

Hallam Students' Union

Sexual Health Workshop

December 2025



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Background and Methodology

Across the UK there has been an increase in the transmission of sexually transmitted diseases (STIs)¹ and Sheffield is not excluded from this issue². To further understand this issue from students studying at Sheffield Hallam, Hallam Students' Union (HSU) Research Team with the support of two student staff, held a workshop involving listening rooms and group discussions. These sessions looked at the stigmas involved with STIs and where students may or may not seek help or support for these. Ethically approval was sought via the University to ensure the research complied with ethical guidelines.

Overall, 11 students attended the workshop, there was a 30-minute listening room activity where students were split into groups and given different vignettes (see appendices) with various questions, and the conversations were recorded. This was followed by some group discussions around where students can access support in relation to their sexual health. As an incentive for taking part students were given £25.

The recordings from the sessions have been thematically analysed and the key themes are detailed below.

Key findings

Stigma and shame in seeking help

As expected, it was discussed how there is a stigma and shame in having an STI or in seeking advice around sexual health. Women in particular, but also men, found it embarrassing to approach a stall and take free condoms, they would much rather have the option to take things like this anonymously. There was a sense of embarrassment around other people seeing them access this kind of support. However, there seemed to be a consensus around changing this and encouraging students and young adults to be more confident in seeking help and advice around their sexual health. Whether this be through improved communication or through continuing to have outreach stalls regularly on campus so students become exposed to people being there to discuss sexual health.

Demographic differences

There seemed to be key differences in perceived attitudes towards sexual health from women in comparison to men. Participants felt as though there is more shame for women to have an STI in comparison to men. For men, having more

¹ Sexually transmitted infections and screening for chlamydia in England: 2024 report. https://www.gov.uk/government/statistics/sexually-transmitted-infections-and-screening-for-chlamydia-in-england-2024-report

² Spotlight on sexually transmitted infections in Yorkshire and Humber: 2023 data. https://www.gov.uk/government/publications/sexually-transmitted-infections-yorkshire-and-humber-data/spotlight-on-sexually-transmitted-infections-in-yorkshire-and-humber-2023-data



sexual partners and approaching outreach stalls for free condoms fits into that 'lad culture' which they felt stemmed from school.

There were also clear differences in cultural approaches to sexual health. International students felt their countries and families approach to sexual health was a lot more private, and something that wasn't openly discussed. They would still feel uncomfortable approaching stalls for sexual health advice particularly if someone else from their culture saw them accessing this. Those kinds of approaches were still engrained into them even though they were now living here.

Lack of education

Discussion arose around the sexual education provision in the UK, participants commented on how this is not adequate in schools which then has an impact when those students become young adults. Participants also discussed how there is a lack of factual information about sexual health and STIs, information often creates fear in those who are seeking it. Finally, international students discussed how it may be beneficial to have access to some for sexual education particularly if they come from cultures where there is more stigma attached to talking about sexual health.

Themes

The following section details the key themes that have arisen during the listening rooms and workshops.

Stigma

Most attendees discussed the negative stigma attached with having an STI and worryingly the negative stigma of even just seeking information around sexual health. There was a perception that words like 'dirty' or 'unclean' could be associated with those who have an STI or are seeking out information around their sexual health. Additionally, there was a perception that those who have an STI might have done something wrong, or would be perceived to be doing something wrong. Consequently, this can cause people to shy away from the subject and this can cause a lot of problems.

'There's a whole stigma attached when talking about sex and people don't really want to talk about it. I think people shy away from it a lot and I think that has caused a lot of problems, but our generation is maybe slightly more open'

'You don't want to talk about it because it's awkward'

Gender differences

As expected, the group discussed the different experiences men and women may have around STI's and sexual health, with both experiencing their own difficulties.

Women discussed how there is often a lot of shame attached to having an STI and even though it could have come from a partner, the shame focuses on the woman. Additionally, there was feeling that women or girls are judged more harshly by society when talking about sexual health.



There was also a point raised about 'lad culture' and how this can often stem from sex education and boys behaviours at school, which is then still carried up to a University setting. Additionally, they discussed how it can be seen as a positive for men to have numerous sexual partners and this can make them a 'lad' however, it was not the same for women.

Cultural differences

Due to the mix of home and international students in the session clear cultural differences around sexual health became apparent. The attendees from Asian or African cultures commented on how there was a completely different approach to sex in their home countries, with sex being a taboo subject that isn't discussed. Approaching an organisation for information around safe sex or STI's would be frowned upon and if people saw them doing this there would be a negative view.

'I agree with social media for advice, as coming from my family the likelihood of walking up to someone and asking a question is unlikely. They would want anonymity'

However, although there is a different view to sexual behaviours in their home countries, international students discussed how coming to the UK may lead international students to engage in sex more freely as they are 'free from their parents'. As a result, this behaviour alongside the stigma approaching organisations for help or information learned from their cultural approach to sex could lead to an increase in STI transmission.

Education

There were a couple of different components to the education theme discussed. Firstly, respondents spoke about the sex education they received whilst at school, with the agreement that this what not adequate. This lack of education at key ages is then setting young adults up to 'fail'.

'We briefly had sex education at school, but it wasn't very good. In one lesson they just showed a cartoon of two people having a pillow fight'

Secondly, respondents spoke of the lack of awareness around the transmission of STI's and how they are treated. They discussed how there was a need for factual information based on scientific evidence that is presented to students in an easy to access way that doesn't create a sense of fear, but more an approach of, you have contracted an STI and these are the simple steps you can take to sort it.

'There are still people that believe that these are contagious through skin and then avoid people with these diseases'

Finally, there was a discussion around how due to the issues discussed in the previous theme around international students and sexual health, there is a need for perhaps sex education to be available to them when they start studies in this country. Some discussed how international students may come to this country and realise there is a more relaxed approach to sexual behaviours which may lead to increased engagement. Therefore, adequate education around safe sexual behaviours is needed.



'A lot of people in society are not just British, they come from other countries. Sheffield is a big international community, so they may come and be like I am free from my parents I can do what I want to do'



Fear mongering

Interestingly attendees discussed the fear mongering that comes with the education and awareness of STI's. Often there is the approach that contracting an STI is the 'end of the world' and 'the worst thing that could ever happen' which they felt could also fuel the lack of engagement with screening and sexual health initiatives. Instead, they discussed having an approach that focuses on how most STI's can be easily treated can help to empower students to seek help around their sexual health as well as helping to remove the negative stigma that is attached.

"...especially the way they talk in schools, it's as if it's the end of the world and it's the worst thing that could happen, when it's not'

'There's not enough information on what to do if you do have one, just all scare mongering, it's all just focused on prevention so then people are scared when they do get it'

Support

Attendees discussed support that can be offered to help and empower students with their sexual health. Firstly, it should be noted apart from their GP attendees were unaware of what organisations could help them with their sexual health or where they could turn for trusted advice.

Most agreed there was embarrassment and stigma walking up to outreach stalls providing sexual health information or free condoms, they would prefer to have condoms free to take it toilets etc. Approaching a reception or stall to ask for them created more of a barrier and hindered students accessing them. Additionally, having outreach stalls in more secluded areas where you can talk to staff in a more private location would be beneficial to some students. Interestingly, one student made the point that although privacy around this subject is beneficial, they noted there should be a shift in this.

It was also discussed how student to student conversations around sexual health are easier to have than with a member of staff or health professional. There was the suggestion of have 'student reps' who could advise students around their sexual health and wellbeing.

How can HSU support and empower students around their sexual health?

Access to sexual health products

One area students discussed was access to sexual health products such as condoms. They explained how they would overall like more privacy when collecting things such as free condoms, this could be similar to the scheme used to collect tampons/sanitary pads where students use a different name, or lockers that they collect them from. Additionally, students stated it would be good to have free condoms in toilets but acknowledged this may lead to students taking a lot.

It had been previously discussed in the session that although there is a taboo around sexual health and students may often feel embarrassed on judged for accessing support, this needs to change. Students discussed how continuing to have stalls



out about on campus that may give out condoms or sexual health information leads to increased exposure around the topic. This may help to reduce the stigmas and embarrassment in seeking help or advice.

Support and guidance

It appears students want most aspects of support and information to be as confidential as possible, there were suggestions around anonymous calling, information being displayed in toilets and generic information around the topic and must up to date research on social media. Students were passionate about information coming from reliable sources and as discussed previously in the workshop they wanted it to not to focus on the fear mongering side of things. Ideally, they want facts that don't make an individual panic if they do happen to contract an STI. There is the hope that this approach would then remove some of the stigma of having an STI.

Wider organisations

Students also commented on how they would like to see improved support and information around sexual health from wider organisations in Sheffield, for example, Sexual Health Sheffield. This will ensure that is not only students who are confident in their sexual health and wellbeing but the wider population in Sheffield.



Appendices

Vignettes

- What are the current views and opinions around STIs amongst students?
- What are the current views and opinions around stigma/shame associated with STIs or accessing support around sexual health and wellbeing?
- How can the Students' Union best interact/communicate with students around sexual health and wellbeing?

Naomi has had casual sex with someone she met on a night out. A few days after this, she starts getting symptoms she knows suggest she has an STI. She feels embarrassed and puts off speaking to her GP as she feels uncomfortable at the thought of potentially undressing at the doctors, and doesn't want to tell her friends in case they judge her. The symptoms end up getting really painful, and eventually Naomi ends up calling 111, worrying she is really ill. 111 tell her she needs to go to Sexual Health as soon as possible, or make a GP appointment. Does this scenario feel realistic? Why do you think Naomi didn't want to tell her friends and felt so embarrassed about talking to the GP?

Lauren, Hassan, Dee and Liam are course mates heading to a lecture together on campus, when they are stopped by a sexual health charity handing out free condoms. At first, none of them really want to engage, but Hassan then jokes about it, saying "Why not, gotta have one for your wallet!" and grabs handful. Lauren wants to take some as well, as condoms are expensive and it's her main form of birth control, but doesn't feel as confident about taking some. Why do you think this is?

Jay and Luca have got together on a night out. They go back to Jay's place and start to engage in sex. During foreplay Jay explains that they don't want to use a condom as it feels better without one, but reassures Luca that they will buy them the morning after pill tomorrow morning to ensure they don't get pregnant. Luca agrees, and the pair have sex, and in the morning Jay buys the morning after pill. Do you see any issues with this scenario?

The Student's Union and SHS have teamed up and are hosting a mobile sexual health testing van on campus, in a busy area. The van is offering free sexual health testing kits, which you can complete on the same day and return to the van for free. Jonah hasn't a sexual health test in over a year and feels fine but has also been having unprotected sex with both men and women in the last year. He wants to go and get a test, but is hesitant. Why do you think this is?



Activity notes









