

SUMMARY OF THE GOVERNMENT RESPONSE TO THE FIRST ANNUAL REPORT OF THE INDEPENDENT ADVISORY GROUP ON TEENAGE PREGNANCY

Introduction

The introduction outlines the key elements of the Government's strategy to cut teenage parenthood.

A cross-government implementation unit has been established to drive delivery of the Strategy. The Teenage Pregnancy Unit was set up in 1999 and is based within the Department of Health, but co-funded by the Departments for Education and Skills; Office of the Deputy Prime Minister; Work and Pensions and the Home Office, who have joint responsibility for the Strategy's implementation.

Delivery of the National Strategy is a commitment of the Manifesto and NHS Plan and a Department of Health Public Service Agreement delivery target.

A network of local teenage pregnancy co-ordinators is in place, covering every top-tier local authority in England. Each local authority area has an agreed local teenage pregnancy strategy and rolling three-year action plan, which sets out how the local authority and health bodies will work together to implement the national Strategy.

Local co-ordinators are supported by regional co-ordinators, who oversee local implementation and ensure that the Strategy is embedded within the performance management frameworks of other relevant programmes at regional level.

In addition to establishing the infrastructure for delivery, key achievements over the first three years include the following.

- Within local teenage pregnancy strategies, all local areas have signed up to under 18 conception rate reduction targets of between 40-60 per cent by 2010 to underpin delivery of the national target.
- Achievement of these targets will also reduce the level of inequality in rates between the worst fifth of wards and the average by at least a quarter.
- A national advertising campaign aimed at young people began in October 2000, focusing on the themes of choices and taking control and responsibility around relationships and sexual behaviour, including resisting peer pressure. Evaluation has shown that 78 per cent of 13-17 year olds recognise the campaign materials. Although the campaign has been delivered through teenage magazines and local radio, the level of recall is equivalent to that shown for TV-led campaigns.

- New guidance for schools on Sex and Relationships Education is being implemented.
- Best practice guidance on the provision of effective contraception and advice services for young people has been issued, against which local services have been audited. Since the Strategy launch, there has been a 22 per cent increase in the number of clinic sessions for young people.
- The Government has supported the National Children's Bureau to establish a Young People's Forum as a tool for consulting young people about the Strategy.
- Twenty Sure Start Plus pilots are now underway, providing personal support for pregnant teenagers and teenage parents on health, education, benefits and housing issues.
- Nine pilot areas are testing how best to provide childcare for teenage parents, to help them return to education, training or employment.
- Six housing pilots are testing how best to support teenage parents. The Housing Corporation has approved funding for over 1,500 new units of supported housing for teenage parents.

Government Response to the First Annual Report of the Independent Advisory Group on Teenage Pregnancy

CHAPTER 1: JOINED UP ACTION

The Government's commitments are:

- that the Cabinet Committee on Children and Young People's Services ensures that tackling teenage pregnancy continues to be a national priority, supported by a clear commitment to long-term funding from across government, including mechanisms for identification and accountability of funding;
- the status, skills and leadership capacity necessary for the co-ordination function of local co-ordinators is sustained by an ongoing commitment to adequate funding from central sources;
- that in reforming the law on sex offences, the Government takes account of all professionals working with young people, including those under the age of consent, to ensure that they can make a referral to, or provide, contraceptive and sexual health services without risk of prosecution;

- that the Government reconsiders the proposed new offence of adult sexual abuse of a child, to ensure that there are no unintended consequences on contraceptive use and previous sexual history in mutually agreed relationships;
- that the Government ensures that the primary unit for co-ordination is the local authority social services department, given the rapid changes in health authority boundaries;
- that the Government identifies ways to ensure that local service plans for teenage pregnancy by social services, education, housing and health authorities contain a greater partnership element to encourage ownership and links to local sexual health plans and other initiatives; is informed by the views of all local stakeholders; and that consideration is given to how best to secure the ongoing commitment of these authorities to the strategy; and
- that the Government considers how best to secure the ongoing commitment of elected authorities to nationally set targets, including the use of financial incentives.

Professionals giving help, advice, treatment and support to young men and women around sexual health issues will not be viewed as aiding and abetting a criminal offence whilst so doing.

CHAPTER 2: NATIONAL CAMPAIGN

The Government welcomed the Independent Advisory Group's support for the national media campaign and their recommendations for its further development:

- that the campaign includes an aspirational element to develop self-esteem, both amongst young parents and young people across different age groups;
- the campaign continues to reinforce messages about responsible sexual behaviour in all its guises and the importance of using contraception, including messages targeted specifically at under 16s;
- the campaign ensures appropriate targeting for groups with specific needs including boys and young men, young people with learning disabilities and other specific needs, young people from black and minority ethnic groups, those in Young Offender Institutions and care leavers; and
- that, as the campaign develops, it pays particular attention to the needs of vulnerable groups, identifying appropriate, and using known, networks to disseminate targeted material.

CHAPTER 3: SEX AND RELATIONSHIPS EDUCATION

The Government welcomed the Independent Advisory Group's recommendations for the continued improvement of Sex and Relationships Education (SRE):

- that PSHE is integrated into the early years framework and is extended into post 16s education or training, and that those responsible for the delivery of PSHE receive adequate training and support;
- that the Government carefully monitors the impact of its SRE guidance and other measures in the special educational sector, primary and secondary schools, and considers what further action may be necessary to improve the quality of SRE, in particular to promote good quality education about relationships at key stages 1 and 2, including training of teachers and PSHE co-ordinators;
- that, as part of its current review, the Teacher Training Agency ensures support for colleges offering initial teacher training in the development of PSHE and SRE programmes;
- that the Government undertakes an evaluation of SRE which identifies and measures the aims, objectives, key indicators and outcomes for SRE;
- that OFSTED produce an annual report on the provision of SRE and Citizenship for all students;
- that the Government develops a clear policy on the provision of information about health services on all school premises and special educational settings, including sexual health services, which is both openly displayed and contains information about access to local services.

The Government has pledged to:

- work together with OFSTED to ensure that all schools have, from Summer 2002, an up-to-date SRE policy available for inspection and that inspectors have adequate training;
- commission a video and training resource for School Governors on SRE;
- start national roll-out of the SRE teacher accreditation programme, informed by the results of the evaluation of the pilot;
- develop an SRE accreditation programme for school nurses and other professionals delivering SRE in schools and other educational settings;

- provide further practical guidance on the provision of quality SRE and PSHE for teachers, highlighting examples of best and innovative practice, with lesson plans and case studies;
- work with Colleges of Further Education to assess their requirements for support in developing SRE programmes, health services and childcare;
- target schools in the most deprived areas, where teenage pregnancy rates are high, to encourage them to join the National Healthy Schools Standard – aiming for at least 15 per cent of schools in these areas to join the programme by 2006;
- host a seminar in October to further develop the role of the National Healthy Schools Standard in supporting school based health services;
- develop a national indicator set to monitor the health and educational outcomes of schools in the Healthy Schools programme; and
- pilot a youth development programme, using the learning from successful programmes run in the United States (following a mapping exercise of similar projects to be completed by the end of 2002).

CHAPTER 4: INVOLVING PARENTS IN PREVENTION

The Government will:

- continue to support Parentline Plus in the development of the “timetotalk” initiative and further dissemination of the top-ten-tips leaflet to local parenting projects;
- disseminate interesting local practice examples of work with parents (including work with fathers) to local teenage pregnancy co-ordinators and support those involved in local parenting projects through a new network for those tackling teenage pregnancy at local levels;
- develop options for providing information through primary care settings to the parents of school aged children on a wide range of health issues;
- seek the views of the Inter-Faith Forum on how best to support and involve parents from the faith communities in helping to prevent teenage pregnancy; and
- undertake further work to look at how we can best support fathers in talking constructively to their children to support school based SRE programmes.

CHAPTER 5: ADVICE AND CONTRACEPTION FOR YOUNG PEOPLE

The Government supports the provision of school based health services where the governing body and school community identify a need. The OFSTED report on good practice in SRE, published in May 2002, highlights how access to individual advice from specialist professionals can underpin effective delivery of school SRE programmes. The Teenage Information and Advice Centre (TIC-TAC) at Paignton Community College, Torbay, is included as an example of a school-based service providing excellent support and guidance for pupils.

The Government will now link with the DfES to develop guidance on the provision of school based services as part of the Extended Schools programme, for issue in September 2002, to encourage schools to consider providing these services.

The Government recognises the key importance of confidentiality in improving younger teenagers' uptake of contraceptive advice, and is committed to ensuring that all professionals are appropriately trained to support young people and make appropriate referrals. The Government has issued a range of guidance for professionals working with young people to make clear that all young people, including under 16s, have the same right to confidentiality as adults, unless there are serious child protection concerns.

The SRE Guidance published by DfES in 2000 makes clear that schools should have a clear and explicit confidentiality policy which is advertised to pupils, staff, parents and visitors and which is set within the schools SRE policy. The guidance also makes clear that schools should provide all pupils with details of local sources of confidential help, for example the school nurse, counsellor, GP or local young person's advice service.

Within confidentiality policies, teachers should follow a set procedure if they learn that a child under the age of 16 is having, or contemplating having, sex. Schools should ensure that the child is adequately counselled and informed about contraception, including precise information about where they can access contraception and confidential advice services.

The Government will now:

- prepare information on long acting methods of contraception for professionals, young people and parents;
- consider research into the extent and nature of confusion on the provision of confidential contraceptive advice to under 16s and prepare any further guidance required;
- develop guidance, in conjunction with DfES, on the provision of school based health services, as part of guidance on the Extended Schools programme;

- support a pilot on the social marketing of condoms to young people;
- develop a plan for further action in the light of the evaluation of the local audit of services;
- linked to the implementation of the Sexual Health and HIV Strategy, the Government will continue to support the training of all professionals working with young people and in particular:
 - consider what further work is needed to support the training of health professionals, in partnership with the Royal Colleges; and
 - following an evaluation of the Connexions training programme, consider whether a national training module on sexual health and relationships should be developed.

CHAPTER 6: BOYS AND YOUNG MEN

The Government will now:

- map cross-government activities targeted at boys and young men to inform further development work to tackle teenage pregnancy;
- disseminate interesting local practice examples of work with boys and young men to local teenage pregnancy co-ordinators; and
- disseminate findings from research in the North East on the effectiveness of specialist workers for boys and young men.

CHAPTER 7: GROUPS WITH SPECIFIC NEEDS

The Government will now:

- develop a method for collecting data on looked after children who become pregnant and identify social services authorities with SRE policies for looked after children as part of the teenage pregnancy national indicator set;
- include the goals of the Teenage Pregnancy Strategy in guidance for National Care Standards Commission Inspectors;
- disseminate interesting practice examples of work with looked after young people and care leavers;

- provide some regional seminars to help develop local expertise in training professionals working with looked after young people on issues around SRE, sexual health and teenage pregnancy;
- publish a resource on diverse communities and working with those from different cultures and faiths around sexual health issues; and
- conduct further research to explore the attitudes and behaviour of black and minority ethnic young people in relation to sexual activity, contraceptive use, pregnancy and experiences as teenage parents.

CHAPTER 8: EDUCATION AND TRAINING FOR TEENAGE PARENTS

The Government has pledged to:

- consider the evaluation of the targeted childcare pilots for teenage parents to work towards a nationwide strategy to ensure that all teenage parents have appropriate access to childcare;
- disseminate good practice on helping school age parents return to education;
- consider commissioning research amongst LEAs which have not received Standards Funds monies to monitor the level of support offered to pregnant girls and parents of school age;
- disseminate information on the way in which Connexions Partnerships are implementing the national Connexions policy on young people with acute and complex needs, including teenage parents;
- monitor the progress of Connexions Partnerships against delivery of locally agreed targets to increase the participation of teenage mothers in education and training;
- consider further development of the Education Maintenance Allowance (EMA) flexibilities for teenage parents in the context of a wider review of the EMA scheme, following the national evaluation; and
- conduct research to review the educational outcomes for pregnant teenagers in mainstream and non-mainstream settings.

CHAPTER 9: SUPPORT FOR TEENAGE PARENTS

The Government will:

- disseminate interesting local practice examples of ante- and post-natal care for teenage parents;

- disseminate good and innovative practice from the lessons learned from Sure Start Plus;
- draw on the emerging findings from the evaluation of Sure Start Plus to consider further development of the programme;
- seek inclusion of issues around the particular needs of teenage fathers at relevant annual conferences of national professional organisations;
- disseminate posters of young fathers to mainstream and project based antenatal and support services; and
- map cross-government work with young fathers and develop a way forward to enhance existing work in this area.

CHAPTER 10: HOUSING FOR TEENAGE PARENTS

The Government will:

- continue to monitor the range of provision for lone teenage parents provided within each local authority, and encourage local authorities to work with Registered Social Landlords to provide suitable move-on accommodation;
- work with housing colleagues in the Office of the Deputy Prime Minister to target local authorities who have not yet put in place adequate plans to address the supported housing needs of teenage parents by 2003;
- monitor all local authority Supporting People strategies to ensure that they take into account the housing support needs of teenage parents; and
- commission research to look at what is happening at local level around housing for parents under 16 who cannot live with their families.

The **Annex** sets out the Forward Action Plan for the Government.

CIRCULAR

Circular No. 02/129/E&EO

Date: 15 July 2002

To: Secretaries of Divisions and Local Associations in England and Wales - **FOR INFORMATION AND ACTION**
Equal Opportunities Officers - **FOR INFORMATION**

Dear Colleague

GOVERNMENT RESPONSE TO THE FIRST ANNUAL REPORT OF THE INDEPENDENT ADVISORY GROUP ON TEENAGE PREGNANCY

Attached to this circular is a summary of the Government response to the First Annual Report of the Independent Advisory Group on Teenage Pregnancy.

Action for Divisions and Local Associations is outlined below.

The full document is available from the Department of Health website on:

www.doh.gov.uk/teenagepregnancyunit/index.htm

BACKGROUND

The Government has emphasised that addressing the issues arising from teenage pregnancy is central to its work to prevent health inequalities, child poverty and social exclusion. Girls from the poorest backgrounds are ten times more likely to become teenage mothers than girls from professional backgrounds. One in every ten babies born in England is to a teenage mother. These children are at high risk of growing up in poverty and experiencing poor health and social outcomes. The infant mortality rate for babies born to mothers under the age of 18 is twice the average. Despite the recent fall of the conception rate for under 16 year olds, Britain continues to have one of the worst records on teenage pregnancy in the developed world.

The Government's response to the Advisory Group's recommendations sets out a new action plan for the next phase of implementation of the teenage pregnancy strategy. As well as maintaining the downward trend in teenage conceptions, the Government's aspiration is that 60 per cent of teenage mothers will be in learning or employment by 2010.

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This new action plan brings together the contributions that a wide range of departments and organisations, both statutory and voluntary, will need to continue to make at national, regional and local level to drive forward implementation.

This circular should be read in conjunction with NUT Circulars 149/00(E&EO) on the 'DfES Guidance on Sex and Relationships Education', 192/01(E&EO) on the DfES guidance, 'The Education of School Age Parents', and 02/107/E&EO on 'The OFSTED Report on Sex and Relationships Education'.

ACTION FOR DIVISIONS

- Divisions should press LEAs to issue guidelines to schools to review their policy on sex and relationship education, in light of the DfES guidance of 2000. This should include guidance on formulating a clear and explicit confidentiality policy.
- Local authorities should be pressed to demonstrate the progress made in reducing teenage parenthood. *(As a condition of the Local Implementation Grant, Teenage Pregnancy Partnership Boards must submit an annual report which demonstrates satisfactory progress towards achieving their agreed reduction targets. These local annual reports and rolling forward action plans are submitted annually for consideration by regional assessment panels.)*
- Divisions should press local authorities to include a teenage pregnancy target in Local Public Service Agreements (LPSA). *(Several local authorities have already included a teenage pregnancy target as part of an LPSA. These set a more challenging reduction than the local target already agreed and, if met, the local authority can benefit from additional funding and agreed freedom and flexibilities. Of the authorities who have agreed LPSAs so far, roughly 10 per cent have included a teenage pregnancy target.)*
- Research demonstrates that LGBT young people may engage in experimental and often unsafe heterosexual activity. Divisions should press LEAs to ensure that their strategies on teenage parenthood should also target those who are, or who may be, lesbian, gay, bisexual or transgendered (LGBT).
- Divisions should press LEAs to ensure that any strategies that focus on the particular needs of boys should also recognise the needs of those who are gay, bisexual or transgender.

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- Divisions should press LEAs to issue guidelines to schools on the DfES guidance, to be issued in September, on the issuing of contraceptives within school, where the governing body and school community identify a need. Any such policy should be in consultation with parents and local community groups, as well as teachers and pupils. If such a strategy is agreed, it should also address the needs of pupils who may be LGBT. In addition, a clear confidentiality policy should be in place.

Yours sincerely

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