

WEDNESDAY 20 NOVEMBER 2019

Latest figures reveal government cuts to the public health grant has slashed contraception spending power by nearly a fifth since 2015

Analysis of the latest local government revenue and outturn data by the Advisory Group on Contraception has found that spend on contraception has fallen 18% in real terms since 2015/16. Whilst spending has increased from last year, without government investment in the public health grant funding remains significantly below 2015/16 levels.

These cuts are happening at the same time that:

- Demand on local sexual and reproductive health services is increasing;
- Abortion rates in women over 30 are steadily rising; and
- Prescribing rates for the most effective long-acting reversible contraception (LARC) methods have plateaued.

The AGC has been tracking cuts to contraceptive services since 2015, undertaking annual audits of local authority spend and contracting. Reviewing the latest data, members are increasingly concerned that national cuts to local authority budgets has put unsustainable pressure on commissioners to deliver more services to more people, with less money.

Early findings from the AGC's annual Freedom of Information request audit revealed that the proportion of councils reducing the number of sites delivering contraceptive services has continued to accelerate from 9% in 2015/16 to 26% in 2018/19. A further 18% of councils have planned closures in the current year, 2019/20. Overall, more than a third of councils commissioned fewer sites to deliver contraceptive services in 2018/19 than they did in 2015/16.

The reasons cited by local authorities are multi-faceted, ranging from cuts to the public health grant, loss of trained staff and service quality issues, through to the closure of general practices and changing models of service delivery towards more integrated sexual health services.

Whilst closures to sites can in some cases help to improve the quality of services, there is a lack of data to understand the impact of service disruption on women's ability to routinely access contraception. This is particularly true of vulnerable and hard-to-reach groups, where the AGC's audit found a notable gap in data on health outcomes and experiences of accessing care.

Ahead of the General Election and the formation of a new government, the AGC is asking all political parties to commit to protecting women's access to comprehensive contraceptive services and reversing the damaging cuts to the public health budget since 2015/16.

Dr Asha Kasliwal, President of the Faculty of Sexual and Reproductive Healthcare and AGC member, said:

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“Cuts to contraceptive services are putting women’s right to access the full range of contraceptive methods at risk. This is particularly true for women who require specialist and outreach services – those who are the most vulnerable in society. When cuts hit the frontline, these are the services that disappear first. Whilst we welcomed the Government’s commitment to increase the public health grant next year, only a long-term funding settlement that commits to fully funding services across the country will reverse the damage of five years of cuts.”

ENDS

Notes

References:

1. Health and Social Care Committee (2018), [Fourteenth Report of Session 2017–19: Sexual health](#) (attendances at sexual health services in England have increased by 13% from 2.9 million in 2013 to 3.3 million in 2017)
2. Department of Health and Social Care (2019), [Abortion Statistics, England and Wales: 2018](#) (since 2008 the proportion of women who had one or more abortions has increased for women aged over 30 (43%), as well as for women aged from 25-29)
3. Public Health England (2019), [Sexual and Reproductive Health Profiles](#) (over 25s abortion rate has increased from 13.7 per 1000 in 2014 to 16.2 per 1000 in 2018)
4. Public Health England (2019), [Sexual and Reproductive Health Profiles](#) (total prescribed LARC (excluding injections) rate has fallen from 50.2 per 1000 in 2014 to 49.5 per 1000 in 2018)

18% real terms cuts:

The latest local authority revenue and outturn data for 2018/19 was published by the Ministry of Housing, Communities and Local Government on 14 November 2019 and can be accessed here: <https://www.gov.uk/government/collections/local-authority-revenue-expenditure-and-financing>

The total spend on contraception in England in 2018/19 was: £175,510,322. This compares to a total contraception spend in England in 2015/16 of: £199,205,807. In nominal terms, this is a 12% cut in spend.

However, accounting for inflation in the cost of providing health services, this is an 18% reduction in total contraception spend – as set out in the calculation below. Inflation figures were based on the NHS Economic assumptions 2016/17 to 2020/21, which can be accessed here:

<https://www.gov.uk/government/publications/economic-assumptions-201617-to-202021/economic-assumptions-201617-to-202021>

Calculation:

	2015/16 (base)	2016/17 (+3.1%)	2017/18 (+2.3%)	2018/19 (+2%)
Modelled growth with inflation	£199,205,807	£205,381,187	£210,104,954	£214,307,053
Actual spend	£199,205,807	£180,047,274	£169,917,167	£175,510,322
% difference	0.00%	12.34%	19.13%	18.10%

Reduction in number of sites commissioned

The AGC undertook a Freedom of Information request audit of all local authorities during the summer of 2019, to find out more details on local authority spend and contracting practices for contraception services. The FOI audit achieved a response rate of 146 local authorities out of 152 (96%), although analysable response rates varied between questions. Responses from this audit and previous years findings revealed that there has been an increase in the proportion of local authorities reducing the number of sites commissioned to deliver contraception:

- From 12 out of 138 (9%) responding councils in 2015/16 to 35 out of 134 (26%) responding councils in 2018/19
- 24 out of 134 (18%) responding councils are planning closures in 2019/20
- On the whole, 46 out of 134 (34%) responding councils commissioned fewer sites in 2018/19 than in 2015/16

For further information, please contact the AGC Secretariat at AGC@incisivehealth.com or on 020 3435 6100.

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About the AGC

The AGC is an expert advisory group made up of leading clinicians and advocacy groups who have come together to discuss and make policy recommendations concerning the contraceptive needs of women of all ages. The AGC came together in November 2010 with a focus on ensuring that the contraceptive needs of all women in England, whatever their age, are met. The full list of members can be found online.

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For more information about the AGC and its work, please visit: <http://www.theagc.org.uk>