



**Isle of Wight
Council**

Isle of Wight Council

Healthy Lives

**Behaviours and lifestyle choices for
adults and children**

October 2024

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1 Introduction

Our behaviours, personal circumstances and illnesses hugely affect our life expectancy and health. Influences on our health are particularly important before birth and during early childhood. These influences and risk factors continue to accumulate, and their effects build as we move into adulthood. Preventing exposure to these risk factors and reducing inequalities in how these risk factors are distributed among our population, can have a positive impact on our health.

Local public health teams work to both prevent and reduce people's exposures to risk factors across all stages of life. We commission services which help people reduce their risk factors (for example, smoking). We also work alongside other organisations to provide people with the support they need to make healthy decisions and prevent exposure to negative risk factors in the first place.

This chapter focuses on:

- the risk factors, causes and protective factors which influence our health
- the health inequalities which are evident and
- the potential impact COVID-19 has had.

Data in this written summary is correct as of August 2024. The data in this report can be explored further by smaller geographies in the JSNA Healthy Lives data report¹. The data report will be updated continuously, as new data becomes available.

The health outcomes of our population, and how these impact different population groups, are discussed in more detail in the accompanying JSNA reports².

¹ [JSNA Healthy Lives data report](#)

² [JSNA reports](#)

2 Global Burden of Disease

The Global Burden of Disease (2021)³ provides a tool to help understand what is causing and driving the most death and disability globally and the differences across countries. This study suggests that on the Isle of Wight the most notable all age causes of disease burden were neoplasms, cardiovascular diseases and respiratory infections and tuberculosis. The top three risk factors driving this are tobacco, high body mass index and dietary risks⁴.

The Isle of Wight's population is progressively ageing, the latest Census data reports that over one in five residents are aged 70 years and over⁵. An ageing population is linked to increased burden and duration of non-communicable diseases⁶. The major causes of disability for adults aged 70 years and over are cancers, cardiovascular diseases and chronic respiratory diseases. Tobacco, high blood sugars and high blood pressure are the three top risk factors for this older population group.

This burden of ill health has remained the same over time, stressing the importance of understanding the behaviours and lifestyles choices of our local population to be able to address them effectively.

³ [GBD Compare | IHME Viz Hub \(healthdata.org\)](https://vizhub.healthdata.org/gbd-compare/)

⁴ [JSNA GBD Power BI Report](#)

⁵ [JSNA Demography Power BI Report](#)

⁶ [Global, regional, and national burden of diseases and injuries for adults 70 years and older: systematic analysis for the Global Burden of Disease 2019 Study | The BMJ](#)

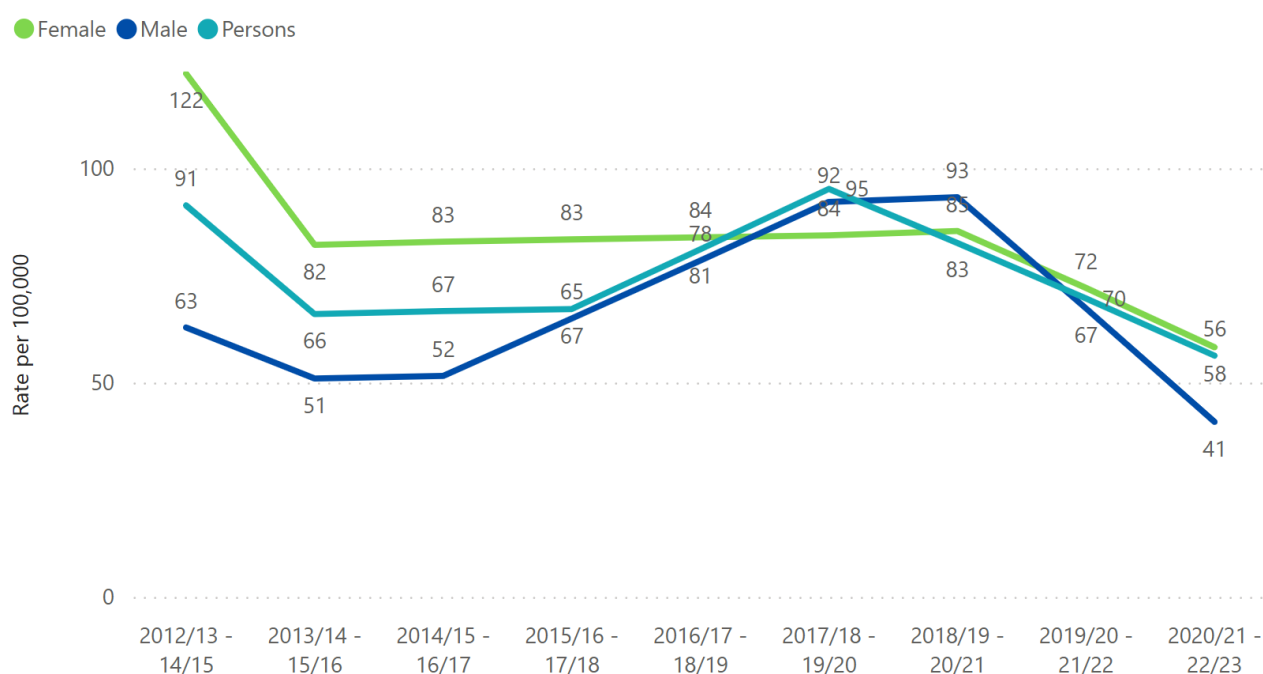
3 Alcohol

Excess alcohol consumption can contribute to a broad range of illnesses, including liver disease, heart disease, stroke, high blood pressure, and mental health conditions. It is the sixth largest risk factor for ill health on the Isle of Wight⁷. It can also be associated with a range of social and economic issues including loss of employment and crime.

In a recent survey, 25% of young people in Year 8 and Year 10 in Hampshire, Isle of Wight, Southampton and Portsmouth reported currently or previously using alcohol. Those who drink alcohol are significantly more likely to be trans and gender diverse and older pupils. Young people from all ethnic minority groups are less likely to drink alcohol compared to White young people⁸.

Hospital admissions specifically caused by alcohol in under 18s have remained statistically significantly worse than the England average, with an average of approximately 25 children admitted across each three-year period. In this age group, females are significantly more likely to be admitted to hospital for alcohol than males on the Island, although the trend is decreasing in both genders. However, the numbers are still higher than England.

Figure 1: Under 18s admission episodes for alcohol-specific conditions on the Isle of Wight, 2012 to 2023



⁷ [JSNA GBD Power BI Report](#)

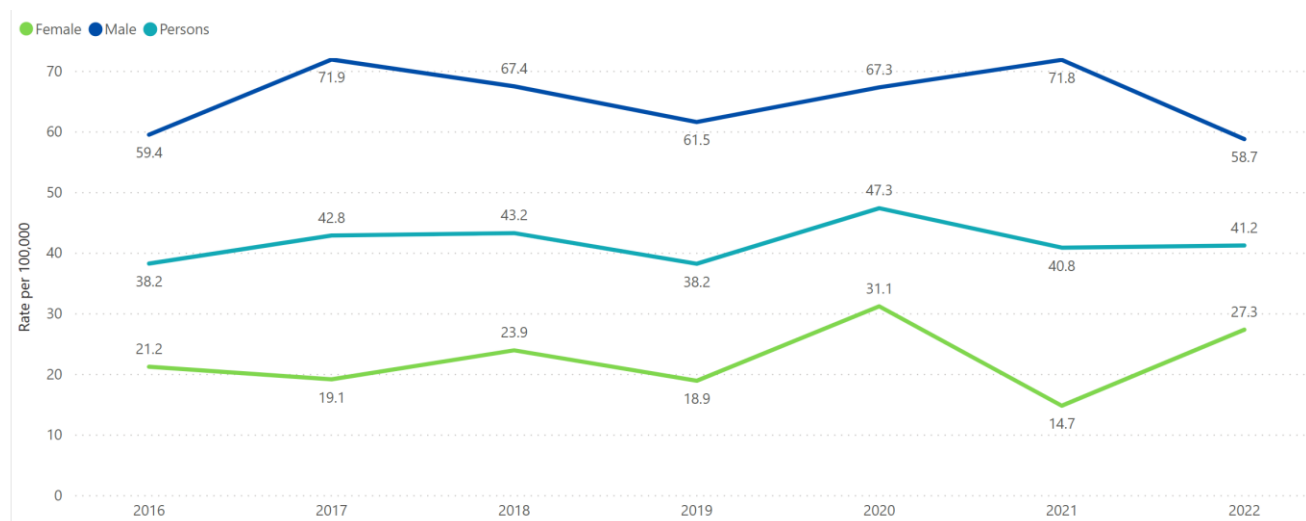
⁸ [HIPS Headline Findings 2024 \(beewellprogramme.org\)](#)

In adults, admissions for alcohol-related conditions (using the narrow definition⁹) have increased between 2016 and 2023¹⁰. The Isle of Wight has higher admissions than England, at 673 per 100,000, compared to 475 per 100,000 for England. Using the broad definition¹¹ for admissions for alcohol related conditions, the trend on the Island has also increased between 2016 and 2023. Nationally, the trend has been decreasing and getting better and the Island has recently moved above the England rate. For both definitions of hospital admissions, areas of greater deprivation and males had higher rates of admissions nationally.

On the Isle of Wight alcohol-related mortality is high at 41.2 per 100,000, statistically similar to the national figure of 39.7 per 100,000.

Nationally and across the Isle of Wight men have significantly higher rates of alcohol related mortality than women¹².

Figure 2: Isle of Wight alcohol-related mortality, 2016 to 2022



In 2022, alcohol specific mortality was higher on the Isle of Wight than England, at 17.3 per 100,000 compared to 14.5 per 100,000. National data shows that people from the most deprived areas are over twice as likely to die from alcohol-specific conditions as

⁹ Narrow definition: includes admissions where only the primary diagnosis (main reason for admission) is an alcohol-related condition. As every hospital admission must have a primary diagnosis, it is less sensitive to coding practices, and therefore can provide the best indication of trends, but may also understate the part alcohol plays in the admission.

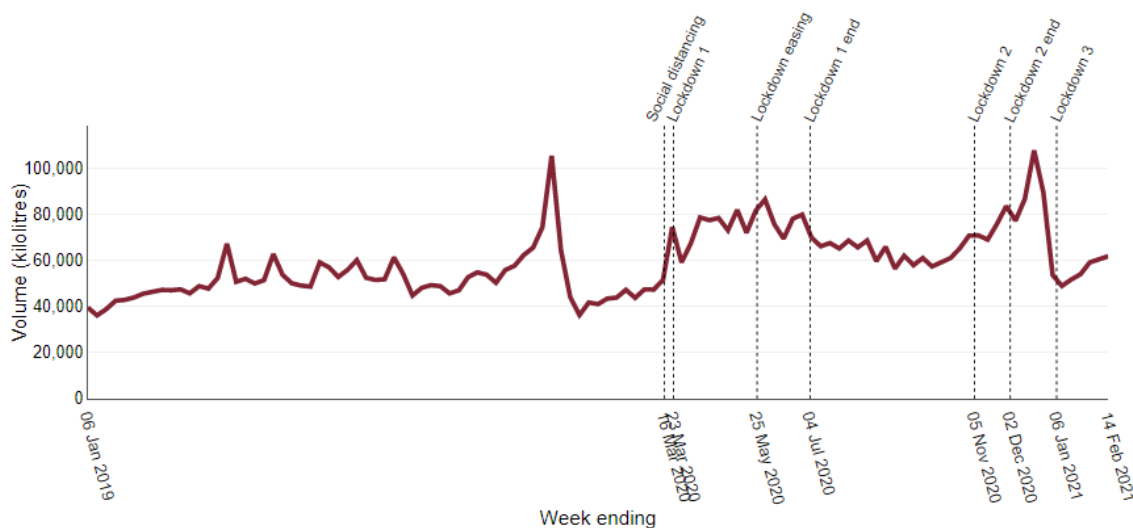
¹⁰ [Fingertips | Department of Health and Social Care](#)

¹¹ Broad definition: includes admissions where either the primary diagnosis (main reason for admission) or one of the secondary (contributory) diagnoses is an alcohol-related condition. This measure gives an indication of the full impact of alcohol on hospital admissions and the burden places on the NHS but is sensitive to changes in coding practice over time.

¹² [Fingertips | Department of Health and Social Care](#)

those from the least deprived areas¹³. During lockdown there was a change in consumption behaviours, with increased retail purchasing of alcohol and drinking at home¹⁴. In England, surveys have shown an increase in drinking at higher risk levels during the pandemic¹⁵. The longer term trends are as yet unclear. Locally, this has been reflected by a steady increase in referrals for alcohol treatment. The substance misuse service explored different options for service delivery when face to face appointments were restricted. This included using digital technology to provide virtual appointments and group meetings.

Figure 3: Great Britain trend in alcohol volume sales 2019 to 2021



¹³ [Fingertips | Department of Health and Social Care](#)

¹⁴ [Wider Impacts of COVID-19 \(phe.gov.uk\)](#)

¹⁵ [Wider Impacts of COVID-19 \(phe.gov.uk\)](#)

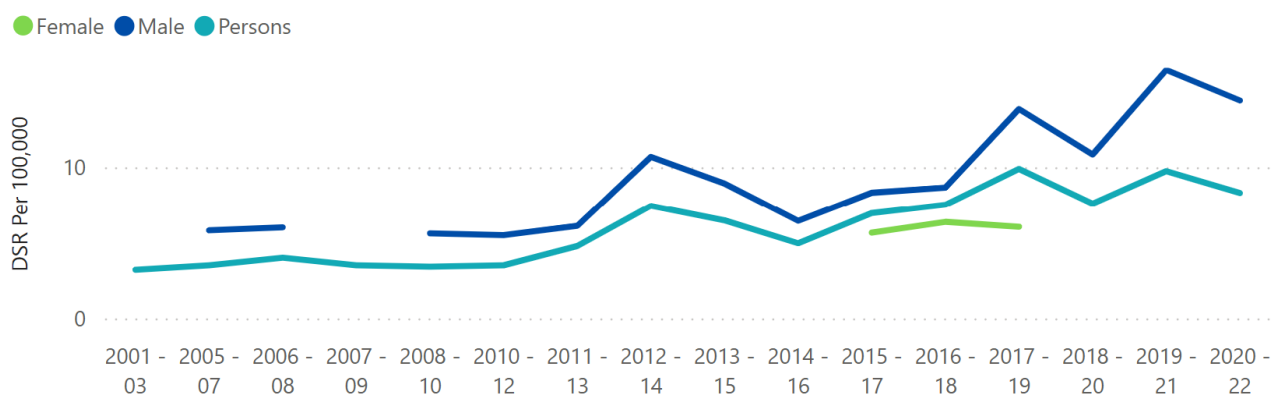
4 Drug misuse

Drug misuse is a significant cause of disability and is the third ranked cause of death in 15- to 49-year-olds on the Isle of Wight¹⁶. The health effects of drug misuse vary depending on the type of substances and the pattern and context of their use¹⁷. In a recent survey of Year 8 and Year 10 schoolchildren in Hampshire, Isle of Wight, Southampton and Portsmouth, 3% reported currently or previously using cannabis, and 1% for other illegal drugs¹⁸.

On the Isle of Wight, hospital admissions for those aged 15 to 24 years due to substance misuse has remained statistically similar to England for the majority of years from 2008/09-2010/11 and 2020/21-2022/23.

Deaths from drug misuse remain statistically significantly higher and worse than England¹⁹ at 8.3 per 100,000 compared to 5.2 per 100,000 in England. Nationally, there is an ageing cohort of drug dependent and ex-dependent people who experience illness and death as a result of their drug misuse. Deaths related to illnesses from former drug misuse will also be included in the rate of deaths from drug misuse and therefore the figures should be considered in this context. Deaths from drug misuse are significantly higher in men than women on the Island, and national data shows people from the most deprived areas are significantly more likely to die from drug misuse than those from the least deprived areas²⁰. It is currently not clear how the pandemic affected drug use, however recorded drug crime increased both locally and nationally.

Figure 4: Isle of Wight deaths from drug misuse, 2001-03 to 2020-22



¹⁶ [GBD Compare | IHME Viz Hub \(healthdata.org\)](#)

¹⁷ [A summary of the health harms of drugs - GOV.UK \(www.gov.uk\)](#)

¹⁸ [HIPS Headline Findings 2024 \(beewellprogramme.org\)](#)

¹⁹ [Fingertips | Department of Health and Social Care](#)

²⁰ [Fingertips | Department of Health and Social Care](#)

Isle of Wight Public Health Team commissions a Substance Misuse Treatment Service to holistically support people affected by alcohol or drugs through overcoming their addiction whilst addressing any social issues which may be present. Detailed data on the demographics of the service users at 'Inclusion' are available in the JSNA Inclusion Health Groups report²¹.

The proportion of opiate users successfully completing drug treatment on the Isle of Wight is stable over time, although it has larger variation year-to-year due to small numbers²². The England trend is in line with the Island's, with a gradual decline. The proportion of non-opiate drug users successfully completing drug treatment has remained stable over time, from 34.4% in 2010 to 31.4% in 2022. On the Isle of Wight, the percentage of non-opiate users who have successfully completed drug treatment has remained stable, from 25.4% in 2018 to 26.2% in 2022²³. Funding for substance misuse as a result of the National Drug Plan may help to reverse these trends²⁴.

²¹ [JSNA Inclusion Health Groups](#)

²² [Fingertips | Department of Health and Social Care](#)

²³ [Fingertips | Department of Health and Social Care](#)

²⁴ [From harm to hope: A 10-year drugs plan to cut crime and save lives - GOV.UK \(www.gov.uk\)](#)

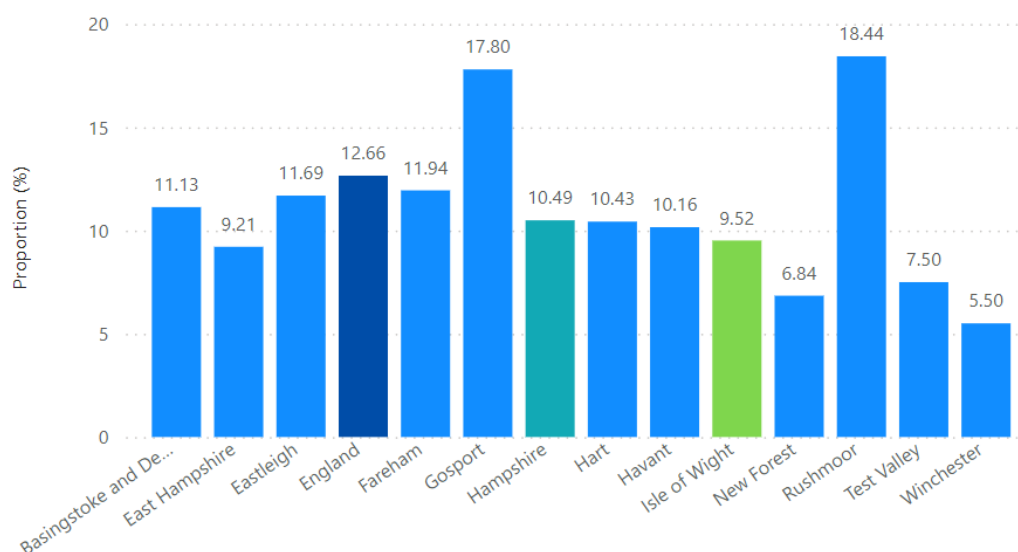
5 Smoking and vaping

Smoking is the leading cause of preventable ill health and early death in England and was responsible for almost 75,000 deaths and more than 500,000 hospital admissions in 2019²⁵. On the Isle of Wight between 2017 and 2019, smoking was responsible for around 600 deaths in people aged 35 years and older²⁶. It is linked to many cancers, cardiovascular disease and respiratory diseases²⁷.

The rates of mortality attributable to smoking in 2017-19 were lower on the Island than England and is showing a gradual downwards trend as the prevalence of smoking declines²⁸. However, despite still being lower than England, smoking attributable hospital admissions has increased for the past two years²⁹.

The smoking prevalence on the Isle of Wight is 9.5% compared to 11.6% in England^{30,31}. In addition, men are significantly more likely to smoke than women, those in routine or manual occupations and those who are unemployed are significantly more likely to smoke than those in managerial or professional occupations, and those living in the most deprived areas are significantly more likely to smoke than those in the least deprived³².

Figure 5: Smoking prevalence in adults, 18+, 2022



²⁵ [Addressing the leading risk factors for ill health | Health Foundation](#)

²⁶ [Smoking Profile - Data | Fingertips | Department of Health and Social Care](#)

²⁷ [Addressing the leading risk factors for ill health | Health Foundation](#)

²⁸ [Smoking Profile - Data | Fingertips | Department of Health and Social Care](#)

²⁹ [Smoking Profile - Data | Fingertips | Department of Health and Social Care](#)

³⁰ [Fingertips | Department of Health and Social Care](#)

³¹ During the pandemic the data collection methods for the Annual Population Survey changed from face-to-face to phone only, and ONS have concluded that the change has impacted the final prevalence figures which are likely to be underestimates. Please see more details [here](#).

³² [Fingertips | Department of Health and Social Care](#)

Two thirds of smokers will start smoking before the age of 18 years and experimental smoking in childhood is highly predictive of regular smoking in adolescence. Risk factors for young people to start smoking include truancy or school exclusion, drinking alcohol, taking drugs and having parents or siblings who smoke. Children who grow up in a smoking household are four times more likely to start smoking.

An evidence update in 2022 on Nicotine Vaping by the Office for Health Improvement and Disparities (OHID) states that although not risk-free, vapes are far less harmful than smoking in the short and medium term and the estimated risk reduction is at least 95%^{33,34}. Therefore, it is important to make vapes accessible as a quitting aid, especially for the Island's high prevalence groups³⁵. However, it is not risk free and NICE recommends that vaping should be discouraged in those who have never smoked³⁶.

A recent survey of children in Hampshire, the Isle of Wight, Portsmouth and Southampton found that 10% of Year 8 and Year 10 pupils reported currently or previously using e-cigarettes³⁷. However, national data from 2023 shows that 1 in 5 children aged 11 to 17 have ever used an e-cigarette, up from one in ten in 2021³⁸. Children who have never smoked are more likely to vape than adults who never smoked, at 2.3% compared to 1.1%. Additionally, one third of those children who currently vape reported having an extremely strong, very strong or strong urge to vape. The most popular flavours for children aged 11 to 17 years were fruit (60%), followed by sweet or soft drink (25%).

To help reduce smoking prevalence, the Isle of Wight Public Health Team commissions a Community Stop Smoking Service which, although universal, is targeted to groups with the highest risk of tobacco-related harm, including routine and manual workers, people with serious mental health issues or smoking-related long-term conditions, and pregnant smokers. More detail is available on the Smokefree Island website³⁹.

Smoking prevalence is thought to have reduced over the pandemic, with an estimated one million people in the UK having stopped during the first lockdown⁴⁰. Evidence based stop smoking services are the most effective way to quit. The local Community Stop Smoking Service saw a reduction in referrals from healthcare services but a large increase in self-referrals after amplifying media messages around smoking as a risk factor for serious COVID-19 infection. Vaping prevalence is lower than smoking prevalence across all groups in England. About 9.1% of adults in England use a vape, 56% of whom are ex-

³³ [Nicotine vaping in England: 2022 evidence update main findings - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/nicotine-vaping-in-england-2022-evidence-update-main-findings)

³⁴ [Nicotine vaping in England: 2022 evidence update main findings - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/news/nicotine-vaping-in-england-2022-evidence-update-main-findings)

³⁵ [The Khan review: making smoking obsolete - GOV.UK](https://www.gov.uk/government/news/the-khan-review-making-smoking-obsolete)

³⁶ [Recommendations on preventing uptake | Tobacco: preventing uptake, promoting quitting and treating dependence | Guidance | NICE](https://www.nice.org.uk/guidance/TA254)

³⁷ [HIPS Headline Findings 2024 \(beewellprogramme.org\)](https://www.beewellprogramme.org/hips-headline-findings-2024)

³⁸ [Use-of-vapes-among-young-people-GB-2023-v2.pdf \(ash.org.uk\)](https://www.ash.org.uk/resources/use-of-vapes-among-young-people-gb-2023-v2.pdf)

³⁹ [Home - Smokefree Island](https://www.smokefreeisland.org/)

⁴⁰ [Isle of Wight Covid-19 Health Impact Assessment](https://www.isleofwight.gov.uk/health-impact-assessment)

smokers. The reason adults give for vaping depends on their smoking status. Never-smokers take up vaping because they enjoy the experience and want to give it a try, whereas current smokers vape to cut down on smoking and to try to quit, and ex-smokers take up vaping to quit smoking and prevent relapse. Those who smoke and haven't tried using e-cigarettes most commonly give the reasons that they do not want to develop a new addiction and are worried about the safety of vaping⁴¹.

Smokefree Island is a service commissioned by the Isle of Wight Council and provided by Solutions4Health. The aims of the service are to provide an expert stop smoking service for the Isle of Wight community.

This will be achieved with three key things:

1: A commitment to excellence

We strive everyday to do the best we can to tackle health inequalities and improve the lives of all the people we work with.

2: Our team

We have a wonderful, diverse team of professionals who bring together extensive digital and health knowledge to help us to provide first class services across the country.

3: Our experience

We provide public health and digital health services all around the UK, building our knowledge over the last 10 years.

Vaping among adults who are 'never smokers' is uncommon, with the ASH survey finding 1.1% of never smokers to be vaping in 2023. In England, in 2020, vaping products became the most popular aid used to stop smoking. There is no local data on adult vaping prevalence currently available, however, the commissioned stop smoking support provider offers an e-Cig Voucher Scheme⁴² to residents who wish to quit using a vape.

It is important to note that while vaping can help smokers quit, it is not harmless and is not for young people under 18. Whilst vapes have a strong association with smoking, at present there is no strong evidence to suggest that vaping is a gateway to smoking. More research is required into the associations between smoking, vaping and the common risk factors for both behaviours in young people.

⁴¹ [Use of e-cigarettes among adults in Great Britain - ASH](#)

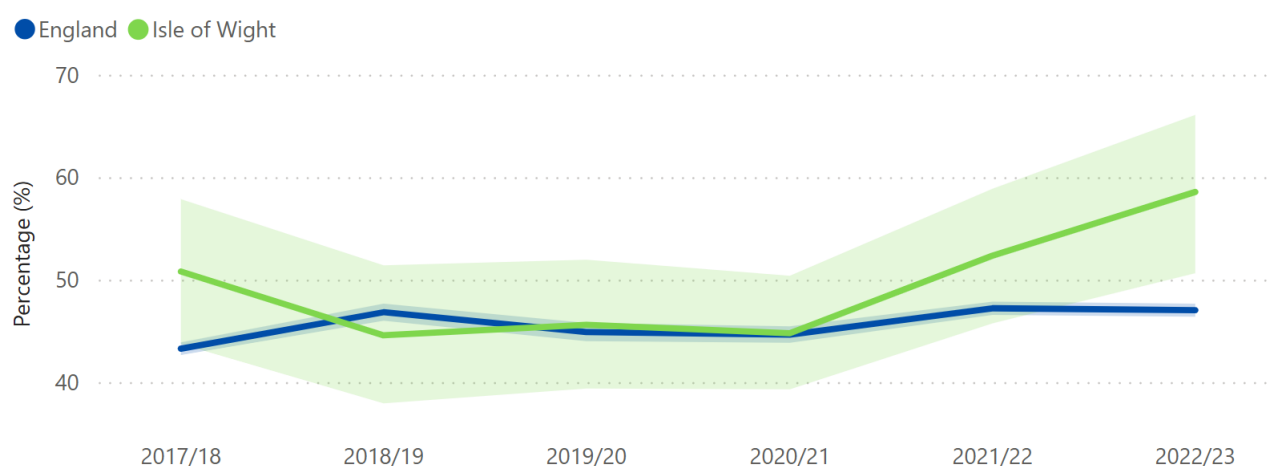
⁴² <https://smokefreeisland.co.uk/vaping-and-ecigarettes/>

6 Physical activity

Being physically active reduces mortality risk, helps prevent and address overweight and obesity, improves mental health, and reduces the risk of developing a wide range of illnesses, including heart disease, stroke, Type 2 diabetes, obesity, some cancers, mental health problems and musculoskeletal conditions.

The proportion of children on the Isle of Wight meeting the recommended 60 minutes of exercise per day has improved from 44.6% in 2018/19 to 58.6% in 2022/23 and is better than the England average, as seen in Figure 6⁴³. National data shows that female children, children in Years 3 to 6, and children from minority ethnic groups are less likely to achieve the recommended amount of exercise.

Figure 6: Physically active children and young people aged 5 to 18, 2017/18 to 2022/23



The Chief Medical Officer currently recommends that adults undertake a minimum of 150 minutes (2.5 hours) of moderate physical activity per week, or 75 minutes of vigorous physical activity per week or an equivalent combination of the two. Children are recommended to undertake 60 minutes of exercise per day.

In 2022/23 66.7% of adults on the Isle of Wight undertake the recommended 30 minutes of moderate intensity activity on at least 5 days per week, and 23.3% are classified as physically inactive as they undertake less than 30 minutes of moderate intensity activity across the week^{44,45}. Both of these statistics have got worse over the last seven years.

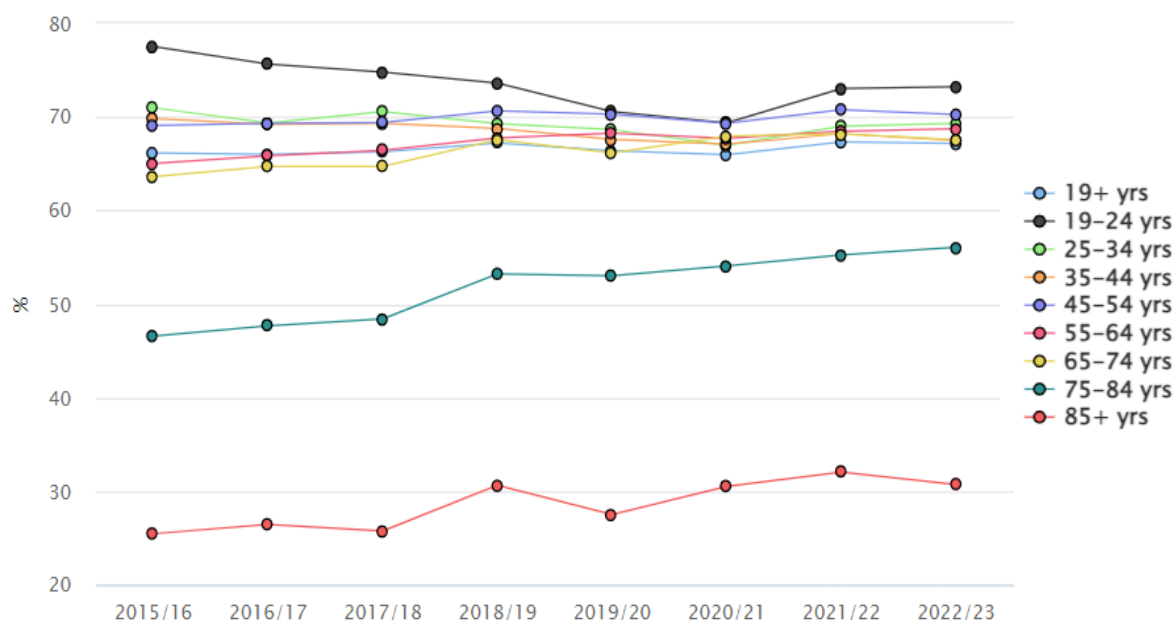
⁴³ [Fingertips | Department of Health and Social Care](#)

⁴⁴ [Fingertips | Department of Health and Social Care](#)

⁴⁵ [Fingertips | Department of Health and Social Care](#)

Nationally, data for adults shows that physical activity levels are lower in females, older people, those with lower levels of education, those living in deprived areas, people with a disability, minority ethnic groups and those who are not employed⁴⁶.

Figure 7: Percentage of adults in England (aged 19+) who do 150 minutes of physical activity per week (physically active), by age, 2015 to 2023



Nationally, activity levels fell in both adults and children during the pandemic, which could be partially explained by fewer people commuting to school or work using active forms of transport such as cycling and walking⁴⁷. For those with long term conditions who were shielding, the impact on activity levels would have been even greater. An Age UK national survey found that 23% of older people had seen their ability to do everyday activities reduce, which is likely to increase their dependency and reduce life expectancy⁴⁸. The impact of reduced mobility on the older population is discussed in more detail in the Isle of Wight COVID-19 Health Impact Assessment⁴⁹.

⁴⁶ [Fingertips | Department of Health and Social Care](#)

⁴⁷ [Wider Impacts of COVID-19 \(phe.gov.uk\)](#)

⁴⁸ [New analysis finds the pandemic has significantly increased older people's need for social care | media | Age UK](#)

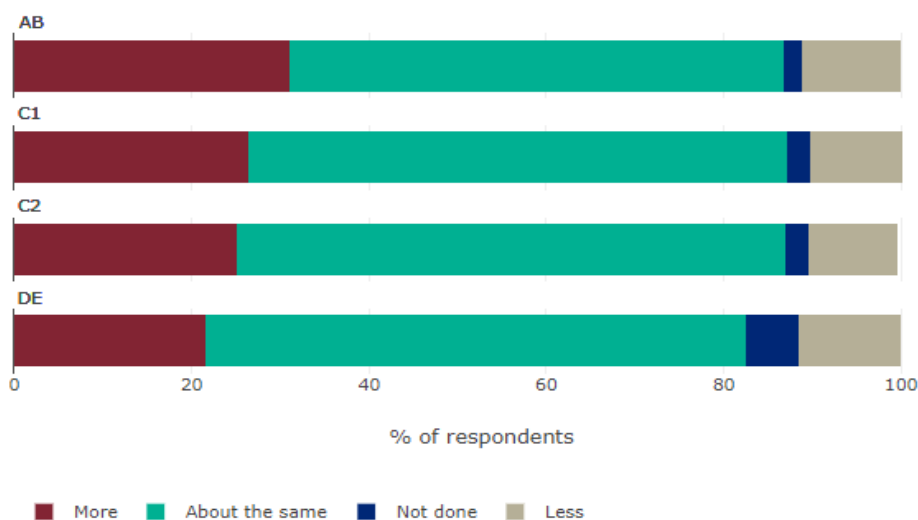
⁴⁹ [Isle of Wight COVID-19 Health Impact Assessment](#)

7 Healthy diet

A healthy diet reduces the risk of obesity, heart disease, some cancers, and bone and joint disorders⁵⁰. Limited data is available on the quality of people's diets locally, but in a recent survey of school students on the Isle of Wight, 88.6% ate fruit and vegetables on two to four days a week or more⁵¹. The proportion of adults meeting the recommended '5-a-day' on a usual day is 35.5% on the Isle of Wight, compared to 31% in England. The Isle of Wight saw a large decrease between 2020/21 and 2021/22⁵². National data shows that males, people from ethnic minority groups, those with a disability, those living in a deprived area and those from a lower socioeconomic group, those who are younger and males are also less likely to have a healthy diet⁵³.

The impact of the pandemic on diet in the UK is complex⁵⁴. With hospitality closed during long periods of restrictions, more people were cooking from home, however the quality of food varied across different groups. Thirty two percent reported eating more healthy main meals but 33% eating more unhealthy snacks⁵⁵. There was also an increase in families eating together and food waste decreased. Children from disadvantaged backgrounds were most likely to eat more highly processed food and least likely to be eating fruit and vegetables⁵⁶.

Figure 8: People eating healthy meals more or less often in the past month by social class in England, Wales and NI: survey data up to 14/07/2020



Source: OHID WICH tool

⁵⁰ [Addressing the leading risk factors for ill health | Health Foundation](#)

⁵¹ [#BeeWell Neighbourhood Data Hive](#)

⁵² [Fingertips | Department of Health and Social Care](#)

⁵³ [Wider Impacts of COVID-19 \(phe.gov.uk\)](#)

⁵⁴ [Renew Normal: Food in a Pandemic](#)

⁵⁵ [Renew Normal: Food in a Pandemic](#)

⁵⁶ [Renew Normal: Food in a Pandemic](#)

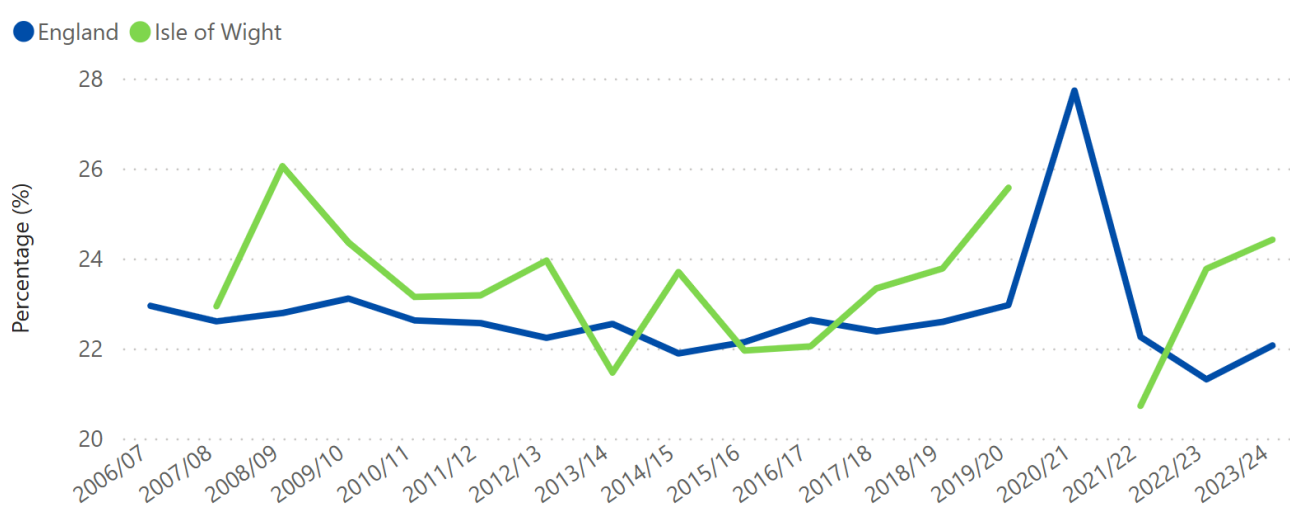
The Food Insecurity Index developed by University of Southampton identifies people who are at risk of food insecurity. Food insecurity can occur through a number of ways - through economic factors and through factors impacting on access to buying groceries. This is explored further in the JSNA Healthy Places chapter which covers University of Southampton's Food Security Index as well as fast food outlets, food banks and community pantries⁵⁷.

⁵⁷ [JSNA Healthy Places](#)

8 Overweight and obesity

Poor diet and physical inactivity are leading risk factors for overweight and obesity, which in turn are risk factors for heart disease, stroke, Type 2 diabetes, liver disease, some cancers, dementia, and mental health conditions⁵⁸. These health risks increase with increasing weight. The proportion of children on the Isle of Wight who are overweight or obese increases from 23.8% in Reception to 35.7% by Year 6, and 60.4% of Island adults are either overweight or obese⁵⁹. This puts the Isle of Wight above the England average for Reception age (21.3%), although lower than the England average for Year 6 children (36.6%).

Figure 9: Reception children classified as overweight or obese, 2006 to 2020



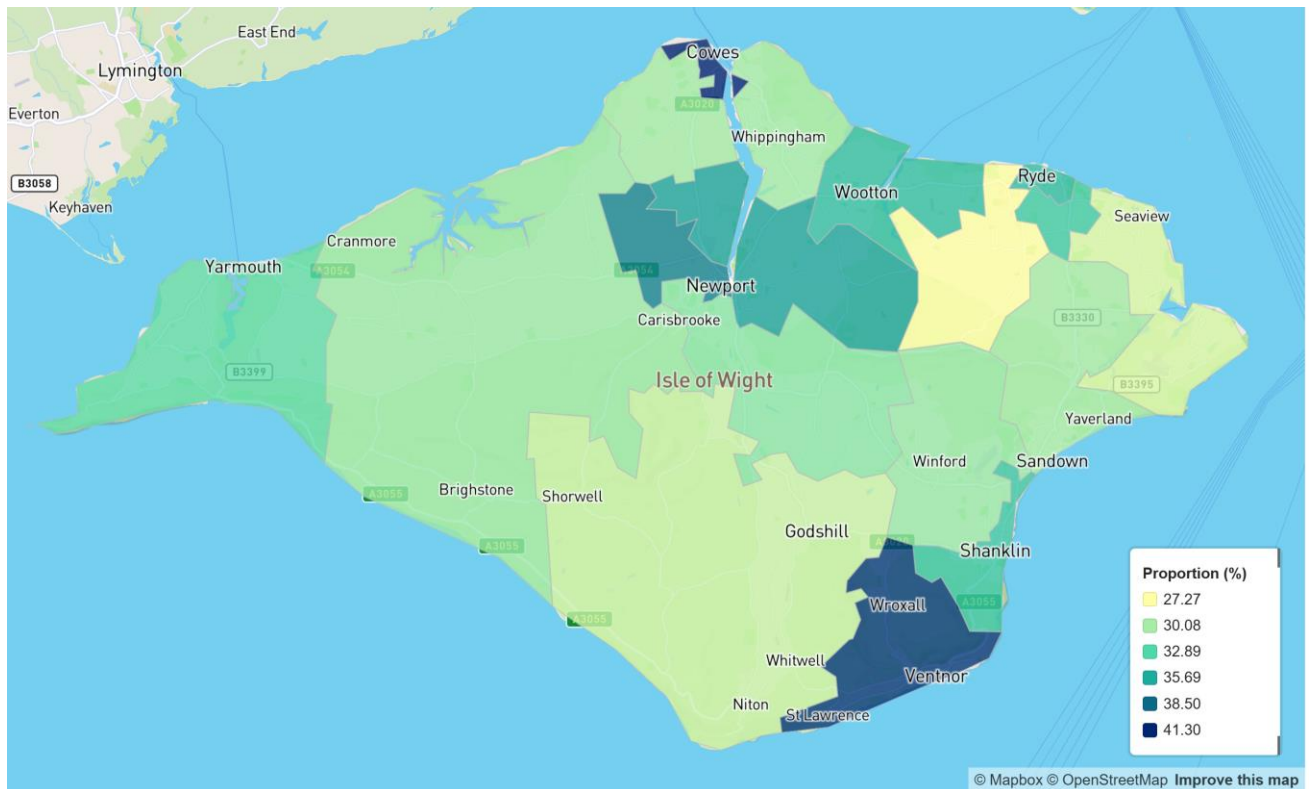
Inequalities in overweight and obesity exist in adults. Nationally, the prevalence of overweight and obesity is higher in Black and White British ethnic groups, those who are disabled, those in older ages, and in men. Overweight and obesity also increase with deprivation. Nationally, rates of childhood obesity and overweight increased sharply over the pandemic, from 35.2% of Year 6 children being overweight or obese in 2019/20, to 40.9% in 2020/21⁶⁰.

⁵⁸ [Addressing the leading risk factors for ill health | Health Foundation](#)

⁵⁹ [Fingertips | Department of Health and Social Care](#)

⁶⁰ [Addressing the leading risk factors for ill health | Health Foundation](#)

Figure 10: Year 6 children classified as overweight or obese, 2020/21-2022/23



To help reduce the prevalence of overweight and obesity, Isle of Wight public health team commissions a Tier 2 weight management service for adults which, although universally accessible, places additional emphasis on targeting men, ethnic minority groups, and those residing in the three deciles of greatest deprivation.

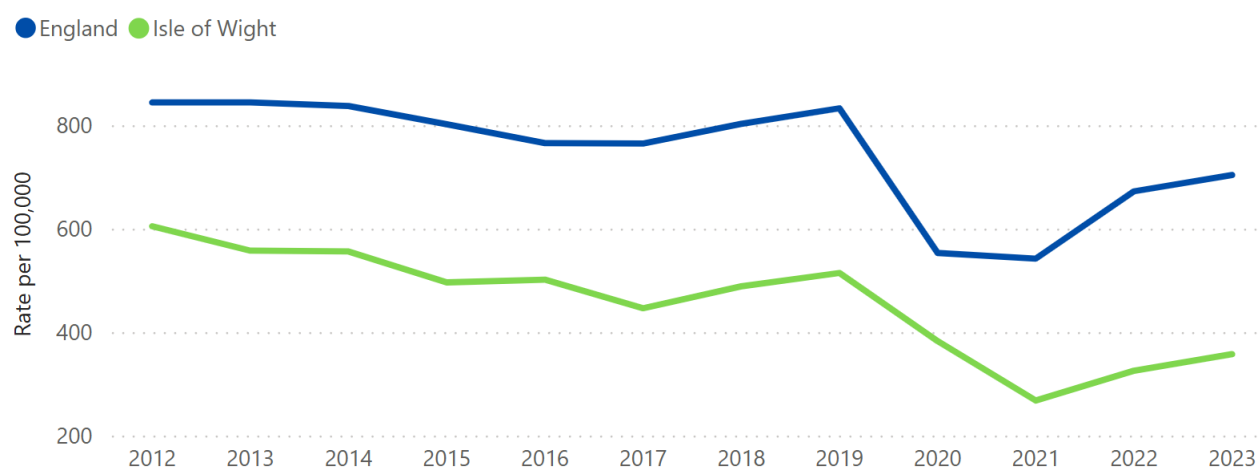
9 Sexual health and reproductive health

Good sexual health encompasses a positive, respectful approach to sexuality and sexual relationships which ensures sexual experiences that are safe, free of coercion, discrimination and violence. In England, the definition of sexual health also includes the provision of advice and services for contraception, termination of pregnancies, sexually transmitted infections (STIs) and Human Immunodeficiency Virus (HIV).

To ensure all women, trans-gender men, and non-binary people with female reproductive organs have choice over if and when they decide to get pregnant, good access to long-acting reversible contraception (LARC) is important. Levels of prescribed LARC across the Isle of Wight fell during the pandemic because of difficulties in organising face-to-face appointments. It will be important to monitor these trends as health services resume more normal functioning. Although it is recognised that LARC is important it is equally important for all people to have access to the full range of contraceptive choices.

Early identification and treatment of STIs is important, as untreated infections can lead to serious complications including infertility, ectopic pregnancy, cancer and premature death. Up until 2019, the STI diagnosis rate had been generally stable on the Isle of Wight and nationally, at which point it dropped in 2020 and 2021 – likely a result of both reduced sexual activity and less access to diagnostic services. The STI diagnosis rate has since increased from a low of 268 per 100,000 in 2021, to a rate of 357 per 100,000 in 2023. These are both lower than England, 542 per 100,000 in 2021 and 704 per 100,000 in 2023. Additionally, poor sexual health is associated with deprivation and social exclusion, and has a greater impact on young people, men who have sex with men (MSM), and certain ethnic groups.

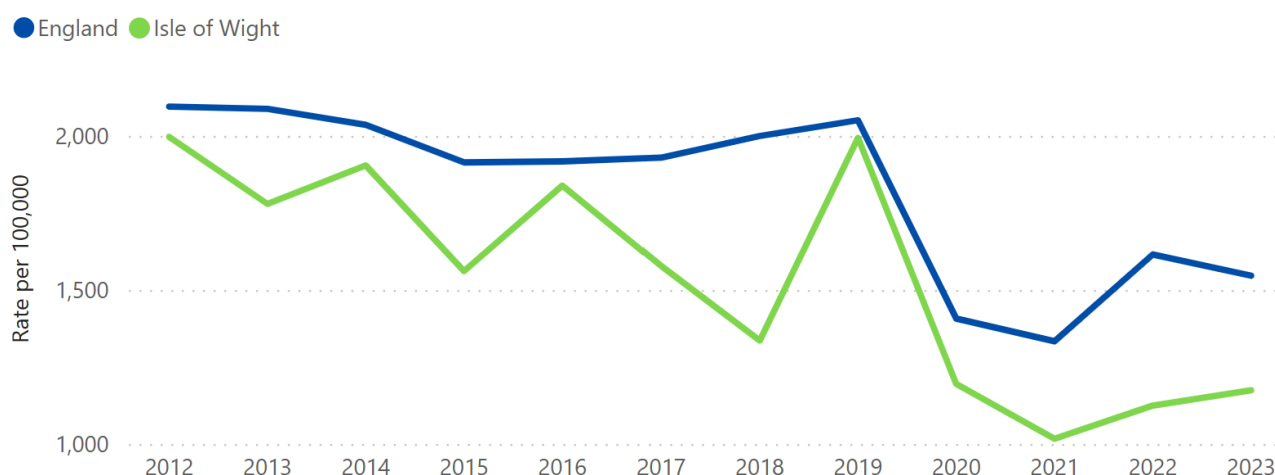
Figure 11: All new STI diagnosis rate / 100,000 population, 2012 to 2023



Chlamydia is the most commonly diagnosed bacterial STI in England, and rates are far higher in young adults than any other age group. The UK Health Security Agency (UKHSA) recommends that local authorities should be working towards achieving a detection rate of at least 3,250 per 100,000 female population aged 15 to 24. The recommendation was set at a level that would encourage a high volume of screening and diagnoses, be ambitious but achievable and high enough to encourage community screening rather than specialist sexual health clinic only diagnoses, as well as be likely to result in a continued chlamydia prevalence reduction, according to mathematical modelling⁶¹. In 2022 there were changes to the National Chlamydia Screening Programme (NCSP) to focus on reducing reproductive harm of untreated infection in young women and other people with wombs and ovaries⁶². The detection rate target is still in place however this change means young women without symptoms will be proactively offered a chlamydia test.

The Isle of Wight’s detection rate had been fluctuating from 2012 to 2019. The pandemic impeded any progress, and the detection rate has since dropped, as seen in Figure 12. In 2023, the Island’s detection rate was 1,174 per 100,000, which is lower and worse than England (1,546 per 100,000)⁶³.

Figure 12: Chlamydia detection rate per 100,000 population aged 15 to 24, 2012 to 2023



The new HIV diagnosis rate on the Isle of Wight was 4.3 per 100,000 in 2023, which was lower than the England average of 10.4 per 100,000⁶⁴. Early HIV diagnosis and treatment will typically lead to a near-normal lifespan. In contrast, late diagnosis is an important predictor of morbidity and mortality. On the Island, the proportion of people who are

⁶¹ [Fingertips | Department of Health and Social Care](#)

⁶² This includes transgender men, non-binary people assigned female at birth and intersex people with a womb or ovaries.

⁶³ [Fingertips | Department of Health and Social Care](#)

⁶⁴ [Fingertips | Department of Health and Social Care](#)

diagnosed late with HIV was 28.6% in 2021-23, which is statistically lower than the England average of 43.5%⁶⁵. National data shows that people from Black-African ethnic groups, heterosexuals (particularly men), and people using injection drugs are more likely to be diagnosed late.

The Isle of Wight public health team commissions sexual and reproductive health services which help to prevent unplanned pregnancies, STIs and HIV as well as to treat infection. The services prioritise addressing inequalities, including through dedicated clinics for young people, MSM, people with learning disabilities and sex workers.

⁶⁵ [Fingertips | Department of Health and Social Care](#)