

Inquiry into teenage pregnancy

Who Cares? Scotland's response

a. Do you have any views on the current policy direction being taken at the national level in Scotland to reduce rates of teenage pregnancy?

Who Cares? Scotland is an independent organisation which works exclusively with looked after children and care leavers in Scotland. From our experience, the incidences of teenage pregnancy amongst young people in care and care leavers are disproportionately higher than their non-care counterparts. For instance, wider U.K. evidence suggests that almost half of female care leavers become mothers between age 18 and 24¹; and that approximately one quarter of young females leaving care are either pregnant or already mothers². This group are also less likely to have an abortion or give the child up for adoption because of their personal experience – *and face a higher likelihood of their own children also being taken into care.*

As the SPICE briefing accompanying this inquiry shows, Scotland has a higher rate of teenage pregnancy than most other western European countries – and Who Cares? Scotland would like to ensure that the current policy direction being taken at the national level in Scotland to reduce rates of teenage pregnancy, specifically considers the needs of young people who are in care. It is also recommended that better understanding on how the experience of young females in care and specifically the emotional impact on them, relates to pregnancy levels. This information could help inform any preventative measures (awareness raising, education, practical support) put in place to reduce incidences of teenage pregnancies amongst this population. In addition, these measures need to be consistently implemented across all LAs and care settings, to improve, for instance the lack of awareness young people in care have on contraception and recognise that they are more likely to become sexually active at a younger age than non-care counterparts³.

b. Do you have any views on the action being taken at the local level by health boards, local authorities and other relevant organisations to reduce teenage pregnancy, particularly in the under 16 age group?

As indicated in the response to question A above, Who Cares? Scotland believe that the ability of the various organisations at the local and national levels to reduce teenage pregnancy rates for young people in care under 16-years old, is significantly compromised by the variety of care settings, placement moves and emotional needs of these young people. It is our view that this adds to the inconsistent and in many cases patch-work approaches which young people in care face in relation to pregnancy. Who Cares? Scotland recommends that the measures needed to reduce teenage pregnancies for young people in care, are developed in a collaborative way –

¹ Information accessed via <http://www.communitycare.co.uk/articles/23/01/2008/107036/teenage-pregnancies-among-children-in-care-research.htm>

² Information accessed via http://publicpolicyexchange.co.uk/docs/8J02-PPE_4_Gill_Frances.pdf

³ As suggested in *ibid*

and that the policies which guide this – involve young people from care with experience of pregnancy directly. It is our view that both females and males who have experience of dealing with pregnancy are involved.

c. What are your views on the relationship between high levels of teenage pregnancy and socio-economic inequality?

Whilst young people in care and care leavers only account for 1% of the population, Who Cares? Scotland is of the opinion that in relation to their non-care counterparts, they are not only disproportionately affected, but ultimately failed in the most part by key services such as housing, education and health. The patch-work and in many cases disjointed approach to delivering their care is consistently and on the whole, negatively impacting on these children and young people – and the symptoms of such an approach are there for all to see. For example, the issues many face in relation to self-esteem and worth and in building healthy relationships. Who Cares? Scotland also believes that the likelihood for these young people of a childhood and adulthood where poverty and deprivation is prevalent is extremely high; and that in many cases, prior to being taken into care, they will have come from families who are also experiencing poverty and deprivation. We also infer that this self-perpetuating cycle of poverty and deprivation, is likely to continue for the children of young people who have care backgrounds.

Therefore, socio-economic inequality undoubtedly plays a significant role between the positive correlations of higher incidences of teenage pregnancy amongst young people from specific socio-economic groups. Evidence supports this; as does the data and statistics presented in the SPICE briefing which accompanies this inquiry by the Health and Sport Committee. Who Cares? Scotland would recommend that this inquiry into teenage pregnancy, takes steps to consider more comprehensively how this relationship between socio-economic status and levels of teenage pregnancy can be tackled via a holistic and alternative approach to redressing the causes of poverty and deprivation. Our belief being that in doing this, the symptoms of such (of which teenage pregnancy is certainly one) can be tackled and redressed with more focus and collaborative intervention via an agenda which is centred on preventative actions and associated resourcing and funding.

d. What are the barriers and challenges to making progress in achieving positive change in communities that might lead to reductions in the levels of teenage pregnancy?

As indicated above Who Cares? Scotland feels that the relationship between socio-economic status, poverty and deprivation and negative outcomes – of which high incidences of teenage pregnancy is one – requires to be tackled innovatively and differently for the 1% of the population which have a care background. Who Cares? Scotland has recently looked into this relationship –

and believes that until looked after children and care leavers are both empowered and regarded to be active, valued and accepted members of our society, then they will continue to live on the margins and face the issues which they currently do. We would welcome the opportunity to give evidence to the Health and Sport Committee on this topic.

Additionally, Who Cares? Scotland would like to invite the Health and Sport Committee to hear directly from those young people from care who have experience of teenage pregnancy – with a view to hearing specifically from them what potential barriers and challenges the national and local government face in achieving positive change in communities that might lead to reductions in the levels of teenage pregnancy. This would help in advancing understanding as to how ‘care communities’ need to be considered in order to affect positive change for young people in a variety of care settings, too.

e. What are your views on the current support services available to young parents / young mothers, e.g. range of services, focus of services and whether services are being delivered in the most appropriate settings?

In echoing what is detailed above – Who Cares? Scotland would like the committee to hear directly from young people from care (both males and females) who have experienced teenage pregnancy; in order to understand how current support services are provided to them, and what needs they are and are not meeting, from *their* perspective. In gathering this information, Who Cares? Scotland believe it could then be compared to that which comes from the professionals and services which deliver these services, in order to accurately assess what works, what does not and what gaps there are for young people in care.

f. Are there specific initiatives that you would wish to highlight to the Health and Sport Committee that you consider indicate good practice with regard to reducing teenage pregnancy rates in Scotland, either in the public sector, voluntary sector or in partnership?

N/A

g. Are there specific approaches to reducing teenage pregnancy that are not currently getting sufficient attention in order to affect positive change for children and young people?

N/A

h. Do you have any comments on any other aspect of teenage pregnancy policy or examples of good practice that you wish to raise with the Committee?

N/A

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