The release of Victoria’s first ever Sexual and Reproductive Health (SRH) Strategy in 2017 highlighted the need for evidence-based data and research to accurately inform the design and improvement of SRH programs and services. Furthermore, social determinants of health must be considered due to their impact on sexual health behaviours, access and opportunities. This Snapshot will provide insight into the most recently available demographic, fertility, contraception and Sexually Transmitted Infection (STI) data for Stonnington.

Stonnington is a local government area in the Southern Metropolitan Region (SMR) of Victoria. There are 54,462 (52.5%) women and 49,371 (47.5%) men in the area (ABS 2017).

**BIRTH RATES**

- In 2016 the number of live births in Stonnington was 1,132
- Victorian average: 1,046 (WHV 2018a)
- This was a birth rate of 20.8 per 1,000 females
- Victorian rate: 24.2 per 1,000 females (WHV 2018b)
- In 2015 2.3 per 1,000 young women (15-19 years) had live births in Stonnington
- Victorian rate: 9.5 per 1,000 young women
- SMR rate: 5.1 per 1,000 young women (WHV 2018c).

**CONTRACEPTION**

- Oral contraceptives are the most popular form of contraception in Australia; 48% of women using a form of contraception use oral contraceptives, compared with only 5% who use an IUD and 5% who use an implanon (Garett et al. 2015)
- Low uptake of Long Acting Reversible Contraception (LARC) remains a significant barrier, women need to be educated and have access to make informed choices.

**UNPLANNED PREGNANCY**

- Half (51%) of Australian women have an unplanned pregnancy (Marie Stopes 2008)
- 1 in 3 Australian women will have a termination in their lifetime (Rowe et al. 2015).

*Sources available on the WHISE website*
• Chlamydia is the most commonly diagnosed sexually transmitted infection (Australian Women’s Health Network 2012).
  • The rate of chlamydia in 2017 was 34.9 per 10,000 females compared to 69.7 per 10,000 males.
  • Victorian rate: 19.8 per 10,000 (females) and 17.2 per 10,000 (males) (WHV 2018d).
  • Young people aged 15-24 account for 26.2% of all notifications in Stonnington (DHH 2018).

• Hepatitis B is a virus that can cause inflammation of the liver (Melbourne Sexual Health Centre 2017).
  • The rate of hepatitis B in 2017 was 1.4 per 10,000, females compared to 0.8 per 10,000 males.
  • Victorian average: 1.1 per 10,000 females compared to 1 per 10,000 males (WHV 2018e).

• In December 2017, a five-yearly Cervical Screening Test replaced the two-yearly Pap test (Department of Health n.d).
  • 64.3% of eligible women (aged 20-69 years) had a Cervical Screen between 2014-2015.
  • Victorian and SMR average: 60.5% (Victorian Cervical Cytology Registry 2015).

• In 2015, 94.8% of 12 year old girls in Stonnington received complete HPV Immunisation (3 doses).
  • Victorian coverage rate: 82.8%.
  • SMR average: 81% (National HPV Vaccination Program Register 2015).

• 1% of 12-14-year-old students reported that they had sexual intercourse.
  • 26.2% of 15-17-year-old students reported that they had sexual intercourse.
  • 44.8% of these students practiced safe sex by using a condom.
  • 81.3% of sexually active adolescent females have used contraception to avoid pregnancy (DE&T 2011).

• Sexual offences are acts, or intent of acts, of a sexual nature against another person, which are non-consensual or where consent is proscribed.
  • In 2017, the rate of sexual offences was 10 per 10,000 women in the Stonnington.
  • Victorian rate: 13.7 per 10,000 women.
  • SMR rate: 11.7 per 10,000 women (WHV 2018f).
Sources


National HPV Vaccination Program Register 2015, Population Based Coverage - Females and Males Ages 12-14 years by Dose Number and LGA Between 01 Jan 2007 and 30 June 2017


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