SUMMARY:
The 10 year national Teenage Pregnancy Strategy ended in 2010. In 2011, the Department for Education Business Plan and the proposed Public Health Outcomes Framework both retain the under 18 conception indicator as a critical measure of reducing health inequalities in vulnerable young people.

This paper provides a considered view of the likely under 18 conception rate for Southampton City in 2010; suggestions for future target setting based on national and local trend projections, and local priorities for implementation and action.

Southampton’s 2009 position in relation to the rate of reduction in teenage conception’s since 1998 is in line with the national average rate of reduction, in the top quartile amongst our statistical neighbours and favourable compared with core cities. The Trust is asked to consider how to sustain this rate of progress.

BACKGROUND and BRIEFING DETAILS:
1. 2010 Position

In 2009 the under 18 conception rate was 49.2 per 1,000 15-17 year olds (this represented a 19% reduction from the 1998 baseline). And, when analysed across 3 year periods, Southampton has seen a continued downward trajectory in the under 18 conception rate since the start of the strategy in 2000 (a rate of 63 per 1,000 in 2001-03 compared to 49.8 in 2007-09).

However, local under 18 conception estimate monitoring suggests that rates will rise slightly in the last quarters of 2010. The local estimate methodology has been nationally approved, but due to estimates being available up to 12 months earlier than the national data the estimate is never 100% accurate.

To date, the 2010 position is projected by different local and national sources as follows:

<table>
<thead>
<tr>
<th>Data source</th>
<th>Under 18 Conception Rate per 1,000 15-17 year olds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office for National Statistics, Quarterly Under 18 Conception Rate for Q2 2010</td>
<td>45.6</td>
</tr>
<tr>
<td>East Midlands Public Health Observatory, National Forecast Under 18 Conception Rate for 2010</td>
<td>53.2</td>
</tr>
<tr>
<td>Local Under 18 Conception Estimate Monitoring figure for 2010</td>
<td>54.7</td>
</tr>
<tr>
<td>Local 3 year average projection for Under 18 Conception Rate 2008-2010</td>
<td>51.7</td>
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</table>
Thus it is likely that the 2010 position will see Southampton achieve between a -16.2% to -10.2% reduction from the 1998 baseline position (in 2009 the national % reduction was -18%). The upper prediction would not be significantly different from the national average rate of reduction, and the lower prediction would not differ from the rate of reduction demonstrated amongst statistical neighbours and core cities.

2. Factors affecting teenage pregnancy rates

The following determinants are cited in the national and international evidence base as correlating with teenage conceptions and are particularly relevant to Southampton:

- Child Poverty and Deprivation- latest figures suggest a quarter of children in Southampton live in relative poverty (a figure which is not reducing), and the impact of the indices of multiple deprivation on the way young people and their families live their lives is well documented. Patterns of behaviour, aspiration, achievement and behavioural choices are all impacted by subtle variations in the index and cyclical teenage pregnancy is apparent amongst Southampton communities.

- Recession- national evidence suggests an increase in birth rate during times of recession (although the last 10 years have seen performance steadily decline across a period of economic growth and recession), but locally the birth rate has continued to rise throughout the recession. This could account for increased conceptions.

- Poor GCSE attainment for young people is intrinsically linked to higher rates of teenage pregnancy. If Southampton is unable to narrow the attainment gap at a quicker pace this could negate any progress made by targeted interventions in the teenage pregnancy strategy. The evidence base suggests that educational attainment has an effect even after adjusting for the effects of deprivation - deprived wards with higher educational attainment have lower teenage pregnancy rates. In Southampton an analysis comparing ward-level GCSE attainment and ward conceptions does not demonstrate a significant correlation, although the analysis was unable to adjust for other variables.

- The NEET rate for young people is intrinsically linked to higher rates of teenage pregnancy. Any small variation in the impact of worklessness or engagement in further education will impact on teenage conceptions.

- The role of SRE in school and college curriculums- the Coalition have removed the focus on this element of curriculum provision and it is therefore likely to be squeezed in future years and de-emphasised. Ofsted inspection is unlikely to focus on this curriculum element in any great detail and will become less frequent overall. National support and quality assurance structures have been removed. Any LA influence or support on curriculum development has been lost and school autonomy has increased further.
**Future trend projections**

**3.1** Due to the small numbers involved and the multitude of determinants, under 18 conception rates are subject to volatile variances across quarters and individual years. Therefore, the most statistically significant perspective to take would be 3 year averages across the last 10 years- from 1998-2009 Southampton has a significant linear trend for the reduction in under 18 conceptions (0.6499).

If this linear trend were to continue, by 2017-19 the under 18 conception rate in Southampton would be 41.7 per 1,000. This would be a further 15.2% reduction by 2017/19 from the 2009 position.

The East Midlands Public Health Observatory has been commissioned by the national Teenage Pregnancy Unit to forecast teenage pregnancy rates for 2010 and until 2020. The 2020 forecast position for Southampton, at the current rate of reduction, is 48.3 per 1,000.
3.3 Their forecast rates for the South East region (30.1 in 2009 and at 2020) and England (37 per 1,000 by 2020 compared with 38.2 in 2009) remain static or plateau by 2020- representing a zero% reduction and 3.1% reduction by 2020 from the 2009 position. This plateau effect is due to the academic belief that a 50% reduction in under 18 conceptions will not be achieved by 2020 due to the interdependencies between the wider determinants of teenage pregnancy. The forecast confidence intervals also denote the significant variability and fluctuation in rates which is expected.

3.4 Therefore, one suggested target would be for Southampton to achieve a similar rate of reduction in 2010-2020 as that experienced between 2000-2010. This could provide a target figure of 41 per 1,000 by 2020. This is based on an upper rate of reduction being achieved- circa 15% reduction across 10 years.

3.5 A more ambitious target would be to accelerate the rate of reduction- with a possible 10% reduction in 5 years or a 5% reduction in 3 years. This would be highly dependent upon a). as a minimum the same level of resources being available to support delivery of the strategy, as have been available over the last 10 years or b). an even greater commitment of resources and their coordination across all partners.

3.6 Any trajectory should set targets as 3 year averages- given that this is more statistically significant than annual rates.

4. **Local priorities**

4.1 In the changing context Southampton would benefit from identifying and addressing key strategic interdependencies for teenage pregnancy. Investment in ring-fenced terms is relatively small and educing, therefore the strategy is reliant on delivery of progress across the wider determinants in addition to targeted actions.

4.2 The evidence base for interventions which correlate with statistically significant reductions in teenage conceptions has been used in Southampton to implement the following interventions since 2008:

- Improving young people’s access to contraception and sexual health services.
- Improving Sex & Relationships Education.

These interventions must be maintained in order to deliver longitudinal change.

4.3 Southampton also needs to focus on embedding and improving a number of core actions which relate to early identification and intervention surrounding young people at risk of teenage pregnancy, and are known to correlate with further reductions.

4.4 Maintaining a focus on a local Teenage Pregnancy Strategy which is well-resourced, accountable and effective will be critical to future success. Strategic ownership is required throughout the transition period of 2011/12 to ensure that the strategy continues to receive strategic focus and commitment, embedded within key new structures as they emerge for the long-term. Short-term planning in 12 month cycles will not address the ingrained determinants of health.
5. RESOURCE/POLICY/FINANCIAL/LEGAL IMPLICATIONS:

5.1 Budget decisions and impact are relevant across: the LA, and Health in relation to both dedicated and associated budgets. There are considerations for the Public Health Budget in relation to scope and breadth.

Implications across staffing and infrastructure resources are significant and the full effect is still unknown until structural changes are realised across the LA and Health in late 2012/13.

6. OPTIONS and TIMESCALES:

6.1 Next Steps

Recommendations:

- During 2011 the Children & Young People’s Trust, the Health & Well-being Board and Southampton Connect, should gain consensus on a 2020 and 2015 aspiration for the under 18 conception rate.

- In the autumn of 2011 a review of the local teenage pregnancy strategy should be conducted to inform the commissioning cycles for health and local authority services, ensuring that future commissioning decisions across the wider determinants of teenage pregnancy take account of and plan for their impact on teenage pregnancy.

- Any aspirations should be informed through this review and the future resources available, before targets are set.

Appendices/Supporting Information:

- East Midlands Public Health Observatory, Teenage Pregnancy Forecasting Tool
- Ward GCSE and attainment analysis 2006-2008 CONFIDENTIAL
- Local Conception Estimate Monitoring 2010 CONFIDENTIAL

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