

Sexual Health: what's changed?

Exploring the current picture of sexual health knowledge and access to services in Sheffield's youth homeless hostels



Contents

Summary	1
Background	2
What's new in Sexual Health Sheffield?	3
What did we do?	4
Findings: Resident survey	6
Findings: staff survey	13
Sexual health activity day	15
Conclusion	16

Summary

This project was undertaken by two medical students from The University of Sheffield, who were on placement with us in November and December 2024. Their work builds on a previous project in 2023 which found many barriers to sexual health knowledge and services. The aim was to get a current picture of young people living in hostels' knowledge of sexual health, and their access to sexual health services, whilst considering the impact of the previous report we produced with Sheffield Foyer.



Medical students Philippa Bennett and Riya James

We surveyed residents and staff in supported accommodation for homeless young people. We wanted to understand their level of knowledge about sexual health topics, and whether they are able to access the sexual health services and support they need.

Key findings:

- There were knowledge gaps among residents, particularly around signs and symptoms of Sexually Transmitted Infections (STIs), and who might be at risk.
- Work has been done to tackle the major barrier of travel to sexual health services, with more support delivered on-site. The biggest remaining barriers to accessing support include embarrassment and fear of judgement.
- Staff highlighted the need for further sexual health training to improve the support they provide to residents, and easier access to resources like condoms and pregnancy tests.

While there has been good progress supporting residents of the hostels to access support around sexual health, there are additional actions which could take this further, including more on-site services and educational outreach.

Thanks

We would like to thank all the young people who took the time to speak to us, along with staff at Sheffield Foyer, Cherrytree Support Services, and Roundabout Homeless Charity who spoke with us and allowed us to visit their services.

Background

In May 2023 Healthwatch Sheffield funded Sheffield Foyer to carry out a #SpeakUp project. The project explored the barriers faced by homeless young adults at Sheffield Foyer – temporary supported accommodation for people aged 16-25 – in accessing Sexual Health Services. They supported 21 residents to fill in a survey asking them about their understanding of sexual health and the barriers they faced. An activity day was also hosted to allow residents to engage with the topic in a different way and had positive feedback from residents.

The survey found that there was a lack of knowledge around STIs and contraception, as well as where to go for information about safe sex. The survey also highlighted some of the barriers that the residents faced, namely transport. Other barriers mentioned by residents were not having someone to accompany them and being afraid of what the results might be.

In October 2023 we organised a roundtable discussion to follow up on these findings, explore them in more detail, and identify practical actions to improve people's access to sexual health care and support. This was attended by representatives from Public Health in Sheffield City Council, Primary Care Sheffield, Sexual health Sheffield, and staff from Sheffield Foyer and Cherrytree Support Services (youth homeless hostels).

The initial report, the joint response from services, and notes from the roundtable discussion report can be found on our website.¹

Recommendations for improvement included:

- More proactive work educating residents about sexual health
- Bringing services closer and increasing the number of local hubs
- Increasing drop-in services
- Helping people understand where to access different services
- Funding or supporting travel to appointments
- Staff training around sexual health advice and testing administration
- Increased self-testing kits provided in community settings

¹ <https://www.healthwatchsheffield.co.uk/report/2023-06-08/speakup-sheffield-foyer>



Why did we carry out this project?

A year on, we want to know the impact of the previous report and how the current picture of homeless young people's knowledge and access to sexual health services has changed.

What's new in Sexual Health Sheffield?

At the beginning of this project, we consulted the Health Promotion Team at Sexual Health Sheffield, and the Sexual Health Commissioning Officers at Sheffield City Council to find out how service delivery has changed in the last year. They shared the following updates:

- **Staff Training:** One-day training sessions for supported accommodation staff covered sexual health updates and how to discuss contraception/ STIs with residents. Around 20 attendees joined from the different hostels. The Sexual Health Sheffield team also attend health events hosted by Sheffield Foyer.
- **Testing Kits:** The health inclusion nurse who visits the hostels can now offer chlamydia, gonorrhoea, and pregnancy self-testing kits—hugely popular among residents. These are available for all residents while the nurse is on-site (which is weekly at some hostels and fortnightly at others). There are also hopes that on-site blood testing could be reintroduced, to screen for syphilis and HIV too.
- **Drop-In Clinics:** The sexual health clinic at Royal Hallamshire Hospital is now open for drop-ins during all opening hours (previously there were specific drop-in time slots), making getting appointments easier. The service is also in the process of creating virtual tours and social media campaigns, aiming to reduce anxiety about visiting clinics and increase awareness.
- **Self-Testing Kits Online:** Access issues for online kits are being simplified with a new direct source being established. However, the team emphasises the importance of young people actively visiting clinics to take health responsibility seriously.
- **Language barriers:** The Sexual Health Sheffield website now includes a translation tool, to provide the information in other languages.
- **Outreach Van:** A new sexual health van launching soon will offer testing and advice in "hard-to-reach" areas, and is funded for two years. The public are currently being consulted on what the van will look like, and what services it will provide.
- **Resources:** Free condoms, lubrication, and updated posters/information are supplied to supported accommodations every three months, and they can request more when needed. Staff from the accommodations collect these supplies from the central clinic.

What did we do?

We went to 3 different hostels: Roundabout Homeless Charity, Sheffield Foyer and CherryTree Support Service, to capture a wider variety of experiences.

These hostels are temporary accommodation for homeless people aged 16 to 25. Their aim is to find people independent accommodation within 6 months, though some residents stay for longer. The residents we spoke to will not be those who were surveyed last year.

We provided an online and paper version of a resident’s survey. The questions covered people’s knowledge around sexual health and available services. We also distributed a staff survey, asking about their concerns, and barriers to promoting sexual health.

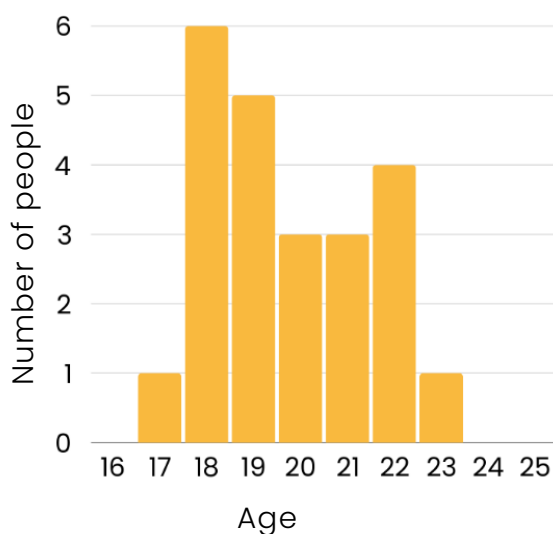
26 residents (5 from Roundabout, 6 from Cherrytree, and 15 from Sheffield Foyer) completed the surveys and we further explored their ideas after the survey to gain more in-depth insight.

15 members of staff completed the staff survey and provided recommendations for improvement.

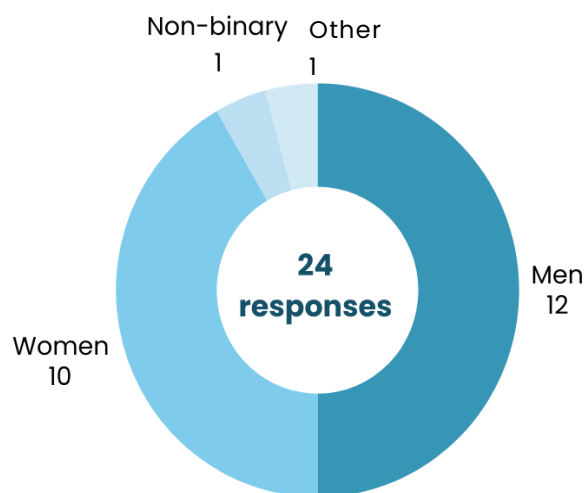
We hosted activity sessions at Cherrytree and Sheffield Foyer. These involved games surrounding STI symptoms and true and false questions about sexual health misconceptions. There is more information about these on page 15.

Resident survey: who did we speak to?

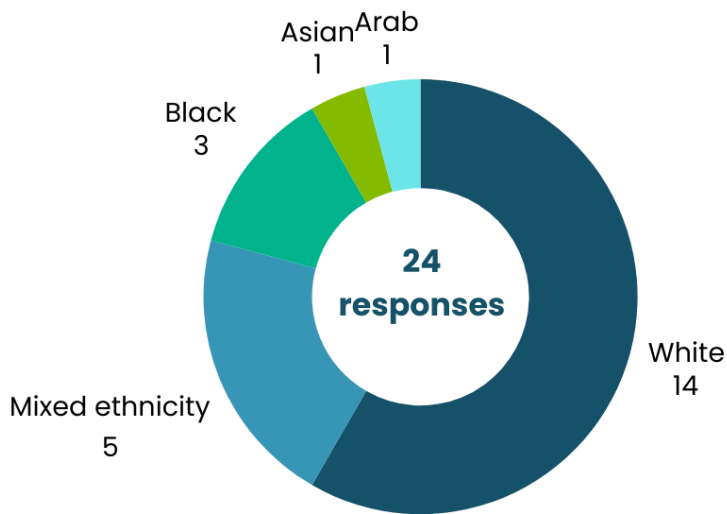
What is your age?



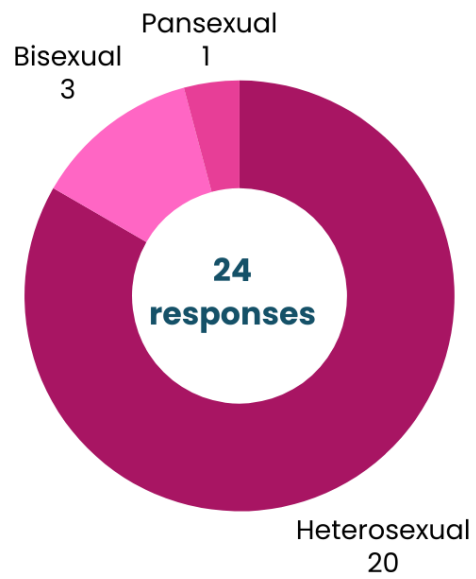
What is your gender?



What is your ethnicity?



What is your sexual orientation?



What is your religion?

No religion	11
Christian	5
Prefer not to say	3
Agnostic	2
Muslim	2
Buddhist	1



2 people identified as a refugee or asylum seeker

Findings: resident survey

Sexual Health Knowledge and Understanding

Like the survey last year, we started by asking respondents how much they felt they knew about certain topics – Sexually Transmitted Infection (STI) transmission, prevention, and symptoms.

In general, most people felt like they had some understanding of each topic, but could learn more.

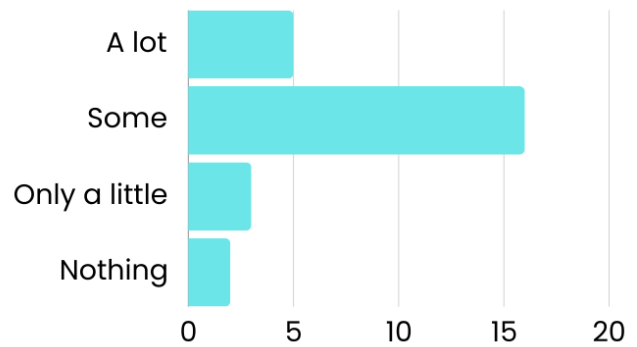
People were most confident with knowledge surrounding STI prevention, and least confident in identifying the signs and symptoms of an STI.

Compared with the previous survey in 2023:

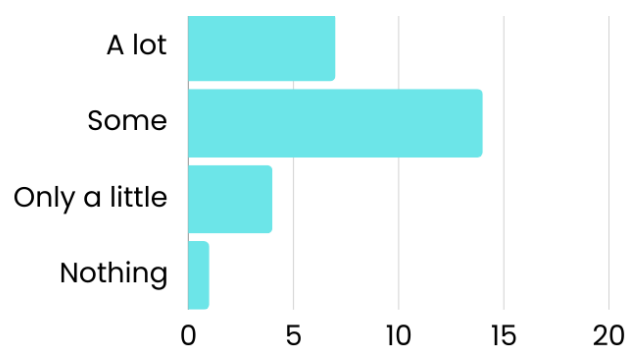
- More people felt confident about their knowledge of how STIs are passed on
- More people felt confident about how to prevent STIs
- People felt about the same about their knowledge of the signs and symptoms of STIs

However, there were still people saying they knew only a little or nothing at all about each of these topics, so further education would be beneficial.

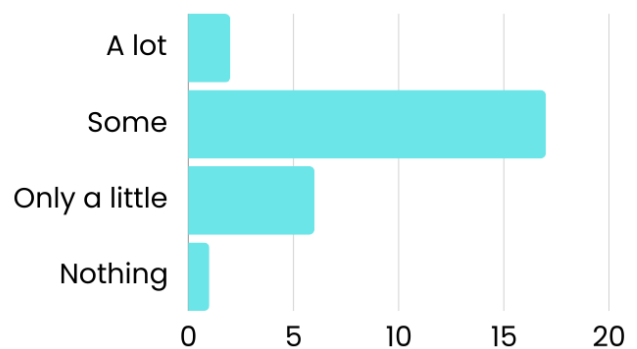
How much do you know about how STIs are passed on?



How much do you know about how to prevent STIs?



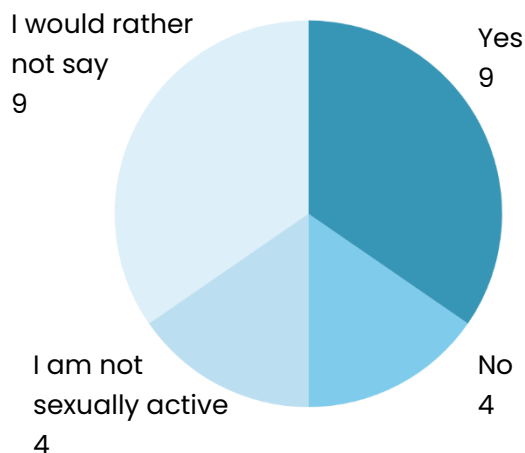
How much do you know about the signs of an STI?



We explored people’s understanding further by asking people whether they were currently having safe sex (using condoms/contraception).

Half of the residents said they were having safe sex, or they weren’t sexually active. However there were also some people who said they were not having safe sex, and a significant number who didn’t feel comfortable answering, highlighting that this can be a difficult topic for some people to talk about.

Are you currently having safe sex?



We also presented some common beliefs and misbeliefs that were presented in the original survey, as well as some additional misconceptions to explore where else people may need further education. We have written whether each statement is true or false below.

All the residents who took part in our survey (26) answered these questions.

Do you agree or disagree with these statements?	Agree	Disagree	Don't know	No answer
STIs are nothing to worry about unless you have sex with lots of people - <i>False</i>	6	15	4	1
Unless you have a lot of sexual partners, you don't need to use condoms - <i>False</i>	2	23	0	1
You can wear two condoms at the same time for extra protection - <i>False</i>	3	18	4	1
Using birth control might make you unable to have children in the future - <i>False</i>	3	5	16	2
You can get the morning after pill to try to prevent a pregnancy - <i>True</i>	20	0	4	2
You need a doctor's prescription to get the morning after pill - <i>False</i>	1	19	5	1

The best way to protect against both STIs and unplanned pregnancies is to use a condom and another form of contraception - <i>True</i>	22	1	2	1
Only LGBTQ+ people or certain ethnic groups are at high risk for STIs - <i>False</i>	8	13	4	1
Alcohol or drugs can 'kill' STIs - <i>False</i>	1	17	7	1
Washing genitals after sex can prevent STIs - <i>False</i>	2	16	6	2

Like the survey last year, we found that there was an understanding that using a condom and another form of contraception was the best way to protect against STIs and unplanned pregnancy.

There also seem to be some improvements in knowledge from the survey last year:

- In 2023, nearly half of people thought that you don't need to worry about STIs unless you have a lot of sexual partners. In our survey this fell to under a quarter of people agreeing.
- In 2023, one third of people believed that you don't need to use condoms unless you have a lot of sexual partners. In our survey this dropped to just 2 out of 26.
- In 2023, nearly half of the respondents thought you needed a doctor's prescription to get the morning after pill. This dropped to just 1 person in our survey.

However, there were also some areas which need further improvement:

- Nearly half of the respondents in the survey last year said that they didn't know whether birth control has an effect on your future fertility. This figure rose to over 60% in our study this year, highlighting that there is still a need for more education in this area.
- Nearly half (12 out of 26) of our respondents were uncertain or agreed that only LGBTQ+ people or certain ethnic groups are at risk for STIs. And over 30% of respondents (8 out of 26) were unsure or agreed that alcohol or drugs can 'kill' STIs, and that washing genitals after sex can prevent STIs. This shows a general lack of understanding of STI prevention and who is at risk.

From further conversations and in group activities with residents after the survey, we found that there was a lack of confidence in their knowledge of STI prevention and symptoms.

Sexual Health Access and Experience

We asked a similar question to the 2023 survey to explore the main barriers that people faced in accessing sexual health services. We expanded the options for potential barriers to further explore the obstacles that people may face. People were able to select multiple options.

5 people stated they had no issues getting tested whatsoever.

Have any of these reasons kept you from getting tested for STIs?	Number of people who selected this option
It is too expensive to get there	1
You are afraid of what people might think	4
You are embarrassed	6
You do not think you are at risk	4
You do not want to know if you have something	2
You do not know what is involved in getting tested	2
You are worried about what the test would involve	1
You do not know where to get tested	0
Language barriers with staff	0
You don't know where to get the right information about getting tests	0
You are unsure whether you have to pay for services	0
You do not have anyone to go with to appointments	1
Other:	Closes too early

Key improvements



There is a marked difference between the number of people saying that travel expense was a barrier, dropping from 6 last year to 1 this year.

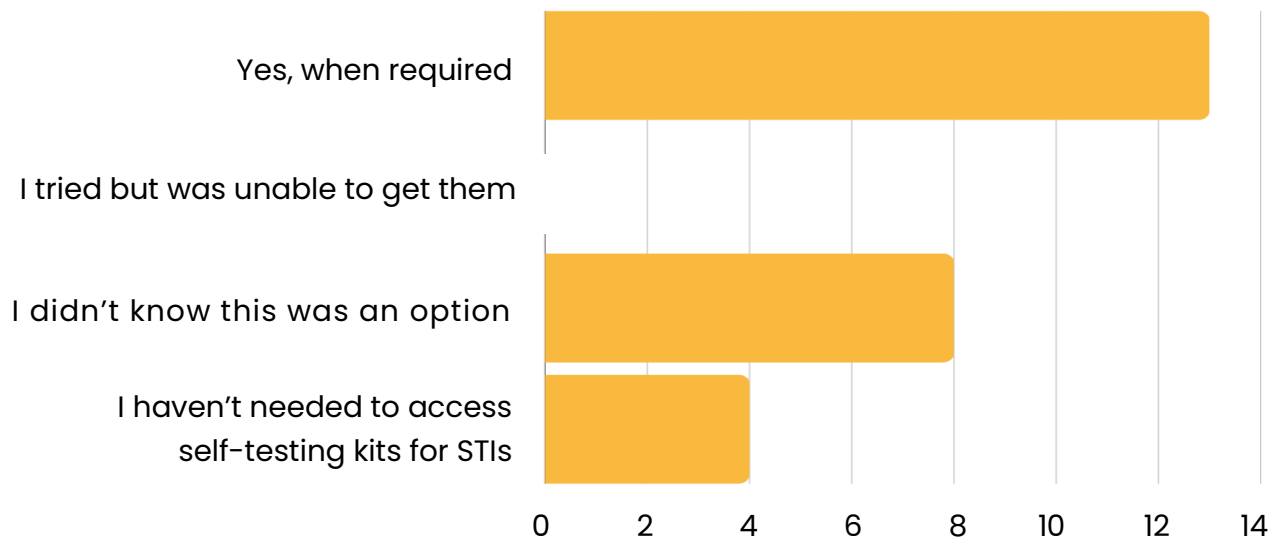
In further discussions with people this was likely due to the inclusion nurse being able to give out self-testing kits directly to residents in the hostel. The residents were very positive about the nurse's visits, saying that they wanted them to visit more frequently.

The major remaining barrier that we identified was **embarrassment** and **being afraid of what people might think**. This highlights that people are afraid of judgement from others and the stigma that surrounds sexual health.

Another positive finding was 5 people stating that they faced no barriers in accessing sexual health services.

After this, respondents were asked about barriers specifically when accessing STI testing:

Have you been able to access free self-testing kits for STIs?



The responses show that many people have been able to access self-testing kits without any problems and no respondent had been unsuccessful when trying to get them. However, 8 of the participants said that they didn't know that free self-testing kits were an option. This could point to a lack of information or advertising of what sexual health services are offered.

We followed this up with a set of questions that further explored people's knowledge of the sexual health services to them and how to access them.

	Yes	No	I don't remember
Have you been offered STI screening at new patient appointments at your GP?	1	18	5
Have you attended any activity days/ events spreading awareness about sexual health services at your hostel?	7	14	3

In discussions with staff members and residents they raised that there had been very few outreach events and activities. One staff member said that there had only been one outreach event since the last survey, and that had been months ago.

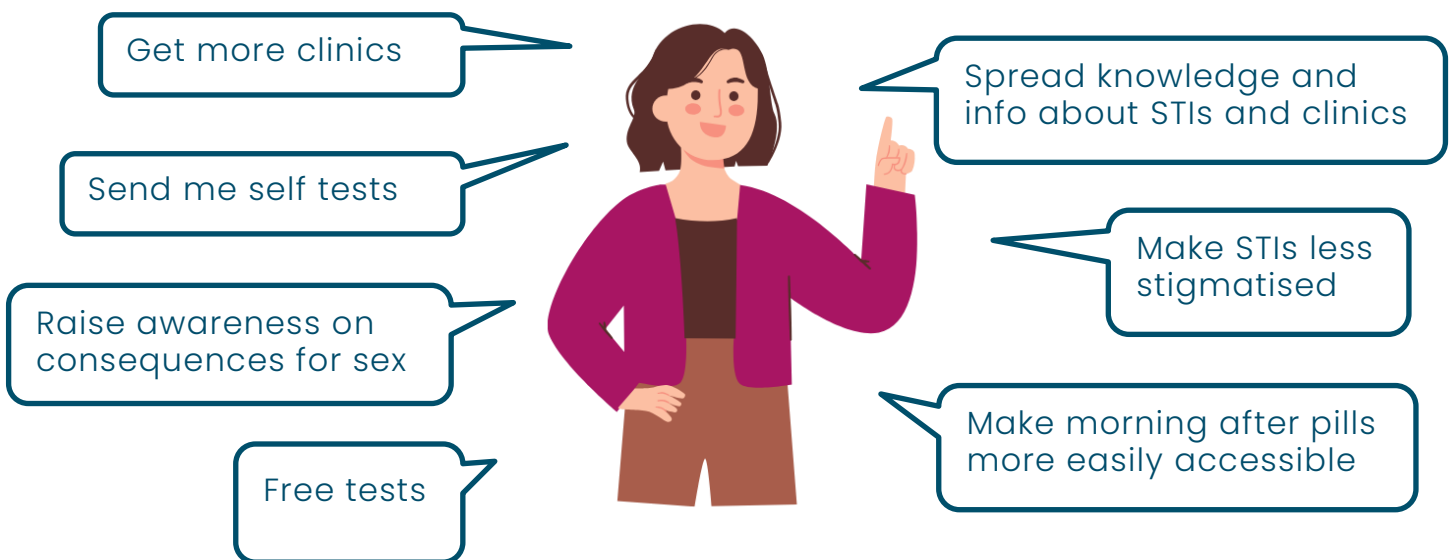
With a high turnover of residents in supported accommodation, these events would need to be held more frequently in order to inform a higher proportion of those living there.

	Yes	No
Do you know where you can go for STI testing?	20	4
Do you know where you can go to get contraception?	20	4

Residents felt that they knew where to go to access both STI testing and contraception. When chatting further with them the knowledge on contraception and how to access it seemed to be better than the knowledge of where to access STI testing.

Finally, we asked 3 questions about changes residents themselves wanted to see.

If you wanted to tell Sexual Health Sheffield one thing about changes you wanted, what would you say?



How would you prefer to contact Sexual Health services?



What would be your ideal sexual health service?

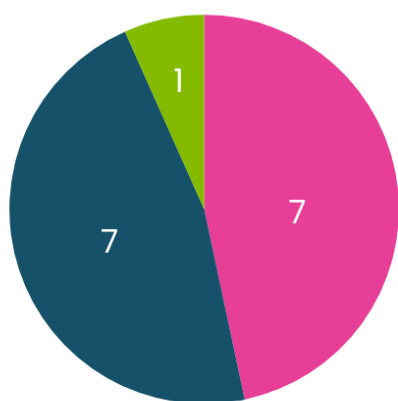


Findings: staff survey

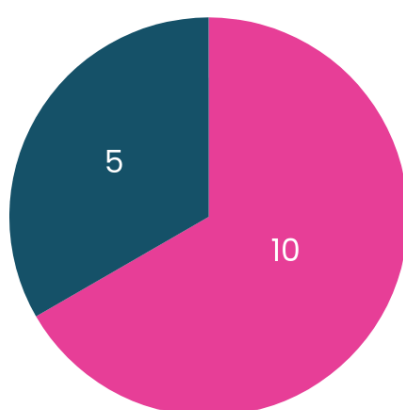
Staff members in supported accommodation play a key role in supporting residents to access information and support for their health. We asked how confident they felt about different aspects relating to sexual health.

How confident do you feel in...

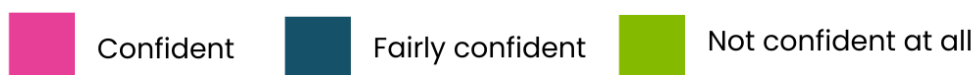
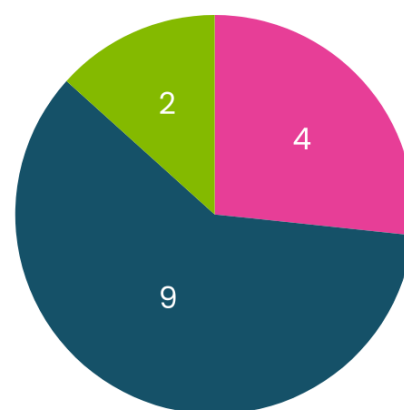
...signposting young people to sexual health information?



...signposting young people to sexual health testing kits and contraception?



...your knowledge about signs and symptoms of STIs?



15 staff members at the three supported accommodations filled in our staff survey, which also asked about training they've received, support they would like, their concerns about residents and sexual health, and their ideas for improvement.

- **Confidence levels:** As seen above, staff were least confident in identifying STI symptoms, and most confident in signposting young people to STI and pregnancy testing. Confidence in providing sexual health information was varied.
- **Training gap:** None of the staff had attended sexual health training in the past year. Four mentioned that training would improve their confidence in discussing sexual health, ultimately benefiting young people's knowledge and access to services. "There used to be a lot of different topic ones [training sessions]. General refreshers would be good", "Sexual health training specifically aimed at 16-21 year olds with advise on how to approach what is usually a taboo subject for a lot of our residents"

- **Staff needs:** The most requested resources were free condoms and STI/pregnancy testing kits. Although Sheffield Foyer mentioned receiving free resources, staff at other hostels we visited were not familiar with this concept. On-site visits from Sexual Health Sheffield were also suggested. "Be able to do STI and pregnancy tests", "Onsite clinic/once a week clinic"
- **Challenges identified:** Accessibility was the biggest concern, with limited locations cited as a barrier. Embarrassment and lack of awareness about STI risks and unplanned pregnancies were also major issues among residents. "I feel they are embarrassed to go to health services and would prefer to do it at home", "Often reluctant to go to sexual health centres and can often find it embarrassing and concerned others will see them there"



Ideas for improvement from staff

As well as identifying training and resource needs, staff recommended increasing accessibility through more hubs, on-site clinics, visits, and ways to awareness about drop-in services and locations.

"There used to be lots of drop-in services around Sheffield. This is now more restricted. Needs to be lots of choice on where they can go"

"Clear short information. Fun youth friendly posters with key information"

"Sexual health updates"

"Make getting appointments easier + quicker"

"Use local GPs"

"Have drop in sessions at supported accommodation"

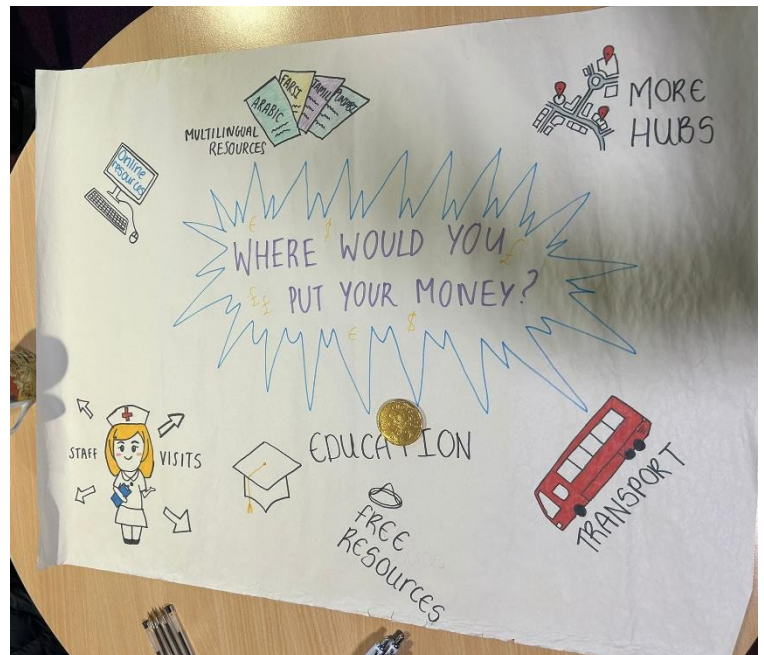
"Awareness sessions, outreach sessions"

Sexual health activity day

We helped to run an activity day at Sheffield Foyer, and some activities at Cherrytree Mickley Lane hostel. This was enjoyed by the residents who actively engaged with the games and discussions. There were 15 participants at the Foyer and 6 at Cherrytree.

The activities increased education about STIs and explored some survey questions about their opinions.

- Drunken condom challenge – residents wore ‘drunken goggles’ and were timed putting a condom on an applicator
- Wheel of STI – if the residents’ spin landed on an STI, they had to look at various symptoms and locate one which was correct for that STI
- True or false- the common misconceptions surrounding sexual health were stated and residents held up red or green cards to agree or disagree
- Chocolate funding- residents were given a chocolate coin and had to choose one element they would fund if they oversaw Sexual Health Sheffield.



Conclusion

The findings highlight key areas of improvement, as well as issues that remain in place:

- **More residents had good understanding of sexual health, but knowledge gaps still exist** – especially in recognising STI symptoms. Misconceptions around STI prevention (e.g., using alcohol or washing genitals to prevent STIs) and birth control's impact on fertility also remain prevalent.
- **Accessibility improvements have reduced logistical barriers.** This includes the health inclusion nurse's ability to provide self-testing kits. As a result, travel is no longer the largest barrier to the young people accessing sexual health support.
- **Embarrassment and fear of judgment** remain significant obstacles to accessing services.
- **Staff training is a key area for development.** Staff in the hostels expressed a need for training and a willingness to undertake it. Although some training has been delivered, a significant number of staff had not yet accessed this.
- **Staff highlighted the need for resources** like condoms, STI testing kits, and pregnancy tests to better support young people. Some were unaware of the offer of free provision from Sexual Health Sheffield, or unable to regularly collect resources from the city centre.

Overall, the findings underscore the importance of continued outreach, education, and resource provision to address knowledge gaps and remove barriers to sexual health services.

We have suggested actions which could improve sexual health and wellbeing for residents in young people's hostels:


- **Awareness of services:** Promotion of the upcoming sexual health van as a solution for accessibility and lack of education
- **Awareness of services:** Promotion of the availability of drop-in STI testing and locations
- **Accessibility improvements:** Continue to support delivery of on-site services, and consider how this could expand in the future (e.g. the feasibility of blood testing)
- **Staff training:** A rolling programme of staff training sessions tackling signs of STIs, available services and updates so that more staff can attend and utilise the training. Regular contact with supported accommodation staff could help to understand why many have not yet been able to undertake the training offer – whether due to frequency, communication about the training, or operational/delivery pressures in the hostels.


- **Resources:** Further promotion of the resources that hostels and similar organisations can access for free. Consider flexible collection or even delivery options to facilitate organisations from across the city to take part in this scheme.
- **Education:** More interactive activity days at hostels to educate young people about sexual health and available services. Increased frequency to ensure that new residents don't miss out on the educational opportunities.

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