

Date of Briefing – August 2004

Preventing Teenage Pregnancy in Looked After Children

The topic of this briefing is the prevention of pregnancy among a specific group: looked after children and young people, who usually live in foster homes, but may also be in residential placements or with family members.

Key Messages

- Teenagers who become parents are known to experience greater educational, health, social and economic difficulties than young people who are not parents. Looked after children and young people are at greater risk of early pregnancy and social disadvantage than other groups. The prevention of teenage pregnancy among looked after children and young people therefore poses particular problems and may have significant beneficial outcomes
- The principal risk factors associated with teenage pregnancy, such as socio-economic deprivation; limited involvement in education; low educational attainment; limited access to consistent, positive adult support; being a child of a teenage mother; low self esteem; and experience of sexual abuse, are to be found more often in the looked after population than among children and young people who are not in care
- Strategy and policy documents regarding services and practices to reduce teenage pregnancy in general are available, but there is little on looked after children and young people specifically
- Access to good quality sex and relationship education has been demonstrated to reduce levels of teenage pregnancy and looked after children and young people are known to have less access to good quality, consistent sources of sex and relationship education and advice than many other children and young people
- Research and policy literature currently focuses on the provision of appropriate and adequate sex and relationship education in conjunction with accessible contraceptive services as the means of reducing teenage pregnancy. The limitations of school-based programmes for looked after children are widely recognised; additional sex and relationship education is therefore recommended

- Authorities that consult young people and develop specialist sexual health services for young people have greater success in reducing teenage pregnancy

Introduction

This section introduces and defines the scope of the briefing and the topic.

A SCIE briefing provides up-to-date information on a particular topic. It is a concise document summarising the knowledge base in a particular area and is intended to act as a 'launch pad' or signpost to more in-depth material. The briefing is divided into the different types of knowledge relevant to health and social care research and practice, as defined by the Social Care Institute for Excellence (SCIE).

(<http://www.scie.org.uk/publications/knowledge.asp>)

Levels of teenage pregnancy in the UK are high relative to other European countries ⁽¹⁾. The Government is aiming to reduce by half the level of teenage pregnancy in under 18s, and to create a downward trend in under 16s, by 2010 ⁽²⁾. This briefing focuses on the prevention of pregnancy among a specific group: looked after children and young people. Looked after children (LAC) is a generic term introduced in the Children Act 1989 to describe children and young people "subject to care orders (placed into the care of local authorities by order of a court) and children accommodated by voluntary agreement of their parents". LAC usually live in foster homes, but may also be in residential placements or with family members ⁽³⁾.

Why this issue is important

This section summarises research findings relating to the impact or consequences of pregnancy among looked after teenagers.

This issue is important because teenagers who become parents are known to experience greater educational, health, social and economic difficulties than young people who are not parents, and their children may be exposed to the consequences of greater social deprivation and disadvantage ^(1,4,5,6). These outcomes have been demonstrated to be more adverse still in the case of looked after children who become parents because this group are more likely than others to be unemployed, have more mental health problems, be expected to be independent, and to have little social or economic support ^(2,7). Until recently there had been no systematic monitoring of health progress and health outcomes in looked after children ⁽⁸⁾, but it is now recognised that the health and educational needs of LAC are different from and greater than many other groups of children and young people ^(8,9). LAC are exposed to greater risk factors for teenage pregnancy than many other groups. Young people in care are recognised as being one of the principal groups to

experience social exclusion ⁽²⁾, and social exclusion has been identified as a “key determinant of teenage pregnancy” ^(2,10).

Access to good quality sex and relationship education (SRE) has also been demonstrated to reduce levels of teenage pregnancy ⁽¹¹⁾ and LAC are known to have less access to good quality, consistent sources of sex and relationship education and advice than many other children and young people ^(12,13,14). There is also a strong link between teenage pregnancy and age at first intercourse ^(15,16) and LAC are known to become sexually active earlier than other groups of children ⁽¹²⁾. As a result, looked after young people are two and a half times more likely to become pregnant as teenagers ⁽²⁾. It is estimated that one in four young women leaving care are either pregnant or already mothers, and almost half of female care leavers become mothers between the ages of 18 and 24 ⁽¹⁷⁾.

The prevention of teenage pregnancy among looked after children and young people therefore poses particular problems and may have particular, significant beneficial outcomes.

What do the different sources of knowledge show?

Organisational Knowledge

This section lists and briefly summarises documents that describe the standards that govern the conduct of statutory services, organisations and individuals working in the field of preventing pregnancy among looked after children and young people.

Children Act 1989 (c.41)

http://www.hms0.gov.uk/acts/acts1989/Ukpga_19890041_en_1.htm

This Act determines the responsibilities of social services in relation to looked after children. This includes the provision of sex and relationship education (SRE) in addition to that provided in schools.

Department of Health (2002). Promoting the Health of Looked After Children.

<http://www.publications.doh.gov.uk/lookedafterchildren/promoting.pdf>

This document sets out a framework for the delivery of services from health agencies and Councils with Social Service Responsibilities (CSSR) to improve the health of looked after children and young people. The document describes the duties of social workers, services and foster carers to provide effective “personal, social and health education, complementing that which is provided by schools”. This includes SRE. Chapters 7 and 11 offer information on teenage pregnancy.

Department for Education and Skills (DfES) (2000). Guidance on the Education of Children and Young People in Public Care.

<http://www.dfes.gov.uk/educationprotects//upload/ACF3725.pdf>

The purpose of the guidance is to assist local authorities in their role as corporate parents to safeguard and promote the education of children and young people in public care. This document sets out the essential measures local authorities must take to ensure that young people in public care gain maximum life chances from the educational opportunities on offer.

Social Exclusion Unit (1999). Teenage Pregnancy. London, The Stationery Office.

<http://www.socialexclusion.gov.uk/page.asp?id=227>

This is the key document describing the current situation and outlining policy on teenage pregnancy in the UK. The combination of accessible sex and relationship education, and access to contraceptive services, is the principal recommendation of this report as an intervention to reduce the number of teenage pregnancies in the UK.

Acheson, D (2000). Independent Inquiry into Inequalities in Health Report. London, The Stationery Office. (Hardcopy only)

Fraser Guidelines

These guidelines state that contraception may be provided for a young person under 16, without parental consent, if the following criteria are fulfilled: the young person understands the advice and is competent to consent to treatment; the person is encouraged to inform her parents/guardians; it is believed that the young person is likely to commence or continue sexual activity with or without contraception; the physical or mental health of the young person will suffer if they do not receive contraceptive advice or supplies; contraceptive advice and treatment is in the best interests of the young person concerned.

Please note: research has consistently demonstrated that LACs are less available for school-based education programmes, including SRE and advice, than other children and young people ⁽⁷⁾.

Policy Community Knowledge

This section summarises documents describing proposed structural models for the delivery of policy and improved practice. These documents are published by public policy research bodies, lobby groups, think tanks and related organisations.

Haydon D. (2003). Teenage Pregnancy and Looked After Children / Care Leavers. Resource for Teenage Pregnancy Co-ordinators. Barnardos.

[http://www.info.doh.gov.uk/tpu/tpu.nsf/e0181c6367f5036280256d09005b2d28/58e4fd8e1f9e477180256dc9002c74e7/\\$FILE/Teenage%20Pregnancy%20Co-ordinators'%20Resource.doc](http://www.info.doh.gov.uk/tpu/tpu.nsf/e0181c6367f5036280256d09005b2d28/58e4fd8e1f9e477180256dc9002c74e7/$FILE/Teenage%20Pregnancy%20Co-ordinators'%20Resource.doc)

Welsh Assembly (2003). Looked-after children's entitlement to sex and relationship education. Children First. Sheet 3.

<http://www.childrenfirst.wales.gov.uk/content/sexual-health-3-e.pdf>

This proposed model for the delivery of SRE to children in care is based on legislation and national policy documents.

Welsh Assembly (2003). Referring looked-after young people to sexual health services. Children First. Sheet 4.

<http://www.childrenfirst.wales.gov.uk/content/sexual-health-4-e.pdf>

This proposed strategy for the delivery of confidential sexual health services and advice to young people in care is based on the Fraser Guidelines and other national guidance documents.

Meyrick J. (2002). An Evaluation Resource to Support the Teenage Pregnancy Strategy. Health Development Agency.

http://www.hda-online.org.uk/documents/eval_teenpregnancy.pdf

This document aims to identify the basic principles of project evaluation and apply them to the creation of local teenage pregnancy strategies for young people in general. It does not intend to be prescriptive or advocate any particular methods or approaches to evaluation.

Sex Education Forum; National Children's Bureau (2001). Working with Young People in Sexual Health Settings: a providers guide.

http://www.ncb.org.uk/resources/sef_ff_25.pdf

This fact sheet gives guidance on developing appropriate, sensitive sexual health services which are young-people friendly. It is aimed at health visitors, primary care and clinical staff, school nurses and community workers.

Sex Education Forum; Council for Disabled Children (2001). Ensuring Entitlement: sex and relationships education for disabled children.

http://www.ncb.org.uk/resources/sexed_ff_26.pdf

Disabled children and young people are less likely to receive SRE at home and in school than other children. This is a fact sheet which seeks to support the development of SRE policy and practice for disabled children generally.

A resource has also been produced offering recommendations specifically on the creation of policy and the provision of sexual health and education services for LAC, including the provision of training and advice for foster carers ⁽⁷⁾.

A project recently developed and tested a training programme for carers of children in public care ⁽¹⁹⁾. This was delivered through a local pilot scheme in London by a Children and Families team, as well as being part of the fpa's open training programme. The training materials developed by the programme cover sexual health, relationships, pregnancy and parenthood for vulnerable children and young people in public care.

Finally, a recent UK study described a multi-agency consultation process to map services and resources, and identify gaps, to inform the development of a teenage pregnancy strategy based on the demands of the Social Exclusion

Unit Report ^(2,20). The establishment of an inter-agency network to provide services to young people concerning sexual health has also been found to be effective ⁽²¹⁾.

Practitioner Knowledge

This section describes studies carried out by health and social care practitioners, documents relating their experiences regarding the topic, and resources produced by local practitioner bodies to support their work.

Teenage Pregnancy Unit (2001). Guidance for Field Social Workers, Residential Social Workers, and Foster Carers on providing information and referring young people to Contraceptive and Sexual Health Services. Quality Protects.

<http://www.dfes.gov.uk/qualityprotects/pdfs/socialguide.pdf>

This document describes how social workers and fosters carers can provide access to confidential and unbiased advice on sexual health and contraception to young people, including looked after children.

Time to decide: a guide to support young people in public care when making decisions about pregnancy. National Children's Bureau ⁽¹⁸⁾

This is a practical self-help guide developed for young women in care who find themselves unexpectedly pregnant, including the options available at different stages of pregnancy.

Darlington Local Teenage Pregnancy Strategy (2001)

<http://www.health-promotion.org.uk/media/pdf/Darlingtonfullstrategy.pdf>

This document describes a local teenage pregnancy strategy for young people in general, based on the key Social Exclusion Unit report ⁽²⁾.

Teenage Pregnancy and Teenage Parenthood Strategy (2001)

http://www.mbpct.nhs.uk/public-reports/pdf/Lancashire_county_TP_Strategy.pdf

This document describes the Lancashire local teenage pregnancy strategy for young people in general, based on the key Social Exclusion Unit report ⁽²⁾.

Research Knowledge

This section summarises the best available research literature. The focus is on studies undertaken in the United Kingdom, so that their findings are as relevant as possible to the intended audience of the briefing.

Risk factors predicting teenage pregnancy have been consistently demonstrated by the research to include socio-economic deprivation; limited involvement in education; low educational attainment; limited access to

consistent, positive adult support; being a child of a teenage mother; low self esteem; experience of sexual abuse; and living in care ^(1,2,10,13,14,15,22,23,24). Social exclusion, especially as a result of social and economic deprivation, has been identified as a “key determinant of teenage pregnancy” ^(2,10). Research has also demonstrated that LAC as a group are likely to satisfy many or all of these criteria ⁽²⁾.

Outside of the issues of social and economic disadvantage or deprivation, the research literature has identified the inadequacy of school and care-based sex and relationship education (SRE) and advice programmes as a major potential reason for levels of teenage pregnancy, especially among LAC ^(7,25,26). This is relevant because the principal source of information and advice on sexual health and contraception for children and young people has been demonstrated to be school-based programmes ⁽²²⁾. LAC are known to have low levels of school attendance ^(9,27). School-based SRE alone has been demonstrated to be insufficient ⁽²⁸⁾, but recent reviews have concluded that there is good evidence that school-based SRE, particularly when linked to contraceptive services, can have an impact on young people’s knowledge and attitudes, delay sexual activity and reduce pregnancy rates ^(1,25). These findings are the result of descriptive, non-randomised studies, however ⁽²⁹⁾.

There is no evidence that sex and relationship education programmes lead to earlier sexual activity ^(1,11). There is also no strong evidence for the effectiveness of abstinence education programmes or programmes encouraging vocational development ⁽¹⁾. Some studies have advocated peer-led SRE programmes ⁽³⁰⁾, but there is no evidence that such programmes are effective in reducing levels of teenage pregnancy ⁽¹¹⁾.

User & Carer Knowledge

This section summarises the issues raised by service users and carers in relation to this topic as described by the literature.

Research has found that young people, especially those in care, consider some current school and care-based sex and relationship education and advice programmes to be inadequate ⁽⁷⁾. Young people generally also report experiencing problems accessing confidential contraceptive services ⁽¹⁶⁾. A study to canvass the views of young people on more effective SRE to prevent teenage pregnancy found that they wanted good quality, consistent information from “youth-centred” services within youth settings or from media sources used by young people, such as magazines or the internet ⁽³⁰⁾. These sources of information satisfied the need for easy and confidential access. It has also been found that authorities that consult young people and develop specialist sexual health services for young people have success in reducing teenage pregnancy ⁽²¹⁾. LAC are less likely than other groups to choose either abortion or adoption because of their own personal experience ⁽¹³⁾.

Useful Links

This section lists sources of information relevant to services users and professionals who work within this field.

Children and Families. Department for Education and Skills

<http://www.dfes.gov.uk/childrenandfamilies/>

This document provides links to a range of government and non-government bodies and organisations. This was formerly Quality Protects.

Teenage Pregnancy Unit

http://www.dfes.gov.uk/teenagepregnancy/dsp_Content.cfm?PageID=85

The Teenage Pregnancy Unit is a cross-Government Unit located within the Department for Education and Skills which was set up to implement the Social Exclusion Unit's report on Teenage Pregnancy. This website contains information about the Government's Teenage Pregnancy Strategy, including guidance issued by the Teenage Pregnancy Unit as well as relevant publications from other Government Departments. There is also information about local implementation of the strategy and details about the Independent Advisory Group on Teenage Pregnancy.

Social Exclusion Unit

<http://www.socialexclusion.gov.uk/>

The Social Exclusion Unit works mainly on specific projects, chosen following consultation with Ministers and interested groups. The Unit forms part of the Government's strategic multi-agency approach to tackling social exclusion.

Health Development Agency

<http://www.hda.nhs.uk/>

The HDA works to improve people's health and reduce health inequalities. The agency gathers evidence and produces advice for policy makers, professionals and practitioners, and works alongside them to get evidence into practice.

National Children's Bureau (NCB)

<http://www.ncb.org.uk/>

The NCB promotes the interests and well-being of all children and young people across every aspect of their lives.

Sex Education Forum (SEF)

<http://www.ncb.org.uk/sef/>

The Sex Education Forum is the national authority on SRE and aims to ensure that all children and young people receive their entitlement to good quality SRE in a variety of settings. Relevant fact sheets made available by the NCB include "Talking about sex and relationships with Children and Young People in Public Care" (1998), "Talking about sex and relationships: a fact sheet for foster carers" (2001), and "Working with Young People in Sexual Health Settings" (2001).

fpa

<http://www.fpa.org.uk>

fpa (formerly The Family Planning Association) is a registered charity providing information and advice on sexual health. Relevant documents made available by the fpa include "Let's make it happen", a training manual aimed at professionals working with looked after children and young people, published jointly by the fpa and the National Children's Bureau.

Barnardos

<http://www.barnardos.org.uk/>

Barnardos run services across England, Northern Ireland, Scotland and Wales. The organisation aims to help disadvantaged children to overcome challenging experiences and tackle the effects of disadvantage and to help them develop into well-rounded adults. The organisation makes available a range of information and resources for teachers and professionals working with vulnerable children.

Brook

<http://www.brook.org.uk/>

Brook Advisory Centres is a voluntary sector provider of free and confidential sexual health advice and services specifically for young people under 25. The centres provide contraception, advice, and counselling to young people about sexual health, as well as outreach, education, and satellite services in response to local need.

The Who Cares? Trust

<http://www.thewhocarestrust.org.uk/>

The Who Cares? Trust designs and manages a variety of development programmes, resulting in the production of practice materials for different audiences involved in or associated with the public care arena. The majority of development programmes, aimed at influencing practice in service delivery for looked after children in local authorities, are piloted in local authorities, prior to national dissemination of the findings and resulting materials. These programmes include education and health.

Mind, Body and Soul

<http://www.mindbodysoul.gov.uk/>

Mind, Body & Soul is a joint initiative between the Department of Health and the Department for Education and Employment. Mind, Body & Soul aims to provide young people between the ages of 14-16 with relevant and appropriate health information, as well a linking to a range of accurate, clear and credible websites on a variety of health issues.

LifeBytes

<http://www.lifebytes.gov.uk/>

LifeBytes is a joint initiative between the Department of Health and the Department for Education and Skills. LifeBytes aims to provide young people between the ages of 11-14 with relevant and appropriate health information, as well as linking to a range of accurate, clear and credible websites on a

variety of health issues. The site is divided into topics and includes sex and relationships.

Like it is

<http://www.likeitis.org.uk>

likeitis is developed by Marie Stopes International and offers information about all aspects of sex education and teenage life. Topics include teenage pregnancy, sex, peer pressure, sexuality, contraception, and emergency contraception.

Comments

Please address all comments, suggestions or ideas for improvement to scharrlib@sheffield.ac.uk

Acknowledgements

Thank you to the experts and service users for their contributions to this briefing.

Reference List

1. **Dickson R., Fullerton D., Eastwood A., Sheldon T., Sharp F.** (1997). Preventing and reducing the adverse effects of unintended teenage pregnancies. *Effective Health Care*, 3 (1), 1-12.

This is a review of the evidence concerning research relevant to the UK.

2. **Social Exclusion Unit** (1999). Teenage Pregnancy [online] <http://www.socialexclusion.gov.uk/page.asp?id=227> [Accessed 8 September 2004]

This is the key document describing the current situation and outlining policy on teenage pregnancy in the UK.

3. **Payne D.** (2001). Babies of teenage mothers 60% more likely to die. *British Medical Journal*, 322 (7283), 386.

This brief article reviews research on child mortality for teenage mothers.

4. **Moffitt T., E-Risk Study Team** (2002). Teen-aged mothers in contemporary Britain. *Journal of Child Psychology and Psychiatry*, 43 (6), 727-742.

This UK study looks at the socio-economic and health problems experienced by young mothers.

5. **Lawlor D., Shaw M., Johns S.** (2001). Teenage pregnancy is not a public health problem. *British Medical Journal*, 323 (7326), 1428-1428.

This is a comment on current UK policy relating to teenage pregnancy.

6. **Hobcraft J. and Kiernan K.** (1999). Childhood poverty, early motherhood and adult social exclusion [online] London School of Economics; Centre for Social Exclusion. Available from: <http://sticerd.lse.ac.uk/dps/case/cp/CASEpaper28.pdf> [Accessed 8 September 2004]

This report looks at the relationship between childhood poverty and teenage pregnancy.

7. **Haydon D.** (2003). Teenage Pregnancy and Looked After Children / Care Leavers. Resource for Teenage Pregnancy Co-ordinators. London, Barnardos.

This document offers recommendations specifically on the creation of policy and the provision of sexual health and education services for LAC.

8. **Department of Health** (1998). Our Healthier Nation. A contract for health [online] London, The Stationery Office. Available from: http://www.dh.gov.uk/PublicationsAndStatistics/Publications/PublicationsPolicyAndGuidance/PublicationsPolicyAndGuidanceArticle/fs/en?CONTENT_ID=4007059&chk=67CTb1 [Accessed 8 September 2004]

This guidance sets out proposals for a partnership between Government, local organisations and individuals to improve people's living conditions and health.

9. **Jackson S., Sachdev D.** (2001). Better education, better future. Research, practice and the views of young people in public care [online] Barnardos. Available from: <http://www.barnardos.org.uk/resources/researchpublications/documents/BETTERED.PDF> [Accessed 8 September 2004]

This report examines current practice and initiatives in the education of young people in care.

10. **McLeod A.** (2001). Changing patterns of teenage pregnancy: population based study of small areas. *British Medical Journal*, 323 (7306), 199-203.

This study reports on demographic patterns of teenage pregnancy within a locality in the UK.

11. **Dennison C.** (2004). Teenage Pregnancy: an overview of the research evidence. Health Development Agency.

This document presents research findings on teenage pregnancy prevention from 1999 to 2004.

12. **McGlone F.** (2000). Families. Research Matters, 32-34.

This brief article reports on the risk of teenage pregnancy for young people in care.

13. **Corylon J., McGuire C.** (1999). Pregnancy and Parenthood. The views and experiences of young people in public care. London, National Children's Bureau.

This book explores the experiences of young women who become pregnant or parents while in or soon after leaving public care.

14. **Corylon J., McGuire C.** (1997). Young Parents in Public Care: Pregnancy and Parenthood Among Young People Looked After By Local Authorities. London, National Children's Bureau.

This book reports on the prevalence and nature of teenage pregnancy and parenthood among the looked after population.

15. **Wellings K., Nanchahal K., Macdowall W., McManus S., Erens R., et al** (2001). Sexual behaviour in Britain: early heterosexual experience. Lancet, 358 (9296), 1843-1850.

This paper reports the results of the second National Survey of Sexual Attitudes and Lifestyles (NATSAL 2000).

16. **Burghes L.** (1999). Young motherhood: why does it happen, what is it like? London, Health Education Authority.

This is the report of an Expert Working Group looking at the health of teenage and lone mothers.

17. **Biehal N., Clayden J., Stein M., Wade J.** (1995). Moving on. Young people and leaving care schemes. London, HMSO.

This is a survey of specialist schemes available to help older adolescents leaving care.

18. **Mason J., Lewis H.** (1999). Time to decide: a guide to support young people in public care when making decisions about pregnancy. London, National Children's Bureau.

This is guidance and information for young people in care and their carers about pregnancy and parenting.

19. **Mackie S., Patel-Kanwal H.** (2003). Let's make it happen: training on sex, relationships, pregnancy and parenthood for those working with looked after children and young people. London, National Children's Bureau; fpa.

This is a training manual for people who work with children and young people in care.

20. **Watson L.** (2003). Developing a multi-agency teenage pregnancy strategy. *Community Practitioner*, 76 (4), 133-137.

This article describes the development of a strategy to reduce teenage pregnancy in a UK locality.

21. **Ingham R., Clements S., and Gillibrand R.** (2001). Factors affecting changes in rates of teenage conceptions 1991 to 1997 [online] Southampton, University of Southampton. Available from: <http://www.socstats.soton.ac.uk/cshr/pdf/changes.pdf> [Accessed 8 September 2004]

This UK study seeks to identify the factors that affect rates of teenage pregnancy in different localities.

22. **BMRB International** (2003). Evaluation of the Teenage Pregnancy Strategy. Tracking Survey. Report of results of nine waves of research. London, BMRB International.

This document reports the findings of research into the effectiveness of the government's Teenage Pregnancy Strategy.

23. **Bonell C.P., Strange V.J., Stephenson J.M., Oakley A.R., Copas A.J., Forrest S.P. et al** (2003). Effect of social exclusion on the risk of teenage pregnancy: development of hypotheses using baseline data from a randomised trial of sex education. *Journal of Epidemiology and Community Health*, 57, 871-876.

This UK study examines whether dislike of school and socioeconomic disadvantage are to be associated with engaging in behaviour likely to increase teenage pregnancy.

24. **Emler N.** (2001). Self-esteem: the costs and causes of low self-worth [online] York, Joseph Rowntree Foundation. Available from: <http://www.jrf.org.uk/knowledge/findings/socialpolicy/n71.asp> [Accessed 8 September 2004]

This is a brief review of findings concerning the impact of low self esteem.

25. **Swann C., Bowe K., McCormick G., and Kosmin M.** (2003). Teenage pregnancy and parenthood: a review of reviews. Evidence Briefing [online] London, Health Development Agency. Available from:

<http://www.hda.nhs.uk/evidence/EBBD.html> [Accessed 8 September 2004]

This reviews the literature on interventions to reduce teenage pregnancy and prevent adverse outcomes from teenage parenthood.

26. **Cheesbrough S., Ingham R., Massey D.** (2002). Reducing the rate of teenage conceptions. A review of the international evidence on preventing and reducing teenage conceptions: the United States, Canada, Australia and New Zealand. London, Health Development Agency.

This is a review of the international evidence on teenage prevention strategies.

27. **Department for Education and Skills** (2000). Guidance on the Education of Young People in Public Care [online] <http://www.dfes.gov.uk/incare/> [Accessed 8 September 2004]

This guidance is intended to assist local authorities in their role as corporate parents to safeguard and promote the education of children and young people in public care.

28. **Wight D., Raab G.M., Henderson M., Abraham C., Buston K.** (2002). The limits of teacher-delivered sex education: interim behavioural outcomes from a randomised trial. *British Medical Journal*, 324 (7351), 1430-

This UK study tested the effectiveness of a theoretically based sex education programme for adolescents.

29. **Bandolier** (2000). Preventing Teenage Pregnancy [online] <http://www.jr2.ox.ac.uk/bandolier/band76/b76-2.html> [Accessed 8 September 2004]

This is a summary of the key points of the review literature on the prevention of teenage pregnancy.

30. **Chambers R.** (2002). Young people's and professionals' views about ways to reduce teenage pregnancy rates: to agree or not agree. *Journal of Family Planning and Reproductive Health Care*, 28 (2), 85-90.

This study compares the views of young people and professionals about ways to reduce the frequency of teenage pregnancy using workshop discussions and Delphi questionnaires.