Safeguarding Children and Young People’s Sexual Health

The Role of the Children’s Workforce

Felicity Owen: Director of Public Health
Welcome
Purpose of the Day

- To explore sexual health and all it encompasses;

- To raise awareness and understanding of services;

- To launch The Brook Sexual Behaviours Traffic Light Tool.
A reminder of our focus

The science and art of preventing disease, prolonging life, and promoting health through the organised efforts of society

(Sir Donald Acheson, Chief Medical Officer, 1984-1991)

Public health is concerned with improving the health of the population, rather than treating the diseases of individual patients.

(Sir Liam Donaldson, Chief Medical Officer, 1998-2010)
Vision: To improve and protect the nation's health and wellbeing and improve the health of the poorest fastest

Outcome 1: Increased healthy life-expectancy
Taking account of the health quality as well as the length of life.
(Note: This measure uses a self-reported health assessment, applied to life expectancy.)

Outcome 2: Reduced differences in life expectancy & healthy life expectancy between communities
Through greater improvements in more disadvantaged communities.
(Note: These two measures would work as a package covering both morbidity and mortality, addressing within-area differences and between area differences)

DOMAIN 1: Improving the Wider Determinants of Health
Objective: Improvements against wider factors which affect health and wellbeing and health inequalities
Indicators Across the life course

DOMAIN 2: Health Improvement
Objective: People are helped to live healthy lifestyles, make healthy choices and reduce health inequalities
Indicators Across the life course

DOMAIN 3: Health Protection
Objective: The population’s health is protected from major incidents and other threats, whilst reducing health inequalities
Indicators Across the life course

DOMAIN 4: Health-care Public Health & Preventing Premature Mortality
Objective: Reduced numbers of people living with preventable ill health and people dying prematurely, whilst reducing the gap between communities.
Indicators Across the life course

THE PUBLIC HEALTH OUTCOMES FRAMEWORK
What is Sexual Health?

- “Sexual health is a state of physical, mental and social well-being in relation to sexuality. It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence”

World Health Organisation
What does that mean for children and young people?

- Dignity and respect for self and others
- Understanding own bodies
- Staying safe
- Responsibility
- Sexuality
- Healthy relationships
- Protection from STIs and unplanned pregnancy
- Identity
- Access to support
• Helping CYP develop and enjoy good sexual health goes hand in hand with helping them feel good about themselves in general and their place in the world; valuing and having respect for themselves and other people.

• Children and Young People’s experiences can have a negative as well as a positive impact on their understanding of positive sexual health and healthy relationships. These experiences may leave a child or young person vulnerable and in need of additional support, guidance, education and safeguarding.
1953

- The Samaritans is established in response to the death of a fourteen year old.

- She had started her periods, but having no one to talk to, believed she had an STI and took her own life.
Now

- The UK continues to have the highest teenage conception rate in Europe;
- Under 25s highest risk group for STIs;
- Over half of LGBTQ young people experience homophobic bullying at school;
- Body image main source of worry for children as young as 10;
  - High proportion of peer abuse and sexual violence in young people’s relationships;
  - Early exposure to pornography.
Teenage Pregnancies

- Teenage Pregnancies are a cause and consequence of health and social inequalities;

- Most teenage pregnancies are unplanned; half result in a termination;

- In Cornwall rates of teenage conceptions are decreasing. But;

- There are still high rates amongst vulnerable populations.
Factors associated with early pregnancy

- Daughter of a teenage mother
- Currently a teenage parent
- Repeat terminations
- Care history
- Early onset of sexual activity
- Poor contraceptive use
- Alcohol & substance misuse
- Low educational attainment
- Disengagement from school/NEET
- Parents with low educational aspirations
- Poverty
- Crime
- Poor emotional wellbeing
- **Vulnerable young people**
What do we know about Cornwall?

• A high percentage of parents amongst our leaving care cohort.

• Workers identified:
  • Low self-esteem and self-worth;
  • Sense of rejection and loss;
  • Low engagement with sexual health services;
  • Pregnancy often occurred shortly following a move to independence.
Local Survey of Young Mothers:

- Most had experienced bullying in school;
- For most school had not been a positive experience;
- A significant number identified parental issues during their childhood;
- Just under half had social care intervention as a child;
- Average first sexual intercourse was 14;
- 50% of those surveyed had had two or more pregnancies.
What works in supporting Children and Young People?

1. Support children and young people to develop the knowledge and skills they need to experience positive relationships and good sexual health;

2. Improve young people’s access and engagement with services;

3. Intervene early with those most at risk.
What do young people in Cornwall tell us they want?

- To talk to parents, carers and practitioners about growing up, relationships and sexual health;
- To learn more about all areas of sexual health;
- To understand risks;
- To access non-judgmental, honest and open advice and support.
How can the Brook Traffic Light Tool Support these aspirations?

- Improve consistency, confidence and quality of decision making by:
  - Shared **objective** understanding of risk;
  - High quality referrals;
  - Consistent response and support;
  - Increased workforce confidence;
  - Improved understanding of healthy behaviours alongside harmful;
  - Embedding relationships and sexual health within wellbeing.
Why the Brook Sexual Behaviours Traffic Light Tool?

- It is an evaluated tool with a strong evidence base behind it;
- It is simplistic and easy to use;
- It effectively signposts users to further support;
- It provides age specific frameworks;
- It includes indicators of ‘normal’ development alongside potentially risky behaviours;
- It is unlicensed and thus efficient to distribute.
Relationship and Sexual Health Best Practice Guidelines

Supports practitioners to:

• Promote positive relationships, sexual health and understanding of physical and emotional development;
• Distinguish healthy sexual development from potentially harmful behaviour;
• Effectively identify, assess and appropriately respond to risk and need;
Provides practitioners with:

- The evidence base for positive relationship and sexual health work;
- Helpful tools and resources for undertaking this work;
- Further information on the law, rights and responsibilities;
- Details of services and how to access them.

Download from www.cornwall.gov.uk/teenagepregnancy
Rolling out to Wider Workforce

• Training Programme for children and young people’s workforce delivered across Cornwall by Brook in 2014;
  
• Includes “Train the trainer” courses;
  
• Tool integrated into multi-agency sexual health training programme;
  
• Email teenagepregnancy@cornwall.gov.uk.
Brook Sexual Behaviours Traffic Light Tool and Cornwall’s Relationship and Sexual Health Best Practice Guidelines Endorsed By:

Cornwall Health and Wellbeing Board

Children’s Trust Cornwall

Safeguarding Children Board

www.cornwall.gov.uk
Welcome