

Investigate the impact of the partners' strategy in improving sexual and reproductive health.

What are the range, uptake and evidence of impact of sexual health advice and strategies? To what extent are services focused on prevention? What are Children and Young People's views of the services available?

Range

- Sexually Transmitted Infection (STI) testing, treatment and contraceptive services with referral and counselling for terminations are available in community settings and town centres.
- YP drop-ins are provided at 8 General Practices (GPs), offering a range of services from advice to fitting implants.
- Teenage Information and Advice Centres (Tic Tacs) are provided in 3 schools offering signposting, condom distribution and prescribing contraception. 3 more are to be developed in other hotspot schools.
- Emergency Hormonal Contraception (EHC) is available free to young people aged under 20 in 18% of pharmacies (20/109)
- Long Acting Reversible Contraception (LARC) is promoted, including a schools DVD.
- Chlamydia Screening is currently available in GP practices, "P-in-a-Pot" events (where most screening occurs), and at sites including Youth Service facilities.
- School nurses offer drop-ins at most secondary schools.
- Free condoms are available via 150 agencies and most GPs.
- Free pregnancy testing kits are available to GPs.

Focus on Prevention

- APAUSE is provided in 6 schools utilizing peer educators and focused on schools in hotspot areas with training and support on policy and practice provided for teachers on SRE / PSHE.
- Multi disciplinary training is provided for adults who work with YP on a range of sexual health and self-esteem issues with training delivered to all Youth Service teams.
- District wide condom distribution training is delivered as are group work sessions for YP "at risk"; Training is delivered to GPs on working with YP accessed by 30 practices.
- Pharmacists receive EHC training.
- Speakeasy, a programme for parents to talk to their children about sex and relationships includes training for Asian Foster Carers.
- Work is taking place to raise awareness within African communities to develop prevention programmes.
- Training of peer educators to deliver prevention work with Looked After Children is delivered.
- In recognition of the need to reach 16-18s, prevention work and policy development is being carried out at the colleges and with training agencies and is also addressed through training programmes for colleagues in the LA, tPCT and third sector. The 'Delay' (and Respect) philosophy is embedded in training delivery.
- Media forms an important arm of prevention work through local radio, billboards, poster sites, buses.
- For pregnant teenagers and teenage parents there is a group facilitated by the specialist midwife and group work caseload management of complex cases.

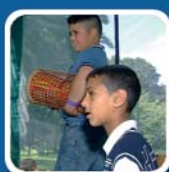


Young People's Views

- Young people's reluctance to attend appointments made for the Genito Urinary Medicine (GUM) clinic, lead to GUM services being delivered in one place at the Information Shop for Young People via CASH.
- YP also influenced changes to Termination of Pregnancy Services (TOPS) provision of counselling for undecided young people.
- A conference of YP led to: increased provision of YP drop-ins at GPs; the development of confidentiality posters; and an increase in media use for services and prevention messages.
- Research has shown considerable impact from media activity on young people with 72% asked had seen or heard adverts from local safe sex campaigns on radio and bus. Most of the young people described the campaign as 'helpful' or 'interesting'.
- Information produced is updated based on evaluations or inputs by young people.
- A local survey shows young people's reasons for first sex includes 'being ready for it' and 'love and commitment' but 'peer pressure' is an important third component with 'opportunity' and 'alcohol' also important.
- Young people have expressed a desire for more school nurses and for sex education to be made more relevant. This is being factored into planning for future work.

Impact and effectiveness of intervention:

- Approximately 70 % of young people leaving Termination Of Pregnancy Services (TOPS) do so with a Long Acting Reversible Contraception (LARC) in place.
- The condom scheme has in the last 12 months provided over 340,000 free condoms.
- 200-250 YP are accessing services in Tic Tacs.
- Contraception and Sexual Health Services (CASH) delivered at the Information Shop for Young People had 374 contacts between Jan 2007 and Nov 2007.
- Since Sept 06, 3093 chlamydia screens have resulted in 279 positives (9% positivity rate) with 164 refusals between April and Nov 07.
- EHC was given 231 times (May 06 - Nov 07) to YP aged 14 - 20 via the EHC scheme.
- Conception rates have reduced by 10.8% from 1998 to 2005 (West Yorks 9.2%, Yorks and Humber 10.2% England 11.8%). 2004's figures of an <18 rate reduction of 57.2 to 44.1 and <16 rate reduction of 9.6 to 7.7 represented a target exceeding reduction of 22.9%.
- Reasons for the reversal are being examined. Until 2004 work focused on improving prevention (through Sex and Relationship Education [SRE]) in both formal and non-formal settings, improving service delivery and the range of settings for accessing services and developing support for pregnant teenagers and teenage parents.
- APAUSE, a school based sex and relationship programme for years 9 and 10, results show increased enjoyment of SRE, increased knowledge, understanding and skills and a change in actual behaviour patterns.
- Evidencing impact of sexual health work can be difficult as the work is based on influencing personal behaviour change, choice, self esteem, values and attitudes and skills development which often does not show immediate outcomes and has to be examined in the longer term.



Investigate the impact of the partners' strategy in improving sexual and reproductive health.

What is the range of outcomes across the wards including any inequalities? How effective is activity to target interventions at 'hot-spots'? How well is data and other information used to inform strategy and service activity?

Reductions in conceptions and live births to under 18s have been achieved in some hotspot wards. Ward data from ONS shows a wide range of conception rates across the district. The ID2004 show the Bradford district to be the second most unequal local authority in England, in terms of deprivation, highlighting the variance throughout the District and teenage pregnancy hotspots are linked to areas of greatest deprivation.

- Increased services at a local level have been provided and in a wider variety of settings with increased prevention work in hotspot wards.
- APAUSE is primarily delivered in hotspot schools has been mainstreamed by the tPCT and is undergoing a review to ensure it meets the needs of the local population. APAUSE evaluates well and is being changed and updated as a result of consultation with students, peers and those who deliver the programme.
- Training has been: delivered to the Youth Service with additional support in hotspot areas: specific programmes have been delivered in schools, including developing resources to deliver to schools for "collapsed days"; to a range of local voluntary sector projects who deliver in hotspot areas.
- Tic-Tacs (Teenage Information Centre Teenage Advice Centre) have been established in a number of hotspot schools with plans to increase provision.
- Speakeasy aimed at parents has been piloted by the tPCT focused on hotspots areas, work with South Asian communities and with foster carers. Successful evaluation led to targeted SHIP resources to develop work in the three top hotspot wards.
- Work has been carried out by Upfront (TP Team) specifically with South Asian communities and supported pilots working with young people from sub Saharan African countries on a range of sexual health issues.
- All LAC & YP receive a comprehensive HNA which includes sexual health. A LAYP SRE policy has been developed and training provided for managers, social workers, residential social workers and foster carers. Upfront were involved in the refresh of the LAC strategy and as a result a number of new initiatives are taking shape.
- A training programme has been piloted with the YOT and will be rolled out.
- The EHC scheme covers 5 of the 6 top hot spot wards with pharmacists from the remaining hotspot being targeted.
- Conception data by ward is used by the Partnership Board and to inform the commissioning process and data from the Chlamydia Screening Programme is overlaid with teenage conception data to enable specific work to be targeted. Information and data from partner agencies including Connexions informs work with teenage parents.
- Locally commissioned research informs practice and has led to significant developments including delivery of GU services at the Information Shop.
- Use of TOPS data has led to engagement with GPs on provision of free pregnancy tests as well as informing the TOPs referral pathway.
- Currently, STI data is not made available by ward or BD code



Investigate the impact of the partners' strategy in improving sexual and reproductive health.

What support is available to teenage parents, including fathers?

Young Parents Support Coordinator post has been created in line with Next Steps Guidance 2007 and the Partnership Board has dedicated LIG funding to support this. The prime objective of the post is to improve health, social and educational outcomes for pregnant teenagers and teenage parents and so reduce social exclusion. Work with young fathers is in the very early stages with Upfront staff currently updating knowledge and skills to further enhance existing father's provision in children centres to include teenage and young fathers.

- The support team is developing an audit tool to profile the client group and strengthen partnerships with services traditionally aimed at boys and young men and also those that work with older men. Fathers of children to teenage mothers age range from 14 to 25 and above.
- Initial support to pregnant teenagers is through early identification of teenage pregnancy via: free pregnancy testing at GP and other agencies by close partnership working between Upfront and the tPCT; enhanced by the training of pharmacist to dispense EHC to under 18s; and by 'Counselling Skills in Unintended Pregnancy' training delivered on a rolling programme to staff in direct contact with young women, and particularly those of statutory school age.
- A care pathway has been developed (in line with the recommendations from the Children, Young People's and Maternity NSF) with community midwives referring young women under 18 to the Parent Education Midwife for signposting and referral on to appropriate support services.
- The Parent Education Midwife Teenage Pregnancy (TP) Specialist delivers weekly ante-natal class for teenagers at the BRI, which pregnant teenagers can attend at any stage of their pregnancy and learn skills and techniques needed for a confident and safe pregnancy, labour and childbirth.
- A TP Support network supports individual staff working with pregnant and teenage parents enabling them to share ideas and good practice, access training and receive peer support.
- Specialist Connexions PAs are trained in the needs and challenges faced by pregnant and teenage parents. Connexions and Early Years and Childcare jointly fund a Teenage Parent's Childcare Coordinator who leads on Care To Learn take up for the district. The post supports Teenage Parents to make informed choices about the type of childcare they require and build self-esteem and confidence, both needed to confidently leave their children in childcare settings.
- Work is ongoing to develop specialist foster care placements for pregnant teenagers both already in local authority care and those who enter care as a result of their pregnancy, supported by provision of a specific parenting group for teenage parents and pregnant teenagers both in and leaving care.
- A Group Development Worker support a network of postnatal support groups across the district delivered by a range of agencies including health, children's centres, voluntary sector, YMCA, housing. They bring together young parents to: share their experiences and gain new skills in parenting and play; address social isolation; and provide a safe space to build confidence and self-esteem as protective factors against repeat teenage conceptions.
- A programme entitled 'Dad's United' has been established to help young fathers to engage with each other through football competitions between different local communities.



Investigate the impact of the partners' strategy in improving sexual and reproductive health.

How are services and interventions linked to improving education outcomes, further education and training provision, and economic regeneration?

Bradford's PSHCE strategy is closely linked to the National Healthy Schools strategy. Schools working towards NHSP develop SRE policies (either separate or as part of the PSHCE policy), schemes of work and programmes of studies and are developed as a whole school piece of work. Schools are supported to ensure implementation across the whole school community so that a consistent message and response to all children and young people across is in place. Schools are supported to develop confidentiality policies with appropriate sign posting and child protection procedures, so that children and young people's issues are dealt with consistently. Members of Upfront are involved in the development, training and delivery of the APAUSE programme delivered in 6 secondary schools across the district. Parents and carers are informed about the range of childcare facilities available to them and Personal, financial, welfare and advocacy support is available to 16-19 year olds to support their education or training. We will continue to engage and support schools in the NHSP. Educational attainment is tracked by Education Bradford for all teenage mothers accessing mainstream education. Children and young people receive sex and relationship education and have access to impartial and confidential advice and guidance. Children and young people are educated about sexual health risks. Action is taken to maximise attendance and avoid exclusion of looked after children, and to encourage their participation in post-16 education and training.

- LAC have access to the same levels of information and support as other children and young people in main steam education and PRUs.
- LAC who become pregnant are supported by the reintegration officer to remain in mainstream education while they are of compulsory school age.
- School age parents are encouraged to take full advantage of the care to learn programme and continue in education and training post 16.
- TP reintegration officer ensures that pregnant LACs have access to a full range on health and social care.
- Pregnant teenagers and young mums are supported to remain in mainstream education where they successfully continue their studies.
- Bradford is rated a green authority for Healthy Schools by government office and comparison with statistical, regional neighbours indicates Bradford is the fastest progressing authority in Yorkshire and the Humber.
- Through the NHSP 113 schools have been audited and judged to meet the national criteria in this area across primary, secondary, SEN and PRU provision. These schools developed a three year action plan to further extend and progress highlighting a major improvement in standards of service provision and quality assurance. An audit of these plans will ensure the transfer of skill set to schools to enable them to better support pregnant teenagers and young mums.
- A review has been conducted of non school based services currently available to identify how to modernise the provision & link it to the "Big Idea" of locality services.

