence and socio-economic status.

a) A particular focus on prevention and sexual health promotion among young people – for example, improving relationships and sex education (RSE) and ensuring provision of free contraception and condoms.

b) A specific objective in the contract to meet the needs of people from high risk groups, including young people, people from black ethnic groups, people who identify as LGBT and people with disabilities.

c) Strengthening community-based services and consideration of alternative methods of service delivery, such as online services and self-testing – with the aim of reducing stigma and encouraging greater use of services, particularly by men and young people.

Please indicate any actions arising from completing this screening exercise.

1. This assessment will inform the approval of the Strategy which will inform the development of the service specification

2. If procurement through tendering is utilised as part of identifying and agreeing a provider, the evaluation panel of submitted bids will need to be satisfied that proposals address the equality characteristics identified in this EIA.

3. To monitor the performance/ delivery of the contract from an equality perspective to minimise the chance of unintended negative outcomes for individuals/groups with protected characteristics.

Please indicate whether a full impact assessment is recommended

NO

What data has been collected to facilitate the assessment of this policy/proposal?

Sexual Health Needs assessment 2021 and subsequent consultation on the Birmingham and Solihull Sexual and Reproductive Health Strategy 2023 – 2030 during May - July 2022

Consultation analysis

Public Consultation Report Summary:

The consultation was undertaken to provide assurance that the sexual health strategy adequately reflected the findings of the needs assessment and incorporated public and stakeholder feedback

Agreement for the strategy's vision and aims was unanimous, with only a few areas being identified as possible gaps -male sexual health education, mental health aspects of sexual health, older people and primary care as a vehicle to deliver improvements in localities.

In response to the themes in the strategy, the key feedback was on

priority groups including integrating sexually transmitted infection and contraceptive advice as an important aspect of prioritizing women who may be vulnerable due to termination of pregnancy, sexual violence, domestic abuse, or cultural and language issues. In addition, building on practitioners' knowledge of the motivation of different client groups e.g. Gay men, Trans community and those with Gender dysmorphia for attending clinic could be used to increase opportunistic sexual health screening and uptake of PrEP.

In terms of younger people, a need for services and pathways tailored to the needs of vulnerable groups (i.e. under 13s, young Sexual Assault victims, Children in Care or foster homes) was highlighted. This will need to incorporate a wider system response to ensure legal, safeguarding and appropriate medical interventions are provided to children under the age of legal consent. Gillick competency and Fraser guidelines are the national standards that sexual health and children and young peoples services work to in order to balance the needs and wishes of the child and the responsibility to keep them safe.

The model that will be developed and used to deliver health services for Birmingham and Solihull in the future will be informed by the feedback received from the consultation

Adverse impact on any people with protected characteristics.

No

Could the policy/proposal be modified to reduce or eliminate any adverse impact?

How will the effect(s) of this policy/proposal on equality be monitored?

Via the public contracting process. Any procurement exercise approved will include evidence of equalities compliance. Contract monitoring will also include equalities monitoring and service user feedback

What data is required in the future?	Service activity and demographic data as well as patient feedback
Are there any adverse impacts on any particular group(s)	No
If yes, please explain your reasons for going ahead.	
Initial equality impact assessment of your proposal	The sexual health needs assessment, strategy and consultation findings have highlighted areas that we will seek to improve via our commissioning processes. These will include gender specific priorities around increased access to contraception for women, awareness raising around sexual health, relationships and behaviours in the male population and improved pathways for LGBTQ communities and older and young people
Consulted People or Groups	<p>As part of the needs assessment during 2021, consultation and engagement was undertaken across Birmingham and Solihull with the community, as well as 130 professionals, and practitioners. The aim of this was to find out what was working well as part of the delivery of sexual and reproductive health services and Genito-urinary Medicine (GUM) clinics and where there were areas for development. The public were also asked about their sexual health behaviours and experiences of services and we received 106 responses.</p> <p>We also consulted on the draft sexual health strategy between May – July 2022. There were 77 responses to the online survey. In addition, one focus group was held with 35 community representatives, and a second with a total of 8 community members and professionals from across Birmingham and Solihull. A workshop was then held with 45 members of staff from the sexual health service.</p>
Informed People or Groups	A presentation on the strategy was provided to primary care via the general practice peer support team chaired by the Local Medical Committee. This was attended by 75 primary care leads.

Summary and evidence of findings from your EIA [Sexual and Reproductive Health Needs Assessment](#) and [public and stakeholder consultation](#)

#### QUALITY CONTROL SECTION

Submit to the Quality Control Officer for reviewing? No

Quality Control Officer comments Content reviewed as comprehensive. An assurance process has been followed, HWBB Sept 22 received and approved the consultation findings. Revisions were subsequently made to the strategy which will now be recommended for Cabinet approval

Decision by Quality Control Officer Proceed for final approval

Submit draft to Accountable Officer? Yes

Decision by Accountable Officer Approve

Date approved / rejected by the Accountable Officer 21/03/2023

Reasons for approval or rejection

Please print and save a PDF copy for your records Yes