Health and Wellbeing Board 26 February 2014

Title of paper:	Teenage Pregnancy in Nottingham – an update		
Director(s)/ Corporate Director(s):	Dr Chris Kenny, Director of Public Health Wards affected: All		All
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Other colleagues who have provided input:			
Date of consultation wi (if relevant)	th Portfolio Holder(s) 13.02.2014 Councillor A	lex Norris	
Relevant Council Plan			
Cutting unemployment by a quarter			
Cut crime and anti-social behaviour			
Ensure more school leavers get a job, training or further education than any other City			<u> </u>
Your neighbourhood as o			
Help keep your energy b			
Good access to public transport			
Nottingham has a good mix of housing			
Nottingham is a good place to do business, invest and create jobs			
Nottingham offers a wide	range of leisure activities, parks and sporting event	IS	
Nottingham offers a wide Support early intervention	range of leisure activities, parks and sporting event		x

Summary of issues (including benefits to citizens/service users):

Teenage pregnancy is a complex and serious social problem. Having children at a young age can adversely influence the health and wellbeing of young women, severely limit education and career prospects and result in negative health outcomes for their children, who are significantly more likely to become teenage parents themselves. In Nottingham reducing rates of unplanned teenage pregnancy and supporting teenage parents is delivered through a partnership approach conveying the message that reducing teenage conceptions is 'everyone's business'. Early Intervention and Primary Prevention is central to our approach to support parents to make positive decisions and ensure the best possible start in life for their children.

Nationally, the under-18s conception rate is at its lowest level since 1969, however, this still equates to approximately 30 000 conceptions (15 to 17 years of age) per year of which three quarters are unplanned and half end in abortion. The data for Nottingham for Quarter 3 2012 indicates that the rolling quarterly rate of 42.6 per 1000 girls aged 15-17 remained the same as the previous rolling figure reported in Quarter 2 2012.

In Nottingham during the 12 months from the baseline in October 1998 to September 1999 there were 362 pregnancies, indicating a decrease of 43.1% when compared to the September 2012 data (206 conceptions) This puts Nottingham City in the top 30% of most improved local authorities with regard to the number of conceptions.

Reducing rates of unplanned teenage pregnancy and supporting teenage parents is carried out through a partnership approach conveying the message that reducing teenage conceptions is 'everyone's businesses'. Early Intervention and Primary Prevention is central to our approach to support parents to make positive decisions ensuring the best possible start in life for their children.

Recommendation(s):

- Members of the Health and Wellbeing Board are asked to note the content of the report.
 Members of the Health and Wellbeing Board are asked to note the development of the 2014/15 Teenage Pregnancy Plan and comment on the draft plan when circulated in March 2014.
- 3 Members of Health and Wellbeing Board are asked to agree to receive an annual update from the Teenage Pregnancy Taskforce.

1. <u>REASONS FOR RECOMMENDATIONS</u>

Teenage pregnancy remains a key driver for poor health and social outcomes. Despite the continued reduction in teenage pregnancy rates in Nottingham, there is no room for complacency and all organisations / partners must continue to work together to ensure a cohesive strategic approach to achieve our 2020 target. The development of a refreshed Teenage Pregnancy Action Plan 2014/15 for Nottingham is central to ensuring that we achieve a sustained reduction of the rates year on year.

2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

Teenage pregnancy is a complex and serious social problem. Having children at a young age can influence the health and wellbeing of young women, severely limit education and career prospects and result in negative health outcomes for their children, who are significantly more likely to become teenage parents themselves. There are also strong associations between high under-18 conception rates and; low educational attainment, low aspirations, poor attendance at school, alcohol use, regretted sex or forced sex, being in public care, being the daughter of a teenage mother, having mental health problems, having been sexually abused or involved in crime.

For teenage conceptions that end in a birth the outcomes are often poorer for mother and child and can include:

- Of those not in employment, education or training at age 16-18, 15% are teenage mothers or pregnant teenagers.
- > Teenage parents are 20% more likely to have no qualifications by age 30.
- Teenage mothers are 22% more likely to be living in poverty at age 30 and much less likely to be employed or living with a partner.
- Children of teenage mothers have a 63% increased risk of being born into poverty and are more likely to have accidents and behavioural problems.
- Teenage mothers have three times the rate of postnatal depression and a higher risk of poor mental health for up to three years after the birth.
- The infant mortality rate of babies born to teenagers is 60% higher than those born to older parents.
- Teenage mothers are three times more likely to smoke through their pregnancy and 50% less likely to breastfeed – both of which have negative health consequences.

Lowering teenage pregnancy rates is, therefore, a key driver for reducing health inequalities and social exclusion. Achieving any reduction in the current rates requires high level strategic understanding and commitment from all agencies to secure a coordinated

approach. Public Health will continue to influence and lobby a wide range of partners at a strategic level to ensure that the reduction of teenage pregnancy rates remains high on everyone's agenda.

National and local statistics

Nationally, the under-18s conception rate is at its lowest level since 1969, however, this still equates to approximately 30 000 conceptions (15 to 17 years of age) per year of which three quarters are unplanned and half end in abortion. The latest provisional teenage pregnancy data is for Quarter 3 (July to September) 2012, during this quarter the under-18 conception rate for England was 28.4 conceptions per 1000 girls aged 15-17 compared to 32.0 as at Quarter 3 2011; representing a decrease of 11.3% and continues the overall downward trend observed since 1998.

The data for Nottingham for Quarter 3 2012 indicates that the rolling quarterly rate of 42.6 per 1000 girls aged 15-17 remained the same as the previous rolling figure reported in Quarter 2 2012. However, the current rate is better than Quarter 3 2011 (50.4 per 1000 girls) and Quarter 3 1999 (73.4 per 1000 girls) demonstrating reductions of 15.5% and 42% respectively.

Teenage pregnancy numbers

There were 206 conceptions for the year ended September 2012 compared to 242 for the same period the previous year, a 14.9% reduction. During the 12 months from the baseline in October 1998 to September 1999 there were 362 pregnancies, representing a decrease of 43.1% when compared to the September 2012 data (206 conceptions). This puts Nottingham City in the top 30% of most improved local authorities with regard to the number of conceptions. The England average is 32% better than the 1999 baseline of 39 643 conceptions compared to the current 26 819. This continued improvement in Nottingham has improved its national ranking which has now dropped to 13th highest teenage pregnancy rate in the country. Middlesbrough currently has the highest rate at 52.1 and Barnet the lowest at 13.9; the England average is 28.4. Of the 11 statistical neighbours, Nottingham has the fourth highest teenage conception rate compared to the third highest for Quarter 3 2011.

The national and local strategic drivers

Although the overall number of teenage conceptions has reduced significantly, reductions in the number of school age conceptions have not been so dramatic. Therefore, there is commitment within the Teenage Pregnancy Plan to identify and intervene early to support the most vulnerable children and young people who are at risk of becoming teenage parents eg looked after children and those with poor attendance and attainment at school (particularly girls not achieving sufficient progress during school years 7 to 9).

Nationally, the focus on teenage pregnancy began in 1999 with the previous government's national 'Teenage Pregnancy Strategy' which had the ambitious target of reducing teenage pregnancy rates 50% by 2010. Although this target was not achieved, reducing unplanned teenage pregnancy continues to be a high priority and we continue to keep the momentum going in terms of advice, prevention and promotion. By 2020, the Nottingham Plan objective is to halve the rate of under 18 conceptions from the 1998 baseline of 74.7 to 37.4. Although this remains a constant challenge, the City is still showing significant year on year progress and is ahead of the 2013/14 incremental target of 52.6 per 1000 population.

Reducing the under 18s conception rate is included in the *Public Health Outcomes Framework* and is one of the key priorities in the *Framework for Sexual Health Improvement* published in March 2013.

The overarching aim in Nottingham is to enable teenagers to make genuine, informed decisions about their lives in order to achieve a long-term reduction in the number of unplanned teenage pregnancies and improve outcomes for teenage parents and their children. The Teenage Pregnancy Plan 2014 - 2015 is currently under development. The previous plans were delivered through a strong partnership commitment and governance structure with the targets underpinned by the Nottingham Plan to 2020, the Council Plan and the Children and Young People's Plan.

Nottingham's high level Teenage Pregnancy Taskforce, founded by Graham Allen MP and now chaired by Councillor Alex Norris, ensures that reducing unplanned teenage pregnancy and supporting teenage parents, remains a high priority in the City. Nottingham's teenage pregnancy agenda is firmly rooted within all of our Early Intervention work.

Services in Nottingham

Work to tackle teenage pregnancy is delivered through both universal services for children, young people and families as well as targeted support to those most at risk.

Reducing rates of unplanned teenage pregnancy and supporting teenage parents is carried out through a partnership approach conveying the message that reducing teenage conceptions is 'everyone's businesses'. Early Intervention and Primary Prevention is central to our approach to support parents to make positive decisions and ensure the best possible start in life for their children.

We have a local commitment to 'You're Welcome' standards and many of our City services work towards this accreditation to ensure that their services are young-people friendly.

Nottingham services for Primary Prevention include:

- Nottingham City's Outreach Contraception and Sexual Health Services (CASH) for young people deliver accessible and integrated sexual health services within the community focusing on those aged 13-25 and at risk of poor sexual health. CASH services are available in a multitude of locations eg schools, health centres, colleges, children's centres etc and offer advice and support on the full range of contraceptive services, providing condoms through the C-Card scheme, emergency contraception and making referrals as appropriate. Between April 2011 and March 2012 CASH recorded 7680 attendances by young people.
- General Practitioners provide information and contraception eg Long Acting Reversible Contraception (LARC).
- Pharmacies across Nottingham provide a range of services including emergency contraception and pregnancy testing.
- The 'Public Health Nursing for school-aged children and young people' service is central to supporting the reduction in teenage pregnancies by providing information and practical support through the delivery of 'Clinic in a Box'.
- The delivery of Sexual and Relationship Education (SRE) continues to be encouraged in all schools as an evidence based approach to improving young people's level of information, understanding and reducing pregnancy rates.
- Family and Community Teams support activities for children, young people and families and are based in Children's Centres.

The teams have staff trained to deliver sexual health, contraceptive and positive relationships advice as well as support to young people and adults aged 13-25.

Universal and targeted youth provision carries out project work to raise aspirations and promote positive relationships.

Nottingham services for Early Intervention include:

- The Family Nurse Partnership is a licensed, intensive home visiting programme working with teenage parents to improve pregnancy outcomes, child health and development as well as aspirations for parents and their baby. The Family Nurse visits from early pregnancy until the child is two years old
 - developing relationships with the mother, father and family to support and educate on parenting and any issues that concern the young woman.
- The Teenage Pregnancy Midwifery service is available to support all pregnant under-18s (and for under-19s with additional needs). The majority of these young women will have a Family Nurse Partnership nurse and access the generic maternity service too.
- > The generic Midwifery and Health Visiting services support all young parents.
- The Beckhampton Centre is a learning centre for school age pregnant girls and school aged mothers who have made a decision to keep their babies. The Centre provides continuity of education for the period a student is unable to attend mainstream school and supports the girl in her role as a young mother providing onsite nursery care for the babies. The teenage pregnancy midwifery service and health visitor service are attached to the Centre and provide weekly antenatal and postnatal sessions.
- The Education Officer for Teenage Pregnancy co-ordinates and monitors the participation and attainment of all pregnant teenagers and school-age parents, assisting them to overcome barriers to accessing education and prevent social exclusion.

Development of the new Teenage Pregnancy Plan 2014-15

On 8 November 2013, a Teenage Pregnancy Network event was held to develop the Teenage Pregnancy Plan 2013-14 and the new teenage pregnancy pathway. 60 people attended the event and contributed to the development of the plan and the pathway. The full draft plan will be emailed out for consultation during March 2014.

Conclusion

The continual reduction of teenage pregnancy rates is not easy to achieve and the evidence clearly shows that any one organisation on its own will not have sufficient impact to guarantee a year-on-year reduction. The examples of current services and strategic drivers within this paper illustrate that plans and actions should be developed and delivered in partnership in order to improve outcomes for all young people.

Commissioning decisions

None

Commissioning intentions

None

3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

None

4. FINANCIAL IMPLICATIONS (INCLUDING VALUE FOR MONEY/VAT)

None

5. <u>RISK MANAGEMENT ISSUES (INCLUDING LEGAL IMPLICATIONS AND CRIME</u> <u>AND DISORDER ACT IMPLICATIONS)</u>

None

6. EQUALITY IMPACT ASSESSMENT

Has the equality impact been assessed?	
Not needed (report does not contain proposals or financial decisions)	Χ
No	
Yes – Equality Impact Assessment attached	

Due regard should be given to the equality implications identified in the EIA.

7. <u>LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR</u> THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

A link to the previous Nottingham City Council Teenage Pregnancy Plan 2011-12 can be found at <u>http://nottinghamcity.gov.uk/index.aspx?articleid=1328</u>

A Framework for Sexual Health Improvement in England *Department of Health* 15 March 2013 <u>https://www.gov.uk/government/publications/a-framework-for-sexual-health-improvement-in-england</u>

Tackling teenage pregnancy: Local government's new public health role *Local Government Association* March 2013 <u>http://www.local.gov.uk/web/guest/publications//journal_content/56/10171/3964823/PUBLI</u> <u>CATION-TEMPLATE</u>

Public Health Outcomes Framework for England 2013-16 *Department of Health* January 2012 <u>https://www.gov.uk/government/publications/healthy-lives-healthy-people-improving-outcomes-and-supporting-transparency</u>

Chief Medical Officer Annual Report 2012, Our Children Deserve Better, Prevention Pays <u>https://www.gov.uk/government/organisations/department-of-health</u>

Guidance on registering births at children's centres <u>http://www.foundationyears.org.uk/2013/09/registering-births-at-childrens-centres/</u>