

A review of teenage pregnancy and related socio-economic factors

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Abstract

This article will review pre-existing socio-economic factors that could potentially influence teenage pregnancy. Research shows that teenage pregnancy within England remains consistently the highest within Europe with no obvious reason. A combination of social and economic factors will be considered that could predispose to teenage pregnancy with particular focus on the involvement of healthcare practitioners in appropriate health promotion strategies.

Keywords

Teenage pregnancy, Health Promotion, Sexual Health, Nursing,

Please cite this article as:

Dickinson, P (2017) A review of teenage pregnancy and socio-economic factors. *Links to Health and Social Care* Vol 2 (2), pp. 66–76.



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Introduction

Teenage pregnancy in England consistently remains the highest in Europe, averaging a total of 24.3 conceptions per every thousand females aged 15 to 17 with the rate varying greatly between geographical areas in England. Further research from Public Health England (PHE 2016) concludes that teenage mothers are more likely to suffer from postnatal depression and associated poor mental health. Furthermore, this group are predicted to be less likely to complete their education leaving them vulnerable to a 63% increased chance of experiencing poverty in adulthood (PHE 2016).

The Royal College of Nursing (RCN 2011) in its Public Health's White Paper "Healthy lives, healthy people: our strategy for public health in England", reiterated the unique role nurses play in both primary and secondary healthcare settings to deliver health promotion. While (2014) provided further support for the role of the nurse confirming how public health nurses were traditionally seen as those in specialist community roles. The article highlighted how in recent years, there was an increasing emphasis for all nurses to act as agents for improving public health and should aim to incorporate health promotion into clinical practice.

To understand the role of the nurse in health promotion this article will aim to provide an insight into the social determinants of health that could lead an individual to becoming pregnant as a teenager. This article will address specific government initiatives related to this issue, whilst giving adequate consideration to the role of the nurse in promoting safe sexual health and reducing health inequalities.

Analyzing the role of the nurse

Frances (2011) highlighted the important role nurses play in society in relation to promoting safe sexual health and suggested how nurses needed to be supportive towards young people and encourage a more 'teenage friendly' environment so that they feel comfortable talking about such a sensitive subject. However, he also acknowledged the need for nurses to be aware of the underlying factors that can contribute towards teenage pregnancy and to continue to promote preventive public health measures, such as contraception.

Considering the social determinants of health

Teenage pregnancy has been identified as a national public health issue due to its association with economic, social and health costs and is a subject on many professional and government agendas (Department of Health 2002, Royal College of Obstetrics and Gynaecology 2007, Department for Children Schools and Families (DCFS) and Department of Health 2010).

The Marmot Review (2010) addressed the collective views of whom as regards the health inequalities experienced by certain groups of people in society. The review concluded that those individuals who were considered to hold a higher socioeconomic position within society had a wider range of lifestyle choices and opportunities to lead a good life. Both social and economic factors were believed to be key to shaping an individual's health and wellbeing, material circumstances, social environment, psychological factors, behaviours and biological factors (Commission on Social Determinants of Health 2008). Teenagers highlighted to be 'at risk' of underage pregnancy included those living in poverty, disengagement in schooling and low

A review of teenage pregnancy and related socio-economic factors| Dickinson, Phoebe education attainment. Research by PHE (2016) labelled these factors as having the potential to contribute to poor academic progress which can leave young people vulnerable to a range of risky behaviours.

Relation to government/local directives

Public Health England (2016) exists to protect and improve the health of the nation and highlights particular health inequalities experienced by certain groups of people within society, with teenage pregnancy a particular policy focus for the organization.

In 2016, Public Health England implemented a strategic action plan targeting the health promotion of sexual and reproductive health within England (PHE 2016). A key priority outlined within the plan was to further reduce conception rates in under 16 and 18 year olds. The National Institute For Health and Care Excellence (NICE 2007) confirmed that there were a total of 39,545 under-18 conceptions, with 41% ending in termination, out of that number a total of 7,179 under-16 conceptions with 57.6% ending in termination. The action plan gave suggestions as to how they aimed to establish effective health promotion for this group in both clinical and educational settings, by placing an increased emphasis on accessibility to information regarding safe sexual health for school aged people. It hoped that increased awareness of the issue and long term preventive measures would be discussed with teenagers.

Promoting health and reducing health inequalities

A primary preventative measure suggested to decrease the number of teenage pregnancies was to introduce sex education programmes into the school curriculum (Centre for the Advancement of Health 2008). Leishman (2004) suggested that

A review of teenage pregnancy and related socio-economic factors| Dickinson, Phoebe childhood experiences and teenage pregnancy were interlinking factors and could be considered a significant cause of health and social issues. An inter-professional approach is considered to be most effective for professionals working with pregnant teenagers. Leishman (2004) suggested that attempts should be made to involve all allied health professionals who had responsibilities in the control and prevention of teenage pregnancy to implement the care for the young person. The Faculty of Public Health (2015) suggested that there was a need for a wider range of services to work inter-professionally by considering the relationship between health, educational and social care systems.

The All-Party Parliamentary Group on Global Health (APPG 2016) identified nurses as the first and sometimes, the only health professionals that young people came into contact with and therefore the quality of their initial assessment, care and treatment was considered crucial. Nurses were viewed as being 'part of the community' able to share aspects of culture and strengths, giving particular attention to the vulnerable individuals or groups identified within society. This evidence highlighted the fact that nurses had the ability to both shape and implement effective health interventions, by offering advice on emergency contraception, long term contraception and how to prevent unwanted pregnancies in order to meet the needs of young people (APPG 2016).

Strategies that can be used by the nurse

To aid nurses in using health promotion techniques, Beattie's (1991) Model of Health Promotion is a widely used tool designed to advise health professionals on the best approach to take when trying to encourage behavioural change. This model incorporates a wide range of guidance and includes information that is evidence based,

A review of teenage pregnancy and related socio-economic factors| Dickinson, Phoebe ensuring that accurate information is delivered to the patient so they can make informed choices, as the Nursing Midwifery Council (NMC 2015) suggests. The strategy identifies four ways a health professional can try to establish health promotion and with teenage pregnancy, an individual approach would be recommended. An individual approach evokes personal development within the young person whilst trying to establish central focus points within their life to encourage behavioural change. The dialogue between the nurse and the young person is paramount within this approach, as NICE (2007) places great value on the importance of the vulnerable young person being given the opportunity for individual sexual health advice to prevent unwanted pregnancies alongwith knowledge of emergency and reversible contraception.

It is important that the nurse views the young person holistically, taking into account for those factors surrounding the individual by considering personal factors that have the potential to affect the young person both physically and mentally (RCN 2012). Graham (2004) suggested that the social determinants of health surrounding the young person can correlate with health inequalities experienced throughout society and this root cause was what healthcare professionals needed to address. Reutter and Kushner (2010) provided further support by emphasising the need to identify the underlying causes of health inequalities by systematically focusing upon the social conditions surrounding the individual and what is producing them.

Barriers to opportunities

While it is important to discuss the need for more health promotion surrounding the issue of teenage pregnancy, it is also important to acknowledge the barriers that healthcare professionals can be confronted with whilst trying to implement it. A study by

A review of teenage pregnancy and related socio-economic factors| Dickinson, Phoebe McFarlane et al. (2016) concluded the main barriers to health promotion were: a lack of management and support for the need for change, insufficient numbers of dedicated and qualified staff who were competent in both the skills and training required for health promotion and the lack of time and resources. The conclusions drawn from this research highlighted the need for health professionals to receive adequate training and support and for them to have access to appropriate resources for health promotion to be of effective.

Ethics and Health Promotion

The rights of young people need to be considered when working with teenagers, as Wray (2005) confirmed that this was a crucial factor in gaining the trust of a young person. The NMC (2015) Code of Conduct states that nurses should treat people as individuals and respect their dignity by ensuring their human rights are being upheld and that they are acting in the best interests of the young person by considering an individual's right to accept or refuse treatment. The NMC (2015) also state that a nurse must be aware of their duty of confidentiality towards patients and should respect a young person's right to privacy of their information.

Recommendations for nursing practice

Public health should be viewed as a responsibility of all nurses and should not be considered as a separate area of clinical practice. The RCN (2016) recommend that nurses should be equipped with the relevant skills and knowledge to be able to provide both a meaningful and holistic approach to public health interventions across all health

A review of teenage pregnancy and related socio-economic factors| Dickinson, Phoebe and social care settings. The NMC (2015) also recommend that when health professionals are engaged in the care of young people, they must keep up-to-date with the relevant laws and policies of how to protect and care for vulnerable people and thus, if concerns become evident, extra support and protection is identified when necessary.

Conclusion

This article has highlighted a number of significant health and social care issues while exploring how specific factors can contribute to a teenage pregnancy. The evidence provided emphasised the need for inter-professional collaboration across health and social care settings in the primary prevention of teenage pregnancy, whilst encouraging the need for wider sexual health advice to be implemented within schools. It has also focused attention on the need for nurses to receive specialist training in health promotion and to view it as a major influence for change. Implemented it within the healthcare setting can reduce the existing inequalities and provide everyone with equal opportunities to health and wellbeing.

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