

Health and Adult Social Care Scrutiny Panel

DATE	29 th July 2026
REPORT OF	Diane Lee, Director of Public Health
SUBJECT	Teenage Conception
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CONTRIBUTION TO OUR AIMS

This report directly supports the Council's strategic aims by addressing teenage conception and improving outcomes for young people, young parents, and their children. Reducing teenage conception and mitigating its longer-term impacts contributes to tackling health inequalities, improving life chances, and breaking intergenerational cycles of disadvantage.

- **Stronger Economy:** Reducing teenage conception and supporting young parents to remain in education, employment or training improves future economic prospects and workforce participation. Earlier intervention helps to reduce long-term dependency on public services and supports young people to achieve their full potential, contributing to economic growth and prosperity.
- **Stronger Communities:** Teenage conception is closely associated with deprivation, poorer educational outcomes, social isolation, and inequality. By focusing on prevention, high-quality relationships and sex education, access to contraception, and targeted support for vulnerable young people and young parents, we can improve outcomes for families, strengthen resilience, and create more inclusive communities.
- **Greener Future:** While teenage conception is not directly linked to environmental outcomes, the Family Hubs and community-based support model promotes accessible local services that enable young people and families to access support within their communities. This contributes to healthier, more sustainable neighbourhoods and supports wider wellbeing ambitions.
- **Engaging and Effective Council:** The teenage conception agenda relies on strong partnership working across public health, education, children's services, sexual health services, Family Hubs, and the voluntary sector. The report demonstrates a commitment to evidence-based practice, co-production with young people, and the use of local insight and data to inform service improvement. By targeting support where need is greatest and strengthening outcomes tracking, we can ensure resources are used effectively and deliver the greatest impact for young people and families.

EXECUTIVE SUMMARY

While teenage conception rates have reduced significantly over recent decades, NEL continues to experience rates above the national average, with persistent inequalities linked to deprivation, educational attainment, and wider social determinants of health. The report highlights the importance of a whole-system approach that combines prevention, education, access to contraception, early intervention, and coordinated support for young parents. It also outlines key priorities, current partnership activity, and proposed service developments designed to improve life chances and reduce long-term inequalities.

MATTERS FOR CONSIDERATION

Note the current position regarding teenage conceptions in North East Lincolnshire (NEL) and the preventative activities being undertaken to further reduce teenage conception rates.

1. BACKGROUND AND ISSUES

Teenage conception remains an important public health issue because it is closely associated with health inequalities and wider social disadvantage. Evidence shows that higher rates are associated with socioeconomic deprivation, lower educational attainment, poor school engagement, adverse childhood experiences, care experience, social isolation, and limited access to supportive services and opportunities. These factors can increase the likelihood of unintended conception and contribute to poorer outcomes for young parents and their children. The impact can be lifelong, affecting educational achievement, participation in employment, income, mental and physical health, and family relationships.

Children born to teenage parents are also more likely to experience poorer health, developmental and educational outcomes, impacting their future life chances and contributing to intergenerational cycles of disadvantage.

The local approach is based on a whole-system model that recognises teenage conception as both a health and social issue, requiring coordinated action across multiple agencies and services. In line with the national Teenage Conception (TP) Framework, this approach emphasises strong strategic leadership, evidence-based prevention, early intervention, accessible relationships and sex education, targeted support for vulnerable groups, and integrated pathways to improve outcomes for young people and reduce inequalities. Key areas of focus include:

- **Prevention and Education:** Delivering high-quality relationships and sex education, improving awareness of sexual health, and ensuring timely access to contraception and prevention services.
- **Early Identification and Access to Support:** Promoting early conception testing, clear referral pathways, and timely engagement with relevant services to ensure young people receive appropriate support as early as possible.

- **Support for Young Parents:** Improving engagement with services, supporting education retention, enhancing emotional wellbeing, developing parenting skills, and reducing the likelihood of repeat pregnancies.
- **Workforce Development:** Building confidence and capability among professionals through training, partnership working, and increased awareness of teenage conception and its wider determinants.
- **Data, Insight and Co-production:** Strengthening local intelligence, improving outcomes monitoring, and ensuring that the voices and experiences of young people inform service development and commissioning decisions.

1.1 Teenage Conceptions in North East Lincolnshire

Since 1998, the under-18 conception rates nationally and locally have fallen significantly. In NEL, there has been a 61% reduction in teenage conceptions, with rates reducing from 63.3 to 24.7 conceptions per 1,000 females aged 15–17. The latest data equates to around 50 under-18 conceptions in NEL. This reflects the national focus on reducing teenage conception rates, together with sustained local partnership working, high-quality relationships and sex education, and improved access to contraception and sexual health services."

More recent trend data shows teenage conception rates have levelled off both nationally and locally. However, North East Lincolnshire continues to have one of the highest teenage conception rates in England. The latest available data shows an under-18 conception rate of 24.7 per 1,000 females aged 15–17, which remains higher than the England average of 13.9 per 1,000. Compared with its five statistical neighbours, NEL currently has the third highest rate. Alongside the potential adverse impacts of teenage conception, there is a need for a continued focus on prevention and support.

Teenage conception is now a relatively low-volume but high-impact issue in North East Lincolnshire. On average, around 3-4 young people per month present to maternity services with a conception, and approximately one-third do not continue with the conception. These figures do not capture the full number of young people accessing support through the Conception Advisory Service, nor those using emergency contraception, meaning the overall level of need is likely to be higher than routine maternity data alone suggests.

While the number of teenage pregnancies is comparatively small, the complexity of need and the potential long-term consequences for young people, their children and public services remain significant. Early parenthood is associated with a range of poorer health, educational and economic outcomes, making continued investment in prevention, early intervention and access to reproductive health services a public health priority

1.2 Drivers and Impact

Teenage conception is strongly associated with deprivation, lower educational attainment, social disadvantage and poorer health outcomes. Evidence demonstrates that young parents are more likely to experience:

- Poor maternal mental health.
- Lower educational attainment and reduced opportunities to participate in education, employment or training.
- Increased likelihood of poverty and unemployment.
- Repeat pregnancies and long-term reliance on support services.
- Poorer outcomes for children, including low birth weight and developmental delay.

There is also evidence of intergenerational cycles of disadvantage, with children of teenage parents more likely to experience poorer social, educational and health outcomes. Nationally, around 60% of Serious Case Reviews involve children of teenage parents, highlighting the importance of early support and intervention.

1.3 Local Response and Strategic Framework

Our Teen Conception (TP) Strategic Framework 2025–2028 sets out the strategic response to reducing teenage conceptions and improving outcomes for young parents and their children across Northern Lincolnshire. It adopts a whole-system approach, recognising that sustainable improvement requires coordinated action across health, education, children's services, communities, and the voluntary sector. Jointly developed with North Lincolnshire, the strategy is aligned with national evidence and best practice and provides a shared framework for partners to work together to prevent teenage conception, address inequalities, and support young parents.

The strategy focuses on five key pillars: prevention and education; early identification and support; support for young parents; workforce development; and improved data, intelligence and insight. Key elements of the current response include:

- **Post-Conception Contraception:** Contraception is routinely embedded within post-conception pathways across North Lincolnshire and Goole NHS Foundation Trust (NLaG) and the Healthy Child Programme. Women are offered contraceptive counselling and access to contraception following termination of conception through NLaG services, while Health Visitors reinforce contraceptive advice, healthy spacing of pregnancies, and signposting/referral to local contraception services during postnatal contacts delivered through the Healthy Child Programme.
- **Integrated Sexual Health Services:** Public Health commissions the Northern Lincolnshire Integrated Sexual Health Service, which provides access to contraception, sexual health advice, testing and treatment. Access to contraception has been expanded through 19 participating community pharmacies in NEL, distributed as targeted as possible to meet need.
- **Young Person-Friendly Campaigns:** The "Check Me Out" campaign provides digital and community-based sexual health information and has generated more than

200,000 views of sexual health messaging, helping improve awareness and access amongst young people.

- **School-Based Provision:** Sexual health support is delivered through a comprehensive school and community-based model. This includes School Nursing Service drop-in sessions and advice services within secondary schools, improving access to confidential advice, contraception, STI prevention and early intervention.
- **Relationships, Sex and Health Education (RSHE):** High-quality and consistent RSHE curriculum delivery remains a cornerstone of local prevention activity. Work continues with schools and education settings, through the Healthy Schools Programme and the PSHE Coordinator Network, to support evidence-informed RSHE delivery, improve confidence in discussing healthy relationships and consent, and ensure young people understand how to access local sexual health services and contraception.
- **Targeted sexual health and wellbeing support:** This is provided for vulnerable groups, including young people known to Youth Justice Services, those who are Electively Home Educated (EHE), and other inclusion cohorts. Community and youth provision further extends access to information, support and signposting outside of school settings.
- **Family Hubs and Best Start in Life:** Local services are increasingly aligned with Family Hubs, Best Start in Life and wider children's services to ensure support is available throughout conception and early parenthood.
- **Partnership Governance:** The Underage Conception Steering Group provides multi-agency strategic oversight, bringing together Public Health, education, children's services, school nursing, sexual health services and maternity services to coordinate local action.

1.4 Barriers

Despite strong prevention activity, a number of challenges exist:

- **Small Cohort, High Complexity:** Numbers are relatively low, making traditional group-based support interventions difficult to sustain, whilst the needs of the cohort remain complex and resource intensive.
- **Access and Engagement:** Young parents often report discomfort accessing adult-focused services, alongside stigma, isolation and competing educational commitments which can affect engagement with support.
- **Fragmented Support Pathways:** There is currently no consistent pathway to support education retention, housing, family support and longer-term wellbeing, resulting in gaps in coordinated care.
- **Limited Outcomes Tracking:** Local systems do not currently have a comprehensive mechanism for monitoring longer-term education, employment and wellbeing outcomes for young parents.
- **Insight Gaps:** Existing service development is often informed by young people with the most complex needs, with limited understanding of the wider experiences of the broader teenage parent cohort.

- **Children Missing From Education or Electively Home Educated:** Prevention activity extends beyond school settings through youth provision, community venues, Family Hubs, digital engagement, targeted outreach and voluntary sector partnerships. This helps ensure support reaches young people who may be absent from school, electively home educated, not in education, employment or training, or facing additional vulnerabilities.

1.5 Opportunities and Next Steps

- **Strengthen Targeted Prevention:** Continue to expand targeted support for vulnerable young people and those most at risk of teenage conception through education, outreach and enhanced access to contraception.
- **Develop Support for Young Parents:** Explore options for provision of holistic support from conception through to the first year of parenthood, supporting education, wellbeing, service navigation and safeguarding.
- **Improve Insight and Intelligence:** Complete the 2026 insight project with young women in NEL to better understand decision-making, service experiences, barriers to access and future aspirations. Findings will inform future service redesign and commissioning.
- **Strengthen Performance Monitoring:** Develop a more robust outcomes framework to track conception rates, repeat pregnancies, engagement with Family Hubs, education outcomes and wellbeing measures.
- **Partnership Working and Co-Production:** Continue to work with young people, families and partner organisations to ensure services are accessible, responsive and shaped by lived experience.

By maintaining a strong focus on prevention while strengthening support for young parents, North East Lincolnshire has an opportunity to reduce inequalities, improve life chances and break cycles of disadvantage for future generations.

In Summary

While North East Lincolnshire continues to experience higher rates of teenage conception than many other areas, sustained partnership activity has contributed to a significant reduction over time. The current focus is on sustaining progress, narrowing the inequalities gap with England through targeted prevention, improving access to contraception and relationships education, and ensuring tailored support for young parents and those most at risk.

2. RISKS, OPPORTUNITIES AND EQUALITY ISSUES

- 2.1** There are both risks and opportunities associated with the local teenage conception agenda. Key risks include the continuation of high conception rates relative to national averages, persistent inequalities linked to deprivation, and the potential for vulnerable young people to disengage from education, employment and support services. Limited coordination of support pathways and insufficient

engagement with young parents may result in poorer outcomes for both parents and children, including increased demand on health, social care and wider public services. There is also a risk that the small size of the cohort may reduce visibility of the issue within the wider system, leading to a loss of momentum and focus.

However, there are significant opportunities to improve outcomes through earlier intervention, improved access to contraception and sexual health services, enhanced support for young parents, and stronger partnership working across education, children's services, Family Hubs, maternity services and Public Health. The proposed development of a dedicated support model for young parents presents an opportunity to improve educational attainment, mental wellbeing, service engagement and future life chances while reducing repeat pregnancies and longer-term inequalities.

- 2.2** A strong focus on equality is embedded throughout the teenage conception programme. Teenage conception disproportionately affects young people living in areas of deprivation and those facing wider social and economic disadvantage. Targeted prevention activity, improved access to contraception, and enhanced wraparound support for young parents are intended to reduce inequalities and improve outcomes for those most at risk. Particular consideration has been given to ensuring that services are accessible, youth-friendly and informed by the experiences of young people themselves. Through prevention, co-production and targeted intervention, the Council and its partners can help reduce inequalities and improve opportunities for vulnerable young people and their families.

3. REPUTATION AND COMMUNICATIONS CONSIDERATIONS

- 3.1** There are potential positive reputational implications for the Council and its partners through continued leadership and commitment to reducing teenage conception and improving outcomes for young parents. Demonstrating a coordinated, evidence-based approach that responds to local need and aligns with national best practice will reinforce the Council's commitment to tackling health inequalities and improving life chances. However, there are potential reputational risks should local rates remain significantly above national averages or if young people perceive services as inaccessible, fragmented or unresponsive to their needs. Continued engagement with young people and partner organisations will therefore be essential.
- 3.2** Communication activity will be delivered through established partnership arrangements and engagement mechanisms. This will include communication with schools, colleges, Family Hubs, sexual health services, children's services and community organisations, alongside direct engagement with young people and young parents. Findings from the current insight-gathering work will help ensure future communication and service development are informed by lived experience and reflect the needs of local young people. Communication channels may include digital campaigns, educational settings, partner networks, social media and community-based engagement activity.

4. FINANCIAL CONSIDERATIONS

Current teenage conception prevention and support activity is largely delivered through existing commissioned services and partnership arrangements. Any future proposals for service development, including enhanced support models for young parents, would be subject to separate consideration and approval processes.

5. CHILDREN AND YOUNG PEOPLE IMPLICATIONS

Teenage conception has significant implications for children and young people in NEL. Effective prevention activity supports young people to make informed choices, improve educational outcomes and maximise future opportunities. For those who become young parents, timely and coordinated support can improve engagement with education, employment and training, strengthen emotional wellbeing, and support positive parenting outcomes. Evidence shows that improving outcomes for young parents also improves outcomes for their children, helping to reduce inequalities and break cycles of disadvantage. Continued focus on prevention and support will help ensure that all children and young people have the opportunity to achieve their full potential.

6. CLIMATE CHANGE, NATURE RECOVERY AND ENVIRONMENTAL IMPLICATIONS

Teenage conception activity has limited direct environmental implications. However, the emphasis on community-based and locally accessible services, including school-based provision, Family Hubs and neighbourhood support services, supports the delivery of integrated services within local communities. This approach contributes to wider ambitions to create healthy, sustainable communities and ensures support is available closer to where young people live, learn and access services.

7. PUBLIC HEALTH, HEALTH INEQUALITIES AND MARMOT IMPLICATIONS

Reducing teenage conception and improving outcomes for young parents is a key public health priority that directly addresses health inequalities and aligns with the Marmot Principles. Teenage conception is strongly associated with deprivation, lower educational attainment, poorer health outcomes, and reduced economic opportunities. Action in this area therefore has the potential to improve life chances for young people and reduce intergenerational cycles of disadvantage.

In particular, this work supports:

- **Giving every child the best start in life** – Supporting young people to avoid unplanned conception and providing coordinated support for those who become young parents helps improve conception outcomes, child development, parenting confidence, and family wellbeing. Early intervention can reduce the risk of poor outcomes for both parents and children.
- **Enabling all children, young people and adults to maximise their capabilities and have control over their lives** – High-quality relationships and sex education, access to contraception, and targeted prevention activity enable young people to make

informed choices about their future. Support for young parents to remain engaged in education, employment and training helps improve aspirations, life chances and long-term economic participation.

- **Creating fair employment and good work for all** – Teenage conception is linked to lower educational attainment and an increased likelihood of being not in education, employment or training (NEET). Preventing teenage conception and supporting young parents to continue their education and career aspirations contributes to future economic independence and workforce participation.
- **Strengthening the role and impact of ill-health prevention** – The local strategy places strong emphasis on prevention through relationships and sex education, access to contraception, targeted outreach, sexual health promotion campaigns and school-based provision. Preventative action remains the most effective way to reduce conception rates and associated inequalities.
- **Creating and developing healthy and sustainable places and communities** – Strong partnership working across schools, Family Hubs, children's services, maternity services, school nursing and sexual health services helps ensure that young people can access support within their local communities and receive coordinated care when needed.
- **Pursuing health equity and reducing inequalities** – Teenage conception rates remain significantly higher in NEL than the national average and disproportionately affect young people living in deprived communities. Targeted interventions and improved support pathways seek to reduce these inequalities and improve outcomes for vulnerable young people and their children.

8. MONITORING COMMENTS

In the opinion of the author, this report does not contain recommended changes to policy or resources (people, finance or physical assets). As a result, no monitoring comments have been sought from the Council's Monitoring Officer (Chief Legal Officer), Section 151 Officer (Director of Finance) or Strategic Workforce Lead. Any future proposals arising from the recommendations within this report would be subject to the Council's normal governance and approval processes.

9. WARD IMPLICATIONS

North East Lincolnshire as a whole.

10. BACKGROUND PAPERS

N/A

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