

Teenage Pregnancy

Introduction

Teenage Pregnancy (defined as pregnancy in women aged under 18) is an important health issue for young people because most teenage pregnancies are unplanned and around half end in an abortion. While many teenagers do make excellent parents, bringing up a child as a teenager can be extremely difficult and result in poor outcomes for both the teenage parent and the child.

Summary

Rates of teenage pregnancy continue to drop, and overall Norfolk is similar to the national average. However, there are some parts of the county with high rates of teenage pregnancy, particularly Norwich.

Headlines

The rate of young women under the age of 18 conceiving has dropped considerably between 2007 and 2014, following the national trend, and then at a slower rate between 2014 and 2018. The number of teenage pregnancies in Norfolk fell from 591 in 2007 to 222 in 2018. There are now 17.1 teenage pregnancies per 1,000 girls in Norfolk, similar to the average for England of 16.7 per 1,000 (see figure 1).

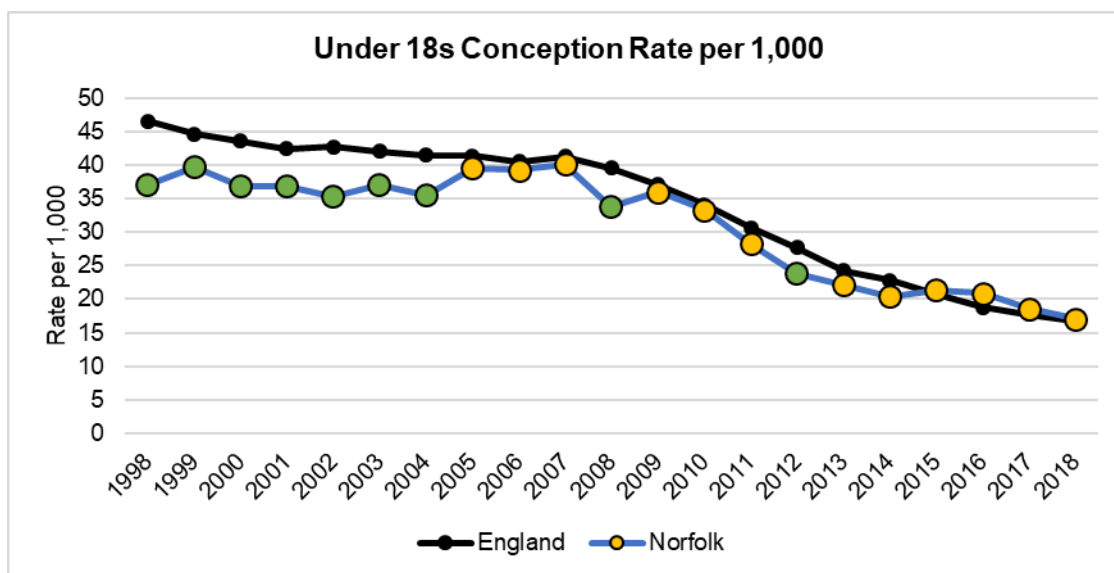


Figure 1: Conceptions by women aged under 18 as rate per 1,000 women aged 15-17.¹

KEY: Markers are coloured red where they are statistically significantly higher than average, yellow where there is no significant difference and green where they are significantly low.

The rate of teenage pregnancy varies across the county. Most districts not significantly different to the national average, except South Norfolk which was below average in 2018 and Norwich which was above the national average (see figure 2). Norwich had 24.2 conceptions per 1,000 girls aged 15-17 (42 conceptions) making it the third highest rate of teenage pregnancy in the Eastern region.

¹ Public Health Outcomes Framework.

<https://fingertips.phe.org.uk/profile/sexualhealth/data#page/4/gid/8000036/pat/6/par/E12000006/ati/102/are/E10000020/iid/20401/age/173/sex/2>

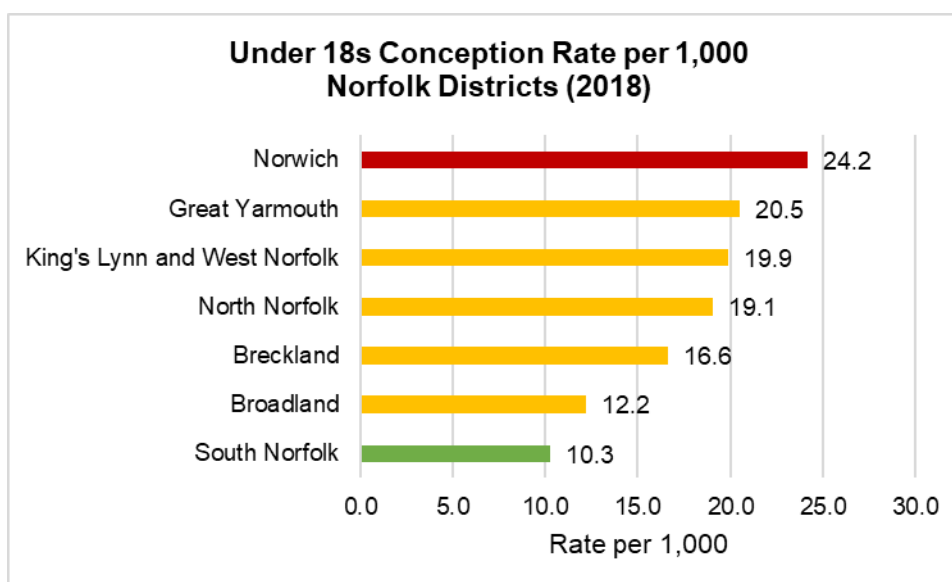


Figure 2: Conceptions by women aged under 18 as rate per 1,000 women aged 15-17 in Norfolk districts.²

KEY: Markers are coloured red where they are statistically significantly higher than average, yellow where there is no significant difference and green where they are significantly low.

In Norfolk 49.5% of teenage pregnancies end in abortion, this is below the national average of 53%. In 2018/19 there were 60 births to teenaged mothers in Norfolk, this is around five per month on average.³

Influences on Health and Wellbeing

Research evidence shows that teenage mothers are less likely to finish their education, are more likely to bring up their child alone and in poverty and have a higher risk of poor mental health than older mothers. Infant mortality rates for babies born to teenage mothers are around 60% higher than for babies born to older mothers. While teenagers can make good parents, the children of teenage mothers have an increased risk of living in poverty, poor quality housing and are more likely to have accidents and behavioural problems.⁴

Social, environmental, population context

Teenage pregnancy is a complex issue, affected by a wide range of personal, social, economic and environmental factors. However, research evidence has identified the key risk factors which are known to increase the likelihood of teenage pregnancy. These can be broadly grouped into: risky behaviours (early onset of sexual activity, poor contraceptive use, mental health, conduct disorders, involvement in crime, substance misuse); education-related factors (low attainment and disengagement from school); and family and social circumstances (living in care, daughter of teenage mothers, ethnicity).⁵

Teenage conception is linked to inequality. The teenage birth rate in the most deprived areas of Norfolk is 40 per 1,000 compared to only 6 per 1,000 in the least deprived areas (see figure 3). This means that rates are 86% lower in the least deprived area - a difference of 34 births per 1,000 girls. If the gap between the most and least deprived areas was closed there would be 28 fewer births to teenagers per year in the most deprived areas.⁶

² Public Health Outcomes Framework.

<https://fingertips.phe.org.uk/profile/sexualhealth/data#page/0/qid/8000057/pat/6/par/E12000006/ati/202/are/E10000020/cid/4/page-options/ovw-do-0>

³ As above

⁴ For more information on outcomes for teenage parents and their children see: <https://www.gov.uk/guidance/child-and-maternal-health-data-and-intelligence-a-guide-for-health-professionals>

⁵ Public Health England (2019) A Framework for supporting teenage mothers and young fathers

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/796582/PHE_Young_Parents_Support_Framework_April2019.pdf

⁶ Norfolk Public Health (2014) Improving health and wellbeing in Norfolk through reducing inequality

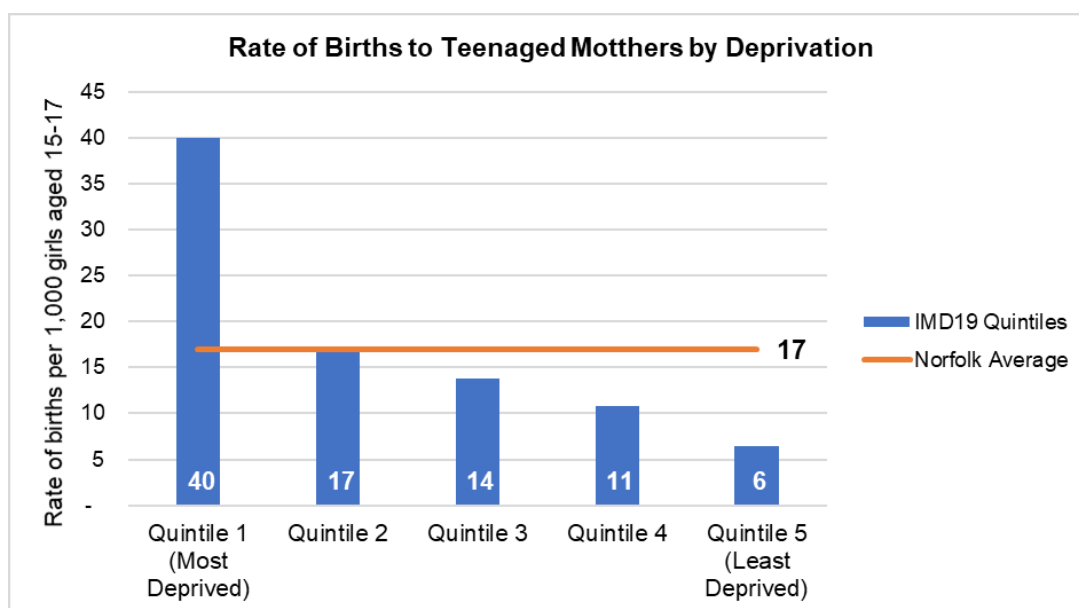


Figure 3: Rate of births to teenaged mothers by deprivation quintile. Source: Birth data from the Office of National Statistics (2016 – 2018) and Indices of Multiple Deprivation 2019.

Current services, local plans and strategies

Teenage Pregnancy is covered by Norfolk’s Sexual Health Strategy. Local services to address Teenage Pregnancy are co-ordinated through the Teenage Pregnancy Sub-Group at the Sexual Health Network. The commissioned sexual health service has an outreach service integrated within its service. At the time of writing the Sexual Health Strategy and services are both undergoing a redesign.

Reductions in the rates of teenage pregnancy are testament to the success of the many prevention initiatives aimed at teenagers, however prevalence does continue to be high in some areas. Most schools offer advice on sex and relationships and from September 2020 Relationships and Sex Education (RSE) will be mandatory for all schools. The Healthy Child Programme in Norfolk (provided by Cambridge Community Service NHS Trust) offers advice to young people on a range of topics including sex and relationships, young people can contact them face-to-face in clinics and appointments in schools and through the ‘ChatHealth’ texting service.

Interventions such as specialist home-visiting and parenting programmes optimise the well-being of teenage parents and their children.⁷ The Norfolk Healthy Child Programme has a ‘Teenage Parent Pathway’ to ensure that all teenage parents are offered an enhanced health visiting service. They also provide a ‘Family Nurse Partnership’ (FNP) programme for the most vulnerable teenage parents. The FNP is a preventive programme, which offers specialist support to first time mums who are 19 years old or younger from pregnancy until the baby is two years old. The programme is a licensed programme, originating in the USA where there has been three large scale research trials. It follows an evidence-based programme of activities delivered by specially trained family nurses.⁸

References and information

Public Health Outcomes Framework:

<http://www.phoutcomes.info/>

Child and Maternity Health Network knowledge hub on Teenage Pregnancy:

<https://www.gov.uk/guidance/child-and-maternal-health-data-and-intelligence-a-guide-for-health-professionals>

Norfolk ‘Birth to Five’ and ‘Five to Nineteen’ Health Needs Assessments (2014)

(Note: These are due to be refreshed in 2021)

⁷ Barlow et al. (2011) Individual and group based parenting programmes for improving psychosocial outcomes for teenage parents and their children. Cochrane Library.

⁸ For more information see: <https://www.heron.nhs.uk/heron/organisationdetails.aspx?id=22453>

0-5: <http://www.norfolkinsight.org.uk/resource/view?resourceId=974>

5-19: <http://www.norfolkinsight.org.uk/resource/view?resourceId=921>

Norfolk Sexual Health Needs Assessment (2013)

(Note: This is due to be refreshed in 2021)

<http://www.norfolkinsight.org.uk/resource/view?resourceId=859>

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