

Sexual Health in Canada

BASELINE 2007

Canadian Federation
for Sexual Health



Fédération canadienne
pour la santé sexuelle



Canadian Federation for Sexual Health (CFSH)

The Canadian Federation for Sexual Health is a leading advocate and authority on sexual and reproductive health, promoting universal access to reliable information and services and the recognition of sexual health as a fundamental human right. Formerly known as the Planned Parenthood Federation of Canada, CFSH is a national network of organizations that has been working in Canada and abroad for more than 40 years.

CFSH is a member of the International Planned Parenthood Federation (IPPF), which joins together family planning associations in nearly 180 countries.

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Foreword

For years, we have known that our work to promote sexual health in Canada would be well served by having data at our fingertips about many of the issues we deal with daily – ranging from pregnancy to sexually transmitted infections to contraception and sexual violence. And we have especially known that our efforts to work with young people on improving their sexual health would benefit from a central source of information about their sexual behaviors and health outcomes.

This report represents the first ever comprehensive, national, statistical portrait of Canadians' sexual and reproductive health. This rich information resource is a major step forward for the sexual health community, depicting significant trends influencing and affecting Canadians' sexuality and health.

The report also highlights areas where research simply doesn't exist that, were it available, would be extremely helpful in improving the negative trends in Canadians' sexual health. For example, in the process of gathering information for this report, it became clear that there is not enough data to fully explain why reported rates of sexually transmitted infections are rising or why abortion service accessibility varies noticeably across the country. How can we aim to improve education, services and support to Canadians' sexual health when we don't have the complete picture?

I am confident that this report will aid practitioners and policy makers in the sexual health field, and that it will inform decisions about future research directions to begin filling our knowledge gaps. But this report is just the beginning. It identifies issues and areas where we can work together to demand answers, strategies and solutions to substantially improve the ability of Canadians to practice healthy sexuality and exercise their sexual and reproductive rights.

Linda Capperault
Executive Director
Canadian Federation for Sexual Health

June, 2007

Executive Summary

The publication of the first comprehensive, national portrait of Canadians' sexual and reproductive health represents a landmark in the sexual health field. *Sexual Health in Canada* is intended to increase public and professional understanding of this critical component of Canadian well-being. The report identifies both positive and negative trends in Canadians' sexual and reproductive health. It also underscores the existence of critical gaps in research, public awareness and access to services.

Sexual Health in Canada amasses current research on key health indicators including contraceptive use, sexually transmitted infections, sexual violence and pregnancy outcomes. Because the patterns for life-long sexual and reproductive health are set early in life, the report pays special attention to trends among young Canadians. The health indicators used in this report are not necessarily the only important measures of sexual and reproductive health. But in the research gathering phase it became clear that public health statistics are simply unavailable for other potential indicators such as gender identities and roles, sexual orientation, eroticism, pleasure, and intimacy.

Another important information gap identified during the research process is the lack of data that would provide a more detailed understanding of the sexual and reproductive health of many sub-groups within the population. Of particular note is the lack of national information about the experience of minority and marginalized groups. Information regarding accessibility of services and health indicator trends of sub-population groups such as new Canadians, LGBTQ (Lesbian, Gay, Bisexual, Transgender and Queer) people, ethnic groups, Aboriginal persons, people living on the street and the disabled is generally not available. Greater focus and research is needed to explore the sexual health experiences and specific needs of diverse groups.

Sexually transmitted infections

The most prominent and identifiable sexual health indicator available is the incidence of sexually transmitted infections (STIs) among Canadians. Unfortunately, reported STI rates have been steadily increasing since 1997. For example, nearly 63,000 cases of chlamydia were reported in 2004, the highest number since this infection became reportable in 1990, and a 70% increase from the rate reported in 1997. And while the elimination of infectious syphilis in Canada was identified as an imminent goal as recently as 1996, rates have instead risen since that time. In 2004, the national infectious syphilis rate was almost nine times the rate reported in 1997.

The highest rates of chlamydia are found in Nunavut and the North West Territories, followed by the Yukon Territory and Saskatchewan. Similarly, the

highest rates of gonorrhoea are found in the North West Territories and Nunavut, with the lowest rates in Newfoundland and Labrador. Syphilis rates are highest in British Columbia and Ontario.

Youth are disproportionately affected by sexually transmitted infections. Although they represent about 14% of the population, over two-thirds of chlamydia infections between 1997 and 2004 were reported among young people aged 15-24 years. The reported gonorrhoea and syphilis rates during this time were also highest among 20-24 year olds.

The number of sexually transmitted infections is likely even higher than these figures suggest because the proportion of people reporting a history of a sexually transmitted infection probably only represents a fraction of the actual number of infections. Many instances of reportable STIs go undetected, particularly those that are asymptomatic such as chlamydia. Furthermore, many of the most common infections, such as human papillomavirus (HPV) and herpes simplex virus (HSV) are not reportable — making national and provincial/territorial infection rates indeterminable.

The rise in reported STI rates runs counter to Health Canada's 1996 *National Goals for the Prevention and Control of Sexually Transmitted Diseases in Canada*. Although Health Canada set a goal of lowering the overall rate of chlamydia to less than 80 cases per 100,000 Canadians by 2000, the rate reported that year was 150 cases per 100,000 — nearly twice the target rate. As the reported sexually transmitted infection rates of diseases like chlamydia and syphilis grow, the Health Canada objectives for 2010 are becoming increasingly unrealistic.

Unlike the dramatic rise in STIs, annual rates of new HIV infections have remained relatively constant in Canada, with an estimated range of 2,300 to 4,500 new cases reported for both 2002 and 2005. British Columbia reported the highest rate of new HIV cases in 2003. More than 88% of all new HIV cases between 1985 and 2005 were reported in Ontario, Québec and British Columbia. Over 20% of new HIV infections are among young people under the age of 30 years.

Contraception

There is a clear link between the rise of STIs and the use, or non-use of contraceptive devices, specifically condoms, that could prevent infection. While a significant majority of sexually active women in Canada are taking control of their fertility by choosing to use contraception, most rely on oral contraceptives, alone.

Ninety percent of women aged 18 to 24 believe they have enough information to be able to choose a method of contraception that is best suited for their needs. However, according to the *Canadian Contraception Study*, while women say that they are satisfied with the extent of their knowledge of available contraceptive choices, they generally have a limited familiarity with methods beyond oral contraceptives and male condoms, which are the ones they generally use.

The overall rate of condom use has declined over the last decade from 21% to 18%. Youth aged 15 to 24 years in the provinces of New Brunswick, Québec and Alberta reported lower rates of condom use than the national average for their peers.

Less than one in five Canadian women reported consistently using condoms as their chosen method of contraception. Among women who reported abandoning condom use, a vast majority stopped when they entered a monogamous relationship and/or perceived minimal risk for STIs. Most women reported stopping condom use prior to mutual negative STI testing by them and their partners. This suggests that women are using contraception primarily for pregnancy prevention, putting many of them and their partners at risk of contracting sexually transmitted infections.

Furthermore, many women are not using their chosen method of contraception correctly or consistently, elevating their risk of an unintended pregnancy or sexually transmitted infection. The steadily increasing STI rates indicate the need on the part of Canadians for a better understanding of their contraceptive options and the sexual health implications of their contraceptive behaviour.

Pregnancy and outcomes

National pregnancy rates have been in steady decline over the past two decades. While they still form the majority of the population bearing children, both birth and induced abortion rates are decreasing among women under 30 years, and the average age at which women are bearing children is rising.

There is no national data on the prevalence of unintended pregnancy in Canada. While abortion rates have decreased, the ratio of induced abortions to live births has remained relatively stable, suggesting that the proportion of pregnant women choosing to terminate a pregnancy has not substantially changed since 1997. Access to abortion services remains limited and pitted with barriers. Less than one in six Canadian hospitals reported providing abortion services in 2006. Access is further restricted by several provinces which do not provide full health insurance coverage for abortions performed in clinics.

Sexual violence

Sexual violence, in its many manifestations, has significant consequences for sexual health, including damage to the urethra, vagina and anus, increased risk of an unintended pregnancy and contracting a STI. Although the health ramifications of sexual violence are well documented, the incidence of it is not well tracked in Canada. Available data on the incidence of sexual violence is generally dated, or reliant on incidents reported to police — which represent only an estimated six percent of sexual assaults experienced in Canada. The limited information available about provincial and territorial rates of sexual violence indicate that they are highest in the territories of Nunavut and Yukon and the provinces of Newfoundland and Labrador, Nova Scotia and New Brunswick.

According to the 1993 *Violence Against Women Survey*, nearly 40% of Canadian adult women reported at least one experience of sexual assault since the age of 16. Four out of 5 female undergraduates surveyed at Canadian universities stated they had been victims of violence in a dating relationship. Of that number, nearly 30% reported incidents of sexual assault.

Youth sexual and reproductive health

Youth sexual and reproductive health¹ is of particular public health significance, as early sexual health choices and negative experiences may have considerable and detrimental consequences such as an unintended pregnancy, pelvic inflammatory disease or sub-fertility or infertility. Identifying trends in negative health outcomes among youth and gaps in their knowledge of sexual and reproductive health issues is therefore of distinct interest.

This report finds that there are a number of long-term trends occurring in youth sexual health. Adolescent pregnancy, abortion and birth rates suggest that young Canadian women have greater control over their fertility than in previous decades. The percentage of adolescents reporting having had sexual intercourse remained stable between 1988 and 2002. Meanwhile, the proportion reporting having had only one sexual partner increased while the number reporting having had many sexual partners decreased over time. Furthermore, a significant proportion (almost 87%) of sexually active youth are choosing to use contraception, suggesting that Canadian adolescents are exercising greater and more effective control over their fertility.

While generally Canadian youth are not engaging in sex at an earlier age than previous generations, 14 and 15 year-olds in the Maritimes and Québec are more likely to be sexually active than those in Ontario or the western provinces.

There has been a gradual decline in rates of adolescent pregnancy (among 15 to 19 year olds) in Canada. The lowest rate of adolescent pregnancy is reported in Prince Edward Island, while the highest rates are reported in the northern territories. Abortion is the most common outcome of adolescent pregnancy in Ontario, Québec and British Columbia. Live birth is the most common outcome of teen pregnancies in other provinces. No information is available for PEI and the territories on outcomes of teen pregnancies. In 2003, the abortion rate among teens was highest in Québec, followed by Manitoba. PEI is the only province which does not provide any abortion services.

A majority of youth reported using some form of contraception during their last intercourse, but many are not choosing to use condoms which would help to protect them against STIs. Adolescents and youth continue to be disproportionately affected by STIs, with more than two in three reported cases of chlamydia in 2004 occurring among 15 to 24 year-olds. It also appears that knowledge among youth of sexual health issues beyond basic anatomy is limited. There are significant

¹ The terms adolescent and youth as used throughout this document, adolescent generally refer to individuals aged between 14 or 15 and 19 years and youth refers to 14 to 24 years, unless otherwise stated.

barriers to reliable sexual health education and services for this age group and as a result, they are not acquiring sufficient knowledge and skills to protect themselves and practice healthy sexuality.

This information should be used to inform school-based sexual health education, given that it holds the potential to reach nearly every child and adolescent in Canada. Ideally, school-based sexual health education will equip youth with the knowledge and skills they will need to maintain their sexual health throughout their lives.

All Canadians deserve the right to practice healthy sexuality. Clearly, on a number of fronts more work is needed to improve the sexual and reproductive health of Canadians. This comprehensive portrait of Canadians' sexual and reproductive health serves to highlight current trends in sexual health in Canada and identify priority areas for policy and resources. It is up to professionals, advocates and policy-makers to work with youth to review these trends and develop a course of action.

Introduction

The Canadian Federation for Sexual Health (CFSH) envisions a global society that celebrates healthy sexuality, its diversity of expression and reproductive choice as fundamental human rights for individuals throughout life. However, efforts to improve the ability of Canadians to access information and services that encourage and facilitate the practice of healthy sexuality have been considerably hampered in the absence of a comprehensive portrait of the status of sexual and reproductive health. With limited and inconsistent health service and outcome information available to assess the trends in sexual health across the country, the state of sexual and reproductive health in Canada has been difficult to measure.

To fill this vital information gap, CFSH created the first national snapshot of sexual and reproductive health, *Sexual Health in Canada*. This report compiles current national and provincial/territorial statistics and research on the prevalence of sexual and reproductive health indicators. It is designed to serve as a reference for policy-makers, advocates, service providers and community-based groups concerned with sexual and reproductive health, allowing for a greater understanding of the trends that affect the lives of Canadians. By capturing a comprehensive snapshot of sexual health in Canada, this report highlights key areas that require increased policy and programming attention. The individual provincial/territorial analyses enable comparisons regarding not only the prevalence of negative health outcomes, but also differential access to information and services.

Sexual and reproductive health encompasses a diverse range of issues including, but not limited to, sex and gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Unfortunately, indications of fulfillment within these areas are not readily available, representing a critical gap in information. *Sexual Health in Canada* therefore relies on the rates of sexually transmitted infections, contraceptive use, pregnancy and pregnancy outcomes and sexual violence, with a particular emphasis on trends within the youth population, to compose a portrait of sexual and reproductive health in Canada. While these indicators are not necessarily reflective of positive sexual health, identifying and analyzing trends in these outcomes allows for a generalized understanding of the overall state of sexual health in Canada with respect to the avoidance of disease, unintended pregnancy or violence.

Sexual Health in Canada is a précis of current essential statistics, encapsulating the status of sexual and reproductive health of Canadians. From this information and increased understanding, we can work towards ensuring the right to healthy sexuality.

Sexual Health in Canada is the first ever comprehensive, national, statistical portrait of Canadians' sexual and reproductive health. This rich information resource is a major step forward for the sexual health community, depicting significant trends influencing and affecting Canadians' sexuality and sexual health.

