

Targeted youth support

Integrated support for vulnerable young people – emerging practice



Targeted and integrated services reduce teenage pregnancy

Area: Bournemouth Borough Council, unitary authority, South West England, population approx 160,000

“Teenage pregnancy rates are linked to a number of overlapping factors, especially deprivation. A targeted and integrated multi-agency approach to prevention and reduction is the only real way of making a long-term impact” – Sue Meakin, Teenage Pregnancy Coordinator (seconded from health), Bournemouth Council, May 2008

Challenges

- Mapping services; minimising duplication and omissions
- Setting up a strategic board to link frontline work and deliver a coordinated preventative approach

Key Actions

- 2000: responsibility for teenage pregnancy reduction moves from primary care trusts (PCT) to local authorities
- 2001: Multi-agency strategic partnership board of senior decision-makers set up; includes the PCT, Connexions, the youth service, midwifery, learning and skills council, social services, contraceptive services and education
- The board analyses existing borough and PCT data on under 18 years conceptions. The clear priority is conceptions linked to deprivation. Identifies high rate wards
- Board links organisations addressing teenage pregnancy by hosting regular events for individuals and agencies
- Sexual Health Outreach Nurse project set up
- Emergency contraception pharmacy scheme set up; 19 pharmacies accepted and trained for the scheme, some linked to high rate under-18 years conception areas
- Sexual health website www.f-risky.co.uk launched. Includes detailed information about sexual health
- 2004: condom card scheme set up. Young people get free condoms from many venues and services across the city
- Sex and relationships education (SRE) training introduced for all staff across the borough working with young people
- Board links to national continual professional development programme of SRE training for teachers and nurses. Prioritises those in deprived wards
- 2007-8: board supports PCT work on Chlamydia screening scheme, including free postal screens online

Key Implementation Tips

- Take a strategic approach. Target resources to areas of the highest need, but keep working in all areas. Otherwise conceptions will shift but not reduce
- Identify and work with all key stakeholders. Have decision makers on your board. They can make good ideas happen
- Involve as many relevant agencies and individuals as possible and ensure they communicate often. A linked approach means the best possible support and the minimum duplication and/or gaps
- You need someone to bring everything together and drive things forward. Ensure this person has a good knowledge of frontline organisations and challenges – good local contacts and understanding are vital to success
- Support must be coordinated and holistic – addressing all needs. It therefore makes sense to link with other agencies and initiatives, e.g. alcohol and risk taking
- Reducing teenage conceptions is about long-term behavioural change. Have realistic expectations

Impact

Targeting most resources, via a multi-agency approach, at the most deprived areas is helping Bournemouth achieve the Government's target of reducing teenage conception rates by 45 per cent by 2010, from a local 1998 baseline. It has already reduced it by more than 33 per cent, from 51.6 to 34.1 (per 1000 15-17 year old women). Linking with Chlamydia screening (freepost postal screens can be obtained via Facebook, Bebo and local websites) is helping ensure information reaches more people through more channels.

Most of the council's support is now situated in areas of most need as well as in city centre locations, such as Boots. The council is currently carrying out an audit of its services to see where further work can be rolled out to accelerate its teenage pregnancy strategy and ensure its 2010 target is achieved. This initiative is a local area agreement target for Bournemouth. The council is also looking to link with the British pregnancy advisory service to provide long acting reversible methods of contraception to young women, particularly the most vulnerable.

To find out more, contact

Sue Meakin, sue.meakin@bp-pct.nhs.uk 01202 541512

For more emerging practice case studies log on to: www.ecm.gov.uk/deliveringservices/tysemergingpractice