



## Scrutiny and Overview Committee

### Report from the Director of Children & Families

For Information

Wards Affected:

ALL

## Teenage Pregnancy and Sexual Health

### 1.0 Summary

This paper aims to up-date members on the development of the Teenage Pregnancy and Young People's Sexual Health Strategy and the outcomes from the Teenage Pregnancy National Support Team's visit in May 2007. This paper also highlights two areas that Members may wish to consider as a theme for a Scrutiny and Overview task group.

### 2.0 Recommendations

Members are asked to note the progress that has been made in improving young people's sexual health and the revised Action Plan reflecting the outcomes from the National Support Team visit. Members are also asked to consider the proposed themes for a task group focus.

### 3.0 Details

Brent has had one of the highest teenage conception rates in the UK, and is an area that has a disproportionate number of sexually transmitted infections (STIs). Brent is faced with a multi-faceted problem, requiring a sustained, co-ordinated approach. Early parenthood tends to restrict the life chances of young people, limiting their opportunities for education, training and employment and making them more likely to be dependent on benefits. Research has shown that teenage parents and their children are more likely to experience poor health outcomes and live in low quality housing.

### 3.1 Brent also faces a number of challenges including:

- Brent PCT's recent financial deficit and organisational change;
- 81st most deprived Local Authority in England, out of 354;

- 8 of Brent's 21 wards are teenage pregnancy 'hotspots' with rates among the highest in England;
- 79% of teenage mothers are lone parents;
- Growth of young people's population;
- Diversity and mobility of population.

### 3.2 Data

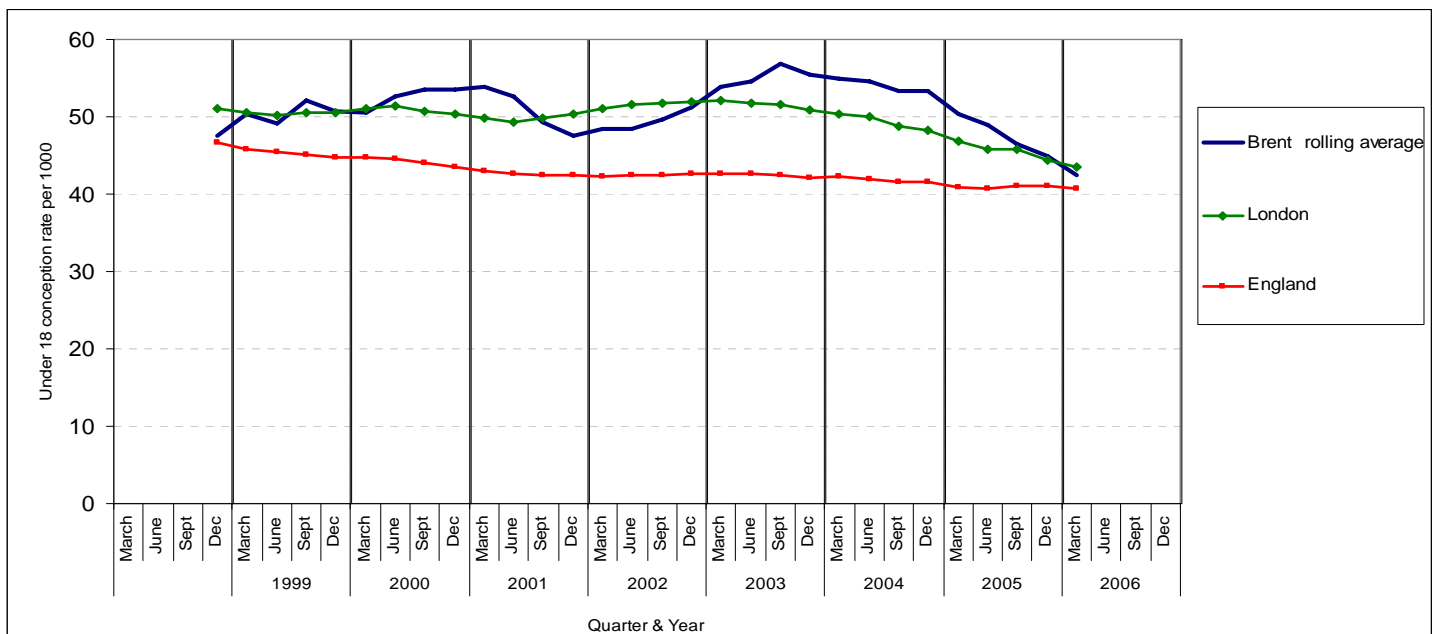
The Government aims:

- To halve the rate of teenage conceptions among under 18's by 2010 and to set a firmly established downward trend in under 16 conceptions
- To increase to 60% teenage parents in education, training or employment to reduce the long term risk of social exclusion by 2010

3.3 The latest data published by the Department for Children, Schools and Families Teenage Pregnancy Unit has indicated that Brent has been moved from Red to Amber/Red in their traffic light ratings. The data indicates:

- Rolling quarterly average for Brent has been reducing each quarter since September 2003 (56.8) to March 2006 (42.4);
- With the exception of the quarter beginning September 2004, the quarterly rate has been constantly dropping since September 2003 (59.5) to March 2006 (35.3);
- 30 fewer conceptions in March 2004 compared with March 2006;
- Latest under 18 conception rate for Brent (March 2006) is 8.2 points below London average and 5.4 points below England average.

Teenage Pregnancy Trends in Brent LB Dec 98 – March 06



3.4 The rates are measured per 1,000 of the female population aged 15-17yrs old. The rates are measured using the Office for National Statistics (ONS) annual under 18 conception data, however, there is a fourteen month time-lag in the publication of national conception statistics, this is because in order to record

a conception the ONS first require information on the birth or abortion resulting from that conception. As birth registration can legally be undertaken up to 6 weeks after birth, information on a birth may not be available until 11 months after the date of conception, then approx 3 months is needed by ONS to compile the data.

3.5 Teenage mothers in Brent by locality - (Quarter 1) 1<sup>st</sup> April 2007 to 30<sup>th</sup> June 2007 Source CIS (Brent PCT)

Locality	16yrs	17yrs	18yrs	19yrs	Grand Total
Harlesden	3	1	1	1	6
Kilburn				2	2
Kingsbury		1	7	3	11
Wembley	1		4	2	7
Willesden			4	5	9
<b>Total</b>	<b>4</b>	<b>2</b>	<b>16</b>	<b>13</b>	<b>35</b>

3.6 Historically Brent's hotspot areas have been Harlesden, Stonebridge, Willesden and Church Road. This is still the case with the 16's and under. For the older teenage group this recent data points to a possible shift to North Wembley and Kingsbury. This may be linked with the regeneration programme and the re-location of residents to the north of the borough. Future data needs to be analysed and trends monitored over the next two quarters.

3.7 **Teenage Pregnancy and Sexual Health Team**

Brent has a Young People's Sexual Health and Teenage Pregnancy Team consisting of a manager, 3 support advisors and an outreach worker. The advisors work with issues such as: housing, benefits, childcare, health, self esteem, relationships, anger management, conflict, education, training and employment. The team also provides age and culturally appropriate sexual health, relationships, and self esteem sessions to young people in a variety of settings. These workshops are available at school health days, young people's groups, colleges, youth settings, pupil referral units and care homes for young people. The team is funded through a number of funding streams: Local Area Agreement, Connexions and the PCT.

3.8 The team works closely with a number of agencies, statutory and voluntary, to provide holistic support and preventative programmes for young people in Brent. Key partners include:

- Brent PCT – health promotion, sexual health commissioner, DAT and sexual health training manager, Brent Drugs and Alcohol Team (DATT), school nurses, health visitors, midwives.
- Brent Children and Families Department – Extended Services, Integrated Services, Social Care
- Children's Centres

- Secondary Schools, Pupil Referral Units, Brent Education Tuition Service, MPower, Fresh Start, Right Track, College of North West London, BACES
- The African Child
- SHOC (Sexual Health On Call)
- Brent Centre for Young People

### 3.9 **National Support Team**

The Teenage Pregnancy National Support Team (NST) offered support to all Authorities with high teenage conception rates and visited Brent in May 07. They held two half day consultations and met with a number of partners from the statutory and voluntary sector. Following on from their visit, key issues were highlighted and recommendations for forward actions are now integrated into the Teenage Pregnancy Action Plan. Key features of the Action Plan include:

#### 3.10 Strategic:

- The Teenage Pregnancy Strategy to be revised to reflect a strong emphasis on prevention;
- A Teenage Pregnancy Executive Group to be established to monitor the implementation of the TP Strategy and Action Plan;
- Local data collected and analysed in partnership with PCT.

#### 3.11 Prevention:

- Increase access to contraceptive and sexual health advice and support services by increasing the number of drop-ins in venues accessible to young people;
- Sex and Relationship Education to be audited in Brent secondary schools;
- Continue to target and identify those at risk of teenage pregnancy – through the Teens and Toddlers Programme and work with identified ‘at risk’ groups in schools and Pupil Referral Units;
- Relationships and Sexual Health Peer Education Programmes to be established in schools and in the community;
- All frontline practitioners to receive basic sexual health awareness and signposting to support services training;
- Identify and disseminate to practitioners cultural and faith issues and barriers in relation to teenage sexual health and pregnancy.
- Provide support to parents/carers in talking to their children about relationships and sex.

#### 3.12 Support:

- Holistic programme of support continues to be delivered by Young People’s Sexual Health and TP Advisors;
- Increasing the number of young parents engaged in employment or training through a Young Mothers Learning tailored course and a Young Fathers Learning tailored course.

### 3.13 **Recommendations for Task Group:**

Two key areas which continue to be challenging are working with parents and working with faith and cultural groups. Relationships and sexual health is a sensitive and emotive area, not openly discussed, surrounded by many taboos and preconceived perceptions. In order to reduce the rate of teenage pregnancy and meet the 2010 target there is a need for a concerted, co-ordinated approach from parents, community and young people. However, ensuring the engagement of Brent's diverse communities, faith groups and parents is an area that needs further work. A task group set up to look at these issues and provide some insight and examples of good practice would enable work to progress to achieving the 2010 targets.

Members may therefore consider setting up a task group to consider one of both of the following themes:

- How can we engage parents in supporting their children with healthy relationships?
- How can we engage communities and faith organisations in supporting relationships and sexual health education?

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