

## **Appendix 1- risk factors for teenage pregnancy, evidence based approaches and associated outcomes for teenage parents and their children**

### **Risk factors of teenage pregnancy**

Teenage pregnancy disproportionately affects the most vulnerable young people in society. The causes are complex and influenced by personal, social, economic and environmental factors. A young woman who experiences multiple risk factors is twice as likely to experience teenage pregnancy compared to young women experiencing none of these risk factors.

The risk factors associated with teenage pregnancy are<sup>1</sup>:

- Living in a deprived area
- Looked after children and care leavers
- Limited knowledge of where to access contraception and sexual health advice
- Young people who have experienced sexual abuse or exploitation
- Alcohol and substance misuse is associated with teenage pregnancy independent of deprivation
- Early onset of sexual activity
- Low educational attainment
- Disengagement from school
- Leaving school at 16 with no qualifications

A recent study<sup>2</sup> has confirmed that the characteristics most strongly associated with teenage pregnancy are; girls who are eligible for free school meals and those who are persistently absent from school at year 7. There also continues to be a significant relationship between educational attainment and teenage pregnancy and this is apparent through slower than expected progress between key stages 2 and 3.

### **Outcomes for teenage mothers**

The evidence<sup>3</sup> shows that teenage mothers and their children are more likely to experience a range of poor outcomes

Outcomes for teenage mothers:

- 11 % of all young people not in education , training or employment are teenage mothers or pregnant teenagers
- 20% more likely to have no qualifications at age 30
- 22% more likely to be living in poverty at 30, and much less likely to be employed or living with a partner

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<sup>1</sup> (Department of Children and Family Services, 2006) Teenage Pregnancy Next Steps: Guidance for local Authorities and Primary Care Trusts on Effective Delivery of Local Strategies

<sup>2</sup> Teenage Pregnancy in England: CAYT Impact Study: Report No. 6. Centre for Analysis of Youth Transitions (2013)

<sup>3</sup> DCSF and Department of Health (2007) Teenage Parents Next Steps: Guidance for Local Authorities and Primary Care Trusts.

- 3 times the rate of post-natal depression and a higher risk of poor mental health for 3 years after the birth.

### **Outcomes for children born to teenage mothers:**

- Children of teenage mothers have a 63% increased risk of being born into poverty and are more likely to have accidents and behavioural problems
- The infant mortality rate for babies born to teenage mothers is 60% higher compared to babies born women 24 years and an above
- Teenage mothers are 3 times more likely to smoke throughout their pregnancy, and 50% less likely to breastfeed, with negative health consequences for the child.

### **What works to reduce teenage pregnancy?**

The factors influencing teenage pregnancy are complex and there is no single intervention which is effective in reducing teenage pregnancy. A strong partnership approach is needed to drive and deliver a range of local interventions and a range of essential factors need to be in place to reduce teenage pregnancy rates as part of work to improve a range of outcomes for young people<sup>4</sup>:

- Strategic leadership, performance management and Governance of the Teenage Pregnancy strategy
- Effective use of data to support commissioning
- Young people friendly contraceptive services
- Workforce development
- Sex and relationships education
- Targeted prevention work with young people at risk

### **Sex and relationship education (SRE)**

While targeted sex and relationships education (SRE) is delivered through the targeted interventions among the more vulnerable young people, universal SRE provision remains in the whole, non statutory. The Sex Education Forum and other key organisations will be continuing to make the case for ensuring the National Curriculum includes the key requirements of SRE.

A growing weight of national and international evidence shows that good quality SRE is proven to contribute to a decline in rates of teenage pregnancy. Large scale reviews of studies in the US<sup>5</sup> as well as lessons from areas in the UK where teenage pregnancy rates have fallen fastest have shown that SRE does have an impact in reducing the number of teenagers who become

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<sup>4</sup>Effective Public Health Practice (April 2011) Teenage Pregnancy National Support Team/Department of Health)

<sup>5</sup> Kirby (2007) Emerging Answers: Research findings on programmes to reduce teenage pregnancy and sexually transmitted infections.

pregnant. 'A Framework for Sexual Health in England' (DH, March 2013)<sup>6</sup>, states that:

*'While teenage conception may result from a number of causes or factors, the strongest empirical evidence for ways to prevent teenage conception is:*

- *High quality education about relationships and sex*
- *Access to and correct use of effective contraception'*

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<sup>6</sup> A Framework for Sexual Health in England' (DH, March 2013)