

**CHILDREN AND YOUNG PEOPLE SCRUTINY COMMITTEE  
28TH JUNE, 2010**

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**TEENAGE PREGNANCY AND CONCEPTION RATES AND HEALTH EDUCATION  
IN SCHOOLS TASK AND FINISH REVIEW GROUP**

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**SUMMARY REPORT**

**Purpose of the Report**

1. To present the outcome and findings of the Teenage Pregnancy and Conception Rates and Health Education in Schools Task and Finish Review Group established by the Children and Young People Scrutiny Committee to scrutinise teenage pregnancy and conception rates and health education in schools.

**Summary**

2. The Children and Young People Scrutiny Committee, at its special meeting held on 14th June, 2010, agreed to establish a Task and Finish Review, consisting of all its Members to undertake a review into how to reduce teenage pregnancy and conception rates in Darlington and support and encourage social and health education programmes being delivered within the Borough's schools.
3. The piece of work arose from the Director of Public Health's report entitled 'Healthier Lives for Children and Young People in County Durham and Darlington', in the context of the National Strategy 'Healthy Lives, Brighter Futures' which states that 'good health for children and young people is crucial, because it enables them to make the best of their opportunities in education and in developing healthy lifestyles'.
4. The following are extracts from that report:-

'Teenage pregnancy continues to be of concern. The provisional under 18 conception rate for County Durham in 2007 was 49.9 per 1000 girls aged 15 to 17 years and for Darlington 55.2/1000, compared with the England rate of 41.7/1000.'

'County Durham and Darlington have significantly higher than national teenage conception rates and continue to be challenged by the national target of a 55% reduction from the 1998 baseline.'

5. The Task and Finish Review Group met formally on 21st June, 2010 to undertake its formal investigations and to collate its evidence and compile the final report, which is attached at **Appendix 1**.

## Recommendations

6. It is recommended that:-

- (a) That the final report and recommendations of the Teenage Pregnancy and Conception Rates and Health Education in Schools Task and Finish Review Group be approved.
- (b) That the final report be forwarded to the special Health and Well Being Scrutiny Committee meeting scheduled for 6th July, 2010.

**Paul Wildsmith**  
**Director of Corporate Services**

## Background Papers

There were no background papers used in the preparation of the report other than those referred to.

Allison Carling: Extension 2291

S17 Crime and Disorder	This report has no implications for Crime and Disorder.
Health and Well Being	This report has implications to address Health and Well Being for the residents of Darlington, and specifically for children and young people
Sustainability	There are no direct implications to Sustainability which this report needs to address.
Diversity	There are no direct implications to Diversity which this report needs to address.
Wards Affected	There is no direct impact on any individual Ward
Groups Affected	This report impacts on Children and Young People specifically, but also Darlington residents as a whole.
Budget and Policy Framework	This report does not represent a change to the budget and policy framework
Key Decision	This is not a key decision
Urgent Decision	For the purpose of the 'call-in' procedure this does not represent an urgent matter
One Darlington: Perfectly Placed	This links to the Theme 3 "Healthy Darlington". Specifically addressing health inequalities to narrow the gaps in health and well-being and life expectancy.
Efficiency	There are no efficiency identified as part of this work

## MAIN REPORT

### Information and Analysis

7. At a meeting of the Monitoring and Co-ordination Group held on the 2<sup>nd</sup> November, 2009, Miriam Davidson, the Locality Director of Public Health, submitted the Director of Public Health's (DPH's) Annual Report entitled 'Healthier Lives for Children and Young People in County Durham and Darlington' and each of the Scrutiny Chairs identified a key message within that report which they felt would be beneficial for their individual Scrutiny Committees to explore.
8. The key messages highlighted in respect of this Committee were in relation to teenage pregnancy and conception rates and health in education in schools and ways to reduce teenage pregnancy and conception rates in Darlington by the use of good Sex and Relationship Education programmes and development of school health service based 'drop ins' in schools across County Durham and Darlington as an integrated, multi-agency model in consultation with the whole school community.
9. A Task and Finish Review Group comprising all Members of the Children and Young People Scrutiny Committee was established to undertake the work and the final report is attached at **Appendix 1**.

**TEENAGE PREGNANCY AND CONCEPTION RATES AND  
HEALTH EDUCATION IN SCHOOLS  
TASK AND FINISH REVIEW GROUP**

**FINAL REPORT**

**Introduction**

1. This is the final report of the Teenage Pregnancy and Conception Rates and Health Education in Schools Task and Finish Review Group established by the Children and Young People Scrutiny Committee to scrutinise teenage pregnancy and conception rates and health education in schools

**Background Information**

2. At a meeting of the Monitoring and Co-ordination Group held on the 2<sup>nd</sup> November, 2009, Miriam Davidson, the Locality Director of Public Health submitted the Director of Public Health's (DPH's) Annual Report entitled 'Healthier Lives for Children and Young People living in County Durham and Darlington' and each of the Scrutiny Chairs identified areas from the key messages within that report which they felt would be beneficial for their individual Scrutiny Committees to undertake a piece of work into.
3. Members agreed to focus their work on teenage pregnancy and conception rates and health in education in schools and ways to reduce teenage pregnancy and conception rates in Darlington by the use of good Sex and Relationship Education programmes and development of school health service based 'drop ins' in schools across County Durham and Darlington as an integrated, multi-agency model in consultation with the whole school community.
4. The Director of Public Health's report is set in the context of the National Strategy 'Healthy Lives, Brighter Futures' which states that 'good health for children and young people is crucial, because it enables them to make the best of their opportunities in education and in developing healthy lifestyles'.
5. The following are extracts from that report:-

'Teenage pregnancy continues to be of concern. The provisional under 18 conception rate for County Durham in 2007 was 49.9 per 1000 girls aged 15 to 17 years and for Darlington 55.2/1000, compared with the England rate of 41.7/1000.'

'County Durham and Darlington have significantly higher than national teenage conception rates and continue to be challenged by the national target of a 55% reduction from the 1998 baseline.'

6. The Task and Finish Review Group comprised all Members of the Children and Young People Scrutiny Committee and met on 21st June, 2010 to undertake its investigations and to collate its findings and compile its final report.

7. Members established by looking at statistics for Under 18 conceptions by Ward that there are hotspots which compare to the deprivation scores of the town and there is a link between teenage pregnancy and deprivation.
8. The Group's Terms of Reference were agreed at the Scrutiny meeting held on the 14th June, 2010 (**Appendix 1**).

### **Acknowledgements**

9. The Task and Finish Review Group acknowledges the support and assistance provided in the course of their investigation and would like to place on record their thanks to the following:-

Mrs. Miriam Davidson, Locality Director of Public Health, NHS Darlington;  
Donna Thorne, Commissioning Manager Maternity Matters and NHS Lead Teenage Pregnancy, Darlington PCT.  
Catherine Shaw, Sex Education and Relationship Officer.  
Jenni Cooke, Assistant Director, Children's Services.  
Allison Carling, Democratic Support Officer, Darlington Borough Council.

### **Methods of Investigation/Findings**

10. Members invited Catherine Shaw, Sex and Relationship Education Officer, Children's Services Department to provide them with an overview on the delivery of sex and relationship education within the borough's schools aimed at reducing teenage pregnancy.

Members also invited Donna Thorne, Lead Teenage Pregnancy, Darlington PCT to attend the meeting to discuss her work with schools to develop a borough wide approach 'clinic in a box' in their schools however not all schools were in a position to progress these proposals therefore there was nothing to report at this time. Members were mindful of the National Institute of Clinical Excellence (NICE) Guidance in relation to contraception provision for young people which is heavily focused on school based settings as the most appropriate and accessible provision for vulnerable /socially disadvantaged young people and will look to receive a future report on progression of a suitable provision in schools and/or a town centre provision.

11. Good sex and relationship education is essential in order to provide children and young people with the skills, knowledge and confidence to make informed choices and decisions. Sex and relationship education must be consistent and factually correct. If children and young people are not taught about sex and relationship issues in this way, they will begin to learn from other areas and this may prove harmful.
12. Having a strong Sex and Relationship Education Policy supports the improvement of the long term health of children and young people in Darlington while also supporting other local and national strategies and reports including Every Child Matters, The Children's Plan, National Healthy Schools Programme, Darlington's Children and Young People's Plan, the NHS 2009 – 2010 Delivery Plan and the Teenage Pregnancy Strategy.

13. A three year action plan for SRE in Darlington was created looking at three specific areas:  
  
SRE delivered in and out of school settings; SRE with parents; and carers and Workforce Development.
14. To date there has been good progress against the action plan and achievements include: the establishment of an SRE Forum in Darlington which consults key people on areas of the action plan who then link directly with the Teenage Pregnancy Strategy Group in Darlington; the SRE Policy adopted by Children's Services; L8R which is a resource for young people (aged 12-19 years) which has been delivered in numerous settings within the town including home, hospitals, college's and youth service settings; a specialised programme designed and delivered to 'looked after children'; the PSHE CPD Programme (Health Education 3 level) which has had an excellent response from school and staff and the uptake for the coming year is good and from September 2010 a HE2 level programme will be offered to youth service staff and residential care workers; the 'Are you Getting It Right' toolkit produced by the Sex Education Forum which has been rolled out across the secondary schools; resources on self esteem have been designed; a programme designed to be delivered with Not in Education, Employment or Training (NEETS) from June 2010; consultations undertaken with over 140 parents and carers to collect their feelings on SRE and establish what can be done to support them in this area; workforce development; support to all schools engaged on a one to one basis where required; and a Primary Guidance Pack has been developed to support Primary settings work with Parents and Carers and the Governing Body to ensure their children receive excellent SRE which is age and stage appropriate in line with the National Curriculum and Ofsted guidance. The Youth Service has also been consulted on the new policy and practice guidelines to support their work on relationship and sexual health to ensure a consistent approach.
15. The Teenage Pregnancy Strategy Group concentrate on four main areas of sex and relationship education, contraception, communication and media and national campaigns and supporting young parents. Since the introduction of the Strategy Group there has been a 21% decrease in overall statistics.
16. Through the Alcohol and Substance Misuse and Teenage Pregnancy Strategies funding has been made available to employ two specialist posts within the Youth Service to bring the advice being delivered together on alcohol abuse and teenage pregnancy. It was also highlighted by Members of the Group that emotional stability and self esteem is also a key factor in teenage pregnancies and they were assured that this is important part of the SRE programme.
17. The Social Norms Survey carried out in September, 2009 also clearly demonstrates how extremely important and integral the information gathered is in the approach to influence and change the perception children and young people have of sexual behaviour and Members agreed that this important fact finding needs to advise the school curriculum.
18. Members discussed the 'c-card' provision which is a condom distribution scheme and part of a national programme to allow young people to register to receive condoms. This provision has expanded by 20% in the last 18 months. The young people register, receive a one-to-one from a trained member of staff and given advice before they are allowed to access

pharmacies, nurses, family planning clinics, some health ‘drop ins’ at schools and youth service premises – in line with the Frazer guidelines.

19. Members also discussed the worries around the delivery of sex and relationship education to primary schools and were advised of the Lucinda and Godfrey training resource used in primary schools and examined the Primary Guidance Pack developed to support Primary settings and ensure that children receive age and stage appropriate sex relationship education.

### **Recommendations**

20. From the evidence we have been presented with, the Task and Finish Review Group fully support the work currently being undertaken in schools within the Borough in relation to sex and relationship education and would request that :-
- (a) all School Governing Bodies to consider the delivery of quality assured, evidence led, age appropriate, sex and relationship education programmes and services taking account of the needs of their children and communities;
  - (b) this Scrutiny Committee fully supports the proposed development of an integrated, multi-agency mode of school health in consultation with the whole school community; and
  - (c) this Scrutiny Committee review the position in six months time taking into account any proposals for alternatives to the ‘clinic in a box’ approach in schools.

### **Teenage Pregnancy and Conception Rates and Health Education in Schools Task and Finish Review Group.**