Sexual & reproductive healthcare outcomes among those at risk of child sexual exploitation: a retrospective review

Seán Cassidy¹, Neylya Solomons¹, Sophie Forsyth², Sophie Herbert³, Sophie Ramsden², Richard West⁴, Kimberley Forbes⁴

¹Chelsea & Westminster Hospital NHS Foundation Trust, ²Great Western Hospitals Foundation NHS Trust Swindon, ³Northamptonshire Integrated Sexual Health Kettering, ⁴Sexual Health Hounslow

Introduction

The purpose of Multi-Agency Sexual Exploitation (MASE) panels is to consider cases of high risk victims and offenders in relation to Child Sexual Exploitation (CSE) and the criminal justice response to offenders. The Department for Education guidance on CSE highlights the need for early information sharing and multi-agency working to prevent and respond to concerns about CSE.¹

In this review the authors aimed to investigate the reasons why young people at risk of CSE attended SRH services, and the level of morbidity around STI diagnosis and unintended pregnancy. They also looked at offer and uptake of long-term contraception in females.

Methods

The authors undertook a retrospective review of a selection of MASE cohorts from 2016 from three SRH services across England. The names of young people were cross-referenced with the SRH clinic system in the locality to determine if they had accessed the service. Information was collected on reason for attendance, sexual health screening, contraception and gravidity. Data was analysed using pivot tables in Excel.

Results

Of 147 young people discussed at MASE panel, 88 (59.9%) were known to SRH services. The age range was 12-19 (median 16) and 89.7% (79/88) were female.

83% (73/88) of young people attending SRH underwent testing for chlamydia and gonorrhoea. 58% (51/88) were tested for HIV and syphilis. No new cases of HIV or syphilis were detected in our cohorts.

26% (23/88) of our cohort had at least one chlamydia diagnosis with 29 episodes in 23 individuals. 8% had at least one diagnosis of gonorrhoea with 9 episodes among 8 individuals. There was one diagnosis of trichomonas.

Number of STI Diagnoses

Contraception was discussed with 94.9% (75/79) of female patients and method of contraception was documented in 58.2% (46/79). Fifteen pregnancies were reported in thirteen females with 8 resulting in termination.

Method of contraception used by female patients

Discussion

Rates of chlamydial infection and unintended pregnancy were high among the MASE cohorts reviewed. Those attending SRH services had good uptake of STI testing and contraception was discussed with almost all young women.

Recommendations

- Consider representation of SRH services at MASE meetings which may improve engagement with SRH services
- Explore the role of the Chlamydia Screening Programme role in improving STI screening of this high risk group via engagement with the panel of providers who attend MASE
- Offer point-of-care testing opportunistically for both HIV and syphilis ensuring skill mix and staffing can support the delivery of positive results
- Further work should explore how SRH services can best work within a network of agencies to prevent and respond to concerns about CSE; in particular, enabling early sharing of confidential information gathered during SRH consultations which may not meet safeguarding referral thresholds but which may provide useful intelligence.

References

1. Department for Education. Child Sexual Exploitation (2017). https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/591903/CSE_Guidance_Core_Document_13.02.2017.pdf [Accessed on 8th June 2017.]

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Swindon Sexual Health

Northamptonshire Healthcare
NHS Foundation Trust

Chelsea and Westminster Hospital

NHS Foundation Trust