

Walsall Teaching Primary Care Trust

Data Available to Inform the Teenage Pregnancy Strategy (A Briefing Paper)

- *In official UK statistics, conceptions are defined as pregnancies resulting in live births, stillbirths or legal terminations. Other pregnancy outcomes such as miscarriage are not included in the data, as these statistics are known to be incomplete (Botting et al, 1998)*

The best available data informs developments in policy, procedure and best practice. The issues of teenage pregnancy and parenthood are both complex and sensitive. Historically data collection in this field has been fraught with difficulties. Local level data often consists of small figures and is therefore subject to stringent data protection to maintain confidentiality. Data distributed recently by the Department of Health (2003 data) was scrutinised and is now less detailed than has been available historically. The DH is awaiting legal advice on the data that can be published in future.

Our aim is to collate meaningful data that will enhance partners' knowledge of current interventions and inform on progress. Data sharing is vital when gaining the support and cooperation of partner agencies. However it is important to identify what is 'meaningful' data to avoid generalisations being made on complex issues.

Details of data currently available have been provided with narrative of its meaning and therefore its usefulness. It is envisaged that this information will allow partners to make an informed decision on the data that they feel will be beneficial.

For the purpose of this paper, the data has been divided into three distinct areas: **Conceptions, Prevention, and Support.**

Prevention

Data that informs on the preventative elements of the strategy is provided by partner organisations in the main, and informs on both service provision and other interventions i.e Training, Education and Personal interventions (one to one)

1. **SRE Provision** - all schools in Walsall have an SRE policy, those currently working towards 'Healthy Schools' status have updated policies. The 2005-06 teenage pregnancy action plan has identified the need for updating existing policies and an audit of schools policy will take place this year.

2. **Condom Scheme** - Walsall currently has a free condom scheme operating borough wide, providers include: General Practitioners, Youth Services, Supported housing, Youth Offending and Social Services. The scheme is monitored and data is available to inform age, gender and location of clients.
3. **Specific Teenage Clinics** - the Hatherton Centre in Walsall (family planning clinic) has specific teenage sessions twice weekly. The GUM (Genital Urinary Medicine) clinic at the Manor Hospital also has a dedicated teenage clinic (sexual health). Data can be provided on the attendances at the sessions bases on age, gender and post-code.
4. **The Glass Project** - this is an educational sexual health programme designed for young people who are vulnerable and often disengaged with formal education. The programme is funded by the teenage pregnancy grant. Data is collected to including the participants age, gender and post-code (first 3 digits only).
5. **Electric Palace** is a youth centre based in the centre of Bloxwich. Teenage pregnancy funding enables the electric palace to provide services for young people including: One to one health advice, pregnancy testing, condoms and counselling. Drop in sessions are available twice weekly. Data is provided quarterly on clients age, gender, ethnicity and postcode, (April-June 05, male 32, female 57, 80% WS3, 10% WS2 and 10% WS1)
6. **Transition and Leaving care** - teenage pregnancy funds the post of a health advisor to work with young people leaving care at 16. The health advisor provides advice and guidance; she holds regular sessions including sessions within supported housing. Current national statistics inform that 50% of the female population of care leavers, are either pregnant or have given birth within the first 12 months of leaving care. There were 68 young women (16-19years, 2004-2005) registered with the Transition and Leaving care team, of those 68 eleven became pregnant within the first 12 months of leaving care, giving a percentage of 7.5% for Walsall. Data is collated quarterly: age, gender, ethnicity and first 3 digits of post code
7. **Arts into PSHE** - teenage pregnancy funds arts programme to support SRE in schools in target areas. Full evaluations are provided on completion, and data on the number of pupils engaged in the work.
8. **Free Training** days, on topics associated with teenage Pregnancy and sexual health is funded via the teenage pregnancy budget. All training provided is evaluated. A database is maintained to inform on attendances, their employing organisation and their profession. This data informs on knowledge bases within organisations, and future training provision.
9. **Free Emergency Hormonal Contraception scheme** - Walsall currently has a borough wide scheme with over 30 pharmacists enrolled. Each time

a pharmacist prescribes emergency contraception personal data is recorded and sent to the tPCT. Data includes: age and postcode

Conceptions

Conception data is made up of both live births and terminations. Ward level data can be obtained from the acute trust quarterly (Manor Hospital). However this data is not considered to be reliable and is only indicative of current trends. Data provided is of young women (18 and under) who have registered their pregnancy at the Manor hospital for their confinement (birth). The data provides age, postcode and weeks gestation (weeks of pregnancy). Walsall has neighbouring authorities that may be the preferred choice of some young women for their confinement. Data for those that choose this option is not currently available. This is something that the National Teenage Pregnancy Unit and the Strategic Health Authority are currently addressing. We know that young women in the West of the borough often choose New Cross hospital for convenience of travel, and young women in the East of the borough (Streetly, Pheasey) choose Good Hope hospital for the same reason.

Termination data is also provided from the acute trust (quarterly) this is also not considered reliable data, and only provides information for young women who have chosen to have their pregnancy terminated in Walsall. The data is currently provided by the agencies that provide pre abortion counselling (WPH, Brook, BPAS, and Calthorpe). We know that there are a percentage of young women that access terminations out of borough, often supported by their GP. Terminations also take place in the private sector, in particular with clients from BME (black and minority ethnic) groups due to confidentiality issues. Data from terminations is submitted to the central government (office of national statistics) and published 2 years following its collection.

The absence of current precise data makes targeting interventions much more of a complex issue and those that work in the field have to be guided by current trends and knowledge of their local area.

Support

Sure Start Plus is a pilot initiative (only 35 in the UK) that aims to reduce the risk of long-term social exclusion resulting from teenage pregnancy through coordinated support to pregnant teenagers under 18 years and teenage parents. Improving the outcomes for teenage parents and their children contribute to the following Government Public Service agreements:

- Halving the under 18 conception rate by 2010 (DfES)
- Reducing infant mortality rates by at least 10% by 2010 (DH)
- Reducing the proportion of young people not in education, employment or training by 2 percentage points by 2010 (DfES)

Data informing on the support agenda is predominantly generated from Sure Start Plus, however data is also provided by Education Walsall (schoolgirls).

1. **Sure Start Plus** - all under 18's booked to have their babies in Walsall are referred to Sure Start Plus. Referral information is stored on a database. Information is confidential and subject to the data protection act. Information can be provided on a quarterly basis to inform age and post code (first 3 digits). A Black Country agreement has been implemented to ensure that referrals across the region can be made. Wolverhampton will refer young women that New Cross referred to their service in error. This data is not a reliable reflection of conceptions as we are aware of young women that are not referred, and are missed due to moving into or out of the borough. The data does however inform on 'hot spot' areas, and gives an indication of current rates.
2. **Education and Employment** – Data is collected in respect of the education achievements of all young women i.e. GCSE's and A levels. The Sure Start Plus Team enter details onto the data base regarding current status, i.e. unemployed, employed, training, formal education, further education or higher education. This information is readily available; however the numbers are small and sharing of data may enable others to identify individual clients, thus breaching their confidentiality. We have access to the Connexions database 'profile' to track pregnant teenagers that move within the West Midlands, to inform educational and employment status
3. **Breastfeeding and Smoking** - Sure start plus have targets to promote breastfeeding and reduce smoking. Data is recorded and collated regarding the rates of teenage mothers that breastfeed, and continue for at least 6 months, and the numbers of teenage women that smoke during pregnancy.

Working with partner organisations and sharing both information and data will strengthen the commitment to the Teenage Pregnancy strategy. The usefulness of the data must be proven to prevent issues arising with regard to confidentiality, data protection and Caldecott principles.

Diane Osborne,
Teenage Pregnancy Coordinator, Walsall tPCT
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