

# JSNA Health and Wellbeing Profile 2025/26

## Sexual and Reproductive Health

Efforts to improve the sexual health of the population are a public health priority. Sexually transmitted infections (STIs) are preventable but can have lasting long-term health implications if not treated (including pelvic inflammatory disease, infertility and ectopic pregnancy).

Prevention of unintended pregnancies and control over reproductive choices preserves good mental and psychosexual health and leads to better outcomes for babies. Poor relationships can have a lasting effect on an individual's mental wellbeing, self-esteem, and confidence.

In Bristol, STI rates remain relatively high and teenage conceptions have increased for the first time in over a decade.

Bristol has a young population compared to England. The city is ethnically diverse with areas of high deprivation and a large lesbian, gay, bisexual and trans (LGBTQ+) community giving rise to greater needs around sexual health and wellbeing.

### Summary points

- Bristol has high crude rates of STIs which are significantly higher than England's. This is reflective of a relatively young, diverse, urban population. In 2024, there were 3,640 new STIs diagnosed in sexual health services.
- When chlamydia in young people under 25 is excluded from the figures, there were 2,652 new diagnoses of STIs.
- Chlamydia is the most commonly diagnosed STI in England and in Bristol- and accounted for 1,804 (half of all STIs) in 2024. This number is similar to 2023.
- There were 691 diagnoses of gonorrhoea reported in 2024 which is a decrease since 2023, however rates remain much higher than they were a decade ago.
- There were 49 diagnoses of syphilis in 2024, which is lower than recent years and the rate is currently significantly lower than that of England and the lowest among our group of similar areas.
- Rates of STIs are higher in mixed and Black ethnic groups but considering the ethnic diversity of Bristol, local rates are not as high as expected amongst these populations suggesting barriers to accessing services.
- Teenage conception rates remain low with 93 conceptions in under 18s in 2022
- There were 7,190 prescriptions of long-acting reversible contraception (coils and implants) in 2023, an increase compared to the previous year, but rates are still lower than pre-covid. Most of these are prescribed in primary care.
- Abortion rates in Bristol increased by 30% in 2022, having previously been stable and relatively low.

### Sexually transmitted infections (STIs)

Bristol has a large proportion of young people and continues to have relatively high crude rates of diagnosed STIs. In 2024, there were 3,640 new STIs diagnosed in sexual health services in Bristol, a rate of 754.0 per 100,000 (compared to 632.0 per 100,000 in England). Excluding chlamydia in under 25-year-olds there were 2,652 new STIs diagnosed in sexual health services, a rate of 549.0 per 100,000 population, higher than the rate of 482.0 per 100,000 in England (Figure 1). This reflects a continued decrease from pre-pandemic levels. When age is

taken into account, Bristol's overall age standardised rate for people is lower than England's rate, but there is no significant difference when looking at only females (Figure 2).

Testing rates and diagnosis rates are closely linked. Overall testing rates have increased since 2012, with a decline during the COVID-19 pandemic which is gradually recovering. In 2024 there were 25,410 STI tests (excluding chlamydia screening for under 25s) carried out in sexual health services, a rate of 5260.9 per 100,000. This is higher than the England rate of 4,088.8 per 100,000.

STI rates in Bristol remain highest in young people aged 15 to 24 years, Black ethnic groups and men who have sex with men.

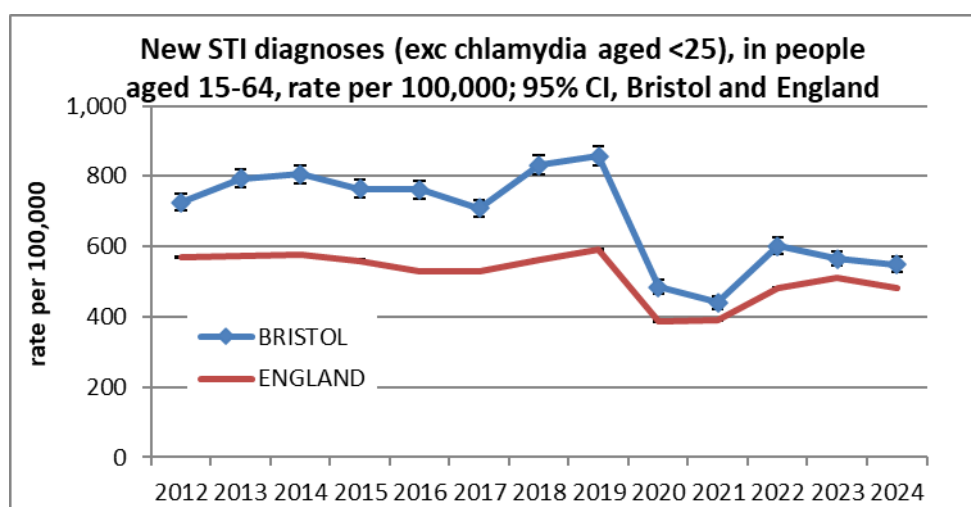


Figure 1: New STI diagnoses (excl. chlamydia aged <25) in people aged 15-64, crude rate per 100,000 population with 95% confidence intervals, Bristol and England. Source: OHID Sexual and Reproductive Health Profiles, July 2025.

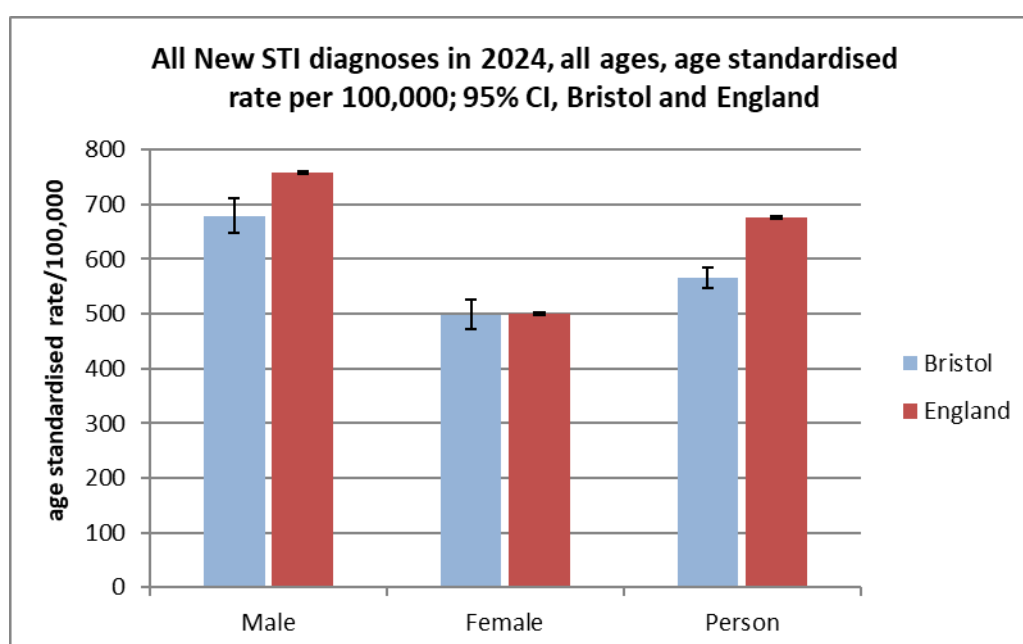


Figure 2: All new STI diagnoses, age standardised rate per 100,000 with 95% confidence intervals, Bristol and England 2024. Source: GUMCAD surveillance system, UK Health Security Agency, ONS population estimates 2024.

## Chlamydia

Chlamydia is the most common STI, it is especially prevalent in young people under 25 but often has no symptoms. The harms of not treating chlamydia are most experienced by women, and there is a national opportunistic chlamydia screening programme for young women to reduce these harms.

There were 1,804 diagnoses of chlamydia in Bristol in all ages in 2024 (a rate of 374.0 per 100,000), which was similar to 2023. England saw a reduction in chlamydia diagnosis rates in the same period and Bristol's rate remains higher than the national rate of 293.0 per 100,000.

More detail on chlamydia can be found here: [Chlamydia JSNA section](#)

## Gonorrhoea

Gonorrhoea is the second most common STI after chlamydia. Men who have sex with men are at high risk for gonorrhoea but in recent years rates have increased amongst the young heterosexual population.

It is a bacterial infection which is treated with antibiotics, but increasing resistance to these antibiotics is a national concern.

Gonorrhoea rates in Bristol and England reached a record high in 2023. But in 2024, cases in Bristol decreased from 884 to 691 (rates of 183.0 to 143.0 per 100,000). This rate remains higher than England's average of 124.0 per 100,000 (Figure 4).

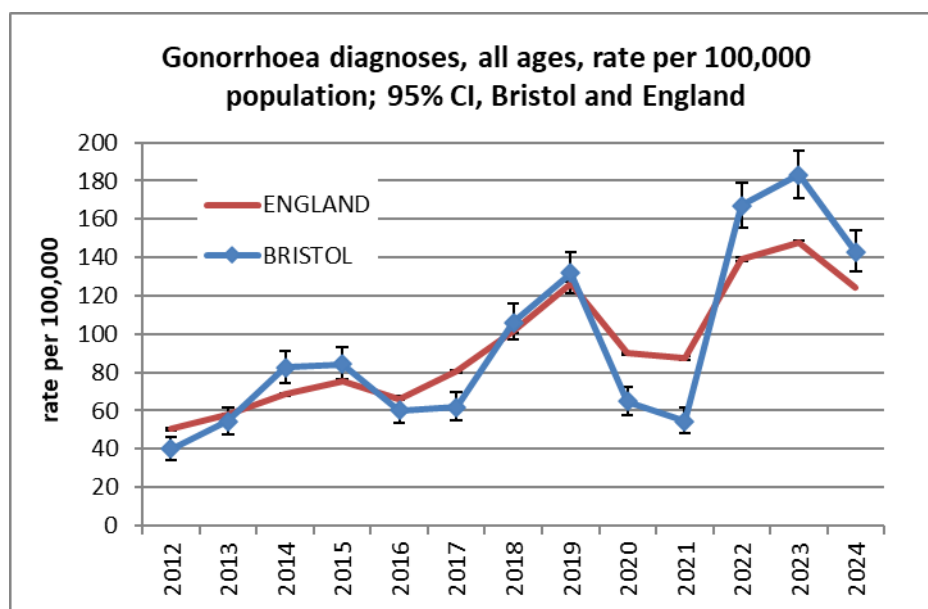


Figure 4: Gonorrhoea diagnoses, crude rate per 100,000 population with 95% confidence intervals, Bristol and England. Source: OHID Sexual and Reproductive Health Profiles, July 2025.

## Genital Herpes

Herpes is caused by the herpes simplex virus (HSV). There were 225 diagnoses of genital herpes in Bristol in 2024 (46.6 per 100,000), which is not significantly different from the England average of 48.3 per 100,000.

## Genital Warts

Genital warts are caused by the human papillomavirus (HPV). Most people with the virus are unaware they have it and do not have any problems. The HPV vaccine protects against the types of HPV that cause most cases of genital warts and rates of diagnoses of genital warts have been steadily declining since its introduction. There were 264 diagnoses of warts in our sexual health services in 2024, the same as 2023, giving a rate higher than the England average (54.7 per 100,000 vs 43.4).

## Syphilis

Syphilis is a bacterial infection which disproportionately affects gay, bisexual and other men who have sex with men. Although England saw a further increase in syphilis diagnoses in 2024, in Bristol there were only 49 diagnoses, a rate of 10.1 per 100,000 (significantly lower than England's rate of 16.5 per 100,000). This is compared to a rate of 13.9 per 100,000 in 2023 (Figure 3). Although absolute numbers are relatively low in comparison to other STIs, syphilis can cause serious long-term problems if left untreated including damage to the heart and brain.

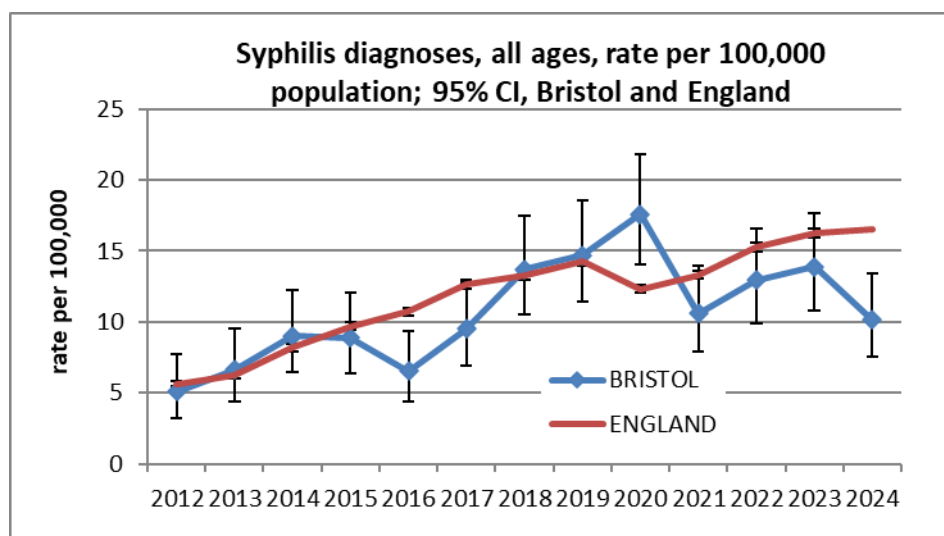


Figure 3: Syphilis diagnoses, crude rate per 100,000 population with 95% confidence intervals, Bristol and England. Source: OHID Sexual and Reproductive Health Profiles, July 2025.

## Pelvic inflammatory disease

Pelvic inflammatory disease (PID) is an infection of the upper female genital tract which may lead to serious complications such as ectopic pregnancy, infertility and chronic pelvic pain. Chlamydia, gonorrhoea and other STIs are common causes of PID.

In 2023/24 there were 235 hospital admissions for PID in Bristol, a rate of 191.0 per 100,000 women aged 15-44, reflecting a decline since 2022/23. This is lower than the England rate of 247.5.

## Reproductive Health

### Teenage pregnancies

The under 18s conception rate in Bristol had been falling since 2007 to reach its lowest rate in 23 years in 2020. In 2022, there were 93 new conceptions, a rate of 13.1 conceptions per 1,000, compared to 13.9 per 1,000 in England (Figure 5). In 2021 around half of these conceptions resulted in abortion. In 2022/23, the percentage of births to mothers under 18 years was 0.4% (0.6% in England overall).

There were 19 conceptions in under 16s (aged 13-15) in 2022.

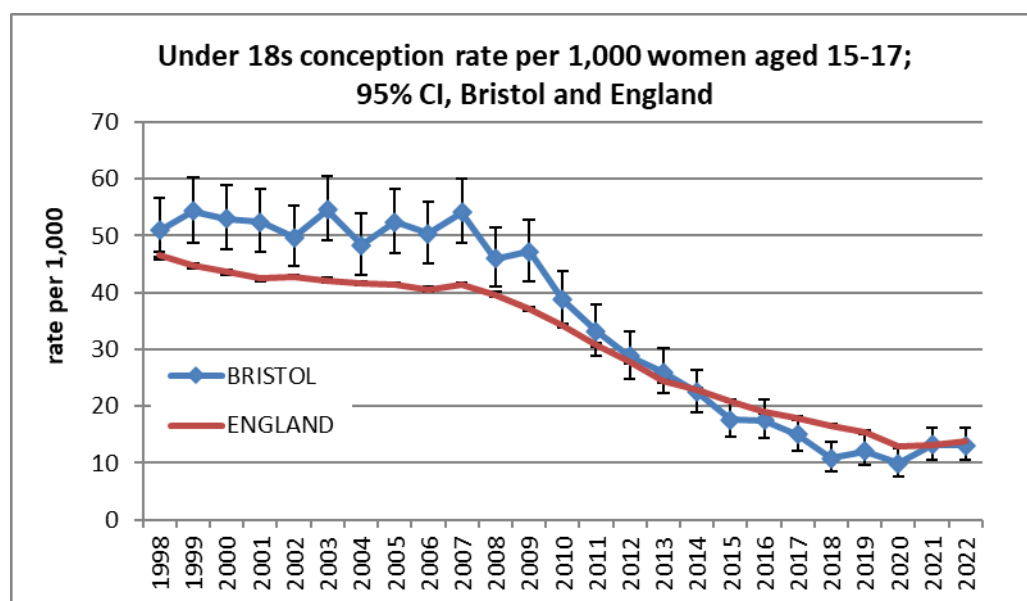


Figure 5: Under 18s conception, rate per 1,000 women (aged 15-17) with 95% confidence intervals, Bristol and England. Source: OHID Sexual and Reproductive Health Profiles and ONS Conception Statistics, England and Wales, 2022, July 2025.

## Contraception

Long-acting reversible contraception (LARC), such as coils and implants, is the most effective form of contraception. Bristol has had high rates of LARC prescribed predominantly within primary care, but like the rest of the country, saw very significant reductions in 2020. In 2023 7,190 LARC devices (excluding injections) were prescribed in primary care, specialist and non-specialist sexual health services (58.4 per 1,000 women aged 15-44), which was higher than the rate of 43.5 per 1,000 in England (Figure 6). This is an increase from 2022 (53.7 per 1,000)

but still below pre-pandemic levels. The rate prescribed in primary care was 51.4 in Bristol, higher than the rate of 25.6 in England. The rate prescribed in the other settings was 7.0 in Bristol, lower than the rate of 18.0 in England.

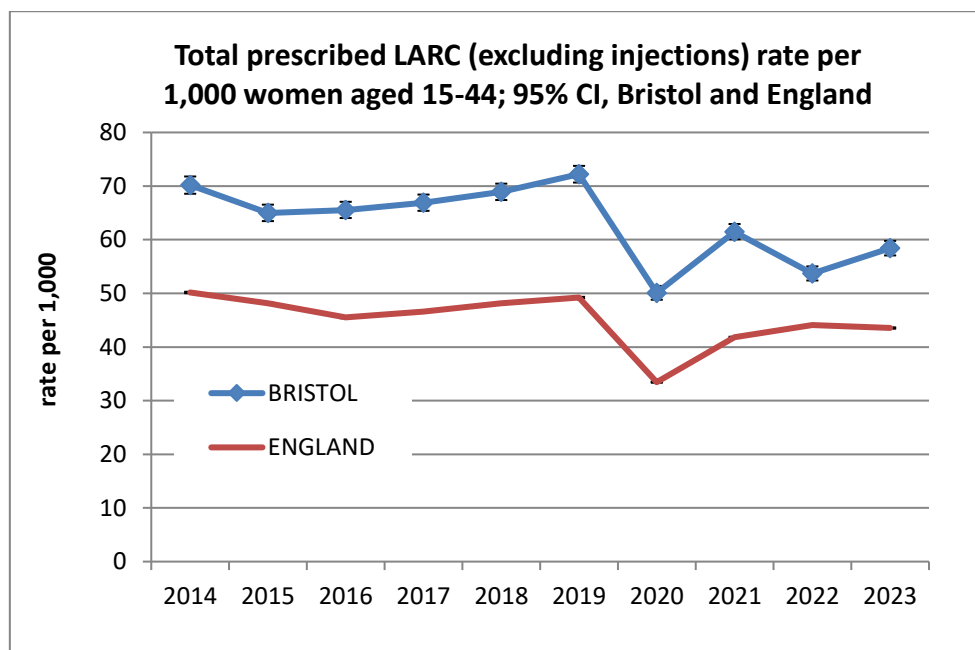


Figure 6: Total prescribed LARC (excluding injections), rate per 1,000 women aged 15-44 with 95% confidence intervals, Bristol and England. Source: OHID Sexual and Reproductive Health Profiles, March 2025.

## Abortion

Total abortion rates remained relatively static until 2021 and below the England rate. However, in 2022 there was a marked increase from 1,689 to 2,200 abortions (16.9 per 1,000 women aged 15-44) (Figure 7). Of those women under 25 years who had an abortion, the proportion who had previously had an abortion was 24.0%, lower than 29.7% in England.

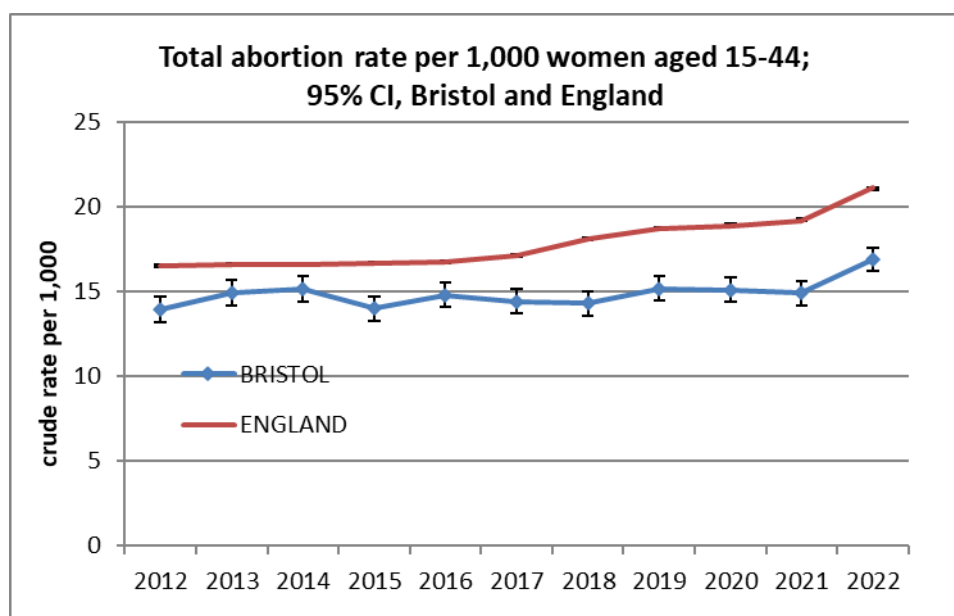


Figure 7: Total abortion rate per 1,000 women aged 15-44 with 95% confidence intervals, Bristol and England. OHID Source: Sexual and Reproductive Health Profiles, July 2025.

## Equalities data

Poor sexual health contributes to health inequalities in Bristol. Strong links exist between deprivation and STIs, teenage conceptions and abortions, with the highest burden borne by women, men who have sex with men (MSM), the trans community, young people, certain Black and minoritised ethnic groups, people involved in sex work, people with learning difficulties and homeless people. Young people in care and care leavers are also at increased risk. Many of the groups at higher risk of poor sexual health face stigma and discrimination, which can influence their ability to access services.

In Bristol the highest rates of new STI diagnoses are among Mixed and Black ethnic groups. The England rate of new STIs among the Black population is twice as high as in Bristol, showing that there may be under-diagnosis of STIs in this group in Bristol and unmet need. (Figure 8).

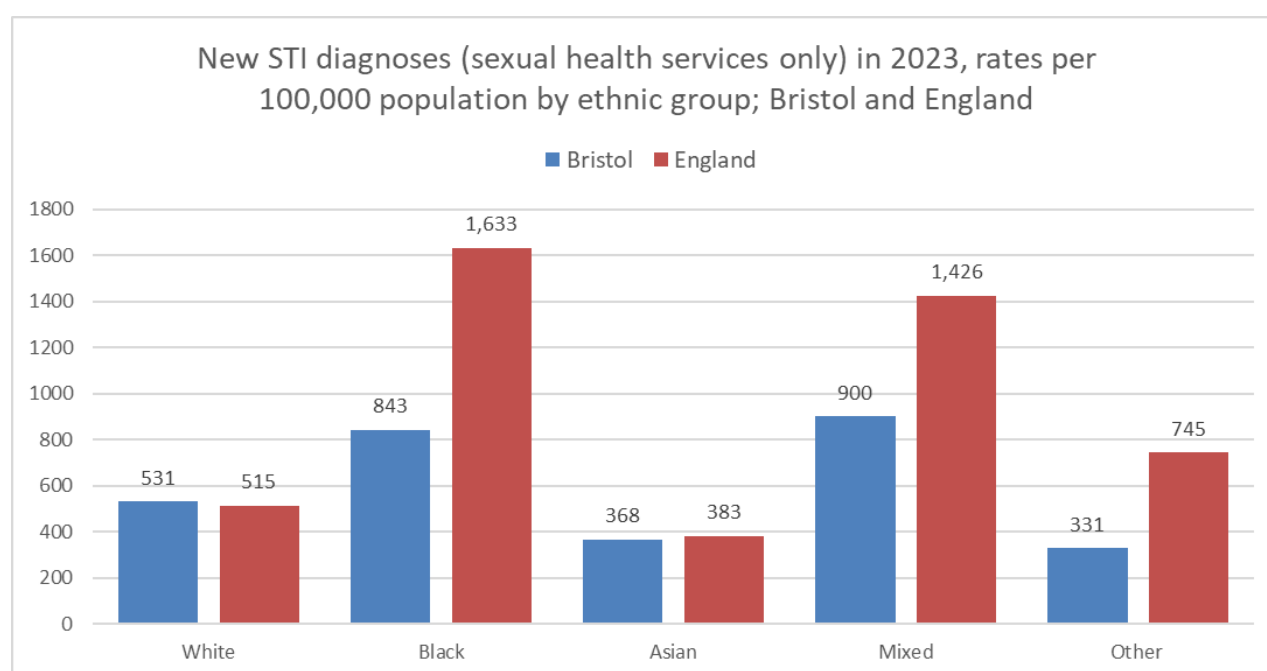


Figure 8: New STI diagnoses, rate per 100,000 population by ethnic group, Bristol and England. Source: UK Health Security Agency SPLASH Supplement Report, April 2025.

The highest rates of new STI diagnoses are experienced by young men and young women both nationally and locally (Figure 9).

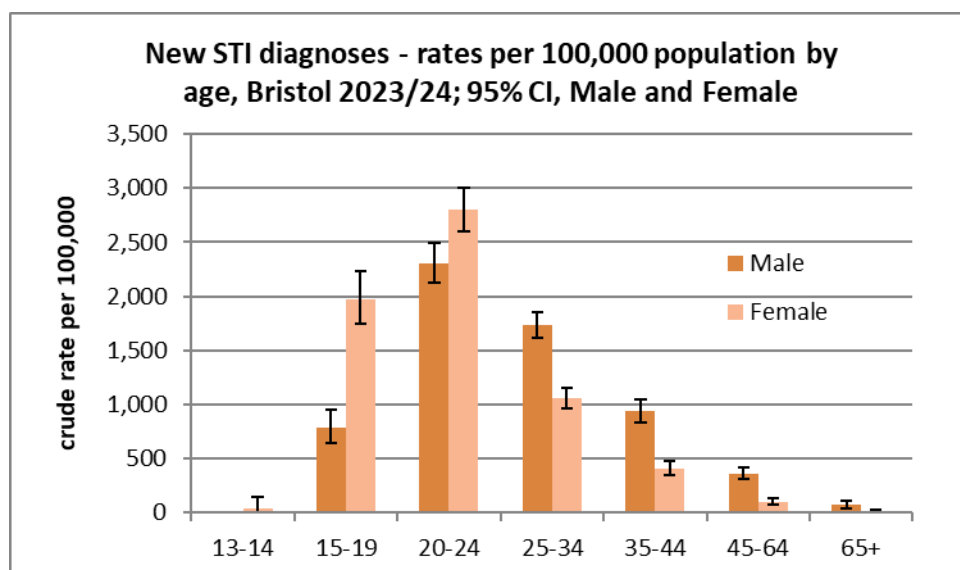


Figure 9: New STI diagnoses, crude rates per 100,000 population by age, with 95% confidence intervals, Bristol 2023/24. Source: GUMCAD surveillance system, UK Health Security Agency.

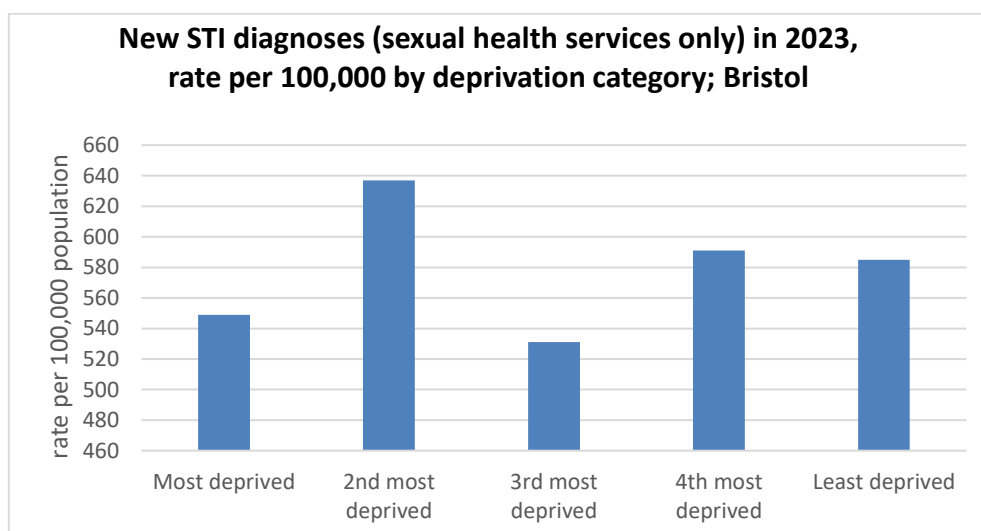


Figure 10: New STI diagnoses, rates per 100,000 population by deprivation, Bristol 2023. Source: UK Health Security Agency SPLASH Supplement Report, April 2025.

#### Further data / links / consultations:

- Office for Health Improvement and Disparities: Sexual and Reproductive Health Profiles <https://fingertips.phe.org.uk/profile/sexualhealth>
- Sexual and reproductive health in England: local and national data <https://www.gov.uk/government/publications/sexual-and-reproductive-health-in-england-local-and-national-data>
- Teenage Pregnancy <https://www.gov.uk/government/collections/teenage-pregnancy>
- Department of Health - 'Abortion statistics, England and Wales' <https://www.gov.uk/government/collections/abortion-statistics-for-england-and-wales>

Date updated: July 2025

Next update due: July 2026